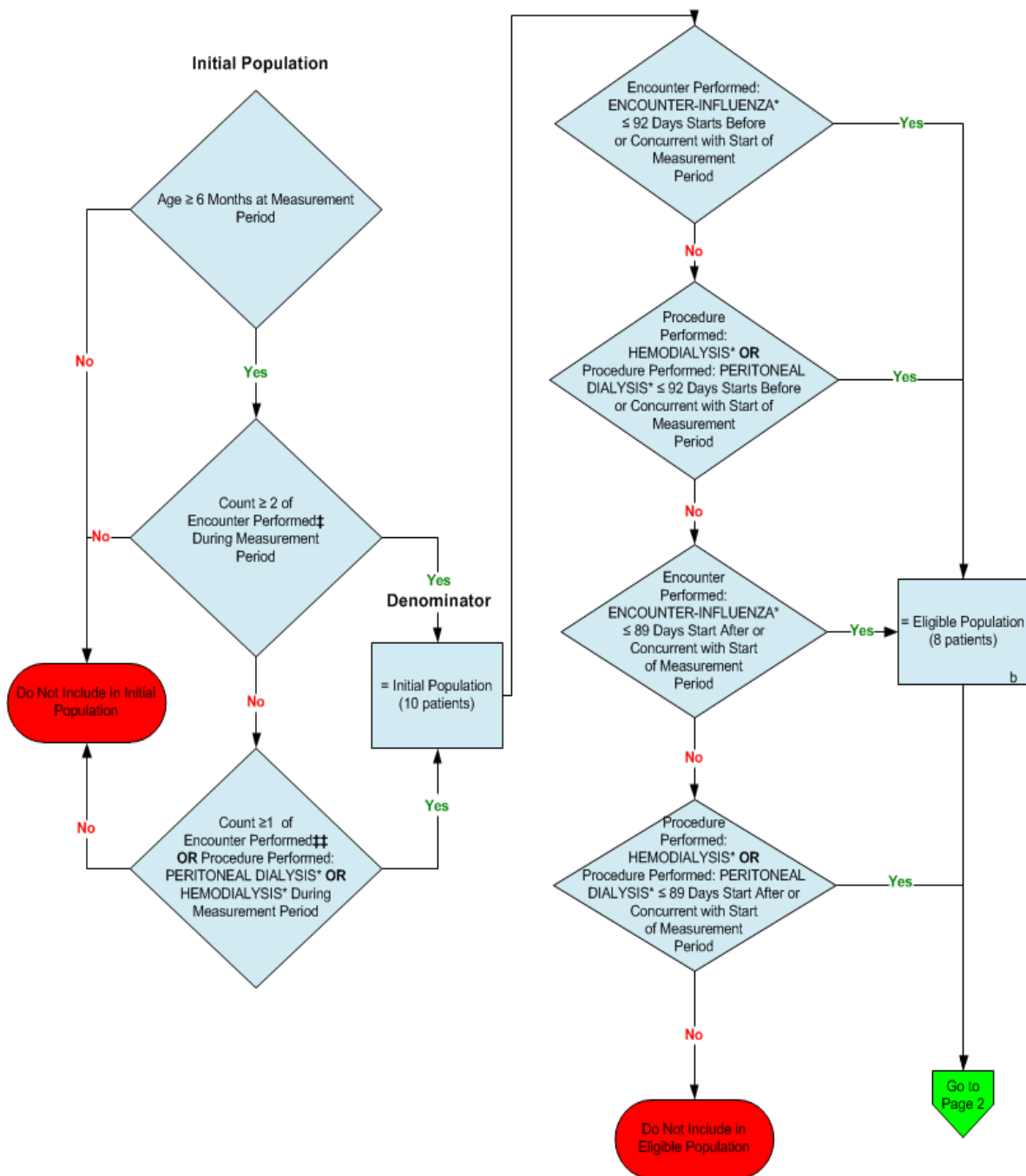


2014 eCQM Flow
Measure Identifier: CMS147v5

NQF 0041: Preventive Care and Screening: Influenza Immunization

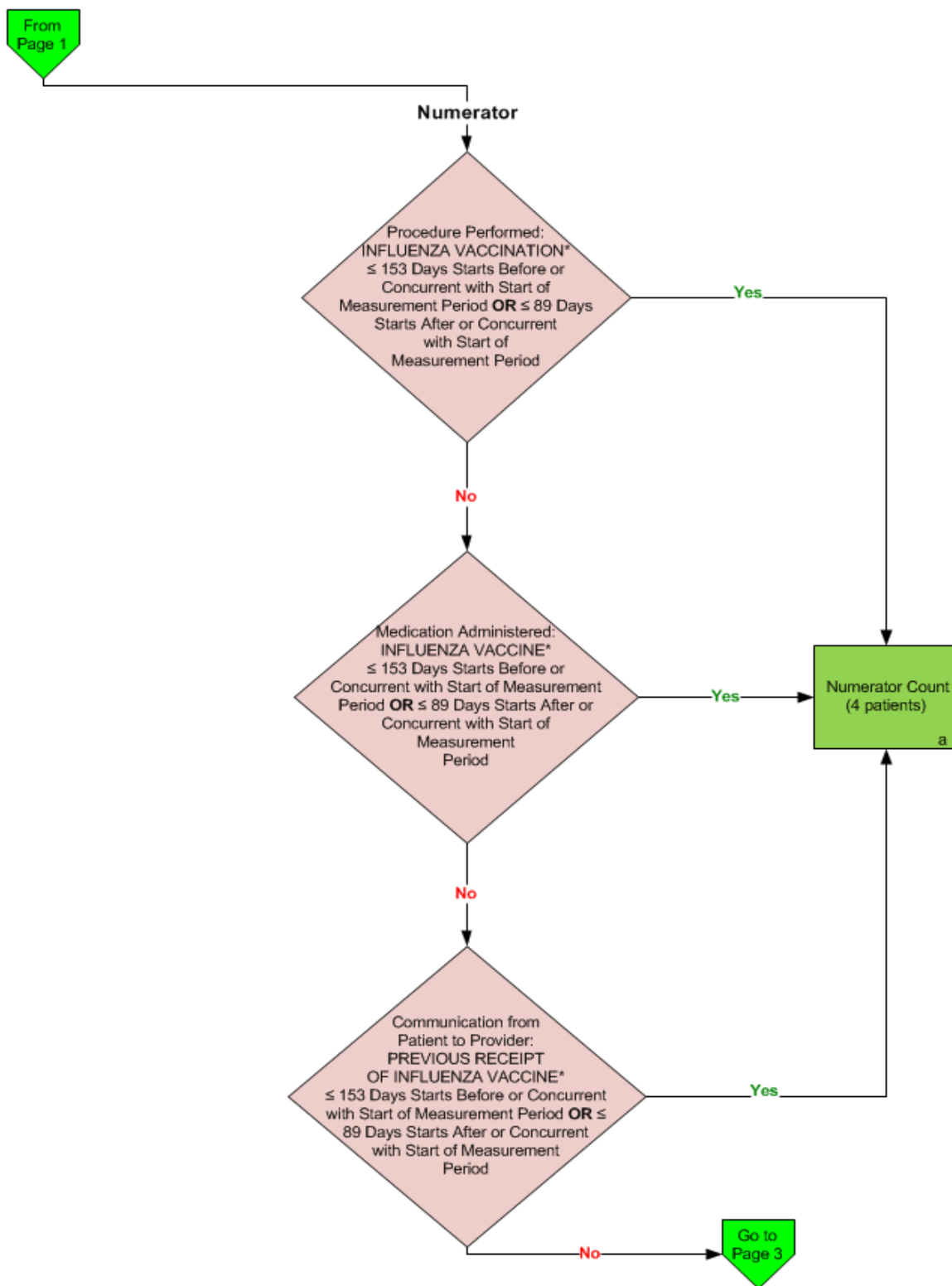


* Please refer to the specific section of the eCQM to identify the QDM data elements and associated value sets for use in reporting this eCQM.

† For a listing of appropriate encounters, please refer to the