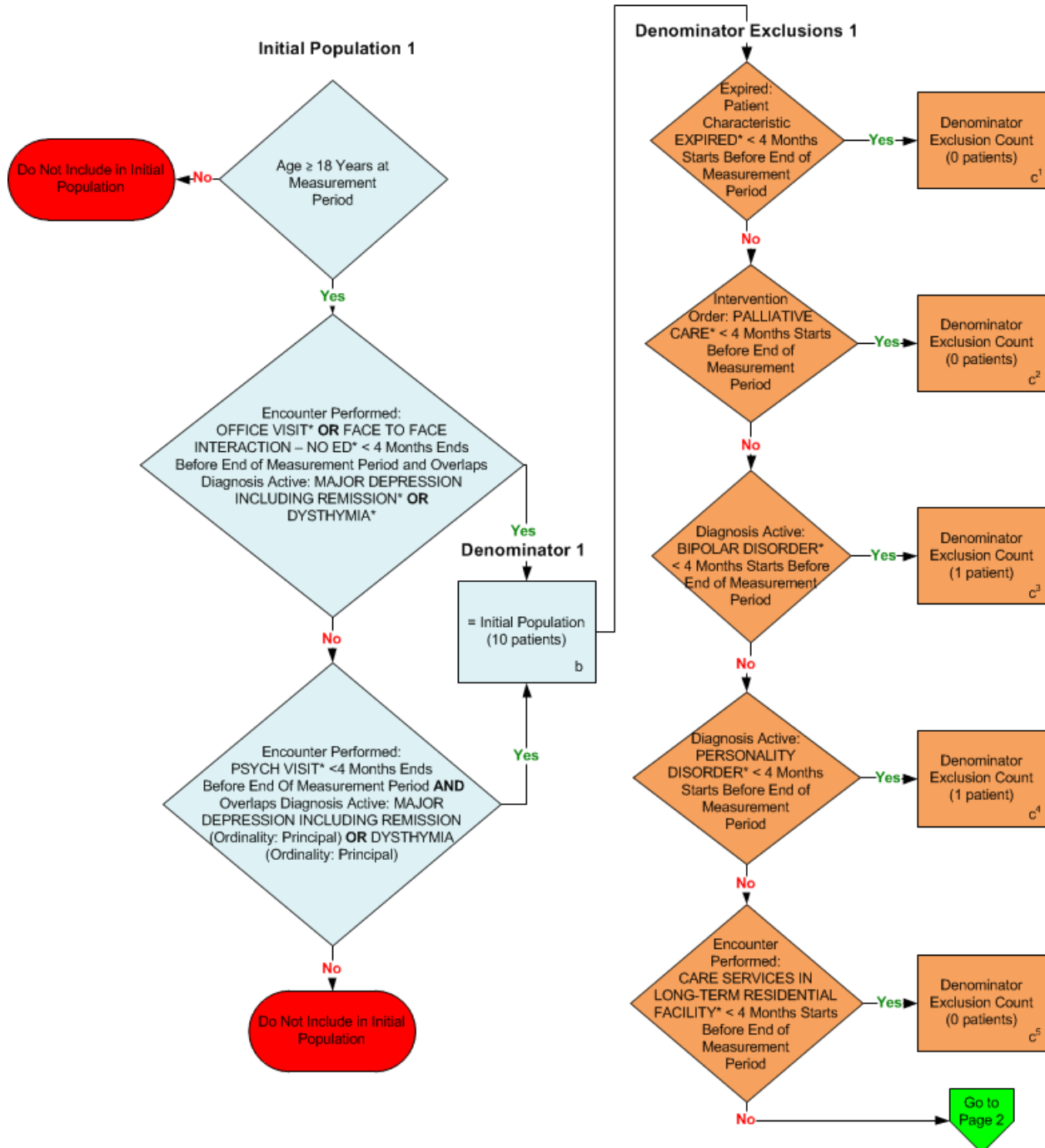


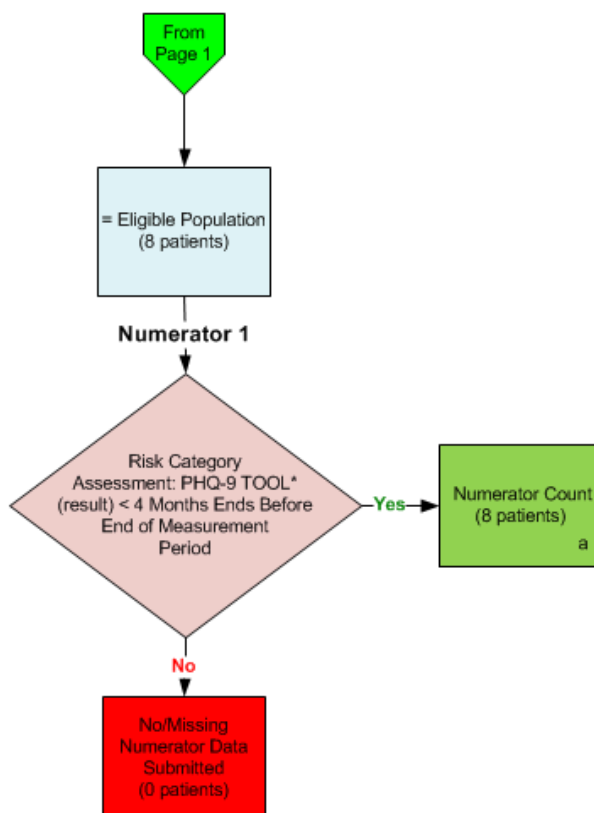
2014 eCQM Flow
Measure Identifier: CMS160v4.1
 NQF 0712: Depression Utilization of the PHQ-9 Tool

This eCQM requires the reporting of three Performance Rates



