

Quality-Data Code Submission Error Report
2009 Physician Quality Reporting Initiative
Report Date: 09/30/2009

This summary is provided to assist eligible professionals and their staff in interpreting the Quality-Data Code Submission Error Report by Measure. Please note that this report is based on the number of valid quality-data codes (QDCs) submitted by measure and reasons why a submission is considered invalid. This report does not include the number of claims for which an expected QDC was not submitted on an eligible claim.

The following PQRI analytical changes were implemented for this report:

- Diagnoses from both the line item and base level of the claim were utilized
- Split claims were rejoined based on common data elements (TIN, NPI, beneficiary, and date of service)
- ASC facility claims indicated by a type of service "F" were excluded. Claims with a place of service "81" were not excluded for this report.

Column Definitions:

- Total QDCs Reported - Number of QDC submissions for a measure whether or not the QDC submission was valid and appropriate for a measure.
- Total Valid QDCs Reported - Number of valid and appropriate QDC submissions for a measure.
- Patient Age Mismatch - Patient did not meet age requirements for the measure.
- Patient Gender Mismatch - Patient did not meet gender requirement for the measure.
- Incorrect HCPCS - Incorrect HCPCS code for the measure - Patient claim did not meet denominator eligibility per measure specifications.
- Incorrect Diagnosis - Incorrect diagnosis code on claim - Patient claim did not meet denominator eligibility per measure specifications.
- Incorrect Diagnosis and HCPCS - Combination of incorrect HCPCS code and incorrect diagnosis code on claim - Patient claim did not meet denominator eligibility per measure specifications.
- Only QDC on Claim - Patient claim missing a qualifying denominator code (all line items contained only QDCs).
- Only QDC and Incorrect Diagnosis - Combination of missing qualifying denominator code and qualifying diagnosis code on the claim.
- Resubmitted QDCs - Submissions invalid due to resubmission of claims simply for the purpose of adding QDCs.
- Unattributed/No NPI - Submissions where the rendering NPI was missing.

How to Read the Quality-Data Code Submission Error Report by Measure:

Using Measure #47-Advance Care Plan as an example, we find the following information as we read across each column: 197,370 QDC submissions were received for this measure, 165,426 of which were considered valid. Therefore, the Valid Submission Rate is 83.82%. The rest of the columns explain reasons for invalid submissions for measure #47. We see that 10,454 (5.30%) submissions did not match the measure's age parameters; there is no gender parameter for this measure; 11,516 (5.83%) submissions were for patient encounters that are not listed in the denominator; this measure applies to all Medicare Part B beneficiaries regardless of diagnosis; 7,326 (3.71%) submissions showed only the numerator component (QDCs) on the claim and the denominator component (HCPCS) were not on the claim nor on any other related claim for the same beneficiary, date-of-service, NPI/TIN. There were no submissions with a combination of QDC-only and diagnosis mismatch and no QDC resubmissions for this measure; 6 (0.00%) submissions lacked an NPI in the rendering provider ID field on the claim.

Analysis Findings Include:

1. The measures with the highest percentage of valid QDCs codes submitted were: #182 Functional Outcome Assessment in Chiropractic Care (98.81%), #144 Oncology: Medical and Radiation: Plan of Care for Pain (100%), #57 Assessment of Oxygen Saturation for Community Acquired Bacterial Pneumonia (97.18%), #58 Assessment of Mental Status for Community-Acquired Bacterial Pneumonia (97.72%), #59 Empiric Antibiotic for Community-Acquired Bacterial Pneumonia (97.56%), #147 Nuclear Medicine: Correlation with Existing Imaging Studies for All Patients Undergoing Bone Scintigraphy (98.11%), #146 Radiology: Inappropriate Use of "Probably Benign" Assessment Category in Mammography Screening, and #145 Radiology: Exposure Time Reported for Procedures Using Fluoroscopy (97.46%).
2. Measures #94 OME: Diagnosis Evaluation - Assessment of Tympanic Membrane Mobility, #95 OME: Hearing Testing, #66 Appropriate Testing for Children, #65 Appropriate Treatment for Children, #186 Wound Care: Use of Compression System in Patients with Venous Ulcers, #181 Elder Maltreatment Screen and Follow-up Plan had no valid QDCs submitted.
3. Measure #134 Screening for Clinical Depression had the highest percentage of claims with QDCs only (11.98%).
4. The rate of diagnosis errors was highest for measure #65 Appropriate Treatment for Children (88.46%).
5. The rate of HCPCS errors was highest for measure #95 OME: Hearing Testing (100%); however there was only one QDC submission. The measure with the second highest rate of HCPCS errors was #181 Elder Maltreatment Screen and Follow-up Plan (87.77%).
6. The rate of patient gender errors was highest for measure #48 Assessment of Presence or Absence of UI in Women Aged 65 Years and Older (4.80%).
7. Overall, the percentage of reported instances with missing NPIs was 0.0% (There were only 22 instances where an NPI was missing).

Appendix E
Quality-Data Code Submission Error Report by Measure
Report Includes Data from the January 2009 through March 2009 TAP File