Population Criteria and associated value sets as specific data elements have not been listed.

†† For a listing of appropriate encounters, please refer to the Population Criteria and associated value sets as specific data elements have not been listed.

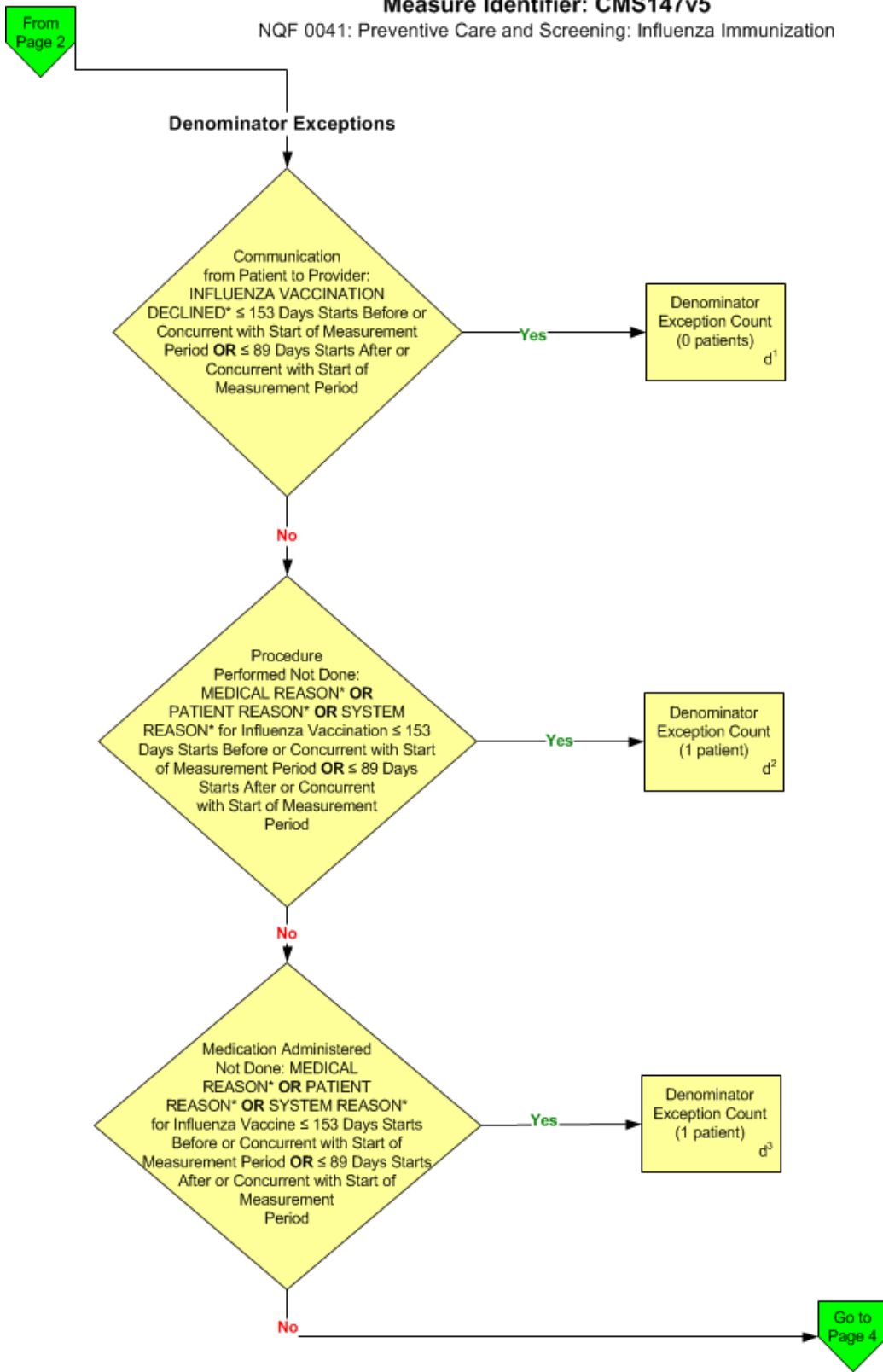
2014 eCQM Flows
Measure Identifier: CMS147v5
 NQF 0041: Preventive Care and Screening: Influenza Immunization



