

EP CLINICAL QUALITY MEASURE IMPLEMENTATION GUIDANCE AND SPECIFICATION SUPPLEMENTAL UPDATES -

	POSTING DATE	MEASURE NUMBER	MEASURE TITLE	IMPLEMENTATION GUIDANCE/SPECIFICATION UPDATE
1	October 1, 2010	NQF 0024	Weight Assessment and Counseling for Children and Adolescents	<p>The measure was listed in the “Eligible professional clinical quality measures” file on the CMS website as having 3 numerators and 3 denominators. UPDATE: The measure requires 9 numerators and 9 denominators for reporting.</p> <p>Reference updated document: Eligible Professional Clinical Quality Measures [PDF, 51.4 KB] .</p>
2	October 1, 2010	NQF 0038, 0041, 0043	<p>0038 - Childhood Immunization Status</p> <p>0041 - Preventive Care and Screening: Influenza Immunization for Patients \geq 50 Years Old</p> <p>0043 - Pneumonia Vaccination Status for Older Adults</p>	<p>CVX codes have been added to these measures for vaccinations. Since RxNorm can map to the 11 terminologies specified in the Final Rule for certification it is used to represent the vaccine as a medication. The CVX codes are derived from CPT codes which are procedure billing codes for vaccinations provided. CPT and related CVX codes are provided in a grouping (CPT added for guidance based on the CDC CVX mapping table most current at the time of measure publication). Since CVX is derived from CPT codes which are based on billed procedures these new items are listed as “Procedure performed: xxx vaccination.”</p> <p>Example from measure 0041</p> <ul style="list-style-type: none"> • OR: “Medication administered: influenza vaccine”; • OR: “Procedure performed: influenza vaccination”; <p>Implementation can use either the <i>vaccine</i> (provided in RxNorm) or the <i>vaccination</i> provided in CVX and CPT code groupings. This presentation allows clearer differentiation between the two and EHR vendors can use either for quality reporting. Supplemental specifications available.</p>
3	October 1, 2010	NQF 0038 (see appendix A below)	Childhood Immunization Status	<p>The supplemental specification for the measure includes the following UPDATES:</p> <ol style="list-style-type: none"> 1. Guidance regarding calculation of the measure is now included, “Measure 0038 lists 12 numerators for reporting. The first ten numerators indicate whether any individual has

EP CLINICAL QUALITY MEASURE IMPLEMENTATION GUIDANCE AND SPECIFICATION SUPPLEMENTAL UPDATES -

	POSTING DATE	MEASURE NUMBER	MEASURE TITLE	IMPLEMENTATION GUIDANCE/SPECIFICATION UPDATE
				<p>received the appropriate number of a specific immunization by the age of 2. The 11th and 12th numerators indicate whether any individual has received all of the expected doses of a group (or bundle) of immunizations. Note that each numerator includes a set of criteria that, if present, would exclude a patient from the expectation to receive the respective vaccine(s). These exclusionary criteria are provided as “AND NOT” sections in each numerator. To calculate this measure any individual who has not received the immunization and meets one of the “AND NOT” criteria is to be removed from the denominator for that calculation.”</p> <ol style="list-style-type: none"> 2. Indents were added to the logic to improve the clarity; no change has occurred to the initial logic intent 3. The measure continues to specify vaccines as medications using RxNorm as the coding taxonomy. In addition, CVX codes and CPT codes (grouped together) are provided as vaccinations (procedures performed) for each type of immunization 4. Numerators 11 and 12, the bundle of immunizations for any individual are both updated to include HiB vaccine (or HiB vaccination) which had been omitted from the original publication 5. The code list spreadsheet has been updated to include some previously missing code lists within groupings and also including some changes to the codes for MMR vaccine, VZV vaccine, DTaP vaccine 6. Baker’s yeast as an exclusion for Hepatitis B vaccine has been updated to include Baker’s yeast as a medication (in the original posting) as well as Baker’s yeast as a substance (i.e., food) 7. All code list groupings have been checked to be sure that the code lists included are clearly identified.
4	October 1, 2010	NQF 0033	Chlamydia Screening	The measure is stratified by patient age to include into three patient

EP CLINICAL QUALITY MEASURE IMPLEMENTATION GUIDANCE AND SPECIFICATION SUPPLEMENTAL UPDATES -

	POSTING DATE	MEASURE NUMBER	MEASURE TITLE	IMPLEMENTATION GUIDANCE/SPECIFICATION UPDATE
			for Women	<p>populations. Supplemental specifications available.</p> <p>UPDATE: The measure is updated to clarify the ages for each of the populations:</p> <p>Population criteria 1 – “AND: “Patient characteristic: birth date” (age) ≥ 15 and ≤ 23 years to expect screening for patients within one year after reaching 15 years through 24 years;</p> <p>Population criteria 2 – “AND: “Patient characteristic: birth date” (age) ≥ 15 and ≤ 19 years to expect screening for patients within one year after reaching 15 years through 20 years;</p> <p>Population criteria 3 – “AND: “Patient characteristic: birth date” (age) ≥ 20 and ≤ 23 years to expect screening for patients within one year after reaching 20 years through 24 years;</p>
5	October 1, 2010	NQF 0041	Preventive Care and Screening: Influenza Immunization for Patients ≥ 50 Years Old	<p>Supplemental specifications available.</p> <ol style="list-style-type: none"> 1. Denominator criterion: o AND: “Encounter: encounter influenza” after or simultaneous to “measurement period” ≥ 58 days; <ol style="list-style-type: none"> a. Modified to: AND: “Encounter: encounter influenza” after or simultaneous to the beginning of the “measurement period” ≥ 58 days; [Additional text added for clarity. The intended meaning is not changed.] 2. Denominator criterion: o AND: “Encounter: encounter influenza” before or simultaneous to “measurement period” ≤ 122 days; <ol style="list-style-type: none"> a. Modified to: o AND: “Encounter: encounter influenza” before or simultaneous to the beginning of the “measurement period” ≤ 122 days; 3. Additional text added for clarity. The intended meaning is not changed.] 4. Numerator criteria <ol style="list-style-type: none"> a. Still present – “Medication administered: influenza vaccine”; b. Added – OR: “Procedure performed: influenza