Topic Measure	QDC Submission Attempts			Denominator Mismatch ^c										Resubmitted QDCs ^f		Unattributed (No NPI) ^g					
	Total QDCs Reported ^a	Total Valid QDCs Reported ^b	% Valid	Patient Age Mismatch ^d		Patient Gender Mismatch ^e		Incorrect HCPCS		Incorrect DX		Both DX and HCPCS Incorrect						Only QDC on Claim		Incorrect DX and Only QDC	
				#	%	#	%	#	%	#	%	#	%	#	%	#	%	#	%		
Advance Care Plan																					
#47 Advance Care Plan	197,370	165,426	83.82%	10,454	5.30%	0	0.00%	11,516	5.83%	0	0.00%	0	0.00%	7,326	3.71%	0	0.00%	0	0.00%	6	0.00%
Arthritis-Osteoarthritis																					
#109 Patients with OA with an Assessment of Pain and Function	12,800	2,279	17.80%	0	0.00%	0	0.00%	1,209	9.45%	928	7.25%	7,858	61.39%	104	0.81%	398	3.11%	0	0.00%	0	0.00%
Arthritis-Rheumatoid																					
#108 DMARD Therapy in Rheumatoid Arthritis	11,605	10,371	89.37%	0	0.00%	0	0.00%	457	3.94%	525	4.52%	0	0.00%	167	1.44%	69	0.59%	0	0.00%	0	0.00%
Asthma																					
#53 Pharmacologic Therapy	1,058	130	12.29%	898	84.88%	0	0.00%	205	19.38%	148	13.99%	19	1.80%	27	2.55%	10	0.95%	0	0.00%	0	0.00%
#64 Asthma Assessment	925	111	12.00%	807	87.24%	0	0.00%	232	25.08%	200	21.62%	27	2.92%	24	2.59%	13	1.41%	0	0.00%	0	0.00%
Breast Cancer																					
#71 Hormonal Therapy for Stage IC-III ER/PR Positive Breast Cancer	20,270	16,037	79.12%	0	0.00%	110	0.54%	737	3.64%	571	2.82%	32	0.16%	118	0.58%	18	0.09%	0	0.00%	0	0.00%
#99 Breast Cancer Patients with a pT and pN Category and Histologic Grade	9,571	5,075	53.02%	0	0.00%	0	0.00%	540	5.64%	3,497	36.54%	317	3.31%	62	0.65%	209	2.18%	0	0.00%	0	0.00%
#112 Screening Mammography	41,371	24,743	59.81%	13,500	32.63%	619	1.50%	1,325	3.20%	0	0.00%	0	0.00%	3,847	9.30%	0	0.00%	0	0.00%	0	0.00%
Bronchitis																					
#116 Inappropriate Antibiotic Treatment for Adults	153	16	10.46%	123	80.39%	0	0.00%	68	44.44%	2	1.31%	61	39.87%	5	3.27%	0	0.00%	0	0.00%	0	0.00%
Coronary Artery Bypass Graft (CABG)																					
#43 Use of IMA in CABG Surgery	7,364	4,703	63.86%	0	0.00%	0	0.00%	2,581	35.05%	0	0.00%	0	0.00%	80	1.09%	0	0.00%	0	0.00%	0	0.00%
#44 Preoperative Beta-blocker in Patients with Isolated CABG Surgery	4,942	3,105	62.83%	0	0.00%	0	0.00%	1,767	35.75%	0	0.00%	0	0.00%	70	1.42%	0	0.00%	0	0.00%	0	0.00%
CAD																					