*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: CMS160v4.1
 NQF 0712: Depression Utilization of the PHQ-9 Tool



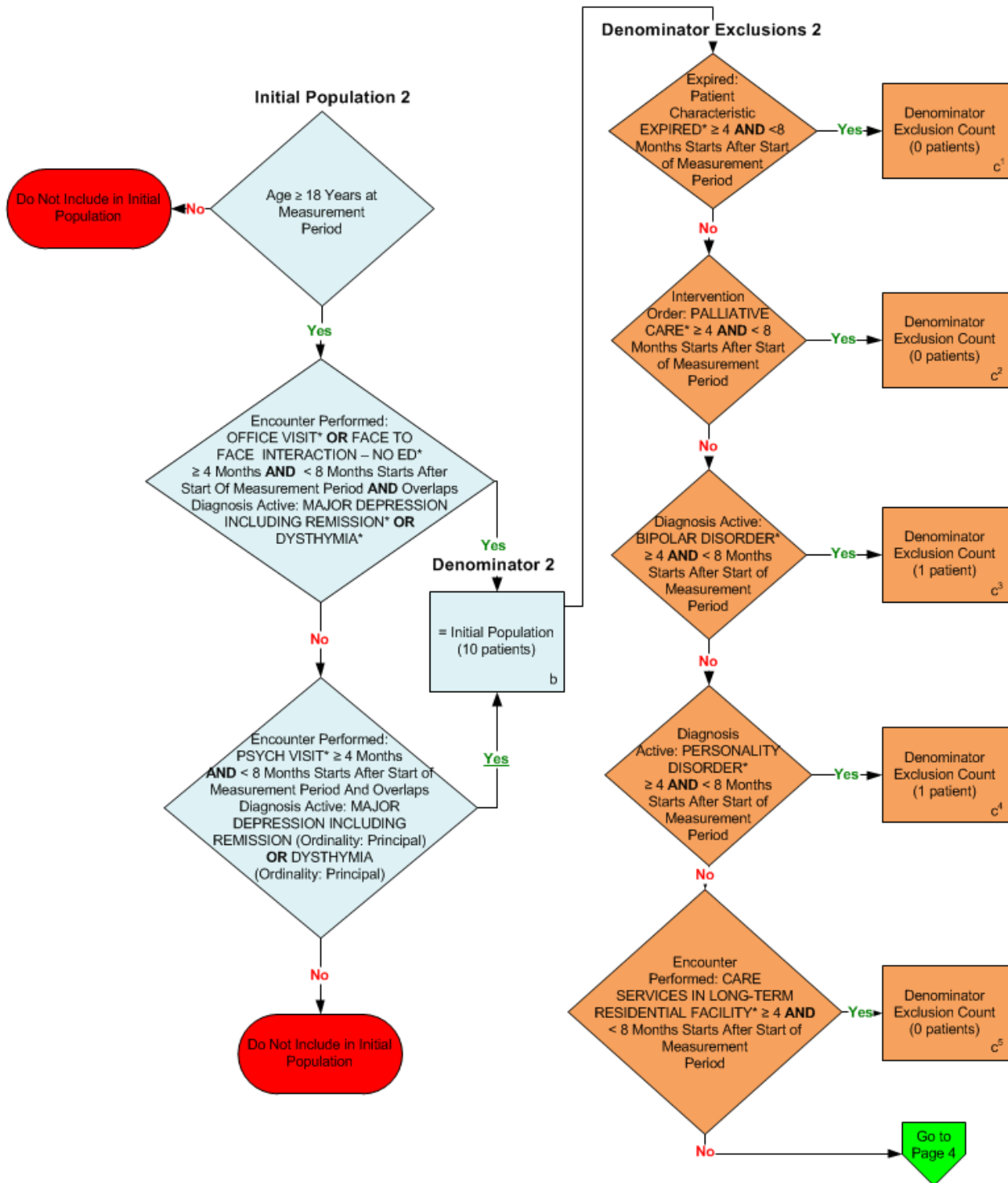
*Please refer to the specific section of the eCQM to identify the QDM data elements and associated value sets for use in reporting this eCQM.