EP CLINICAL QUALITY MEASURE IMPLEMENTATION GUIDANCE AND SPECIFICATION SUPPLEMENTAL UPDATES -

	POSTING DATE	MEASURE NUMBER	MEASURE TITLE	IMPLEMENTATION GUIDANCE/SPECIFICATION UPDATE
				<p>vaccination”;</p> <p>[Immunization measures have been updated to include both RxNorm codes and CVX codes: When referring to RxNorm codes vaccines the term <i>influenza vaccine</i> indicates the medication product CVX and CPT codes are provided in a code list grouping. Since each is derived from the vaccination provided and CPT is the procedure code from which CVX is derived, the term <i>influenza vaccination</i> indicates the procedure that was performed (the vaccination).]</p> <p>5. Exclusions:</p> <ul style="list-style-type: none"> a. The original 5 exclusions remain (the first 5 in the list) b. While identifying codes for exclusions for the procedures (adverse effects, adverse event and intolerance), the measure steward identified the need to also add medication allergy for influenza vaccine, substance allergy to eggs, and medication intolerance to influenza vaccine. The new elements include: <ul style="list-style-type: none"> o OR: “Medication intolerance: influenza vaccine”; o OR: “Medication allergy: influenza vaccine”; o OR: “Medication adverse effects: influenza vaccine”; o OR: “Procedure adverse event: influenza vaccination”; o OR: “Procedure intolerance: influenza

EP CLINICAL QUALITY MEASURE IMPLEMENTATION GUIDANCE AND SPECIFICATION SUPPLEMENTAL UPDATES -

	POSTING DATE	MEASURE NUMBER	MEASURE TITLE	IMPLEMENTATION GUIDANCE/SPECIFICATION UPDATE
				<p>vaccination”;</p> <ul style="list-style-type: none"> o OR: “Substance allergy: allergy to eggs”; <p>c. Applicable code lists are also added in the Excel code list descriptor spreadsheet.</p>
6	October 1, 2010	NQF 0067	Coronary Artery Disease (CAD): Oral Antiplatelet Therapy Prescribed for Patients with CAD	<p>Supplemental specifications available.</p> <p>The measure steward reviewed the code lists and found that extraneous codes were contained in the four code lists below. Also, additional codes were added to the ICD-10 and SNOMED-CT “Coronary Artery Disease includes MI” code lists. The following code lists were updated to reflect the most pertinent concepts:</p> <ul style="list-style-type: none"> o “Cardiac Surgery” by SNOMED-CT code list (A_c168) o “Coronary Artery Disease includes MI” by ICD-9-CM code list (A_c122) o “Coronary Artery Disease includes MI” by ICD-10-CM code list (A_c123) o “Coronary Artery Disease includes MI” by SNOMED-CT code list (A_c124) <ul style="list-style-type: none"> • In the Initial Patient Population section, indentation around encounters was updated to clarify the requirements are either a) ≥ 2 counts of outpatient or nursing facility encounters OR b) ≥ 1 count of inpatient discharge encounters.
7	October 1, 2010	NQF 0070	Coronary Artery Disease (CAD): Beta-Blocker Therapy for CAD Patients with Prior Myocardial Infarction (MI)	<p>Supplemental specifications available.</p> <ul style="list-style-type: none"> • The measure steward reviewed the code lists and found additional SNOMED codes for the “Myocardial Infarction” SNOMED code lists (A_c58). Also, extraneous SNOMED codes were found in the code lists below. All three of these code lists were updated: <ul style="list-style-type: none"> o “Cardiac Surgery” by SNOMED-CT code list (A_c168) o “Coronary Artery Disease No MI” by SNOMED-CT code list (A_c120) o “Myocardial Infarction” by SNOMED-CT code list (A_c58)

EP CLINICAL QUALITY MEASURE IMPLEMENTATION GUIDANCE AND SPECIFICATION SUPPLEMENTAL UPDATES -

	POSTING DATE	MEASURE NUMBER	MEASURE TITLE	IMPLEMENTATION GUIDANCE/SPECIFICATION UPDATE
				<ul style="list-style-type: none"> In the Initial Patient Population section, indentation around encounters was updated to clarify the requirements are either a) ≥ 2 counts of outpatient or nursing facility encounters OR b) ≥ 1 count of inpatient discharge encounters. In the Data Criteria section of measure 0070, the QDS elements "Device applied: cardiac pacer <i>device</i>" using "cardiac pacer <i>device</i> code list" [A_c303] was renamed to "Device applied: cardiac pacer" using "cardiac pacer code list" for clarity.
8	October 1, 2010	NQF 0074	Coronary Artery Disease (CAD): Drug Therapy for Lowering LDL-Cholesterol	<p>Supplemental specifications available.</p> <p>The measure steward reviewed the code lists and found that extraneous codes were contained in the four code lists below. Also, additional codes were added to the ICD-10 and SNOMED-CT "Coronary Artery Disease includes MI" code lists. The following code lists were updated to reflect the most pertinent concepts:</p> <ul style="list-style-type: none"> "Cardiac Surgery" by SNOMED-CT code list (A_c168) "Coronary Artery Disease includes MI" by ICD-9-CM code list (A_c122) "Coronary Artery Disease includes MI" by ICD-10-CM code list (A_c123) "Coronary Artery Disease includes MI" by SNOMED-CT code list (A_c124)
9	October 1, 2010	NQF 0081	Heart Failure (HF): Angiotensin-Converting Enzyme (ACE) Inhibitor or Angiotensin Receptor Blocker (ARB) Therapy for Left Ventricular Systolic Dysfunction (LVSD)	<p>Supplemental specifications available.</p> <ul style="list-style-type: none"> The Pregnancy Code lists (c242, c243, c532) have been significantly revised during the retooling of CAD 0066. The changes affect the published measure 0081. AMA found that extraneous codes were contained in the three "pregnancy" code lists below and needed to be removed. Additional codes were added to the ICD-9 and ICD-10 code lists. The following code lists were updated to reflect the most pertinent concepts: <ul style="list-style-type: none"> "Pregnancy" by ICD-9-CM code list (A_c243) "Pregnancy" by ICD-10-CM code list (A_c242) "Pregnancy" by SNOMED-CT code list (A_c532) In the Initial Patient Population section, indentation around

