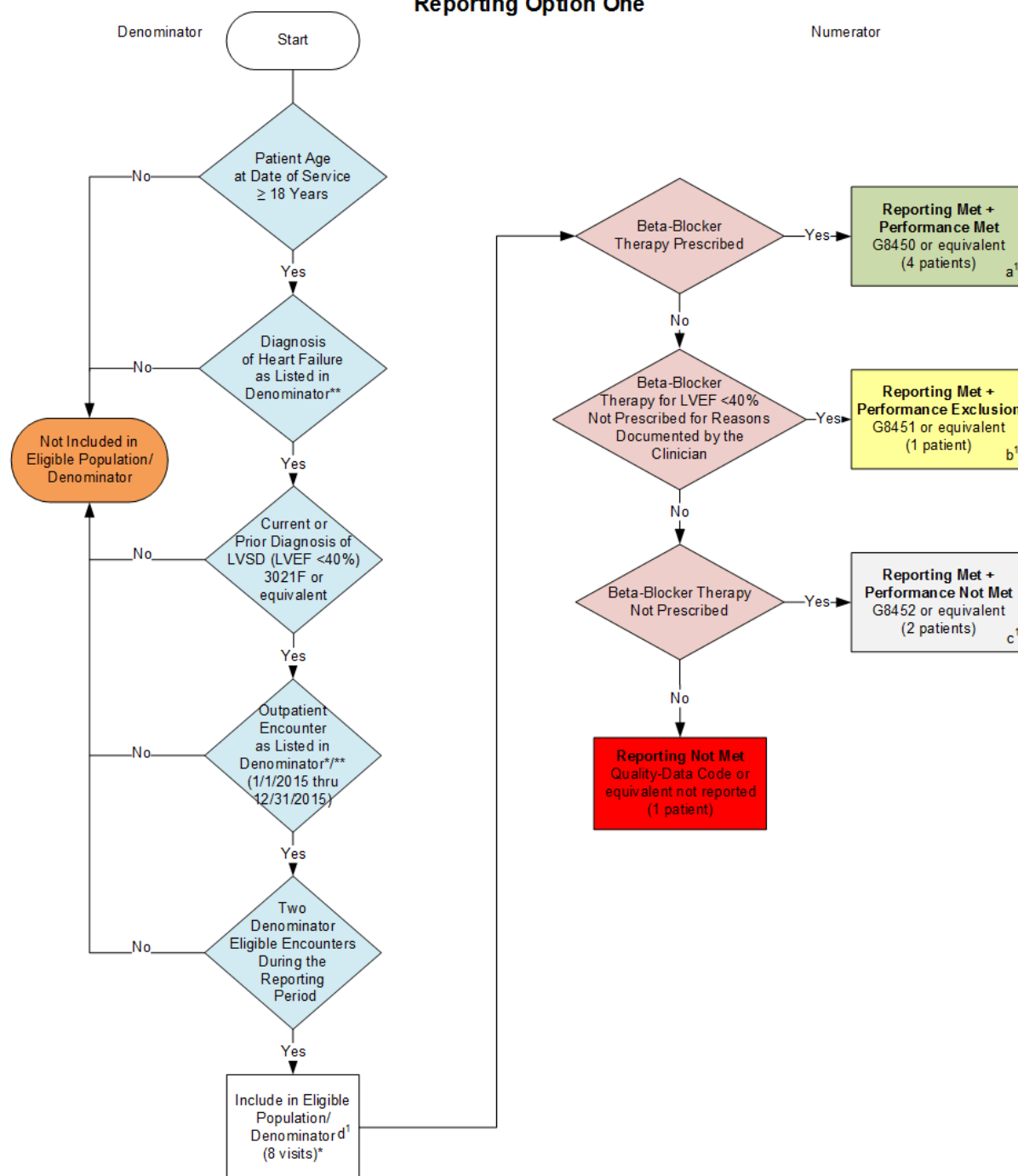


2015 Registry Individual Measure Flow
PQRS #8 NQF #0083: Heart Failure (HF): Beta-Blocker Therapy for Left Ventricular Systolic Dysfunction (LVSD)
Reporting Option One