SAMPLE CALCULATION: *Combination of Initial Population 1; Denominator 1; Numerator 1*

Performance Rate =

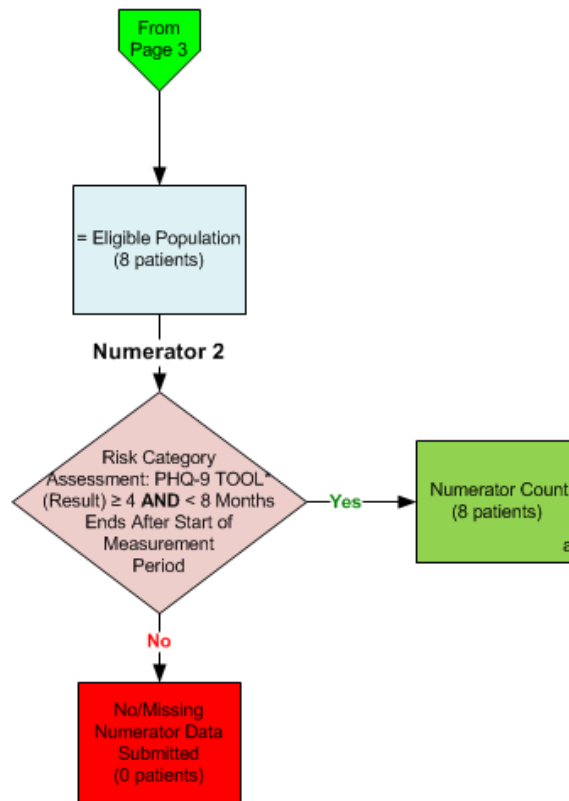
$$\frac{\text{Numerator (a=8 Patients)}}{\text{Denominator (b=10 Patients) - Denominator Exclusions (c}^1\text{ + c}^2\text{ + c}^3\text{ + c}^4\text{ + c}^5\text{ = 2 Patients) - Denominator Exceptions (N/A)}} = 100.00\%$$

2014 eCQM Flow
Measure Identifier: CMS160v4.1
 NQF 0712: Depression Utilization of the PHQ-9 Tool



*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: CMS160v4.1
 NQF 0712: Depression Utilization of the PHQ-9 Tool