EP CLINICAL QUALITY MEASURE IMPLEMENTATION GUIDANCE AND SPECIFICATION SUPPLEMENTAL UPDATES -

	POSTING DATE	MEASURE NUMBER	MEASURE TITLE	IMPLEMENTATION GUIDANCE/SPECIFICATION UPDATE
				<p>encounters was updated to clarify the requirements are either a) ≥ 2 counts of outpatient or nursing facility encounters OR b) ≥ 1 count of inpatient discharge encounters.</p> <ul style="list-style-type: none"> • In both the Population Criteria and Data Criteria sections, the QDS element "Diagnostic study result: LVF assessment" was renamed to "Diagnostic study result: LVF ASSMT" to match the name in the code list spreadsheet. • In the exclusion section of the Population Criteria, the QDS element "Diagnosis active: chronic kidney disease with <i>or</i> without hypertension" was renamed to "Diagnosis active: chronic kidney disease with <i>and</i> without hypertension." • In the Data Criteria section, "Grouping" was added to the end of the following code lists: "disease of aortic and mitral valves," "non rheumatic mitral (valve) disease," "chronic kidney disease with and without hypertension," "hypertensive renal disease with renal failure," "renal failure and ESRD," and "acute renal failure."
10	October 1, 2010	NQF 0047	Asthma Pharmacologic Therapy	<p>In the population criteria section, under the denominator, it should only say "all patients in the initial patient population". The measure was correctly specified. The Initial Patient Population identifies all patients between 5 and 40 years who have persistent asthma and have been seen at least twice during the measurement year. The challenge is that ICD10 and SNOMED have terms for persistent asthma and the "Diagnosis active: asthma persistent" is listed using the code lists (value sets) grouped from SNOMED and ICD10. To accommodate those who use ICD9, a separate condition "Diagnosis active: asthma" using only the ICD9 code list (value set) was listed and the set was constrained by requiring documentation in the EHR of a severity of "persistent".</p> <p>To clarify, based on comments, UPDATES made:</p> <ul style="list-style-type: none"> • "Diagnosis active: asthma", severity = "persistent" was <i>removed</i> from the denominator of the population criteria section. In addition, in the data criteria section, under the denominator, from the bulleted list, the "Diagnosis active; asthma persistent"

EP CLINICAL QUALITY MEASURE IMPLEMENTATION GUIDANCE AND SPECIFICATION SUPPLEMENTAL UPDATES -

	POSTING DATE	MEASURE NUMBER	MEASURE TITLE	IMPLEMENTATION GUIDANCE/SPECIFICATION UPDATE
				<p>code list was <i>removed</i>.</p> <ul style="list-style-type: none"> "Diagnosis active: asthma" phrase in the Initial Patient Population (IPP) of the population criteria was <i>renamed</i> to "diagnosis active: asthma", severity = "persistent".
11	October 1, 2010	NQF 0031	Breast cancer screening	<p>Supplemental specifications available.</p> <p>UPDATES were made in the code list spreadsheet to the following:</p> <ul style="list-style-type: none"> Code list N_c74 'breast cancer screening': <ul style="list-style-type: none"> Standard taxonomy was changed from "GROUPING" to "ICD-9." Standard category was changed from "Diagnosis / Condition / Problem" to "Diagnostic study." Standard code list was changed from "N_c554, N_c558" to "87.36, 87.37, V76.11, V76.12" Code list N_c46 'bilateral mastectomy': <ul style="list-style-type: none"> The original 'bilateral mastectomy' code list that used CPT codes is now renamed to "bilateral mastectomy modifier" and the codes now only include the modifiers: 09950 and .50 Code list N_c79 'unilateral mastectomy': <ul style="list-style-type: none"> The original 'unilateral mastectomy' code list that used CPT codes is now renamed to 'unilateral mastectomy CPT' <p>Rationale for the changes:</p> <p>The breast cancer screening code list (N_c74) was updated for consistency. The mastectomy code lists (N_c46 and N_c79) were updated for reasons as follows: The original file included CPT, SNOMED-CT and ICD-9CM codes for mastectomy. ICD-9 and SNOMED have specific codes for unilateral mastectomy and for bilateral mastectomy, each with a respective code list. CPT identifies mastectomy as a procedure and applies a modifier if the procedure is</p>

EP CLINICAL QUALITY MEASURE IMPLEMENTATION GUIDANCE AND SPECIFICATION SUPPLEMENTAL UPDATES -

	POSTING DATE	MEASURE NUMBER	MEASURE TITLE	IMPLEMENTATION GUIDANCE/SPECIFICATION UPDATE
				<p>bilateral. The code list provided previously included the same CPT codes for unilateral and for bilateral mastectomy and did not specify that the modifier was required to indicate a bilateral procedure. The update provides modifier codes as an additional code list to indicate that a procedure was bilateral and performed in one operative session.</p> <ul style="list-style-type: none"> • The CPT code list for “bilateral mastectomy” is now “bilateral mastectomy modifier” and includes only the two modifier codes. • The CPT code list for unilateral mastectomy is renamed “unilateral mastectomy CPT.” • The logic now states the patient has had a bilateral mastectomy determined by a grouping of ICD-9CM or SNOMED codes (in the “bilateral mastectomy grouping”), OR the patient has had a “unilateral mastectomy CPT” AND a “bilateral mastectomy modifier”. • The logic for >1 unilateral mastectomy performed at different times is unchanged. • The indentation for the last bullet on ‘AND NOT: FIRST = SECOND’ was updated for clarity. The meaning here was to say that the patient must NOT have more than one unilateral mastectomy, or bilateral mastectomy, or unilateral mastectomy with a bilateral mastectomy modifier, AND the patient also must NOT have the first unilateral mastectomy