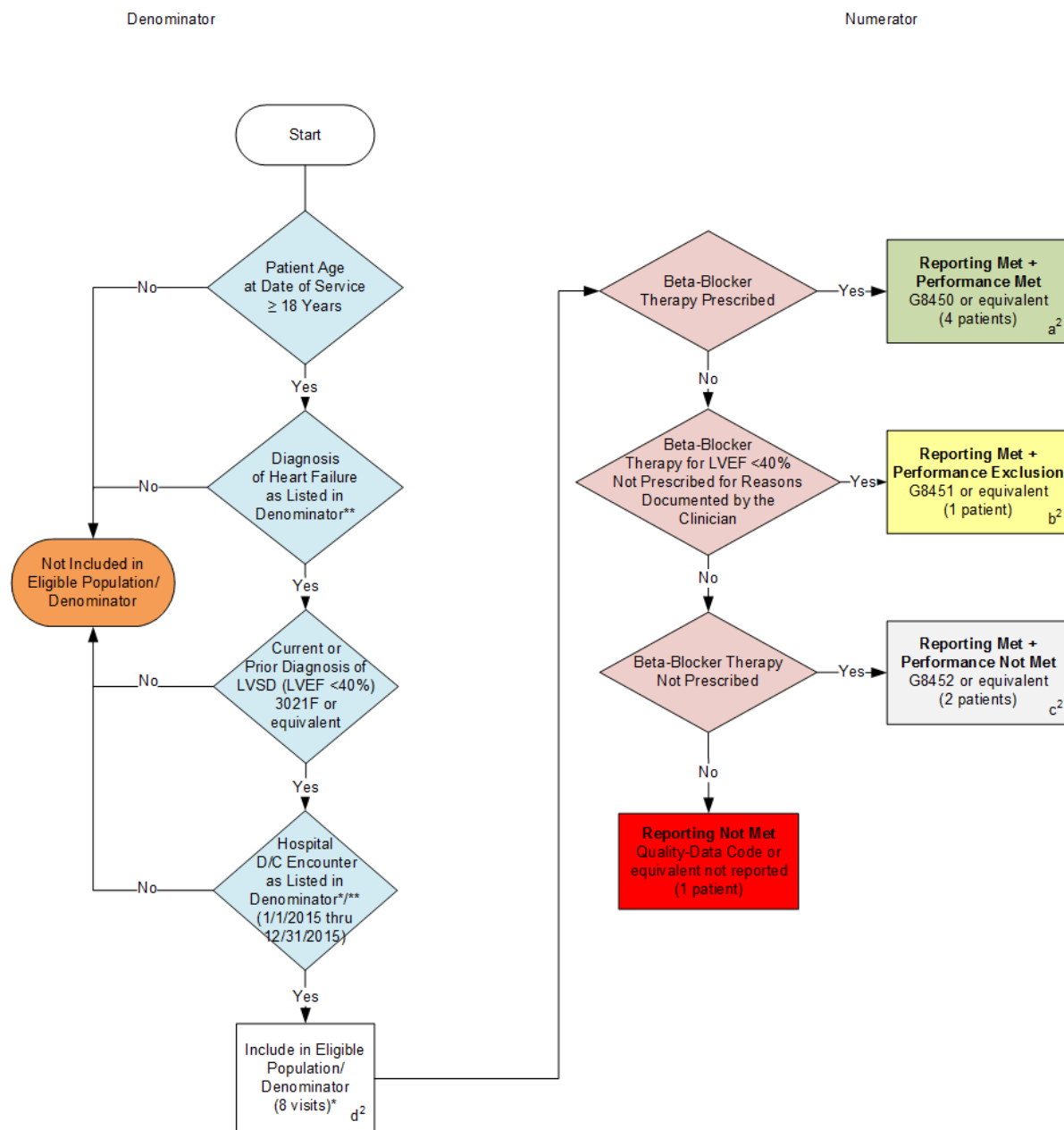
This measure is to be reported at two different frequencies, depending upon the clinical setting. This measure is to be reported for a minimum of once per reporting period when seen in the outpatient setting AND reported at each hospital discharge (99238 and 99239*) during the reporting period. Please reference the Reporting Criteria 2 for Hospital Discharge Setting Flow.

**See the posted Measure Specification for specific coding and instructions to report this measure.

NOTE: Reporting Frequency: Patient-process

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2015 Registry Individual Measure Flow
PQRS #8 NQF #0083: Heart Failure (HF): Beta-Blocker Therapy for Left Ventricular Systolic Dysfunction (LVSD)
Reporting Option Two



This measure is to be reported at two different frequencies, depending upon the clinical setting. This measure is to be reported for a minimum of once per reporting period when seen in the outpatient setting AND reported at each hospital discharge (99238 and 99239*) during the reporting period. Please reference the Reporting Criteria for Outpatient Setting Flow.