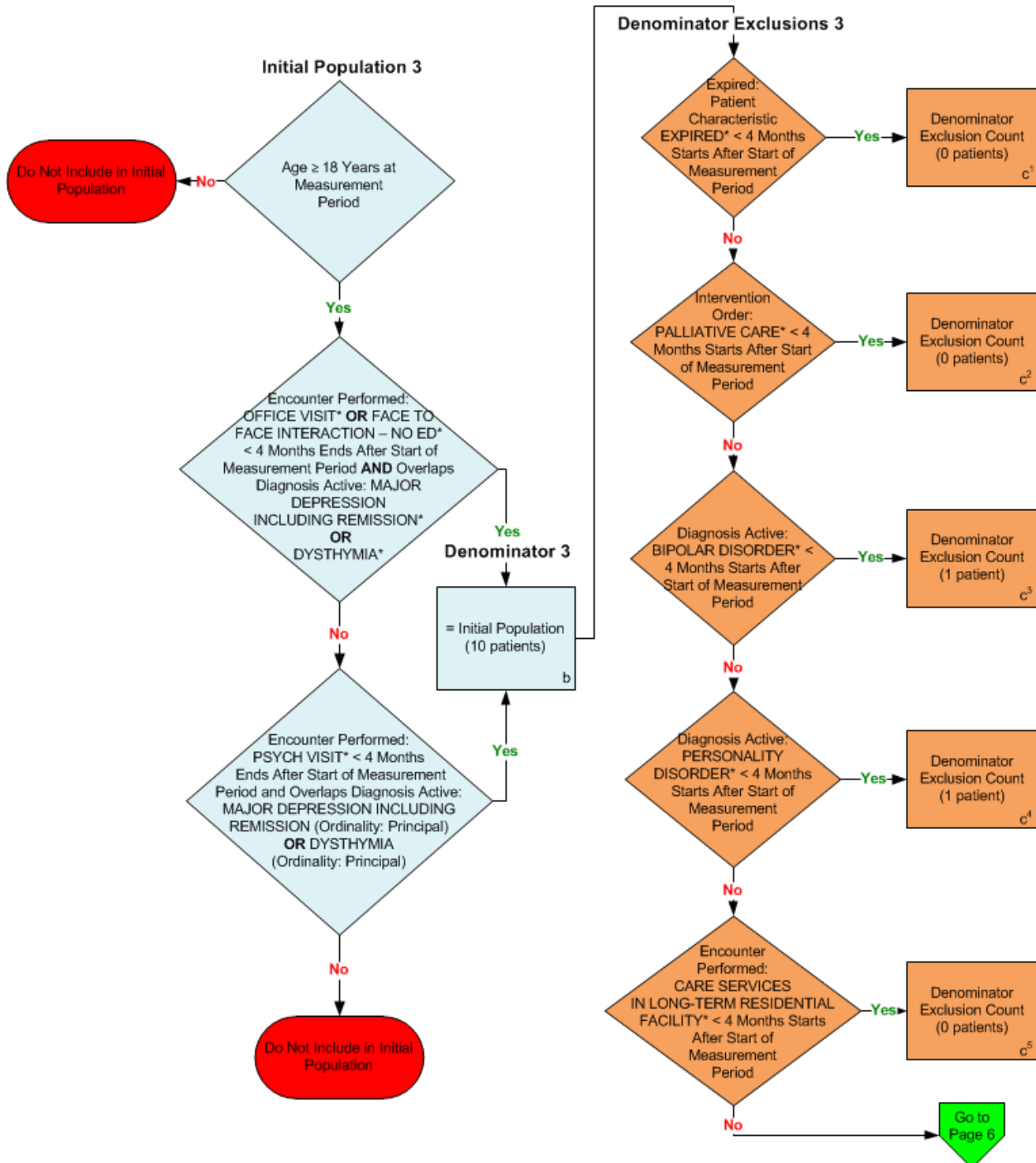
*Please refer to the specific section of the eCQM to identify the QDM data elements and associated value sets for use in reporting this eCQM.

SAMPLE CALCULATION: *Combination of Initial Population 2; Denominator 2; Numerator 2*

