

CMS Management Report
2009 Physician Quality Reporting Initiative
Claims-based Individual Measures Reporting, Performance, Validation, and Incentive Report

Report Date: 06/11/2010

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.

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.
- % Valid – Percentage of Total Valid QDCs Reported divided by Total QDCs Reported.
- Total QDCs Reported on Eligible Cases – Number of valid or invalid QDCs reported on eligible cases meeting the measure's denominator criteria.
- 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.

Quality Data Code (QDC) Submission Error Report

1. The 6 measures with the highest percentage of valid QDCs codes submitted were:

- #147 Nuclear Medicine: Correlation with Existing Imaging Studies for All Patients Undergoing Bone Scintigraphy (97.74%),
- #146 Radiology: Inappropriate Use of "Probably Benign" Assessment Category in Mammography Screening (97.01%),
- #179 Rheumatoid Arthritis (RA): Assessment and Classification of Disease Prognosis (96.75%),
- #128 Universal Weight Screening and Follow-Up (96.71%),
- #93 AOE: Systemic Antimicrobial Therapy – Avoidance of Inappropriate Use (96.64%) and
- #140 Age-Related Macular Degeneration (AMD): Counseling on Antioxidant Supplement (96.64%).

2. Measures with no valid QDCs submitted were: #175 Pediatric End Stage Renal Disease (ESRD): Influenza Immunization, #94 OME: Diagnostic Evaluation - Assessment of Tympanic Membrane Mobility, #95 OME: Hearing Testing, and #66 Appropriate Testing for Children.

3. The 5 measures with the highest percentage of claims with QDCs only were:

#181 Elder Maltreatment Screen and Follow-Up Plan (12.12%),
#134 Screening for Clinical Depression (10.93%),
#112 Screening Mammography (8.54%),
#48 Assessment of Presence or Absence of UI in Women Aged 65 Years and Older (4.99%), and
#155 Falls: Plan of Care (3.73%).

4. The 5 measures with the highest rate of diagnosis errors were:

#40 Management Following Fracture (91.29%),
#122 Blood Pressure Management (60.57%),
#55 ECG Performed for Syncope (57.39%),
#24 Communication with the Physician Managing Ongoing Care Post-Fracture (33.99%), and
#186 Wound Care: Use of Compression System in Patients with Venous Ulcers (32.07%).

5. The 5 measures with the highest rate of HCPCS errors were:

#20 Timing of Antibiotic Prophylaxis - Ordering Physician (89.53%),
#45 Discontinuation of Prophylactic Antibiotics (64.91%),
#181 Elder Maltreatment Screen and Follow-Up Plan (55.45%),
#134 Screening for Clinical Depression (44.76%), and
#94 OME: Diagnostic Evaluation – Assessment of Tympanic Membrane Mobility (35.43%).

6. The 5 measures with the highest rate of patient gender errors were:

#48 Assessment of Presence or Absence of UI in Women Aged 65 Years and Older (5.45%),
#112 Screening Mammography (3.58%),
#50 Plan of Care for UI in Women Aged 65 Years and Older (3.52%),
#39 Screening or Therapy for Women Aged 65 Years and Older (3.44%), and
#49 Characterization of UI in Women Aged 65 Years and Older (3.25%).

