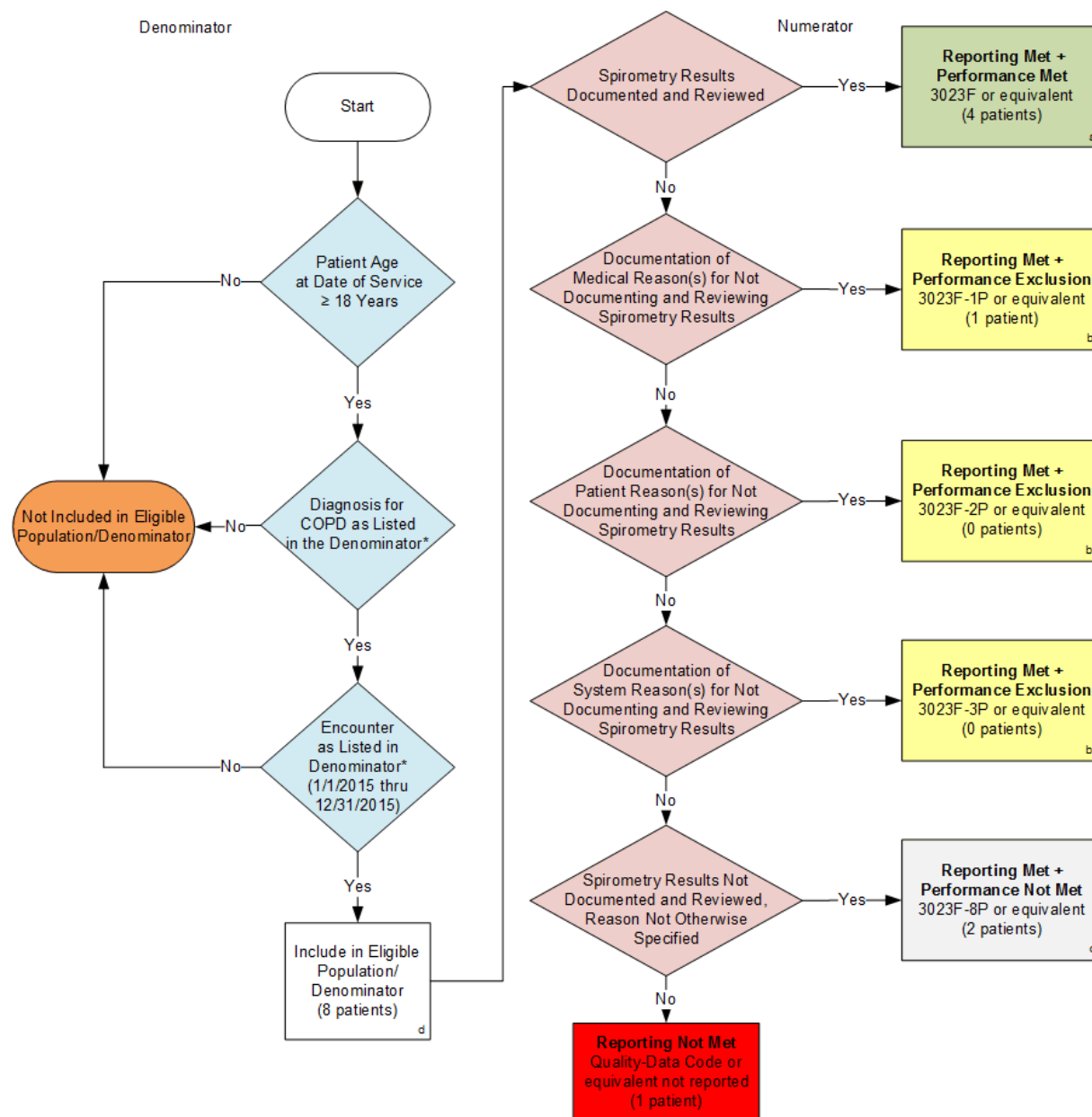


2015 Claims/Registry Individual Measure Flow
PQRS #51 NQF #0091: Chronic Obstructive Pulmonary Disease (COPD): Spirometry Evaluation



SAMPLE CALCULATIONS:

Reporting Rate=

$$\frac{\text{Performance Met (a=4 patients)} + \text{Performance Exclusion (b}^1\text{+b}^2\text{+b}^3\text{=1 patient)} + \text{Performance Not Met (c=2 patients)}}{\text{Eligible Population / Denominator (d=8 patients)}} = \frac{7 \text{ patients}}{8 \text{ patients}} = 87.50\%$$

Performance Rate=

$$\frac{\text{Performance Met (a=4 patients)}}{\text{Reporting Numerator (7 patients) – Performance Exclusion (b=1 patient)}} = \frac{4 \text{ patients}}{6 \text{ patients}} = 66.67\%$$

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

NOTE: Reporting Frequency – Patient-intermediate

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2015 Claims/Registry Individual Measure Flow
PQRS #51 NQF #0091: Chronic Obstructive Pulmonary Disease (COPD):
Spirometry Evaluation

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

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 COPD as Listed in the Denominator equals No, do not include in Eligible Patient Population. Stop Processing.
 - b. If Diagnosis of COPD as Listed in the Denominator 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, include in the Eligible population.
5. 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 patients in the sample calculation.
6. Start Numerator
7. Check Spirometry Results Documented and Reviewed:
 - a. If Spirometry Results Documented and Reviewed 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 patients in Sample Calculation.
 - c. If Spirometry Results Documented and Reviewed equals No, proceed to Documentation of Medical Reason(s) for Not Documenting and Reviewing Spirometry Results.
8. Check Documentation of Medical Reason(s) for Not Documenting and Reviewing Spirometry Results:

- a. If Documentation of Medical Reason(s) for Not Documenting and Reviewing Spirometry Results 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 Documentation of Medical Reason(s) for Not Documenting and Reviewing Spirometry Results equals No, proceed to Documentation of Patient Reason(s) for Not Documenting and Reviewing Spirometry Results.
9. Check Documentation of Patient Reason(s) for Not Documenting and Reviewing Spirometry Results:
 - a. If Documentation of Patient Reason(s) for Not Documenting and Reviewing Spirometry Results 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 0 patients in the Sample Calculation.
 - c. If Documentation of Patient Reason(s) for Not Documenting and Reviewing Spirometry Results equals No, proceed to Documentation of System Reason(s) for Not Documenting and Reviewing Spirometry Results.
10. Check Documentation of System Reason(s) for Not Documenting and Reviewing Spirometry Results:
 - a. If Documentation of System Reason(s) for Not Documenting and Reviewing Spirometry Results 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 b³ equals 0 patients in the Sample Calculation.
 - c. If Documentation of System Reason(s) for Not Documenting and Reviewing Spirometry Results equals No, proceed to Spirometry Results Not Documented and Reviewed, Reason Not Otherwise Specified.
11. Check Spirometry Results Not Documented and Reviewed, Reason Not Otherwise Specified:
 - a. If Spirometry Results Not Documented and Reviewed, Reason Not Otherwise Specified equals Yes, include in Reporting Met and Performance Not Met.
 - b. Reporting Met and Performance Not Met letter is represented in the Reporting Met in the Sample Calculation listed at the end of document. Letter c equals 2 patients in the Sample Calculation.
 - c. If Spirometry Results Not Documented and Reviewed, Reason Not Otherwise Specified equals No, include in Reporting Not Met.
12. Check Reporting Not Met
 - a. If Reporting Not Met equals No, Quality Data Code or equivalent not reported. 1 patient has been subtracted from the reporting numerator in sample calculation.

SAMPLE CALCULATIONS:

Reporting Rate=

$$\frac{\text{Performance Met (a=4 patients)} + \text{Performance Exclusion (b}^1\text{+b}^2\text{+b}^3\text{=1 patient)} + \text{Performance Not Met (c=2 patients)}}{\text{Eligible Population / Denominator (d=8 patients)}} = \frac{7 \text{ patients}}{8 \text{ patients}} = 87.50\%$$

Performance Rate=

$$\frac{\text{Performance Met (a=4 patients)}}{\text{Reporting Numerator (7 patients) – Performance Exclusion (b=1 patient)}} = \frac{4 \text{ patients}}{6 \text{ patients}} = 66.67\%$$