Performance Rate =

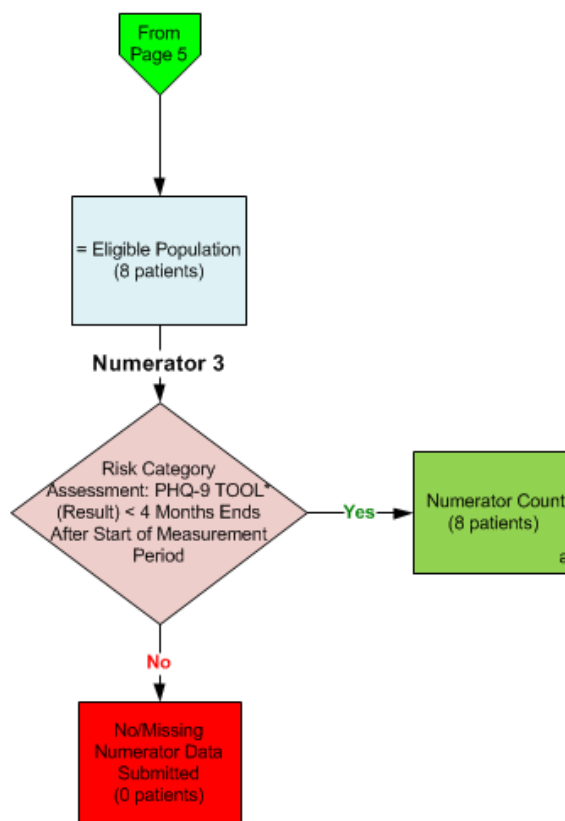
$$\frac{\text{Numerator (a=8 Patients)}}{\text{Denominator (b=10 Patients) – Denominator Exclusions (c}^1\text{ + c}^2\text{ + c}^3\text{ + c}^4\text{ + c}^5\text{ = 2 Patients) – Denominator Exceptions (N/A)}} = 100.00\%$$

2014 eCQM Flow
Measure Identifier: CMS160v4.1
 NQF 0712: Depression Utilization of the PHQ-9 Tool



*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: CMS160v4.1
 NQF 0712: Depression Utilization of the PHQ-9 Tool



*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: *Combination of Initial Population 3; Denominator 3; Numerator 3*

Performance Rate =

$$\frac{\text{Numerator (a=8 Patients)}}{\text{Denominator (b=10 Patients) - Denominator Exclusions (c}^1 + \text{c}^2 + \text{c}^3 + \text{c}^4 + \text{c}^5 = 2 \text{ Patients) - Denominator Exceptions (N/A)}} = 100.00\%$$

2014 eCQM Flows
Measure Identifier: CMS160v4.1
NQF 0712: Depression Utilization of the PHQ-9 Tool
This eCQM requires the reporting of three Performance Rates

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 1
2. Check Age:
 - a. If the AGE greater than or equal to 18 years at measurement period equals No, do not include in Initial Population. Stop Processing.
 - b. If the AGE greater than or equal to 18 years at measurement period equals Yes, proceed to check Encounter Performed.
3. Check Encounter Performed:
 - a. If the Encounter Performed QDM data element, OFFICE VISIT OR FACE TO FACE INTERACTION – NO ED, less than 4 months ends before end of measurement period and overlaps QDM data element, Diagnosis Active: MAJOR DEPRESSION INCLUDING REMISSION, or DYSTHYMIA, equals Yes, include in Initial Population 1 and go to Denominator 1.
 - b. If the Encounter Performed QDM data element, OFFICE VISIT OR FACE TO FACE INTERACTION – NO ED, less than 4 months ends before end of measurement period and overlaps QDM data element, Diagnosis Active: MAJOR DEPRESSION INCLUDING REMISSION, or DYSTHYMIA, equals No, go to check Encounter Performed.
4. Check Encounter Performed:
 - a. If the Encounter Performed QDM data element, PSYCH VISIT, less than 4 months ends before end of measurement period AND overlaps QDM data element, Diagnosis Active: MAJOR DEPRESSION INCLUDING REMISSION (ordinality: Principal), or DYSTHYMIA (ordinality: Principal), equals Yes, include in Initial Population 1 and go to Denominator 1.
 - b. If the Encounter Performed QDM data element, PSYCH VISIT, less than 4 months ends before end of measurement period AND overlaps QDM data element, Diagnosis Active: MAJOR DEPRESSION INCLUDING REMISSION (ordinality: Principal), or DYSTHYMIA (ordinality: Principal), equals No, do not include in the Initial Population. Stop Processing.
5. Start Denominator 1:
 - a. Denominator equals the Initial Population. Denominator is represented by Letter b in the sample calculation listed at the end of this document. Letter b equals 10 patients in the sample calculation.