EP CLINICAL QUALITY MEASURE IMPLEMENTATION GUIDANCE AND SPECIFICATION SUPPLEMENTAL UPDATES -

	POSTING DATE	MEASURE NUMBER	MEASURE TITLE	IMPLEMENTATION GUIDANCE/SPECIFICATION UPDATE
				<p>record to be identical to the second.</p> <p>PREVIOUS POPULATION CRITERIA DENOMINATOR STATEMENT:</p> <ul style="list-style-type: none"> ○ AND NOT: <ul style="list-style-type: none"> ● OR: “Procedure performed: bilateral mastectomy grouping”; ● OR: >1 count(s) of “Procedure performed: unilateral mastectomy”; ● AND NOT: FIRST “Procedure performed: unilateral mastectomy” = SECOND “Procedure performed: unilateral mastectomy”; <p>UPDATED POPULATION CRITERIA DENOMINATOR STATEMENT:</p> <ul style="list-style-type: none"> ○ AND NOT: <ul style="list-style-type: none"> ● OR: >1 count(s) of “Procedure performed: unilateral mastectomy grouping”; ● OR: “Procedure performed: bilateral mastectomy grouping”; ● OR: <ul style="list-style-type: none"> ○ AND: “Procedure performed: unilateral mastectomy CPT”; ○ AND: “Procedure performed: bilateral mastectomy modifier”; ○ AND NOT: FIRST “Procedure performed: unilateral mastectomy grouping” = SECOND “Procedure performed: unilateral mastectomy grouping”; ○ <p>DATA CRITERIA SECTION:</p>

EP CLINICAL QUALITY MEASURE IMPLEMENTATION GUIDANCE AND SPECIFICATION SUPPLEMENTAL UPDATES -

	POSTING DATE	MEASURE NUMBER	MEASURE TITLE	IMPLEMENTATION GUIDANCE/SPECIFICATION UPDATE
				<p>The following items have been added:</p> <ul style="list-style-type: none"> ○ “Procedure performed: bilateral mastectomy” using “unilateral mastectomy code list CPT” before or simultaneously to the “measurement end date”; ○ “Procedure performed: bilateral mastectomy modifier code list” before or simultaneously to the “measurement end date”;
12	October 8, 2010	0075	Ischemic Vascular Disease (IVD): Complete Lipid Panel and LDL Control	<p>Numerator 2 of the logic was updated:</p> <ul style="list-style-type: none"> - In the first bullet, the term “most recent” was added for clarification - In the second bullet, the minus sign (-) was replaced by the word ‘minus’ to make it clear that this refers to a calculation. Note that guidance for the calculation was also added to the measure: “In the second part of the Numerator 2, the calculated LDL value must use results of total cholesterol, HDL and triglycerides all from the same date.”
13	October 8, 2010	0421	Adult Weight Screening and Follow-Up	<p>In review of the code list, some pregnancy concepts were removed to avoid confusion and to be sure that only patients with active pregnancy were identified. In addition, in numerator 2, the third bullet on “Physical Exam Finding: BMI” was changed from ≥ 25 to $< 18.5 \text{ kg/m}^3$ for consistency to meet the BMI ranges requirements.</p>
14	October 8, 2010	0038	Childhood Immunization Status	<p>The logic was updated to make it clearer that the reasons for not providing vaccines are exclusions. So all of these reasons were moved to the exclusion section for clarity. In addition, guidance was provided for how to apply exclusions:</p> <p>“Measure 0038 lists 12 numerators for reporting. The first ten numerators indicate whether any individual has received the appropriate number of a specific immunization by the age of 2. The 11th and 12th numerators indicate whether any individual has received</p>

EP CLINICAL QUALITY MEASURE IMPLEMENTATION GUIDANCE AND SPECIFICATION SUPPLEMENTAL UPDATES -

	POSTING DATE	MEASURE NUMBER	MEASURE TITLE	IMPLEMENTATION GUIDANCE/SPECIFICATION UPDATE
				<p>all of the expected doses of a group (or bundle) of immunizations. Note that each of the first 10 numerators, referring to a single vaccine (or vaccine combination - MMR) has a related (or paired) set of exclusions that apply only to the respective vaccine. The exclusion criteria are numbered identically to their respective numerators (e.g., MMR vaccines in Numerator 3 and MMR exclusions in Exclusion 3). Numerators 11 and 12 contain multiple vaccines. The exclusions for numerators 11 and 12 should be derived from the exclusions specified for the individual vaccines within those bundles.</p> <p>Note that numerator 3 is separated into numerator 3a (MMR vaccine) and numerator 3b (measles, mumps and rubella vaccines individually). Either 3a or 3b must be satisfied to meet the requirements of numerator 3. If there is an exclusion for any of the individual vaccines in numerator 3b, the patient is removed from the denominator. Similarly, for numerators 11 and 12, if there is an exclusion for any of the individual vaccines, the patient is removed from the denominator. Numerators 11 and 12 are intended to show only those patients for whom all of the listed vaccines have been performed.”</p> <p>NOTE: FOR REPORTING PURPOSES, IF THE SUPPLEMENTAL SPECIFICATIONS ARE USED, THE EXCLUSIONS ARE NOT REPORTED FOR THIS MEASURE AND 3A AND 3B MUST BE SUMMED TO = NUMERATOR 3.</p>
15	October 8, 2010	0027	Smoking and Tobacco Use Cessation, Medical assistance: a. Advising Smokers and Tobacco Users to Quit, b. Discussing Smoking and Tobacco Use	<p>Numerator 1 and 2 in the population criteria section was updated: An additional line was added to numerator 2:</p> <ul style="list-style-type: none"> • AND: “Patient characteristic: tobacco user” <=1 year before or simultaneously to “measurement period”; <p>This option requires that only smokers are included in the group for which counseling is required. For reporting there would be no change to the numbers reported in numerator 1 and numerator 2. The</p>