* Please refer to the specific section of the eCQM to identify the QDM data elements and associated value sets for use in reporting this eCQM.

2014 eCQM Flow
Measure Identifier: CMS147v5

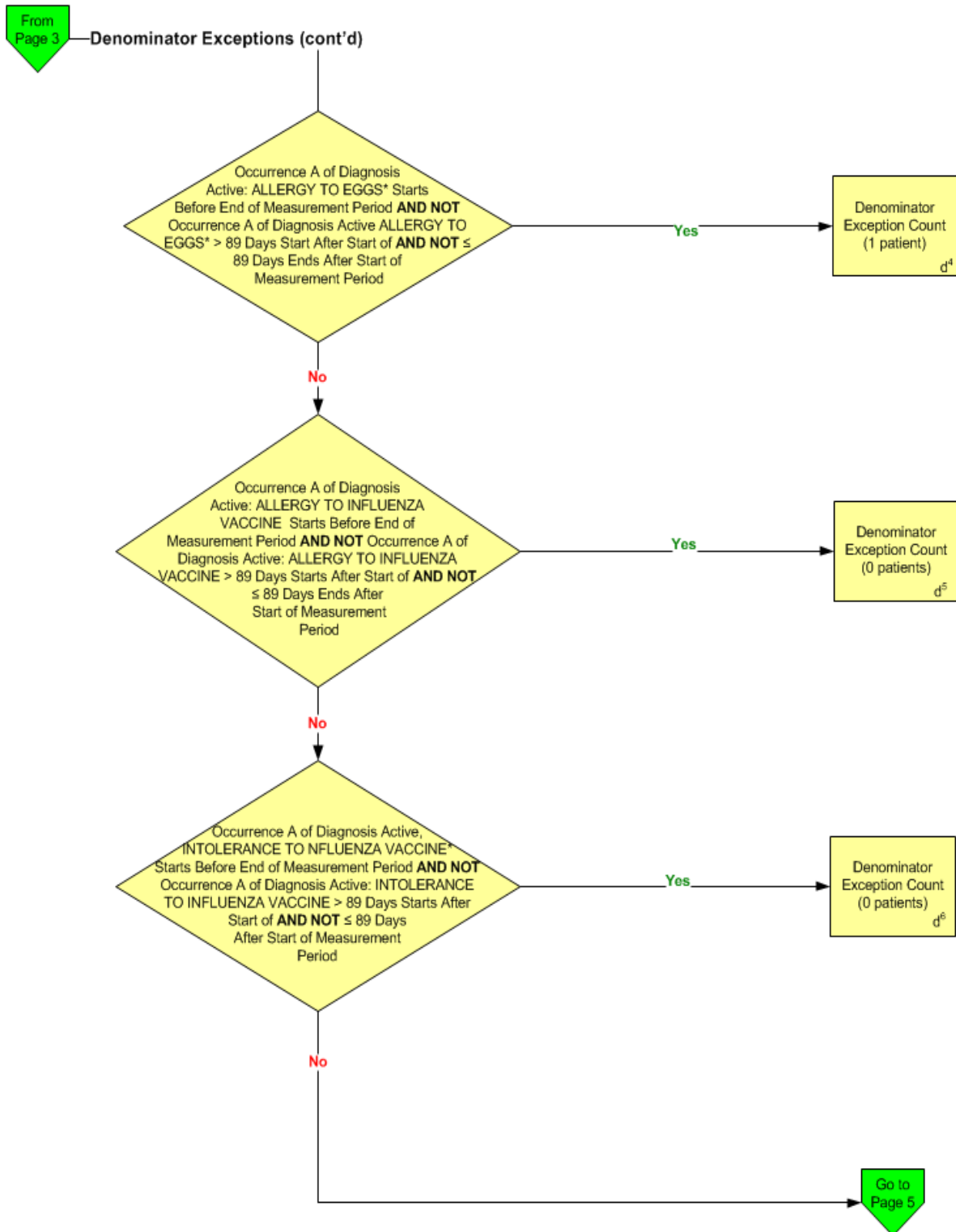
NQF 0041: Preventive Care and Screening: Influenza Immunization



* Please refer to the specific section of the eCQM to identify the QDM data elements and associated value sets for use in reporting this eCQM.