#6 Oral Antiplatelet Therapy Prescribed for Patients with CAD	355,231	328,153	92.38%	0	0.00%	0	0.00%	6,415	1.81%	16,788	4.73%	546	0.15%	1,883	0.53%	2,464	0.69%	0	0.00%	1	0.00%
#118 ACE or ARB Therapy for Patients with CAD and Diabetes and/or LVSD	44,915	37,906	84.39%	0	0.00%	0	0.00%	607	1.35%	4,470	9.95%	151	0.34%	396	0.88%	2,255	5.02%	0	0.00%	0	0.00%
#152 Coronary Artery Disease (CAD): Lipid Profile in Patients with CAD	81,160	74,952	92.35%	0	0.00%	0	0.00%	1,267	1.56%	4,036	4.97%	172	0.21%	492	0.61%	245	0.30%	0	0.00%	0	0.00%
#153 Coronary Artery Disease (CAD): Referral for Arteriovenous (AV) Fistula	1,905	1,254	65.83%	1	0.05%	0	0.00%	30	1.57%	26	1.36%	593	31.13%	1	0.05%	2	0.10%	0	0.00%	0	0.00%
Chest Pain																					
#54 ECG Performed for Non-Traumatic Chest Pain	242,887	179,207	73.78%	3,512	1.45%	0	0.00%	3,837	1.58%	56,170	23.13%	1,712	0.70%	633	0.26%	617	0.25%	0	0.00%	0	0.00%
Chronic Kidney Disease (CKD)																					
#121 Laboratory Testing (Calcium, Phosphorus, iPTH and Lipid Profile)	4,493	3,597	80.06%	0	0.00%	0	0.00%	106	2.36%	725	16.14%	43	0.96%	11	0.24%	47	1.05%	0	0.00%	0	0.00%
#122 Blood Pressure Management	15,341	6,891	44.92%	0	0.00%	0	0.00%	182	1.19%	7,410	48.30%	308	2.01%	15	0.10%	176	1.15%	0	0.00%	0	0.00%
#123 Plan of Care: Elevated Hemoglobin for Patients Receiving ESAs	12,650	4,761	37.64%	1	0.01%	0	0.00%	356	2.81%	835	6.60%	6,170	48.77%	8	0.06%	289	2.28%	0	0.00%	0	0.00%
#135 Chronic Kidney Disease (CKD): Influenza Immunization	17,016	2,144	12.60%	3	0.02%	0	0.00%	52	0.31%	3,040	17.87%	11,447	67.27%	3	0.02%	393	2.31%	0	0.00%	0	0.00%
Colon Cancer																					
#72 Chemotherapy for Stage III Colorectal Cancer (CRC)	6,855	5,464	79.71%	0	0.00%	0	0.00%	277	4.04%	446	6.51%	12	0.18%	33	0.48%	37	0.54%	0	0.00%	0	0.00%
#100 CRC Patients with a pT and pN Category and Histologic Grade	9,136	3,150	34.48%	0	0.00%	0	0.00%	249	2.73%	1,163	12.73%	4,286	46.91%	75	0.82%	269	2.94%	0	0.00%	0	0.00%
#113 CRC Screening	117,031	83,384	71.25%	25,516	21.80%	0	0.00%	2,655	2.27%	0	0.00%	0	0.00%	6,747	5.77%	0	0.00%	0	0.00%	0	0.00%
Chronic Obstructive Pulmonary Disease (COPD)																					
#51 Spirometry Evaluation	27,945	25,491	91.22%	0	0.00%	0	0.00%	483	1.73%	1,516	5.42%	199	0.71%	235	0.84%	164	0.59%	0	0.00%	0	0.00%
#52 Bronchodilator Therapy	24,107	20,048	83.16%	0	0.00%	0	0.00%	383	1.59%	1,066	4.42%	310	1.29%	211	0.88%	156	0.65%	0	0.00%	0	0.00%