EP CLINICAL QUALITY MEASURE IMPLEMENTATION GUIDANCE AND SPECIFICATION SUPPLEMENTAL UPDATES -

	POSTING DATE	MEASURE NUMBER	MEASURE TITLE	IMPLEMENTATION GUIDANCE/SPECIFICATION UPDATE
			Cessation Medications, c. Discussing Smoking and Tobacco Use Cessation Strategies	addition was intended to serve as a clarification for those calculating performance.
16	November 10, 2010	0038	Childhood Immunization Status	NCQA reviewed the code lists and found additional extraneous codes that need to be removed. These include 3 codes from the ‘progressive neurologic disorder’ SNOMED code list (292925004, 292992006, and 292927007) and 1 SNOMED code (69624006) from the ‘immunodeficiency’ SNOMED code list. The SNOMED progressive neurologic disorder codes were determined to be pre-coordinated codes of the streptomycin adverse reaction, polymyxin B adverse reaction, and neomycin adverse reaction, and these were already defined previously in the retooled measure using RxNorm codes. Therefore, the SNOMED codes were removed. For the immunodeficiency code, that was removed during their review because it was found to be related to immunodeficiency disease in Arab foals. The measure code list spreadsheet was revised accordingly.
17	November 10, 2010	0055	Diabetes: Eye Exam	<p>The following updates were made to specify the appropriate timing relativity:</p> <ul style="list-style-type: none"> • Population criteria: numerator –To add clarity, the phrase “during measurement period” was added to “procedure performed: eye exam” to constrain the timing period appropriately • Data criteria: numerator – The phrase “before measurement end date” was removed from the “procedure performed: eye exam” data element <p>The intent of the measure is to expect an eye exam during the measurement year OR an eye exam in the previous year with no diabetic retinopathy identified. Hence, if retinopathy was identified in the previous year, a new eye exam is expected during the measurement year.</p>

EP CLINICAL QUALITY MEASURE IMPLEMENTATION GUIDANCE AND SPECIFICATION SUPPLEMENTAL UPDATES -

	POSTING DATE	MEASURE NUMBER	MEASURE TITLE	IMPLEMENTATION GUIDANCE/SPECIFICATION UPDATE
18	November 10, 2010	0033	Chlamydia Screening for Women	Several code lists were found to be truncated in the measure output spreadsheet: N_c207 "procedures indicative of sexually active woman" (CPT), N_c206 "contraceptives" (RxNorm), N_c210 "Laboratory tests indicative of sexually active women" (LOINC), N_c580 "sexually active woman" (ICD9), N_c619 "sexually active woman" (ICD10), N_c215 "X-ray Study" (CPT), and N_c516 "X-ray Study" (SNOMED). These were re-populated and the measure codelist spreadsheet was updated.
19	November 10, 2010	0036	Use of Appropriate Medications for Asthma	The third 'or' bullet in the denominator has been modified. The original file included the "encounter outpatient, acute inpatient, ED" grouping code list in the denominator. On review of the measure, NCQA determined that the measure intent requires only the "encounter outpatient" grouping for that clause, not the combined "encounter outpatient, acute inpatient, ED" grouping concept. The QDS element "encounter outpatient, acute inpatient, ED" was renamed in both the human-readable document and the measure codelist spreadsheet to "encounter outpatient".
20	November 10, 2010	0575	Diabetes: HbA1c Control (<8%)	On page 3 of the published human-readable, in the population criteria (denominator) section, the last QDS element "encounter non-acute inpt, outpatient, or ophthalmology" had a line of truncated text following it. The phrase "occurring on 2 different dates" was added for clarity. It now reads: ">=2 count(s) of "Encounter: encounter non-acute inpt, outpatient, or ophthalmology" occurring on 2 different dates." The above updates only apply to the published human-readable document. No changes were made to the measure codelist spreadsheet.
21	November 10, 2010	0389	Prostate Cancer:	In the data criteria section, the initial patient population listed the

EP CLINICAL QUALITY MEASURE IMPLEMENTATION GUIDANCE AND SPECIFICATION SUPPLEMENTAL UPDATES -

	POSTING DATE	MEASURE NUMBER	MEASURE TITLE	IMPLEMENTATION GUIDANCE/SPECIFICATION UPDATE
			Avoidance of Overuse of Bone Scan for Staging Low Risk Prostate Cancer Patients	<p>timing relativity of the data element “prostate cancer” as “before or simultaneous to diagnostic study performed: bone scan.” This has been updated to “before or simultaneous to measurement period.” The change was made to more accurately reflect the original measure’s intent.</p> <p>The above updates only apply to the published human-readable document. No changes were made to the measure codelist spreadsheet.</p>
22	November 10, 2010	0052	Low Back Pain: Use of Imaging Studies	<p>The denominator logic in the initial patient population was revised for clarity. The logic operator “AND NOT” was added to indicate that the subsequent bulleted data elements were exceptions to the denominator.</p> <p>The above updates only apply to the published human-readable document. No changes were made to the measure codelist spreadsheet.</p>
23	November 10, 2010	0089	Diabetic Retinopathy: Communication with the Physician Managing Ongoing Diabetes Care	<p>The exclusion in the initial patient population, the medical and patient reasons data elements were updated from “Procedure not done” to “Communication not done”. The update ensures that the population criteria exclusion is consistent with the information in the data criteria exclusion.</p> <p>The above updates only apply to the published human-readable document. No changes were made to the measure codelist spreadsheet.</p>
24	November 10, 2010	0088	Diabetic Retinopathy: Documentation of Presence or Absence of Macular Edema and Level of Severity of Retinopathy	<p>The data element “macular or fundus exam” was misspelled in the numerator in the population criteria – this is now corrected.</p> <p>The above updates only apply to the published human-readable document. No changes were made to the measure codelist spreadsheet.</p>
25	November 10, 2010	0064	Diabetes: LDL	In the population criteria numerator 2 section, the logic was revised