2014 eCQM Flow
Measure Identifier: CMS147v5

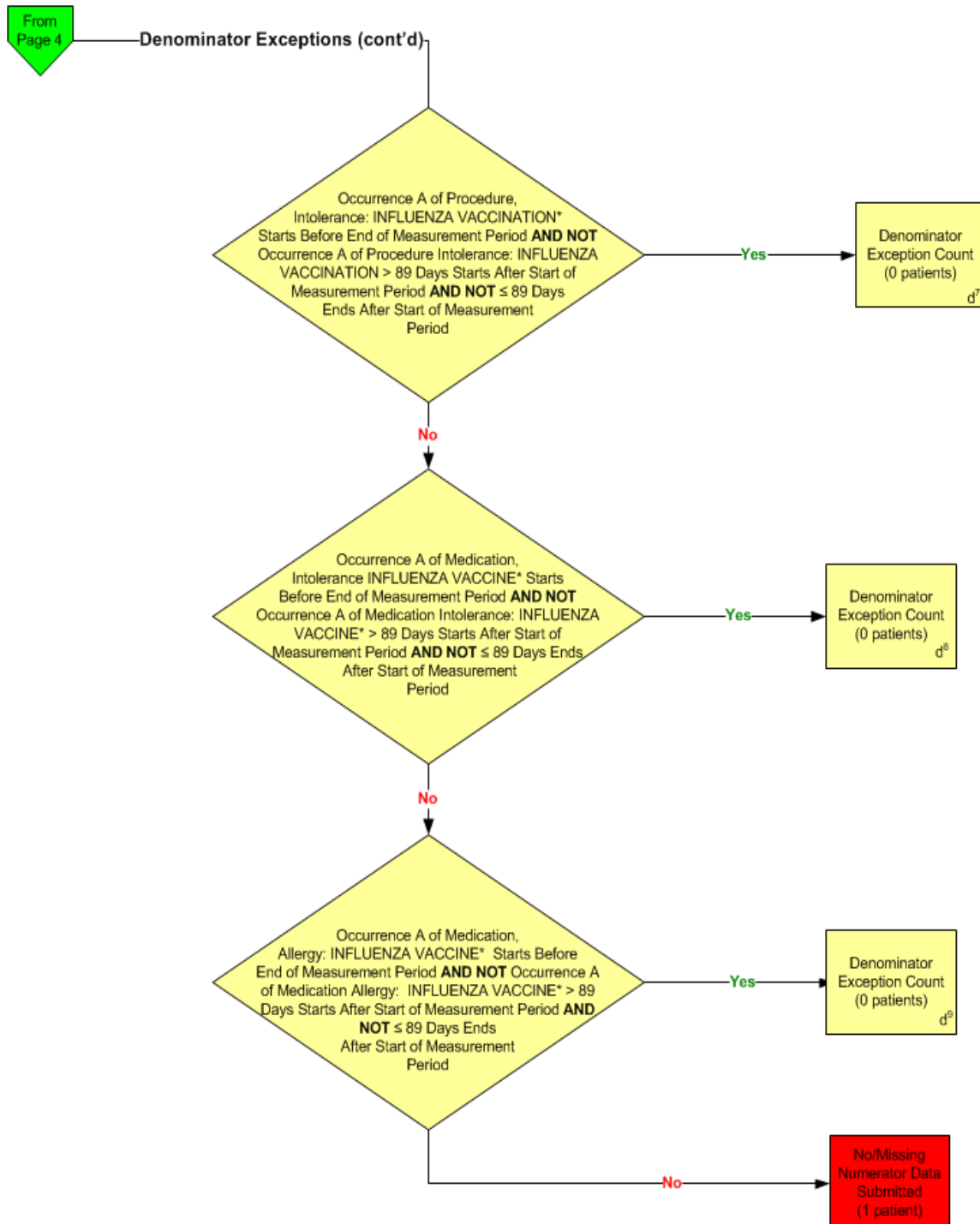
NQF 0041: Preventive Care and Screening: Influenza Immunization



* Please refer to the specific section of the eCQM to identify the QDM data elements and associated value sets for use in reporting this eCQM.

2014 eCQM Flow
Measure Identifier: CMS147v5

NQF 0041: Preventive Care and Screening: Influenza Immunization



* Please refer to the specific section of the eCQM to identify the QDM data elements and associated value sets for use in reporting this eCQM.