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^b For each measure, the # of instances where an TIN/NPI combination submitted a valid QDC for that measure.

^c The # of occurrences of QDC reporting where the QDC does not match the denominator requirements for the measure.

^d The # of occurrences of a QDC reporting where the QDC does not match the age requirements for the measure.

^e The # of occurrences of a QDC reporting where the QDC does not match the gender requirements for the measure.

^f The # of occurrences of a QDC reporting where the QDC was received on a claim that was resubmitted for the purpose of adding QDCs.

^g The # of occurrences where a valid NPI is not present.

Note: MCMP and PGP pilot program participants are excluded from these reports (based on the most recent pilot participant list from ORD).

Topic Measure	QDC Submission Attempts			Denominator Mismatch ^c																Resubmitted QDCs ^f		Unattributed (No NPI) ^g	
	Total QDCs Reported ^a	Total Valid QDCs Reported ^b	% Valid	Patient Age Mismatch ^d		Patient Gender Mismatch ^e		Incorrect HCPCS		Incorrect DX		Both DX and HCPCS Incorrect		Only QDC on Claim		Incorrect DX and Only QDC							
				#	%	#	%	#	%	#	%	#	%	#	%	#	%	#	%				
Glaucoma																							
#12 Optic Nerve Evaluation	360,301	337,634	93.71%	0	0.00%	0	0.00%	6,016	1.67%	14,276	3.96%	430	0.12%	1,625	0.45%	658	0.18%	0	0.00%	0	0.00%		
#141 Primary Open-Angle Glaucoma (POAG): Reduction of Intraocular Pressure (IOP) by 15% OR Documentation of a Plan of Care	55,847	44,471	79.63%	0	0.00%	0	0.00%	628	1.12%	6,862	12.29%	170	0.30%	393	0.70%	165	0.30%	0	0.00%	0	0.00%		
Heart Failure																							
#5 ACE Inhibitor or ARB Therapy for LVSD	96,488	64,913	67.28%	0	0.00%	0	0.00%	2,324	2.41%	20,247	20.98%	551	0.57%	587	0.61%	1,677	1.74%	0	0.00%	0	0.00%		
#8 Beta-blocker Therapy for LVSD	65,597	52,706	80.35%	0	0.00%	0	0.00%	2,552	3.89%	8,954	13.65%	328	0.50%	392	0.60%	1,088	1.66%	0	0.00%	0	0.00%		
Hemodialysis Vascular Access Decision																							
#172 hemodialysis Vascular Access Decision-Making by Surgeon to Maximize Placement of Autogenous Arterial Venous (AV) Fistula	243	200	82.30%	0	0.00%	0	0.00%	18	7.41%	7	2.88%	8	3.29%	10	4.12%	0	0.00%	0	0.00%	0	0.00%		
Hepatitis C (HCV)																							
#83 Testing of Patients with Chronic HCV for Hepatitis C Viremia	928	669	72.09%	0	0.00%	0	0.00%	8	0.86%	199	21.44%	3	0.32%	12	1.29%	5	0.54%	0	0.00%	0	0.00%		
#84 Initial Hepatitis C RNA Testing	569	506	88.93%	0	0.00%	0	0.00%	4	0.70%	18	3.16%	11	1.93%	11	1.93%	5	0.88%	0	0.00%	0	0.00%		
#85 Genotype Testing Prior to Therapy	697	597	85.65%	0	0.00%	0	0.00%	7	1.00%	53	7.60%	9	1.29%	13	1.87%	3	0.43%	0	0.00%	0	0.00%		
#86 Consideration for Antiviral Therapy	299	270	90.30%	0	0.00%	0	0.00%	6	2.01%	13	4.35%	7	2.34%	2	0.67%	1	0.33%	0	0.00%	0	0.00%		
#87 RNA Testing at Week 12 of Therapy	110	78	70.91%	0	0.00%	0	0.00%	3	2.73%	15	13.64%	7	6.36%	3	2.73%	5	4.55%	0	0.00%	0	0.00%		