7. Overall, the percentage of reported instances with missing NPIs was 0.00%.

Topic Measure	QDC Submission Attempts			Total QDCs Reported on Eligible Cases	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					
					#	%	#	%	#	%	#	%	#	%	#	%	#	%	#	%		
#185 Endoscopy & Polyp Surveillance: Colonoscopy Interval for Patients with a History of Adenomatous Polyps - Avoidance of Inappropriate Use	22,922	20,110	87.73%	20,110	0	0.00%	0	0.00%	865	3.77%	822	3.59%	817	4.00%	171	0.75%	204	0.89%	0	0.00%	0	0.00%
Falls																						
#154 Falls: Risk Assessment	411,921	317,914	77.18%	369,152	31,006	7.53%	0	0.00%	37,650	9.14%	0	0.00%	0	0.00%	5,101	1.24%	0	0.00%	18	0.00%	2	0.00%
#155 Falls: Plan of Care	54,196	35,403	65.32%	35,404	4,283	7.90%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	2,022	3.73%	0	0.00%	10	0.02%	1	0.00%
Glaucoma																						
#12 Optic Nerve Evaluation	1,093,875	1,029,471	94.11%	1,029,837	1	0.00%	0	0.00%	12,275	1.12%	47,881	4.38%	1,777	0.00%	1,812	0.17%	297	0.03%	0	0.00%	5	0.00%
#141 Primary Open-Angle Glaucoma (POAG): Reduction of Intraocular Pressure (IOP) by 15% OR Documentation of a Plan of Care	196,940	156,674	79.55%	167,418	0	0.00%	0	0.00%	1,739	0.88%	26,537	13.47%	752	0.00%	362	0.18%	134	0.07%	0	0.00%	2	0.00%
Heart Failure																						
#5 ACE Inhibitor or ARB Therapy for LVSD	377,914	233,574	61.81%	254,504	0	0.00%	0	0.00%	13,359	3.53%	102,899	27.23%	2,943	1.00%	2,485	0.66%	5,354	1.42%	0	0.00%	0	0.00%
#8 Beta-blocker Therapy for LVSD	251,292	189,803	75.53%	189,803	0	0.00%	0	0.00%	13,608	5.42%	43,081	17.14%	2,007	1.00%	1,381	0.55%	2,777	1.11%	0	0.00%	1	0.00%
Hemodialysis Vascular Access Decision																						
#172 hemodialysis Vascular Access Decision-Making by Surgeon to Maximize Placement of Autogenous Arterial Venous (AV) Fistula	2,067	1,844	89.21%	1,844	2	0.10%	0	0.00%	114	5.52%	51	2.47%	14	1.00%	43	2.08%	1	0.05%	0	0.00%	0	0.00%
Hepatitis C (HCV)																						
#83 Testing of Patients with Chronic HCV for Hepatitis C Viremia	3,460	2,590	74.86%	2,730	0	0.00%	0	0.00%	60	1.73%	626	18.09%	19	1.00%	11	0.32%	15	0.43%	0	0.00%	0	0.00%
#84 Initial Hepatitis C RNA Testing	2,131	1,904	89.35%	1,981	0	0.00%	0	0.00%	40	1.88%	100	4.69%	3	0.00%	7	0.33%	6	0.28%	0	0.00%	0	0.00%
#85 Genotype Testing Prior to Therapy	2,538	2,223	87.59%	2,288	0	0.00%	0	0.00%	42	1.65%	188	7.41%	6	0.00%	13	0.51%	9	0.35%	0	0.00%	0	0.00%
#86 Consideration for Antiviral Therapy	1,167	1,050	89.97%	1,050	0	0.00%	0	0.00%	17	1.46%	97	8.31%	1	0.00%	2	0.17%	3	0.26%	0	0.00%	0	0.00%
#87 RNA Testing at Week 12 of Therapy	633	548	86.57%	573	0	0.00%	0	0.00%	15	2.37%	41	6.48%	1	0.00%	3	0.47%	3	0.47%	0	0.00%	0	0.00%
#89 Counseling Patients Regarding Use of Alcohol	1,136	957	84.24%	957	0	0.00%	0	0.00%	14	1.23%	153	13.47%	3	0.00%	7	0.62%	3	0.26%	0	0.00%	0	0.00%