**See the posted Measure Specification for specific coding and instructions to report this measure.

NOTE: Reporting Frequency: Patient-process

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2015 Registry Individual Measure Flow
PQRS #8 NQF #0083: Heart Failure (HF): Beta-Blocker Therapy for Left Ventricular Systolic Dysfunction (LVSD)

SAMPLE CALCULATIONS:

Reporting Rate=

Performance Met ($a^1+a^2=8$ encounters) + Perf. Exclusion ($b^1+b^2=2$ encounters) + Performance Not Met ($c^1+c^2=4$ encounter) = 14 encounters = 87.50%
 Eligible Population / Denominator ($d^1+d^2=16$ encounters) = 16 encounters

Performance Rate=

Performance Met ($a^1+a^2=8$ encounters) = 8 encounters = 66.67%
 Reporting Numerator (14 encounters) – Performance Exclusion ($b^1+b^2=2$ encounters) = 12 encounters

This measure is to be reported at two different frequencies, depending upon the clinical setting. This measure is to be reported for a minimum of once per reporting period when seen in the outpatient setting AND reported at each hospital discharge (99238 and 99239*) during the reporting period.

This measure contains 2 Reporting Criteria; although as the Sample Calculation indicates, there is **ONLY** one reporting rate and one performance rate for this measure.

**See the posted Measure Specification for specific coding and instructions to report this measure.

NOTE: Reporting Frequency: Patient-process

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2015 Registry Individual Measure Flow
PQRS #8 NQF #0083: Heart Failure Beta-Blocker Therapy for Left Ventricular
Systolic Dysfunction (LVSD)

Please refer to the specific section of the Measure Specification to identify the denominator and numerator information for use in reporting this Individual Measure.

Reporting Option 1

1. Start with Denominator
2. Check Patient Age:
 - a. If the Age is greater than or equal to 18 years of age on Date of Service and equals No during the measurement period, do not include in Eligible Patient Population. Stop Processing.
 - b. If the Age is greater than or equal to 18 years of age on Date of Service and equals Yes during the measurement period, proceed to check Patient Diagnosis.
3. Check Patient Diagnosis:
 - a. If Diagnosis of Heart Failure as Listed in the Denominator equals No, do not include in Eligible Patient Population. Stop Processing.
 - b. If Diagnosis of Heart Failure as listed in the denominator equals Yes, proceed to check Current of Prior Diagnosis of LVSD (LVEF <40%).
4. Check Current of Prior Diagnosis of LVSD (LVEF <40%):
 - a. If Diagnosis of LVSD (LVEF <40%) 3021F or equivalent as Listed in the Denominator equals No, do not include in Eligible Patient Population. Stop Processing.
 - b. If Diagnosis of LVSD (LVEF <40%) 3021F or equivalent as Listed in the Denominator equals Yes, proceed to check Encounter Performed.
5. Check Encounter Performed:
 - a. If Outpatient Encounter as Listed in the Denominator equals No, do not include in Eligible Patient Population. Stop Processing.
 - b. If Outpatient Encounter as Listed in the Denominator equals Yes, include in the Eligible population.
6. Check Two Denominator Eligible Encounters Performed:
 - a. If Two Denominator Eligible Encounters Performed as Listed in the Denominator equals No, do not include in Eligible Patient Population. Stop Processing.
 - b. If Two Denominator Eligible Encounters Performed as Listed in the Denominator equals Yes, include in the Eligible population.
7. Denominator Population:

- a. Denominator population is all Eligible Patients in the denominator. Denominator is represented as Denominator in the Sample Calculation listed at the end of this document. Letter d¹ equals 8 visits in the sample calculation.
8. Start Numerator
9. Check Beta-Blocker Therapy Prescribed:
 - a. If Beta-Blocker Therapy Prescribed equals Yes, include in Reporting Met and Performance Met.
 - b. Reporting Met and Performance Met letter is represented in the Reporting Rate and Performance Rate in the Sample Calculation listed at the end of this document. Letter a¹ equals 4 patients in Sample Calculation.
 - c. If Beta-Blocker Therapy Prescribed equals No, proceed to check Beta Blocker Therapy for LVEF <40% Not Prescribed for Reasons Documented by the Clinician.
10. Check Beta Blocker Therapy for LVEF <40% Not Prescribed for Reasons Documented by the Clinician:
 - a. If Beta-Blocker Therapy for LVEF <40% Not Prescribed for Reasons Documented by the Clinician equals Yes, include in Reporting Met and Performance Exclusion.
 - b. Reporting Met and Performance Exclusion letter is represented in the Reporting Rate and Performance Rate in the Sample Calculation listed at the end of this document. Letter b¹ equals 1 patient in the Sample Calculation.
 - c. If Beta-Blocker Therapy for LVEF <40% Not Prescribed for Reasons Documented by the Clinician equals No, proceed to check Beta-Blocker Therapy Not Prescribed.
11. Check Beta-Blocker Therapy Not Prescribed:
 - a. If Beta-Blocker Therapy Not Prescribed equals Yes, include in Reporting Met and Performance Not Met.
 - b. Reporting Met and Performance Not Met letter is represented in the Reporting Rate in the Sample Calculation listed at the end of this document. Letter c¹ equals 2 patients in the Sample Calculation.
 - c. If Beta-Blocker Therapy Not Prescribed equals No, proceed to Reporting Not Met.
12. Check Reporting Not Met:
 - a. If Reporting Not Met, the Quality Data Code or equivalent was not reported. 1 patient has been subtracted from the reporting numerator in sample calculation.