#89 Counseling Patients Regarding Use of Alcohol	257	178	69.26%	0	0.00%	0	0.00%	5	1.95%	68	26.46%	0	0.00%	5	1.95%	1	0.39%	0	0.00%	0	0.00%		
#90 Counseling Patients Regarding Use of Contraception Prior to Starting Antiviral Therapy	85	48	56.47%	16	18.82%	0	0.00%	3	3.53%	14	16.47%	5	5.88%	8	9.41%	6	7.06%	0	0.00%	0	0.00%		
#183 Hepatitis C: Hepatitis A Vaccination in Patients with HCV	230	153	66.52%	0	0.00%	0	0.00%	14	6.09%	55	23.91%	4	1.74%	1	0.43%	6	2.61%	0	0.00%	0	0.00%		
#184 Hepatitis C: Hepatitis B Vaccination in Patients with HCV	221	154	69.68%	0	0.00%	0	0.00%	13	5.88%	47	21.27%	4	1.81%	0	0.00%	6	2.71%	0	0.00%	0	0.00%		
HIT																							
#124 HIT - Adoption/Use of EHRs	1,237,136	1,175,051	94.98%	2	0.00%	0	0.00%	46,196	3.73%	0	0.00%	0	0.00%	15,887	1.28%	0	0.00%	0	0.00%	1	0.00%		
Imaging-Stroke																							
#10 CT or MRI Reports	53,177	48,732	91.64%	0	0.00%	0	0.00%	484	0.91%	2,140	4.02%	52	0.10%	311	0.58%	53	0.10%	0	0.00%	0	0.00%		
#11 Carotid Imaging Reports	15,345	12,273	79.98%	0	0.00%	0	0.00%	352	2.29%	2,037	13.27%	555	3.62%	100	0.65%	58	0.38%	0	0.00%	0	0.00%		
Influenza																							
#110 Vaccination for Patients ≥ 50 Years Old	135,593	117,164	86.41%	2,901	2.14%	0	0.00%	7,709	5.69%	0	0.00%	0	0.00%	8,388	6.19%	0	0.00%	0	0.00%	0	0.00%		
Leukemia (CLL)																							
#70 Baseline Flow Cytometry	5,931	5,362	90.41%	0	0.00%	0	0.00%	76	1.28%	458	7.72%	4	0.07%	30	0.51%	5	0.08%	0	0.00%	0	0.00%		
Macular Degeneration																							
#14 Dilated Macular Examination	276,086	261,826	94.83%	256	0.09%	0	0.00%	6,950	2.52%	5,569	2.02%	182	0.07%	1,306	0.47%	231	0.08%	0	0.00%	0	0.00%		
#140 Age-Related Macular Degeneration (AMD): Counseling on Antioxidant Supplement	130,314	124,451	95.50%	104	0.08%	0	0.00%	2,627	2.02%	1,738	1.33%	63	0.05%	838	0.64%	57	0.04%	0	0.00%	0	0.00%		
Myelodysplastic Syndrome (MDS) and Acute Leukemias																							
#67 Baseline Cytogenetic Testing Performed on Bone Marrow	7,028	6,148	87.48%	0	0.00%	0	0.00%	151	2.15%	615	8.75%	12	0.17%	97	1.38%	13	0.18%	0	0.00%	0	0.00%		
#68 Documentation of Iron Stores in Patients Receiving Erythropoietin Therapy	6,599	5,678	86.04%	0	0.00%	0	0.00%	107	1.62%	490	7.43%	8	0.12%	25	0.38%	11	0.17%	0	0.00%	0	0.00%		
Medication Management																							
#130 Documentation of Current Medications	290,176	275,944	95.10%	1	0.00%	0	0.00%	11,758	4.05%	0	0.00%	0	0.00%	2,473	0.85%	0	0.00%	0	0.00%	0	0.00%		
Melanoma																							
#136 Melanoma: Follow-Up Aspects of Care	10,333	9,563	92.55%	0	0.00%	0	0.00%	271	2.62%	300	2.90%	67	0.65%	95	0.92%	51	0.49%	0	0.00%	0	0.00%		
#137 Melanoma: Continuity of Care - Recall System	9,902	9,210	93.01%	0	0.00%	0	0.00%	225	2.27%	220	2.22%	134	1.35%	91	0.92%	21	0.21%	0	0.00%	0	0.00%		
#138 Melanoma: Coordination of Care	8,074	3,320	41.12%	0	0.00%	0	0.00%	96	1.19%	4,096	50.73%	197	2.44%	16	0.20%	356	4.41%	0	0.00%	0	0.00%		