SAMPLE CALCULATION:

Performance Rate =

$$\frac{\text{Numerator (a=4 patients)}}{\text{Denominator (b=8 patients) - Denominator Exclusions (N/A) - Denominator Exceptions (d¹+d²+d³+d⁴+d⁵+d⁶+d⁷+d⁸+d⁹=3 patients)}} = 80.00\%$$

2014 eCQM Flows
Measure Identifier: CMS147v5
NQF 0041: Preventive Care and Screening: Influenza Immunization

Please refer to the specific section of the eCQM to identify the Population Criteria and associated value sets for use in reporting this eCQM.

1. Start Initial Population
2. Check Age:
 - a. If the AGE greater than or equal to 6 months of age at measurement period equals No, do not include in Initial Population. Stop Processing.
 - b. If the AGE greater than or equal to 6 months of age at measurement period equals Yes, continue processing and proceed to check Encounter Performed.
3. Check Encounter Performed: Total number of encounters must be greater than or equal to 2
 - a. If the Encounter Performed QDM data element, OFFICE VISIT, during measurement period equals Yes, include in Initial Population and proceed to check for another Encounter Performed until total number of encounters are greater than or equal to 2.
 - b. If the Encounter Performed QDM data element, OFFICE VISIT, during measurement period equals No, proceed to check next Encounter Performed.
 - c. If the Encounter Performed QDM data element, OUTPATIENT CONSULTATION, during measurement period equals Yes, include in Initial Population and proceed to check for another Encounter Performed until total number of encounters are greater than or equal to 2.
 - d. If the Encounter Performed QDM data element, OUTPATIENT CONSULTATION, during measurement period equals No, proceed to check next Encounter Performed.
 - e. If the Encounter Performed QDM data element, CARE SERVICES IN LONG-TERM RESIDENTIAL FACILITY, during measurement period equals Yes, include in Initial Population and proceed to check for another Encounter Performed until total number of encounters are greater than or equal to 2.
 - f. If the Encounter Performed QDM data element, CARE SERVICES IN LONG-TERM RESIDENTIAL FACILITY, during measurement period equals No, proceed to check next Encounter Performed.
 - g. If the Encounter Performed QDM data element, HOME HEALTHCARE SERVICES, during measurement period equals Yes, include in Initial Population and proceed to check for another Encounter Performed until total number of encounters are greater than or equal to 2.
 - h. If the Encounter Performed QDM data element, HOME HEALTHCARE SERVICES, during measurement period equals No, proceed to check next Encounter Performed.
 - i. If the Encounter Performed QDM data element, PATIENT PROVIDER INTERACTION, during measurement period equals Yes, include in the Initial

Population and proceed to Denominator if total number of encounters are greater than or equal to 2.

- j. If the Encounter Performed QDM data element, PATIENT PROVIDER INTERACTION, during measurement period equals No, proceed to check Encounter Performed or Procedure Performed.
4. Check Encounter Performed OR Procedure Performed: Total number of encounters performed OR Procedure Performed must be greater than or equal to 1.
- a. If the Encounter Performed QDM data element, PREVENTIVE CARE – INITIAL OFFICE VISIT, 0 TO 17, during the measurement period equals Yes, include in the Initial Population and proceed to Denominator.
 - b. If the Encounter Performed QDM data element, PREVENTIVE CARE – INITIAL OFFICE VISIT, 0 TO 17, during the measurement period equals No, proceed to check next Encounter Performed.
 - c. If the Encounter Performed QDM data element, PREVENTIVE CARE SERVICES – INITIAL OFFICE VISIT, 18 AND UP, during the measurement period equals Yes, include in the Initial Population and proceed to Denominator.
 - d. If the Encounter Performed QDM data element, PREVENTIVE CARE SERVICES – INITIAL OFFICE VISIT, 18 AND UP, during the measurement period equals No, proceed to check next Encounter Performed.
 - e. If the Encounter Performed QDM data element, PREVENTIVE CARE SERVICES – INDIVIDUAL COUNSELING, 18 AND UP, during the measurement period equals Yes, include in the Initial Population and proceed to Denominator.
 - f. If the Encounter Performed QDM data element, PREVENTIVE CARE SERVICES – INDIVIDUAL COUNSELING, 18 AND UP, during the measurement period equals No, proceed to check next Encounter Performed.
 - g. If the Encounter Performed QDM data element, PREVENTIVE CARE SERVICES – GROUP COUNSELING, 18 AND UP, during the measurement period equals Yes, include in the Initial Population and proceed to Denominator.
 - h. If the Encounter Performed QDM data element, PREVENTIVE CARE SERVICES – GROUP COUNSELING, 18 AND UP, during the measurement period equals No, proceed to check next Encounter Performed.
 - i. If the Encounter Performed QDM data element, PREVENTIVE CARE SERVICES – OTHER during the measurement period equals Yes, include in the Initial Population and proceed to Denominator.
 - j. If the Encounter Performed QDM data element, PREVENTIVE CARE SERVICES – OTHER, during the measurement period equals No, proceed to check next Encounter Performed.
 - k. If the Encounter Performed QDM data element, DISCHARGE SERVICES – NURSING FACILITY, during the measurement period equals Yes, include in the Initial Population and proceed to Denominator.
 - l. If the Encounter Performed QDM data element, DISCHARGE SERVICES – NURSING FACILITY, during the measurement period equals No, proceed to check next Encounter Performed.