EP CLINICAL QUALITY MEASURE IMPLEMENTATION GUIDANCE AND SPECIFICATION SUPPLEMENTAL UPDATES -

	POSTING DATE	MEASURE NUMBER	MEASURE TITLE	IMPLEMENTATION GUIDANCE/SPECIFICATION UPDATE
			Management & Control	<p>for clarity – the operator “MOST RECENT” was added to be consistent with measure intent.</p> <p>The above updates only apply to the published human-readable document. No changes were made to the measure codelist spreadsheet.</p>
26	December 13, 2010	0038	Childhood Immunization Status	<p>NCQA initially used UMLS CUI codes in the “neomycin” code list. These are now removed and replaced by the appropriate RxNorm CUI codes. The measure output spreadsheet is updated with the appropriate code lists.</p>
27	December 13, 2010	0067	Coronary Artery Disease (CAD): Oral Antiplatelet Therapy Prescribed for Patients with CAD	<p>For the code list "Bleeding Coagulation Disorders" (c420), a historic code 287.4 (secondary thrombocytopenia) was added to include patients who may have been classified with a condition in the past that is required by the measure. Related to the code 287.4, the steward confirmed that two specific sub-concepts are relevant and should be included: 287.41 (post transfusion purpura) and 287.49 (secondary TCP).</p> <p>The above updates only apply to the measure code list spreadsheet. No changes were made to the published human-readable document.</p>
28	December 13, 2010	0084	Heart Failure: Warfarin Therapy for Patients with Atrial Fibrillation	<p>For the code list "Hemoptysis" (c225), the historic code 786.3 (hemoptysis) was added to include patients who may have been classified with a condition in the past that is required by the measure. Related to the code 786.3, the steward confirmed that two specific sub concepts are relevant and should be included: 786.30 (hemoptysis) and 786.39 (other hemoptysis).</p> <p>In addition, for the code list "Anemia and Bleeding Disorders" (c223), a historic code 287.4 (secondary thrombocytopenia) was added to include patients who may have been classified with a condition in the past that is required by the measure. Related to the code 287.4, the steward confirmed that two specific sub-concepts are relevant and should be included: 287.41 (post transfusion purpura) and 287.49</p>

EP CLINICAL QUALITY MEASURE IMPLEMENTATION GUIDANCE AND SPECIFICATION SUPPLEMENTAL UPDATES -

	POSTING DATE	MEASURE NUMBER	MEASURE TITLE	IMPLEMENTATION GUIDANCE/SPECIFICATION UPDATE
				(secondary TCP). The above updates only apply to the measure code list spreadsheet. No changes were made to the published human-readable document.
29	December 13, 2010	0024 0033	Weight Assessment and Counseling for Children and Adolescents Chlamydia Screening for Women	Some codes from the “encounter pregnancy” were removed. First, the codes V24, V24.0 and V24.2 were taken out because the steward determined that these codes are related to postpartum care and the women who are pregnant will be captured by the other codes in the measure. Second, the V25 codes (V25, V25.01, V25.02, V25.03, V25.09) were also removed because on further review, the steward determined that these are not specific to pregnancy and were inadvertently included in the code list. These codes were specific to contraception use which does not align with the pregnancy exclusion. The above updates only apply to both measures 0024 and 0033 measure code list spreadsheets. No changes were made to the published human-readable documents.
30	December 13, 2010	0036	Use of Appropriate Medications for Asthma	Some codes were added to two code lists on further review by the steward: <ul style="list-style-type: none"> • “Emphysema” (c277) ICD-9-CM code list had the following code added: 492.0 “Emphysematous Bleb”. • “COPD” (c225) ICD-9-CM code list had the following code added: 491.20 “Obstructive chronic bronchitis without mention of acute exacerbation”. The above updates only apply to the measure code list spreadsheet. No changes were made to the published human-readable document.
31	December 13, 2010	0068	Ischemic Vascular Disease (IVD): Use of Aspirin or another Antithrombotic	Several codes were added to one of the code lists for this measure: <ul style="list-style-type: none"> • “Ischemic Vascular Disease” (c131) ICD-9-CM code list intended to have the whole series for 433 included. Two of these were missing and added back to the measure: 433 (Occlusion and stenosis of precerebral arteries) and 433.00 (Occlusion and stenosis of basilar artery without mention of

EP CLINICAL QUALITY MEASURE IMPLEMENTATION GUIDANCE AND SPECIFICATION SUPPLEMENTAL UPDATES -

	POSTING DATE	MEASURE NUMBER	MEASURE TITLE	IMPLEMENTATION GUIDANCE/SPECIFICATION UPDATE
				<p>cerebral infarction).</p> <p>The above updates only apply to the measure code list spreadsheet. No changes were made to the published human-readable document.</p>
32	December 13, 2010	0052	Low Back Pain: Use of Imaging Studies	<p>Several code lists were updated for this measure on further review by the steward:</p> <ul style="list-style-type: none"> • “Cancer” (c557) ICD-9-CM code list: additional subcodes (209.31, 209.32, 209.33, 209.34, 209.35, 209.36) to the 209.3 (Neuroendocrine tumors) series were added for specificity. In addition, the 209.7 (Secondary neuroendocrine tumor) code series (209.7, 209.70, 209.71, 209.72, 209.73, 209.74, 209.75, 209.79) were also added to this code list. • “Low Back Pain” (c322) ICD-9-CM code list: The first numerical code “6” was a typo. It should be listed as 724.6 instead. This is corrected in the code list output. In addition, subcodes 724.70, 724.71 and 724.79 were added to the 724.7 (Disorders of coccyx) series for specificity. <p>The above updates only apply to the measure code list spreadsheet. No changes were made to the published human-readable document.</p>
33	December 13, 2010	0421	Adult Weight Screening and Follow-Up	<p>The HCPCS code list “encounter_outpatient_HCPCS_with_clinician” (Q_c68) was removed to better represent the measure requirements.</p> <p>The Pregnancy code lists have been significantly revised by the steward during the retooling process. Extraneous codes were found in the three “pregnancy” code lists below and needs to be removed. Additional codes were added to the ICD-9 and ICD-10 code lists. The following code lists were updated to reflect the most pertinent concepts:</p> <ul style="list-style-type: none"> ○ “Pregnancy” by ICD-9-CM code list (Q_c157) ○ “Pregnancy” by ICD-10-CM code list (Q_c158)