6. Start Denominator Exclusions 1
7. Check Expired: Patient Characteristic:
 - a. If the Expired: Patient Characteristic QDM data element, EXPIRED, less than 4 months starts before end of measurement period equals Yes, include in Denominator Exclusion count. Denominator Exclusion is represented by Letter c¹ in the sample calculation listed at the end of Population 1. Letter c¹ equals 0 patients in the sample calculation.
 - b. If the Expired: Patient Characteristic QDM data element, EXPIRED, less than 4 months starts before end of measurement period equals No, proceed to check Intervention Order.
8. Check Intervention Order:
 - a. If the Intervention Order QDM data element, PALLIATIVE CARE, less than 4 months starts before end of measurement period equals Yes, include in Denominator Exclusion count. Denominator Exclusion is represented by Letter c² in the sample calculation listed at the end of Population 1. Letter c² equals 0 patients in the sample calculation.
 - b. If the Intervention Order QDM data element, PALLIATIVE CARE, less than 4 months starts before end of measurement period equals No, proceed to check Diagnosis Active.
9. Check Diagnosis Active:
 - a. If the Diagnosis Active QDM data element, BIPOLAR DISORDER, less than 4 months starts before end of measurement period equals Yes, include in Denominator Exclusion count. Denominator Exclusion is represented by Letter c³ in the sample calculation listed at the end of Population 1. Letter c³ equals 1 patient in the sample calculation.
 - b. If the Diagnosis Active QDM data element, BIPOLAR DISORDER, less than 4 months starts before end of measurement period equals No, proceed to check Diagnosis Active.
10. Check for Diagnosis Active:
 - a. If the Diagnosis Active QDM data element, PERSONALITY DISORDER, less than 4 months starts before end of measurement period equals Yes, include in Denominator Exclusions count. Denominator Exclusion is represented by Letter c⁴ in the sample calculation listed at the end of Population 1. Letter c⁴ equals 1 patient in the sample calculation.
 - b. If the Diagnosis Active QDM data element, PERSONALITY DISORDER, less than 4 months starts before end of measurement period equals No, proceed to check Encounter Performed

11. Check for Encounter Performed:

- a. If the Encounter Performed QDM data element, CARE SERVICES IN LONG-TERM RESIDENTIAL FACILITY, less than 4 months starts before end of measurement period equals Yes, include in Denominator Exclusion count. Denominator Exclusion is represented by letter c⁵ in the sample calculation listed at the end of Population 1. Letter c⁵ equals 0 patients in the sample calculation.
- b. If the Encounter Performed QDM data element, CARE SERVICES IN LONG-TERM RESIDENTIAL FACILITY, less than 4 months starts before end of measurement period equals No, include in Eligible Population and go to the Numerator.

12. Start Numerator 1

13. Check Risk Category Assessment:

- a. If the Risk Category Assessment QDM data element, PHQ-9 TOOL (result), less than 4 months ends before end of measurement period equals Yes, include in Numerator Count. Numerator is represented by Letter a in the sample calculation listed at the end of Population 1. Letter a equals 8 patients in the sample calculation. Continue on to Initial Population 2.
- b. If the Risk Category Assessment QDM data element, PHQ-9 TOOL (result), less than 4 months ends before end of measurement period equals No, include in the No/Missing Data Submitted count. Stop Processing. Continue on to Initial Population 2.

SAMPLE CALCULATION: *Combination of Initial Population 1; Denominator 1; Numerator 1*

Performance Rate =

$$\frac{\text{Numerator (a=8 Patients)}}{\text{Denominator (b=10 Patients) - Denominator Exclusions (c}^1 + \text{c}^2 + \text{c}^3 + \text{c}^4 + \text{c}^5 = 2 \text{ Patients) - Denominator Exceptions (N/A)}} = 100.00\%$$