2015 Registry Individual Measure Flow
PQRS #8 NQF #0083: Heart Failure Beta-Blocker Therapy for Left Ventricular
Systolic Dysfunction (LVSD)

Please refer to the specific section of the Measure Specification to identify the denominator and numerator information for use in reporting this Individual Measure.

Reporting Option 2

1. Start with Denominator
2. Check Patient Age:
 - a. If the Age is greater than or equal to 18 years of age on Date of Service and equals No during the measurement period, do not include in Eligible Patient Population. Stop Processing.
 - b. If the Age is greater than or equal to 18 years of age on Date of Service and equals Yes during the measurement period, proceed to check Patient Diagnosis.
3. Check Patient Diagnosis:
 - a. If Diagnosis of Heart Failure as Listed in the Denominator equals No, do not include in Eligible Patient Population. Stop Processing.
 - b. If Diagnosis of Heart Failure as listed in the denominator equals Yes, proceed to check Current of Prior Diagnosis of LVSD (LVEF <40%).
4. Check Current of Prior Diagnosis of LVSD (LVEF <40%):
 - a. If Diagnosis of LVSD (LVEF <40%) 3021F or equivalent as Listed in the Denominator equals No, do not include in Eligible Patient Population. Stop Processing
 - b. If Diagnosis of LVSD (LVEF <40%) 3021F or equivalent as Listed in the Denominator equals Yes, proceed to check Encounter Performed.
5. Check Hospital Discharge Encounter Performed:
 - a. If Hospital Discharge Encounter as Listed in the Denominator equals No, do not include in Eligible Patient Population. Stop Processing.
 - b. If Hospital Discharge Encounter as Listed in the Denominator equals Yes, include in the Eligible Population.
6. Denominator Population:
 - a. Denominator population is all Eligible Patients in the denominator. Denominator is represented as Denominator in the Sample Calculation listed at the end of this document. Letter d² equals 8 visits in the sample calculation.
7. Start Numerator
8. Check Beta-Blocker Therapy Prescribed:

- a. If Beta-Blocker Therapy Prescribed equals Yes, include in Reporting Met and Performance Met.
 - b. Reporting Met and Performance Met letter is represented in the Reporting Rate and Performance Rate in the Sample Calculation listed at the end of this document. Letter a² equals 4 patients in Sample Calculation.
 - c. If Beta-Blocker Therapy Prescribed equals No, proceed to Documentation of Beta-Blocker Not Prescribed.
9. Check Beta-Blocker Therapy for LVEF <40% Not Prescribed for Reasons Documented by the Clinician:
 - a. If Beta-Blocker Therapy for LVEF <40% Not Prescribed for Reasons Documented by the Clinician equals Yes, include in Reporting Met and Performance Exclusion.
 - b. Reporting Met and Performance Exclusion letter is represented in the Reporting Rate and Performance Rate in the Sample Calculation listed at the end of this document. Letter b² equals 1 patient in the Sample Calculation.
 - c. If Beta-Blocker Therapy for LVEF <40% Not Prescribed for Reasons Documented by the Clinician equals No, proceed to Beta-Blocker Therapy Not Prescribed.
10. Check Beta-Blocker Therapy Not Prescribed:
 - a. If Beta-Blocker Therapy Not Prescribed equals Yes, include in Reporting Met and Performance Not Met.
 - b. Reporting Met and Performance Not Met letter is represented in the Reporting Rate in the Sample Calculation listed at the end of this document. Letter c² equals 2 patients in the Sample Calculation.
 - c. If Beta-Blocker Therapy Not Prescribed equals No, proceed to Reporting Not Met.
11. Check Reporting Not Met:
 - a. If Reporting Not Met, the Quality Data Code or equivalent was not reported. 1 patient has been subtracted from the reporting numerator in sample calculation.

SAMPLE CALCULATIONS:	
Reporting Rate=	
Performance Met (a ¹ +a ² =8 patients) + Perf. Exclusion (b ¹ +b ² =2 patients) + Performance Not Met (c ¹ +c ² =4 patients) = 14 patients = 87.50%	
Eligible Population / Denominator (d ¹ +d ² =16 patients) = 16 patients	
Performance Rate=	
Performance Met (a ¹ +a ² =8 patients) = 8 patients = 66.67%	
Reporting Numerator (14 patients) – Performance Exclusion (b ¹ +b ² =2 patients) = 12 patients	

This measure contains 2 Reporting Criteria, although as the Sample Calculation indicates, there is **ONLY** one reporting rate and one performance rate for this measure.