- m. If the Encounter Performed QDM data element, NURSING FACILITY VISIT during the measurement period equals Yes, include in the Initial Population and proceed to Denominator.
 - n. If the Encounter Performed QDM data element, NURSING FACILITY VISIT, during the measurement period equals No, proceed to check next Encounter Performed.
 - o. If the Encounter Performed QDM data element, ANNUAL WELLNESS VISIT, during the measurement period equals Yes, include in the Initial Population and proceed to Denominator.
 - p. If the Encounter Performed QDM data element, ANNUAL WELLNESS VISIT, during the measurement period equals No, proceed to check next Encounter Performed.
 - q. If the Encounter Performed QDM data element, PREVENTIVE CARE – ESTABLISHED OFFICE VISIT, O TO 17, during the measurement period equals Yes, include in the Initial Population and proceed to Denominator.
 - r. If the Encounter Performed QDM data element, PREVENTIVE CARE – ESTABLISHED OFFICE VISIT, O TO 17, during the measurement period equals No, proceed to check next Encounter Performed.
 - s. If the Encounter Performed QDM data element, PREVENTIVE CARE SERVICES – ESTABLISHED OFFICE VISIT, 18 AND UP, during the measurement period equals Yes, include in the Initial Population and proceed to Denominator.
 - t. If the Encounter Performed QDM data element, PREVENTIVE CARE SERVICES – ESTABLISHED OFFICE VISIT, 18 AND UP, during the measurement period equals No, proceed to check next Encounter Performed.
 - u. If the Encounter Performed QDM data element, FACE-TO-FACE INTERACTION, during the measurement period equals Yes, include in the Initial Population and proceed to Denominator
 - v. If the Encounter Performed QDM data element, FACE-TO-FACE INTERACTION, during the measurement period equals No, proceed to check Procedure Performed.
 - w. If the Encounter Performed QDM data element, PERITONEAL DIALYSIS OR HEMODIALYSIS, during the measurement period equals Yes, include in the Initial Population and proceed to Denominator.
 - x. If the Encounter Performed QDM data element, PERITONEAL DIALYSIS OR HEMODIALYSIS, during the measurement period equals No, do not include in Initial Population and stop processing.
5. Start Denominator
- a. Denominator equals the Initial Population. Denominator is represented and equals 10 patients. Proceed to Encounter Performed.
6. Check Encounter Performed:
- a. If the Encounter Performed QDM data element, ENCOUNTER-INFLUENZA, less than or equal to 92 days starts before or concurrent with start of measurement period equals Yes, include in Eligible Population. Eligible Population is represented by the Letter b in the sample calculation listed at the end of this document. Letter b equals 8 patients in the sample calculation. Proceed to Numerator.

- b. If the Encounter Performed QDM data element, ENCOUNTER-INFLUENZA, less than or equal to 92 days starts before or concurrent with start of measurement period equals No, proceed to check Procedure Performed.
- 7. Check Procedure Performed:
 - a. If the Procedure Performed QDM data element, HEMODIALYSIS, OR QDM data element, PERITONEAL DIALYSIS, less than or equal to 92 days starts before or concurrent with start of measurement period equals Yes, include in Eligible Population. Eligible Population is represented by the letter b in the sample calculation listed at the end of this document. Letter b equals 8 patients in the sample calculation. Proceed to Numerator.
 - b. If the Procedure Performed QDM data element, HEMODIALYSIS, OR QDM data element, PERITONEAL DIALYSIS, less than or equal to 92 days starts before or concurrent with start of measurement period equals No, proceed to check Encounter Performed.
- 8. Check Encounter Performed:
 - a. If the Encounter Performed QDM data element, ENCOUNTER-INFLUENZA, less than or equal to 89 days starts after or concurrent with start of measurement period equals Yes, include in Eligible Population. Eligible Population equals the Initial Population plus the Eligible Population. Eligible Population is represented by the Letter b in the sample calculation listed at the end of this document. Letter b equals 8 patients in the sample calculation. Proceed to Numerator.
 - b. If the Encounter Performed QDM data element, ENCOUNTER-INFLUENZA, less than or equal to 89 days starts after or concurrent with start of measurement period equals No, do not include in Eligible Population Procedure Performed.
- 9. Check Procedure Performed:
 - a. If the Procedure Performed QDM data element, HEMODIALYSIS, OR QDM data element, PERITONEAL DIALYSIS, less than or equal to 89 days starts after or concurrent with start of measurement period equals Yes, include in Eligible Population. Eligible Population equals the Initial Population plus the Eligible Population. Eligible Population is represented by the Letter b in the sample calculation listed at the end of this document. Letter b equals 8 patients in the sample calculation. Proceed to Numerator.
 - b. If the Procedure Performed QDM data element, HEMODIALYSIS, OR QDM data element, PERITONEAL DIALYSIS, less than or equal to 89 days starts after or concurrent with start of measurement period equals No, do not include in Eligible Population and stop processing.
- 10. Start Numerator
- 11. Check Procedure Performed:
 - a. If the Procedure Performed QDM data element, INFLUENZA VACCINATION, less than or equal to 153 days starts before or concurrent with start of measurement

period OR less than or equal 89 days starts after or concurrent with start of measurement period equals Yes, include in Numerator count. Numerator is represented by Letter a in the sample calculation listed at the end of this document. Letter a equals 4 patients in the sample calculation.