1. Start Initial Population 2
2. Check Age:
 - a. If the AGE greater than or equal to 18 years at measurement period equals No, do not include in Initial Population. Stop Processing.
 - b. If the AGE greater than or equal to 18 years at measurement period equals Yes, proceed to check Diagnosis Active.
3. Check Encounter Performed:
 - a. If the Encounter Performed QDM data element, OFFICE VISIT OR FACE TO FACE INTERACTION–NO ED, greater than or equal to 4 months and less than 8 months starts after start of measurement period AND overlaps QDM data element, Diagnosis Active: MAJOR DEPRESSION INCLUDING REMISSION, OR DYSTHYMIA, equals Yes, include in Initial Population 2 and go to Denominator 2.
 - b. If the Encounter Performed QDM data element, OFFICE VISIT OR FACE TO FACE INTERACTION–NO ED, greater than or equal to 4 months and less than 8 months starts after start of measurement period AND overlaps QDM data element, Diagnosis Active: MAJOR DEPRESSION INCLUDING REMISSION, OR DYSTHYMIA, equals No, proceed to check Encounter Performed.
4. Check Encounter Performed:
 - a. If the Encounter Performed QDM data element, PSYCH VISIT, greater than or equal to 4 months and less than 8 months starts after start of measurement period AND overlaps QDM data element, Diagnosis Active: MAJOR DEPRESSION INCLUDING REMISSION (ordinality: Principal), OR DYSTHYMIA (ordinality: Principal), equals Yes, include in Initial Population 2 and go to Denominator 2.
 - b. If the Encounter Performed QDM data element, PSYCH VISIT, greater than or equal to 4 months and less than 8 months starts after start of measurement period AND overlaps QDM data element, Diagnosis Active: MAJOR DEPRESSION INCLUDING REMISSION (ordinality: Principal), OR DYSTHYMIA (ordinality: Principal), equals No, do not include in the Initial Population. Stop Processing.
5. Start Denominator 2
 - a. Denominator equals the Initial Population. Denominator is represented by Letter b in the sample calculation listed at the end of this document. Letter b equals 10 patients in the sample calculation.
6. Start Denominator Exclusions 2
7. Check Expired: Patient Characteristic:
 - a. If the Expired: Patient Characteristic QDM data element, EXPIRED, greater than or equal to 4 months and less than 8 months starts after start of measurement period equals Yes, include in Denominator Exclusion count. Denominator Exclusion is represented by Letter c¹ in the sample calculation listed at the end of Population 2. Letter c¹ equals 0 patients in the sample calculation.

- b. If the Expired Patient: Characteristic QDM data element, EXPIRED, greater than or equal to 4 months and less than 8 months starts after start of measurement period equals No, proceed to check Intervention Order.
- 8. Check Intervention Order:
 - a. If the Intervention Order QDM data element, PALLIATIVE CARE, greater than or equal to 4 months and less than 8 months starts after start of measurement period equals Yes, include in Denominator Exclusion count. Denominator Exclusion is represented by Letter c² in the sample calculation listed at the end of Population 2. Letter c² equals 0 patients in the sample calculation.
 - b. If the Intervention Order QDM data element, PALLIATIVE CARE, greater than or equal to 4 months and less than 8 months starts after start of measurement period equals No, proceed to check Diagnosis Active.
- 9. Check Diagnosis Active:
 - a. If the Diagnosis Active QDM data element, BIPOLAR DISORDER, greater than or equal to 4 months and less than 8 months starts after start of measurement period equals Yes, include in Denominator Exclusion count. Denominator Exclusion is represented by Letter c³ in the sample calculation listed at the end of Population 2. Letter c³ equals 1 patient in the sample calculation.
 - b. If the Diagnosis Active QDM data element, BIPOLAR DISORDER, greater than or equal to 4 months and less than 8 months starts after start of measurement period equals No, proceed to check Diagnosis Active.
- 10. Check for Diagnosis Active:
 - a. If the Diagnosis Active QDM data element, PERSONALITY DISORDER, greater than or equal to 4 months and less than 8 months starts after start of measurement period equals Yes, include in Denominator Exclusions count. Denominator Exclusion is represented by Letter c⁴ in the sample calculation listed at the end of Population 2. Letter c⁴ equals 1 patient in the sample calculation.
 - b. If the Diagnosis Active QDM data element, PERSONALITY DISORDER, greater than or equal to 4 months and less than 8 months starts after start of measurement period equals No, proceed to check Encounter Performed
- 11. Check for Encounter Performed:
 - a. If the Encounter Performed QDM data element, CARE SERVICES IN LONG-TERM RESIDENTIAL FACILITY, greater than or equal to 4 months and less than 8 months starts after start of measurement period equals Yes, include in Denominator Exclusion count. Denominator Exclusion is represented by Letter c⁵ in the sample calculation listed at the end of Population 2. Letter c⁵ equals 0 patients in the sample calculation.
 - b. If the Encounter Performed QDM data element, CARE SERVICES IN LONG-TERM RESIDENTIAL FACILITY, greater than or equal to 4 months and less than 8 months starts after start of measurement period equals No, include in Eligible Population and go to the Numerator.

