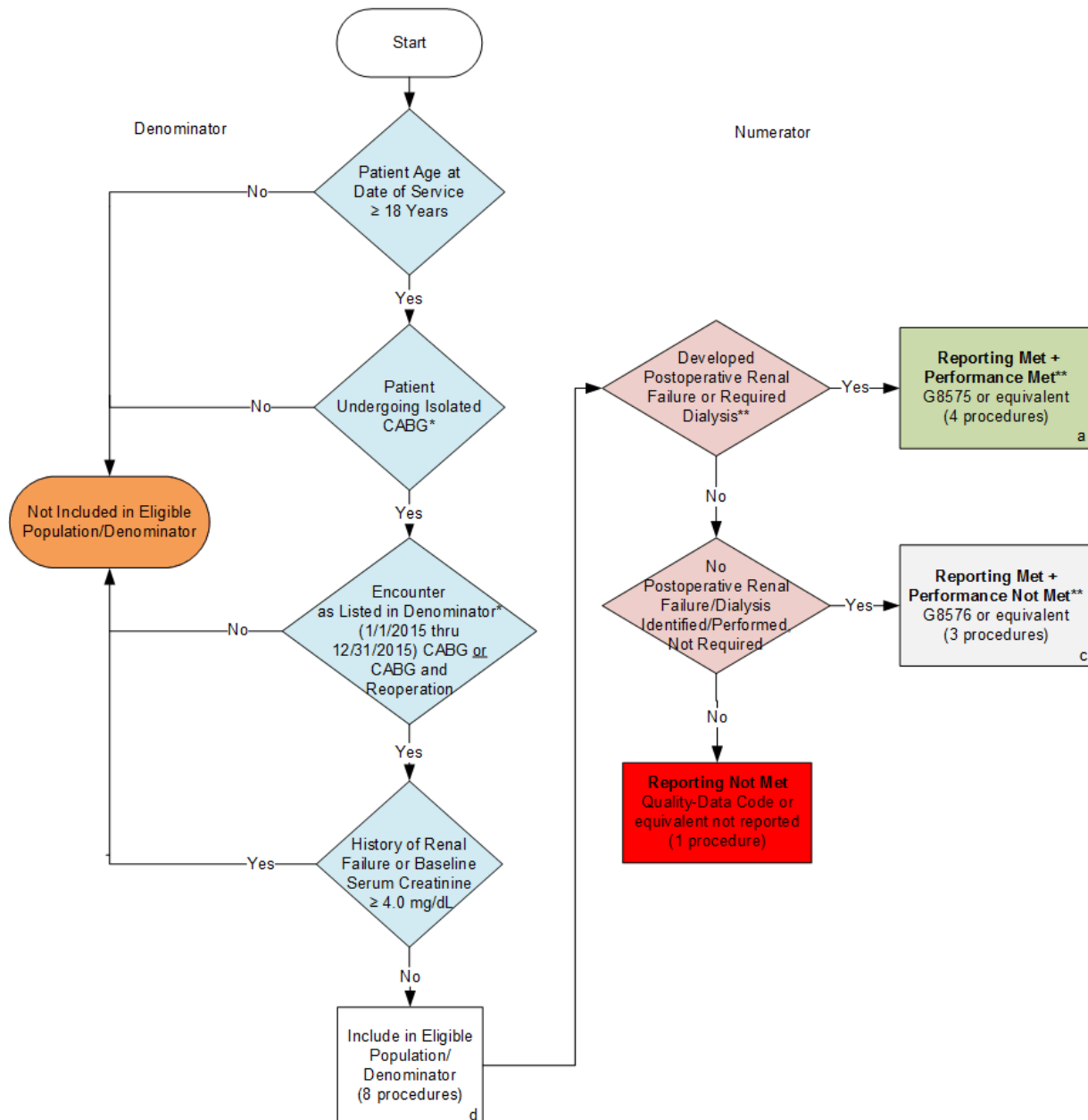


2015 Registry Individual Measure Flow
PQRS #167 NQF #0114 Coronary Artery Bypass Graft (CABG): Postoperative Renal Failure