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				#	%	#	%	#	%	#	%	#	%	#	%	#	%	#	%		
Mental Health																					
#134 Screening for Clinical Depression	4,292	1,748	40.73%	0	0.00%	0	0.00%	2,030	47.30%	0	0.00%	0	0.00%	514	11.98%	0	0.00%	0	0.00%		
Myeloma																					
#69 Treatment with Bisphosphonates	5,263	4,830	91.77%	0	0.00%	0	0.00%	103	1.96%	271	5.15%	6	0.11%	51	0.97%	3	0.06%	0	0.00%		
Myocardial Infarction																					
#28 Aspirin at Arrival	9,654	8,382	86.82%	0	0.00%	0	0.00%	93	0.96%	1,109	11.49%	16	0.17%	49	0.51%	26	0.27%	0	0.00%		
Nuclear Medicine																					
#147 Nuclear Medicine: Correlation with Existing Imaging Studies for All Patients Undergoing Bone Scintigraphy	9,438	9,260	98.11%	0	0.00%	0	0.00%	79	0.84%	0	0.00%	0	0.00%	55	0.58%	0	0.00%	0	0.00%		
Obesity																					
#128 Universal Weight Screening and Follow-Up	82,672	65,222	78.89%	10,369	12.54%	0	0.00%	1,835	2.22%	0	0.00%	0	0.00%	6,421	7.77%	0	0.00%	0	0.00%		
Oncology																					
#143 Oncology: Medical and Radiation - Pain Intensity Quantified	17,208	2,133	12.40%	0	0.00%	0	0.00%	9,256	53.79%	78	0.45%	1,317	7.65%	325	1.89%	33	0.19%	0	0.00%		
#144 Oncology: Medical and Radiation - Plan of Care for Pain	9,365	9,365	100.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%		
#156 Oncology: Radiation Dose Limits to Normal Tissues	225	168	74.67%	0	0.00%	0	0.00%	16	7.11%	31	13.78%	5	2.22%	5	2.22%	0	0.00%	0	0.00%		
Osteoporosis																					
#24 Communication with the Physician Managing Ongoing Care Post-Fracture	3,743	1,571	41.97%	28	0.75%	0	0.00%	137	3.66%	1,130	30.19%	170	4.54%	110	2.94%	1,445	38.61%	0	0.00%		
#39 Screening or Therapy for Women Aged 65 Years and Older	114,807	100,419	87.47%	2,368	2.06%	2,661	2.32%	5,532	4.82%	0	0.00%	0	0.00%	5,142	4.48%	0	0.00%	0	0.00%		
#40 Management Following Fracture	45,721	1,207	2.64%	338	0.74%	0	0.00%	104	0.23%	41,989	91.84%	1,489	3.26%	97	0.21%	4,819	10.54%	0	0.00%		
#41 Pharmacologic Therapy	30,789	20,188	65.57%	231	0.75%	0	0.00%	8,403	27.29%	560	1.82%	101	0.33%	871	2.83%	120	0.39%	0	0.00%		
Osteoarthritis																					
#142 Osteoarthritis (OA): Assessment for Use of Anti-Inflammatory or Analgesic Over-the-Counter (OTC) Medications	6,390	3,557	55.67%	0	0.00%	0	0.00%	1,360	21.28%	497	7.78%	715	11.19%	77	1.21%	94	1.47%	0	0.00%		
Otitis																					
#91 AOE: Topical Therapy	475	453	95.37%	0	0.00%	0	0.00%	9	1.89%	12	2.53%	0	0.00%	1	0.21%	0	0.00%	0	0.00%		
#92 AOE: Pain Assessment	470	455	96.81%	0	0.00%	0	0.00%	3	0.64%	11	2.34%	0	0.00%	1	0.21%	1	0.21%	0	0.00%		
#93 AOE: Systemic Antimicrobial Therapy - Avoidance of Inappropriate Use	382	367	96.07%	0	0.00%	0	0.00%	8	2.09%	6	1.57%	0	0.00%	1	0.26%	0	0.00%	0	0.00%		
#94 OME: Diagnostic Evaluation - Assessment of Tympanic Membrane Mobility	32	0	0.00%	32	100.00%	0	0.00%	0	0.00%	28	87.50%	0	0.00%	0	0.00%	0	0.00%	0	0.00%		
#95 OME: Hearing Testing	1	0	0.00%	1	100.00%	0	0.00%	1	100.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%		
Pain Management																					
#131 Assessment Prior to Initiation of Patient Treatment	40,393	32,595	80.69%	0	0.00%	0	0.00%	6,911	17.11%	0	0.00%	0	0.00%	887	2.20%	0	0.00%	0	0.00%		
Perioperative																					
#20 Timing of Antibiotic Prophylaxis - Ordering Physician	518,498	47,622	9.18%	22	0.00%	0	0.00%	0	0.00%	3	0.00%	462,106	89.12%	0	0.00%	8,665	1.67%	0	0.00%		
#21 Selection of Prophylactic Antibiotic - First OR Second Generation Cephalosporin	42,392	34,430	81.22%	1	0.00%	0	0.00%	0	0.00%	0	0.00%	7,597	17.92%	0	0.00%	365	0.86%	0	0.00%		
#22 Discontinuation of Prophylactic Antibiotics (Non-Cardiac Procedures)	41,107	20,818	50.64%	2	0.00%	0	0.00%	0	0.00%	1	0.00%	11,916	28.99%	0	0.00%	544	1.32%	0	0.00%		
#23 VTE Prophylaxis	31,498	24,226	76.91%	3	0.01%	0	0.00%	0	0.00%	3	0.01%	6,942	22.04%	0	0.00%	325	1.03%	0	0.00%		
#30 Timing of Prophylactic Antibiotics - Administering Physician	509,142	410,526	80.63%	22	0.00%	0	0.00%	88,687	17.42%	0	0.00%	0	0.00%	5,282	1.04%	0	0.00%	0	0.00%		
#45 Discontinuation of Prophylactic Antibiotics	38,190	10,655	27.90%	2	0.01%	0	0.00%	23,859	62.47%	0	0.00%	0	0.00%	787	2.06%	0	0.00%	0	0.00%		
Pharyngitis																					
#66 Appropriate Testing for Children	169	0	0.00%	169	100.00%	0	0.00%	0	0.00%	150	88.76%	10	5.92%	0	0.00%	5	2.96%	0	0.00%		