#90 Counseling Patients Regarding Use of Contraception Prior to Starting Antiviral Therapy	321	190	59.19%	197	110	34.27%	0	0.00%	6	1.87%	24	7.48%	71	22.00%	7	2.18%	19	5.92%	0	0.00%	0	0.00%
#183 Hepatitis C: Hepatitis A Vaccination in Patients with HCV	1,298	915	70.49%	915	0	0.00%	0	0.00%	72	5.55%	257	19.80%	44	3.00%	8	0.62%	2	0.15%	0	0.00%	0	0.00%
#184 Hepatitis C: Hepatitis B Vaccination in Patients with HCV	1,310	934	71.30%	934	0	0.00%	0	0.00%	76	5.80%	251	19.16%	39	3.00%	8	0.61%	2	0.15%	0	0.00%	0	0.00%
HIT																						
#124 HIT - Adoption/Use of EHRs	8,192,032	7,805,931	95.29%	7,805,931	0	0.00%	0	0.00%	327,548	4.00%	0	0.00%	0	0.00%	58,553	0.71%	0	0.00%	0	0.00%	7	0.00%
Imaging-Stroke																						
#10 CT or MRI Reports	312,029	273,863	87.77%	286,842	2	0.00%	0	0.00%	7,931	2.54%	14,920	4.78%	763	0.00%	1,398	0.45%	175	0.06%	0	0.00%	0	0.00%
#11 Carotid Imaging Reports	87,523	68,044	77.74%	68,048	16,588	18.95%	0	0.00%	2,909	3.32%	12,687	14.50%	3,242	4.00%	439	0.50%	198	0.23%	0	0.00%	0	0.00%
Influenza																						
#110 Vaccination for Patients ≥ 50 Years Old	508,539	471,597	92.74%	471,597	8,130	1.60%	0	0.00%	28,623	5.63%	0	0.00%	0	0.00%	8,319	1.64%	0	0.00%	0	0.00%	2	0.00%
Leukemia (CLL)																						
#70 Baseline Flow Cytometry	14,756	13,805	93.56%	13,805	0	0.00%	0	0.00%	111	0.75%	783	5.31%	20	0.00%	32	0.22%	5	0.03%	0	0.00%	0	0.00%
Macular Degeneration																						
#14 Dilated Macular Examination	940,622	903,864	96.09%	903,864	1,115	0.12%	0	0.00%	9,824	1.04%	23,153	2.46%	1,871	0.00%	1,737	0.18%	179	0.02%	2	0.00%	2	0.00%
#140 Age-Related Macular Degeneration (AMD): Counseling on Antioxidant Supplement	492,011	475,456	96.64%	477,199	507	0.10%	0	0.00%	4,521	0.92%	8,393	1.71%	765	0.00%	1,071	0.22%	65	0.01%	0	0.00%	0	0.00%
Myelodysplastic Syndrome (MDS) and Acute Leukemias																						
#67 Baseline Cytogenetic Testing Performed on Bone Marrow	15,830	14,624	92.38%	14,624	0	0.00%	0	0.00%	129	0.81%	1,010	6.38%	26	0.00%	34	0.21%	7	0.04%	0	0.00%	0	0.00%
#68 Documentation of Iron Stores in Patients Receiving Erythropoietin Therapy	14,557	12,865	88.38%	13,628	0	0.00%	0	0.00%	123	0.84%	747	5.13%	16	0.00%	40	0.27%	5	0.03%	0	0.00%	0	0.00%
Medication Management																						
#130 Documentation of Current Medications	2,214,555	2,105,528	95.08%	2,105,528	31	0.00%	0	0.00%	95,775	4.32%	0	0.00%	0	0.00%	13,252	0.60%	0	0.00%	0	0.00%	3	0.00%
Melanoma																						
#136 Melanoma: Follow-Up Aspects of Care	53,058	50,427	95.04%	50,592	0	0.00%	0	0.00%	795	1.50%	1,324	2.50%	72	0.00%	260	0.49%	15	0.03%	0	0.00%	1	0.00%
#137 Melanoma: Continuity of Care - Recall System	51,199	48,933	95.57%	49,023	0	0.00%	0	0.00%	771	1.51%	1,052	2.05%	94	0.00%	248	0.48%	11	0.02%	0	0.00%	0	0.00%
#138 Melanoma: Coordination of Care	42,618	8,507	19.96%	9,349	0	0.00%	0	0.00%	7	0.02%	1,284	3.01%	124	0.00%	1,368	3.21%	18	0.04%	0	0.00%	0	0.00%