- b. If the Procedure Performed QDM data element, INFLUENZA VACCINATION, less than or equal to 153 days starts before or concurrent with start of measurement period OR less than or equal 89 days starts after or concurrent with start of measurement period equals No, check Medication Administered.

12. Check Medication Administered:

- a. If the Medication Administered QDM data element, INFLUENZA VACCINE, less than or equal to 153 days starts before or concurrent with start of measurement period OR less than or equal 89 days starts after or concurrent with start of measurement period equals Yes, include in Numerator count. Numerator is represented by Letter a in the sample calculation listed at the end of this document. Letter a equals 4 patients in the sample calculation.
- b. If the Medication Administered QDM data element, INFLUENZA VACCINE, less than or equal to 153 days starts before or concurrent with start of measurement period OR less than or equal 89 days starts after or concurrent with start of measurement period equals No, check Communication: From Patient to Provider.

13. Check Communication: From Patient to Provider:

- a. If the Communication: From Patient to Provider QDM data element, PREVIOUS RECEIPT OF INFLUENZA VACCINE, less than or equal to 153 days starts before or concurrent with start of measurement period OR less than or equal 89 days starts after or concurrent with start of measurement period equals Yes, include in Numerator count. Numerator is represented by Letter a in the sample calculation listed at the end of this document. Letter a equals 4 patients in the sample calculation.
- b. If the Communication: From Patient to Provider QDM data element PREVIOUS RECEIPT OF INFLUENZA VACCINE, less than or equal to 153 days starts before or concurrent with start of measurement period or less than or equal 89 days starts after or concurrent with start of measurement period, equals No, proceed to Denominator Exceptions.

14. Start Denominator Exceptions

15. Check Communication: From Patient to Provider:

- a. If the Communication: From Patient to Provider QDM data element, INFLUENZA VACCINATION DECLINED, less than or equal to 153 days starts before or concurrent with start of measurement period OR less than or equal to 89 days starts after or concurrent with start of measurement period, equals Yes, include in Denominator Exceptions count. The Denominator Exception is represented by the

Letter d¹ in the sample calculation listed at the end of this document. Letter d¹ equals 0 patients in the sample calculation.

- b. If the Communication: From Patient to Provider QDM data element, INFLUENZA VACCINATION DECLINED, less than or equal to 153 days starts before or concurrent with start of measurement period OR less than or equal to 89 days starts after or concurrent with start of measurement period, equals No, proceed to check Procedure, Performed Not Done.

16. Check Procedure, Performed Not Done:

- a. If the Procedure, Performed Not Done QDM data element, MEDICAL REASON, OR QDM data element, PATIENT REASON, OR QDM data element, SYSTEM REASON, for Influenza Vaccination is less than or equal to 153 days starts before or concurrent with start of measurement period OR less than or equal to 89 days starts after or concurrent with start of measurement period, equals Yes, include in Denominator Exceptions count. The Denominator Exception is represented by the Letter d² in the sample calculation listed at the end of this document. Letter d² equals 1 patient in the sample calculation.
- b. If the Procedure, Performed Not Done QDM data element, MEDICAL REASON, OR QDM data element, PATIENT REASON, OR QDM data element, SYSTEM REASON, for INFLUENZA VACCINATION is less than or equal to 153 days starts before or concurrent with start of measurement period OR less than or equal to 89 days starts after or concurrent with start of measurement period, equals No, proceed to check Medication, Administered not done.

17. Check Medication, Administered Not Done:

- a. If the Medication, Administered Not Done QDM data element, MEDICAL REASON, OR QDM data element, PATIENT REASON, OR QDM data element, SYSTEM REASON, for INFLUENZA VACCINE is less than or equal to 153 days starts before or concurrent with start of measurement period OR less than or equal to 89 days starts after or concurrent with start of measurement period, equals Yes, include in Denominator Exceptions count. The Denominator Exception is represented by the Letter d³ in the sample calculation listed at the end of this document. Letter d³ equals 1 patient in the sample calculation.
- b. If the Medication, Administered Not Done QDM data element, MEDICAL REASON, OR QDM data element, PATIENT REASON, OR QDM data element, SYSTEM REASON, for INFLUENZA VACCINE is less than or equal to 153 days starts before or concurrent with start of measurement period or less than or equal to 89 days starts after or concurrent with start of measurement period, equals No, proceed to check Occurrence A Diagnosis Active.

18. Check Occurrence A Diagnosis Active:

- a. If the Occurrence A Diagnosis Active QDM data element, ALLERGY TO EGGS starts before end of measurement period AND NOT Occurrence A of Diagnosis Active: ALLERGY TO EGGS greater than 89 days starts after start of AND NOT less