^a For each measure, the total # of instances where an TIN/NPI combination submitted a QDC for that measure.

^b For each measure, the # of instances where an TIN/NPI combination submitted a valid QDC for that measure.

^c The # of occurrences of QDC reporting where the QDC does not match the denominator requirements for the measure.

^d The # of occurrences of a QDC reporting where the QDC does not match the age requirements for the measure.

^e The # of occurrences of a QDC reporting where the QDC does not match the gender requirements for the measure.

^f The # of occurrences of a QDC reporting where the QDC was received on a claim that was resubmitted for the purpose of adding QDCs.

^g The # of occurrences where a valid NPI is not present.

Note: MCMP and PGP pilot program participants are excluded from these reports (based on the most recent pilot participant list from ORD).

Topic Measure	QDC Submission Attempts			Denominator Mismatch ^c														Resubmitted QDCs ^f		Unattributed (No NPI) ^g	
	Total QDCs Reported ^a	Total Valid QDCs Reported ^b	% Valid	Patient Age Mismatch ^d		Patient Gender Mismatch ^e		Incorrect HCPCS		Incorrect DX		Both DX and HCPCS Incorrect		Only QDC on Claim		Incorrect DX and Only QDC					
				#	%	#	%	#	%	#	%	#	%	#	%	#	%	#	%		
Upper Respiratory Infection (URI)																					
#65 Appropriate Treatment for Children	156	0	0.00%	156	100.00%	0	0.00%	0	0.00%	138	88.46%	2	1.28%	0	0.00%	5	3.21%	0	0.00%	0	0.00%
Urinary Incontinence (UI)																					
#48 Assessment of Presence or Absence of UI in Women Aged 65 Years and Older	68,206	52,258	76.62%	2,239	3.28%	3,272	4.80%	6,942	10.18%	0	0.00%	0	0.00%	5,635	8.26%	0	0.00%	0	0.00%	1	0.00%
#49 Characterization of UI in Women Aged 65 Years and Older	15,974	10,335	64.70%	518	3.24%	456	2.85%	782	4.90%	3,851	24.11%	533	3.34%	225	1.41%	580	3.63%	0	0.00%	0	0.00%
#50 Plan of Care for UI in Women Aged 65 Years and Older	14,921	9,547	63.98%	467	3.13%	443	2.97%	648	4.34%	3,573	23.95%	524	3.51%	235	1.57%	527	3.53%	0	0.00%	0	0.00%
Wound Care																					
#186 Wound Care: Use of Compression System in Patients with Venous Ulcers	150	0	0.00%	0	0.00%	0	0.00%	76	50.67%	2	1.33%	31	20.67%	3	2.00%	1	0.67%	0	0.00%	0	0.00%
Total	8,568,322	6,575,264	76.74%	342,797	4.00%	7,561	0.09%	411,242	4.80%	492,136	5.74%	544,362	6.35%	138,687	1.62%	40,898	0.48%	0	0.00%	22	0.00%

^a For each measure, the total # of instances where an TIN/NPI combination submitted a QDC for that measure.

^b For each measure, the # of instances where an TIN/NPI combination submitted a valid QDC for that measure.

^c The # of occurrences of QDC reporting where the QDC does not match the denominator requirements for the measure.

^d The # of occurrences of a QDC reporting where the QDC does not match the age requirements for the measure.

^e The # of occurrences of a QDC reporting where the QDC does not match the gender requirements for the measure.

^f The # of occurrences of a QDC reporting where the QDC was received on a claim that was resubmitted for the purpose of adding QDCs.

^g The # of occurrences where a valid NPI is not present.

Note: MCMP and PGP pilot program participants are excluded from these reports (based on the most recent pilot participant list from ORD).