Topic Measure	QDC Submission Attempts			Total QDCs Reported on Eligible Cases	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		#	%				
					#	%	#	%	#	%	#	%	#	%	#	%	#	%						
#111 Vaccination for Patients 65 years and Older	571,673	532,575	93.16%	533,508	22,185	3.88%	0	0.00%	29,937	5.24%	0	0.00%	0	0.00%	8,228	1.44%	0	0.00%	0	0.00%	3	0.00%		
Preventive Care and Screening																								
#173 Preventive Care and Screening: Unhealthy Alcohol Use - Screening	49,291	44,910	91.11%	44,910	1	0.00%	0	0.00%	4,176	8.47%	0	0.00%	0	0.00%	205	0.42%	0	0.00%	0	0.00%	0	0.00%		
Prostate Cancer																								
#102 Inappropriate Use of Bone Scan for Staging Low-Risk Prostate Cancer Patients	5,798	4,091	70.56%	4,259	0	0.00%	0	0.00%	1,245	21.47%	24	0.41%	183	3.00%	73	1.26%	14	0.24%	0	0.00%	0	0.00%		
#104 Adjuvant Hormonal Therapy for High-Risk Prostate Cancer Patients	4,301	3,501	81.40%	3,620	0	0.00%	0	0.00%	513	11.93%	8	0.19%	77	2.00%	83	1.93%	0	0.00%	0	0.00%	0	0.00%		
#105 Three-dimensional Radiotherapy for Patients with Prostate Cancer	5,812	4,502	77.46%	4,899	0	0.00%	0	0.00%	718	12.35%	26	0.45%	90	2.00%	78	1.34%	1	0.02%	0	0.00%	0	0.00%		
Radiology																								
#145 Radiology: Exposure Time Reported for Procedures Using Fluoroscopy	532,030	499,445	93.88%	499,505	0	0.00%	0	0.00%	28,472	5.35%	0	0.00%	0	0.00%	4,053	0.76%	0	0.00%	0	0.00%	0	0.00%		
#146 Radiology: Inappropriate Use of "Probably Benign" Assessment Category in Mammography Screening	1,214,677	1,178,374	97.01%	1,178,478	0	0.00%	0	0.00%	23,868	1.96%	267	0.02%	4,165	0.00%	7,126	0.59%	788	0.06%	0	0.00%	1	0.00%		
Stroke and Stroke Rehabilitation																								
#31 DVT Prophylaxis for Ischemic Stroke or Intracranial Hemorrhage	11,810	9,285	78.62%	9,285	0	0.00%	0	0.00%	728	6.16%	1,271	10.76%	433	4.00%	70	0.59%	25	0.21%	0	0.00%	0	0.00%		
#32 Discharged on Antiplatelet Therapy	18,161	15,208	83.74%	15,208	0	0.00%	0	0.00%	1,232	6.78%	982	5.41%	553	3.00%	118	0.65%	69	0.38%	0	0.00%	0	0.00%		
#34 t-PA Considered	10,557	6,634	62.84%	7,447	0	0.00%	0	0.00%	1,581	14.98%	809	7.66%	618	6.00%	61	0.58%	43	0.41%	0	0.00%	0	0.00%		
#35 Screening for Dysphagia	8,870	4,782	53.91%	6,136	0	0.00%	0	0.00%	722	8.14%	1,007	11.35%	932	11.00%	43	0.48%	32	0.36%	0	0.00%	0	0.00%		
#36 Consideration of Rehabilitation Services	14,768	11,935	80.82%	11,981	0	0.00%	0	0.00%	1,149	7.78%	1,085	7.35%	414	3.00%	95	0.64%	46	0.31%	0	0.00%	0	0.00%		
Syncope																								
#55 ECG Performed for Syncope	1,322,925	297,478	22.49%	297,482	225,676	17.06%	0	0.00%	9,150	0.69%	759,285	57.39%	250,558	19.00%	941	0.07%	5,511	0.42%	0	0.00%	5	0.00%		
Thoracic Surgery																								
#157 Thoracic Surgery: Recording of Clinical Stage for Lung Cancer and Esophageal Cancer Resection	736	544	73.91%	544	0	0.00%	0	0.00%	21	2.85%	147	19.97%	22	3.00%	1	0.14%	2	0.27%	0	0.00%	0	0.00%		
Tobacco Use																								
#114 Inquiry Regarding Tobacco Use	1,670,348	1,363,579	81.63%	1,498,635	8	0.00%	0	0.00%	156,307	9.36%	0	0.00%	0	0.00%	15,406	0.92%	0	0.00%	0	0.00%	1	0.00%		
#115 Advising Smokers to Quit	839,143	755,656	90.05%	790,630	4	0.00%	0	0.00%	39,907	4.76%	0	0.00%	0	0.00%	8,606	1.03%	0	0.00%	0	0.00%	4	0.00%		
Upper Respiratory Infection (URI)																								
#65 Appropriate Treatment for Children	672	1	0.15%	1	0	0.00%	0	0.00%	0	0.00%	0	0.00%	653	97.00%	0	0.00%	18	2.68%	0	0.00%	0	0.00%		
Urinary Incontinence (UI)																								
#48 Assessment of Presence or Absence of UI in Women Aged 65 Years and Older	254,936	206,849	81.14%	206,862	10,499	4.12%	13,894	5.45%	35,340	13.86%	0	0.00%	0	0.00%	12,734	4.99%	0	0.00%	0	0.00%	1	0.00%		
#49 Characterization of UI in Women Aged 65 Years and Older	64,379	44,577	69.24%	44,603	2,581	4.01%	2,091	3.25%	1,083	1.68%	11,653	18.10%	4,924	8.00%	169	0.26%	1,987	3.09%	0	0.00%	0	0.00%		
#50 Plan of Care for UI in Women Aged 65 Years and Older	59,161	41,537	70.21%	41,562	2,341	3.96%	2,084	3.52%	1,021	1.73%	10,040	16.97%	4,529	8.00%	227	0.38%	1,819	3.07%	0	0.00%	0	0.00%		
Wound Care																								
#186 Wound Care: Use of Compression System in Patients with Venous Ulcers	792	232	29.29%	232	0	0.00%	0	0.00%	54	6.82%	254	32.07%	48	6.00%	17	2.15%	7	0.88%	0	0.00%	0	0.00%		
Total	41,187,590	32,227,959	78.25%	32,708,879	1,073,936	2.61%	37,396	0.09%	4,858,957	11.80%	2,077,639	5.04%	1,001,552	2.00%	331,231	0.80%	109,256	0.27%	122	0.00%	80	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 QDC reporting where the QDC does not match the age requirements for the measure.

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

^f The # of occurrences of 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: MCOMP and PGP pilot program participants are excluded from these reports (based on the most recent pilot participant list from ORD).