EP CLINICAL QUALITY MEASURE IMPLEMENTATION GUIDANCE AND SPECIFICATION SUPPLEMENTAL UPDATES -

	POSTING DATE	MEASURE NUMBER	MEASURE TITLE	IMPLEMENTATION GUIDANCE/SPECIFICATION UPDATE
				<ul style="list-style-type: none"> ○ “Pregnancy” by SNOMED-CT code list (Q_c160) <p>The above updates only apply to the measure code list spreadsheet. No changes were made to the published human-readable document.</p>
34	December 28 th , 2010	0014	Prenatal Care: Anti-D Immune Globulin	The measure logic has been updated to better clarify the exclusion. These changes will be consistent with the final HQMF.
35	December 28 nd , 2010	0033	Chlamydia Screening for Women	The December 8 th deliverable had an inadvertently shortened list of codes for the “Encounter outpatient” CPT codelist (N_c27). This has been corrected in the current measure code list spreadsheet.
36	January 04, 2011	All Measures	All Measures	Measures were updated to include copyright/disclosure information.
37	October 6, 2011	0083	Heart Failure (HF): Beta-Blocker Therapy for Left Ventricular Systolic Dysfunction (LVSD)	The < 50 BPM parameter was inadvertently omitted from the measure exclusions and has been added.
38	November 1, 2011	0031	Breast Cancer Screening	<p>The patient characteristic gender = female should be included in the Initial Patient Population.</p> <p>HL7 code= 10174 for Gender Female.</p> <p>Please use the HL7 code above. Specifications will not be issued at this time but will reflect the change in subsequent releases.</p>

EP CLINICAL QUALITY MEASURE IMPLEMENTATION GUIDANCE AND SPECIFICATION SUPPLEMENTAL UPDATES -

Appendix A: Measure 0038 Detailed Coding Updates:

	Standard concept id	Standard concept (Code list name)	Standard Taxonomy	Code	Descriptor	Add	Remove	Reason
1	c250	HIV disease	ICD9-Diag	042	Human immunodeficiency virus [HIV] disease AIDS, AIDS-like syndrome, AIDS-related complex, ARC, HIV infection, symptomatic; use additional code(s) to identify all manifestations of HIV; use additional code to identify HIV-2 infection (079.53) exclude: asymptomatic HIV infection status (V08); exposure to HIV virus (V01.79); nonspecific serologic evidence of HIV (795.71)	-	-	Change concept name to HIV disease [Intended to include symptomatic and asymptomatic, code 042 is specifically symptomatic and needs to be retained – it would be inappropriate for a code list named “asymptomatic HIV”
2	c505	Baker’s Yeast	RxNorm	892677	Baker’s yeast allergenic extract 100 MG/ML	-	-	Retain – This was the only code in the code set. After review it was determined any Baker’s yeast medication or food substance should be included as a Baker’s yeast allergy exclusion (Medication for the RxNorm medications, Substance for the SNOMED substances)
3	c505	Baker’s Yeast	RxNorm	967985	Saccharomyces cerevisiae allergenic extract 50 MG/ML solution	X		Additional Baker’s yeast medication added for completeness

EP CLINICAL QUALITY MEASURE IMPLEMENTATION GUIDANCE AND SPECIFICATION SUPPLEMENTAL UPDATES -

	Standard concept id	Standard concept (Code list name)	Standard Taxonomy	Code	Descriptor	Add	Remove	Reason
4	NEW	Baker's Yeast substance	SNOMED-CT	2101000	Baker's yeast proteinase	X		Additional concept – Baker's yeast as a food substance – Include as a new code list of 1 element – Substance allergy: Baker's yeast
4	c341	Cancer of lymphoreticular or histiocytic tissue	SNOMED-CT	442537007	Non-Hodgkin lymphoma associated with Human immunodeficiency virus infection	-	-	Code list was incorrectly identified. This is not a unique code list c341, the code belongs to code list c340 – corrected
5	c260	DTaP Vaccine	RxNorm	204525	Diphtheria Toxoid Vaccine 30 UNT/ML / Tetanus Toxoid Vaccine 20 UNT/ML Injectable Suspension		X	Does not include all 3 components of DTaP
6	c260	DTaP Vaccine	RxNorm	205255	Diphtheria Toxoid Vaccine 12.5 UNT / Tetanus Toxoid Vaccine 5 UNT per 0.5 ML Injectable Suspension		X	Does not include all 3 components of DTaP
7	c260	DTaP Vaccine	RxNorm	205257	Diphtheria Toxoid Vaccine 4 UNT/ML / Tetanus Toxoid Vaccine 20 UNT/ML Injectable Suspension		X	Does not include all 3 components of DTaP
8	c260	DTaP Vaccine	RxNorm	205259	Clostridium tetani antigen vaccine 2 UNT / Corynebacterium diphtheriae antigen vaccine 2 UNT per 0.5 ML Injectable		X	Does not include all 3 components of DTaP
9	c260	DTaP Vaccine	RxNorm	260122	Diphtheria Toxoid Vaccine 0.036 MG/ML / Haemophilus capsular oligosaccharide 0.05 MG/ML Injectable Solution Suspension		X	Does not include all 3 components of DTaP
10	c260	DTaP Vaccine	RxNorm	795942	Diphtheria Toxoid Vaccine 0.05 MG/ML / Haemophilus capsular oligosaccharide 0.02 MG/ML Injectable Suspension		X	Does not include all 3 components of DTaP