- than or equal to 89 days ends after start of measurement period, equals Yes, include in Denominator Exceptions count. The Denominator Exception is represented by the Letter d⁴ in the sample calculation listed at the end of this document. Letter d⁴ equals 1 patient in the sample calculation.
- b. If the Occurrence A Diagnosis Active QDM data element, ALLERGY TO EGGS starts before end of measurement period AND NOT Occurrence A of Diagnosis Active: ALLERGY TO EGGS greater than 89 days starts after start of AND NOT less than or equal to 89 days ends after start of measurement period, equals No, proceed to check next Diagnosis Active.
19. Check Occurrence A Diagnosis Active:
- a. If the Occurrence A Diagnosis Active QDM data element, ALLERGY TO INFLUENZA VACCINE starts before end of measurement period AND NOT Occurrence A of Diagnosis Active: ALLERGY TO INFLUENZA VACCINE greater than 89 days starts after start of AND NOT less than or equal to 89 days ends after start of measurement period, equals Yes, include in Denominator Exceptions count. The Denominator Exception is represented by the letter d5 in the sample calculation listed at the end of this document. Letter d5 equals 0 patients in the sample calculation.
 - b. If the Occurrence A Diagnosis Active QDM data element, ALLERGY TO INFLUENZA vaccine starts before end of measurement period AND NOT Occurrence A of Diagnosis Active: ALLERGY TO INFLUENZA VACCINE greater than 89 days starts after start of AND NOT less than or equal to 89 days ends after start of measurement period, equals No, proceed to check next Diagnosis Active.
20. Check Occurrence A Diagnosis Active:
- a. If the Occurrence A Diagnosis Active Procedure Intolerance QDM data element, INTOLERANCE TO INFLUENZA VACCINE, starts before end of measurement period AND NOT Occurrence A of Diagnosis Active: TO INTOLERANCE TO INFLUENZA VACCINE greater than 89 days starts after start of AND NOT less than or equal to 89 days ends after start of measurement period, equals Yes, include in Denominator Exceptions count. The Denominator Exception is represented by the letter d⁶ in the sample calculation listed at the end of this document. Letter d⁶ equals 0 patients in the sample calculation.
 - b. If Occurrence a Diagnosis Active QDM data element, INTOLERANCE TO INFLUENZA VACCINE, starts before end of measurement period AND NOT Occurrence A of Diagnosis Active: TO INTOLERANCE TO INFLUENZA VACCINE greater than 89 days starts after start of AND NOT less than or equal to 89 days ends after start of measurement period, equals No, proceed to check next Procedure Intolerance.
21. Check Occurrence A Procedure Intolerance:
- a. If the Occurrence A Procedure Intolerance QDM data element, INFLUENZA VACCINATION, starts before end of measurement period AND NOT Occurrence A of Procedure Intolerance: INFLUENZA VACCINATION greater than 89 days starts

after start of measurement period AND NOT less than or equal to 89 days ends after start of measurement period, equals Yes, include in Denominator Exceptions count. The Denominator Exception is represented by the letter d⁷ in the sample calculation listed at the end of this document. Letter d⁷ equals 0 patients in the sample calculation.

- b. If the Occurrence A Procedure Intolerance QDM data element, INFLUENZA VACCINATION, starts before end of measurement period AND NOT Occurrence A of Procedure Intolerance: INFLUENZA VACCINATION greater than 89 days starts after start of measurement period AND NOT less than or equal to 89 days ends after start of measurement period, equals No, proceed to check Medication Intolerance.

22. Check Occurrence A Medication Intolerance:

- a. If the Occurrence A Medication Intolerance QDM data element, INFLUENZA VACCINE, starts before end of measurement period AND NOT Occurrence A of Medication Intolerance: INFLUENZA VACCINE greater than 89 days starts after start of measurement period AND NOT less than or equal to 89 days ends after start of measurement period, equals Yes, include in Denominator Exceptions count. The Denominator Exception is represented by the letter d⁸ in the sample calculation listed at the end of this document. Letter d⁸ equals 0 patients in the sample calculation.
- b. If the Occurrence A Medication Intolerance QDM data element, INFLUENZA VACCINE, starts before end of measurement period AND NOT Occurrence A of Medication Intolerance: INFLUENZA VACCINE greater than 89 days starts after start of measurement period AND NOT less than or equal to 89 days ends after start of measurement period, equals No, proceed to check Medication Allergy.

23. Check Occurrence A Medication Allergy:

- a. If the Occurrence A Medication Allergy QDM data element, INFLUENZA VACCINE, starts before end of measurement period AND NOT Occurrence A of Medication Allergy: INFLUENZA VACCINE greater than 89 days starts after start of measurement period AND NOT less than or equal to 89 days ends after start of measurement period, equals Yes, include in Denominator Exceptions count. The Denominator Exception is represented by the letter d⁹ in the sample calculation listed at the end of this document. Letter d⁹ equals 0 patients in the sample calculation.
- b. If the Occurrence A Medication Allergy QDM data element, INFLUENZA VACCINE, starts before end of measurement period AND NOT Occurrence A of Medication Allergy: INFLUENZA VACCINE greater than 89 days starts after start of measurement period AND NOT less than or equal to 89 days ends after start of measurement period, equals No, include in the No/Missing Numerator Data Submitted count and stop processing.

SAMPLE CALCULATION:

Performance Rate =

$$\frac{\text{Numerator (a=4 patients)}}{\text{Denominator (b=8 patients) - Denominator Exclusions (N/A) - Denominator Exceptions (d}^1 + \text{d}^2 + \text{d}^3 + \text{d}^4 + \text{d}^5 + \text{d}^6 + \text{d}^7 + \text{d}^8 + \text{d}^9 = 3 \text{ patients)}} = 80.00\%$$