SAMPLE CALCULATIONS:

Reporting Rate=

$$\frac{\text{Performance Met (a=4 procedures)} + \text{Performance Not Met (c=3 procedures)}}{\text{Eligible Population / Denominator (d=8 procedures)}} = \frac{7 \text{ procedures}}{8 \text{ procedures}} = 87.50\%$$

Performance Rate=**

$$\frac{\text{Performance Met (a=4 procedures)}}{\text{Reporting Numerator (7 procedures)}} = \frac{4 \text{ procedures}}{7 \text{ procedures}} = 57.14\%$$

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

**A lower calculated performance rate for this measure indicates better clinical care or control.

Note: Report Frequency – Procedure

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2015 Registry Individual Measure Flow
PQRS #167 NQF #0114: Coronary Artery Bypass Graft (CABG): Postoperative Renal Failure

Please refer to the specific section of the Measure Specification to identify the denominator and numerator information for use in reporting this Individual Measure. A lower calculated performance rate for this measure indicates better clinical care or control.

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 Undergoing Isolated CABG.
3. Check Patient Undergoing Isolated CABG:
 - a. If Patient Undergoing Isolated CABG equals No, do not include in Eligible Patient Population. Stop Processing.
 - b. If Patient Undergoing Isolated CABG equals Yes, proceed to check Encounter Performed.
4. Check Encounter Performed:
 - a. If Encounter as Listed in the Denominator equals No, do not include in Eligible Patient Population. Stop Processing.
 - b. If Encounter as Listed in the Denominator equals Yes, proceed to check History of Renal Failure or Baseline Serum Creatinine ≥ 4.0 mg/dL.
5. Check History of Renal Failure or Baseline Serum Creatinine ≥ 4.0 mg/dL:
 - a. If History of Renal Failure or Baseline Serum Creatinine ≥ 4.0 mg/dL equals Yes, do not include in Eligible Patient Population. Stop Processing.
 - b. If History of Renal Failure or Baseline Serum Creatinine ≥ 4.0 mg/dL equals No, 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 d equals 8 procedures in the sample calculation.
7. Start Numerator
8. Check Developed Postoperative Renal Failure or Required Dialysis:
 - a. If Developed Postoperative Renal Failure or Required Dialysis 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 a equals 4 procedures in Sample Calculation.
 - c. If Developed Postoperative Renal Failure or Required Dialysis equals No, proceed to No Postoperative Renal Failure/Dialysis Identified/Performed, Not Required.

9. Check No Postoperative Renal Failure/Dialysis Identified/Performed, Not Required:
 - a. If No Postoperative Renal Failure/Dialysis Identified/Performed, Not Required equals Yes, include in Reporting Met and Performance Not Met.
 - b. Reporting Met and Performance Not Met letter is represented in the Reporting Rate and Performance Rate in the Sample Calculation listed at the end of this document. Letter c equals 3 procedures in Sample Calculation.
 - c. If No Postoperative Renal Failure/Dialysis Identified/Performed, Not Required equals No, proceed to Reporting Not Met.
10. Check Reporting Not Met:
 - a. If Reporting Not Met equals No, Quality Data Code or equivalent not reported. 1 procedure has been subtracted from the reporting numerator in the sample calculation.

SAMPLE CALCULATIONS:

Reporting Rate=

$$\frac{\text{Performance Met (a=4 procedures) + Performance Not Met (c=3 procedures)}}{\text{Eligible Population / Denominator (d=8 procedures)}} = \frac{7 \text{ procedures}}{8 \text{ procedures}} = 87.50\%$$

Performance Rate=**

$$\frac{\text{Performance Met (a=4 procedures)}}{\text{Reporting Numerator (7 procedures)}} = \frac{4 \text{ procedures}}{7 \text{ procedures}} = 57.14\%$$