EP CLINICAL QUALITY MEASURE IMPLEMENTATION GUIDANCE AND SPECIFICATION SUPPLEMENTAL UPDATES -

	Standard concept id	Standard concept (Code list name)	Standard Taxonomy	Code	Descriptor	Add	Remove	Reason
	c260	DTaP Vaccine	RxNorm	802049	Diphtheria Toxoid Vaccine 13.2 UNT/ML / Tetanus Toxoid Vaccine 10 UNT/ML Injectable Suspension		X	Does not include all 3 components of DTaP
11	c260	DTaP Vaccine	RxNorm	805379	Diphtheria Toxoid Vaccine 13.4 UNT/ML / Tetanus Toxoid Vaccine 10 UNT/ML Injectable Suspension		X	Does not include all 3 components of DTaP
12	c260	DTaP Vaccine	RxNorm	807273	Diphtheria toxoid vaccine 2 UNT / tetanus toxoid vaccine 5 UNT per 0.5 ML Prefilled Syringe		X	Does not include all 3 components of DTaP
13	c260	DTaP Vaccine	RxNorm	807415	Diphtheria Toxoid Vaccine 4 UNT/ML / Tetanus Toxoid Vaccine 10 UNT/ML Injectable Suspension		X	Does not include all 3 components of DTaP
14	c260	DTaP Vaccine	RxNorm	807277	Diphtheria Toxoid Vaccine 4 UNT/ML / Tetanus Toxoid Vaccine 10 UNT/ML Injectable Suspension		X	Does not include all 3 components of DTaP
15	c563	Immunodeficiency	SNOMED-CT	69624006	Combined immunodeficiency disease in Arab foals		X	Removed – SNOMED modeling error – veterinary disease
16	c423	Influenza vaccine	RxNorm	805544	Influenza Virus Vaccine, Live Attenuated, A-South Dakota-6-2007 (H1N1) (A-Brisbane-59-2007-like) strain 158000000 UNT/ML / Influenza Virus Vaccine, Live Attenuated, A-Uruguay -716-2007 (H3N2) (A-Brisbane-10-2007-like) strain 158000000 UNT/ML / Influenza Virus Vaccine, Live Attenuated, B-Florida-4-2006 strain 158000000 UNT/ML Nasal Spray		X	Removed after consideration of appropriateness for age group
17	c268	MMR Vaccine	RxNorm	762820	Rubella Virus Vaccine Live (Wistar RA 27-3 Strain) 2000 UNT/ML Injectable Solution		X	Includes Rubella vaccine only – not indicative of full MMR

EP CLINICAL QUALITY MEASURE IMPLEMENTATION GUIDANCE AND SPECIFICATION SUPPLEMENTAL UPDATES -

	Standard concept id	Standard concept (Code list name)	Standard Taxonomy	Code	Descriptor	Add	Remove	Reason
18	c268	MMR Vaccine	RxNorm	805077	Mumps Virus Vaccine Live, Jeryl Lynn Strain 40000 UNT/ML / Rubella Virus Vaccine Live (Wistar RA 27-3 Strain) 2000 UNT/ML Injectable Solution		X	Includes Rubella and Mumps vaccine only – not indicative of full MMR
19	c598	Mumps	ICD-10	B26	Mumps	X		Original delivery indicated B26 only. B26 is the main Mumps category in the ICD-10-CM hierarchy. Other subcategories of mumps are: B26.0 Mumps orchitis B26.1 Mumps meningitis B26.2 Mumps encephalitis B26.3 Mumps pancreatitis B26.8 Mumps with other complications B26.81 Mumps hepatitis B26.82 Mumps myocarditis B26.83 Mumps nephritis B26.84 Mumps polyneuropathy B26.85 Mumps arthritis B26.89 Other mumps complications B26.9 Mumps without complication
20	c268	MMR Vaccine	RxNorm	805496	ProQuad, Measles, Mumps, Rubella, and Varicella Virus Vaccine Live Injectable Solution	X		MMR vaccine codes added
21	c268	MMR Vaccine	RxNorm	804186	M-M-R II, Measles, Mumps, and Rubella Virus Vaccine Live Injectable Solution	X		MMR vaccine codes added

EP CLINICAL QUALITY MEASURE IMPLEMENTATION GUIDANCE AND SPECIFICATION SUPPLEMENTAL UPDATES -

	Standard concept id	Standard concept (Code list name)	Standard Taxonomy	Code	Descriptor	Add	Remove	Reason
22	c420	VZV Vaccine	RxNorm	106483	varicella-zoster immune globulin 50 MG/ML Injectable Solution		X	VZV Post-exposure prophylaxis, does not represent VZV vaccine which is required by the measure
23	c420	VZV Vaccine	RxNorm	252016	varicella-zoster immune globulin 100 UNT/ML Injectable Solution		X	VZV Post-exposure prophylaxis, does not represent VZV vaccine which is required by the measure
24	c420	VZV Vaccine	RxNorm	646808	varicella-zoster immune globulin 50 UNT/ML Injectable Solution		X	VZV Post-exposure prophylaxis, does not represent VZV vaccine which is required by the measure
25	c420	VZV Vaccine	RxNorm	759605	Varicella zoster vaccine, live (Oka/Merck) 19,400 UNT per 0.65 ML Injectable Suspension	X		Add VZV vaccine to code list
26	c420	VZV Vaccine	RxNorm	759609	Zostavax 29800 UNT/ML Injectable Suspensio	X		Add VZV vaccine to code list