12. Start Numerator 2

13. Check Risk Category Assessment:

- a. If the Risk Category Assessment QDM data element, PHQ-9 TOOL (result), greater than or equal to 4 months and less than 8 months ends after 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 Population 2. Letter a equals 8 patients in the sample calculation. Continue on to Initial Population 3.
- b. If the Risk Category Assessment QDM data element, PHQ-9 TOOL (result), greater than or equal to 4 months and less than 8 months ends after start of measurement period equals No, include in the No/Missing Data Submitted count. Stop Processing. Continue on to Initial Population 3.

SAMPLE CALCULATION: *Combination of Initial Population 2; Denominator 2; Numerator 2*

Performance Rate =

$$\frac{\text{Numerator (a=8 Patients)}}{\text{Denominator (b=10 Patients) – Denominator Exclusions (c}^1\text{ + c}^2\text{ + c}^3\text{ + c}^4\text{ + c}^5\text{ = 2 Patients) – Denominator Exceptions (N/A)}} = 100.00\%$$

1. Start Initial Population 3
2. Check Age:
 - a. If the AGE greater than or equal to 18 years at measurement period equals No, do not include in Initial Population. Stop Processing.
 - b. If the AGE greater than or equal to 18 years at measurement period equals Yes, proceed to Active.
3. Check Encounter Performed:
 - a. If the Encounter Performed QDM data element, OFFICE VISIT OR FACE TO FACE INTERACTION–NO ED, less than 4 months ends after start of measurement period AND overlaps QDM data element,Diagnosis Active: MAJOR DEPRESSION INCLUDING REMISSION, or DYSTHYMIA, equals Yes, include in Initial Population 3 and go to Denominator 3.
 - b. If the Encounter Performed QDM data element, OFFICE VISIT OR FACE TO FACE INTERACTION–NO ED, less than 4 months ends after start of measurement period AND overlaps QDM data element,Diagnosis Active: MAJOR DEPRESSION INCLUDING REMISSION, or DYSTHYMIA, equals No, go to check Encounter Performed.
4. Check Encounter Performed:
 - a. If the Encounter Performed QDM data element, PSYCH VISIT, less than 4 months ends after start of measurement period AND overlaps QDM data element,Diagnosis Active: MAJOR DEPRESSION INCLUDING REMISSION (ordinality: Principal), or DYSTHYMIA (ordinality: Principal), equals Yes, include in Initial Population 3 and go to Denominator 3.
 - b. If the Encounter Performed QDM data element, PSYCH VISIT, less than 4 months ends after start of measurement period AND overlaps QDM data element,Diagnosis Active: MAJOR DEPRESSION INCLUDING REMISSION (ordinality: Principal), or DYSTHYMIA (ordinality: Principal), equals No, do not include in the Initial Population. Stop Processing.
5. Start Denominator 3
 - a. Denominator equals the Initial Population. Denominator is represented by letter b in the sample calculation listed at the end of this document. Letter b equals 10 patients in the sample calculation.
6. Start Denominator Exclusions 3
7. Check Expired: Patient Characteristic:
 - a. If the Expired: Patient Characteristic QDM data element, EXPIRED less than 4 months ends after start of measurement period equals Yes, include in Denominator Exclusion count. Denominator Exclusion is represented by letter c¹ in the sample calculation listed at the end of this measure stratification. Letter c¹ equals 0 patients in the sample calculation.

- b. If the Expired: Patient Characteristic QDM data element, EXPIRED less than 4 months ends after start of measurement period equals No, proceed to check Intervention Order.
- 8. Check Intervention Order:
 - a. If the Intervention Order QDM data element, PALLIATIVE CARE, less than 4 months ends after start of measurement period equals Yes, include in Denominator Exclusion count. Denominator Exclusion is represented by letter c^2 in the sample calculation listed at the end of this measure stratification. Letter c^2 equals 0 patients in the sample calculation.
 - b. If the Intervention Order QDM data element, PALLIATIVE CARE, less than 4 months ends after start of measurement period equals No, go to check Diagnosis Active.
- 9. Check Diagnosis Active:
 - a. If the Diagnosis Active QDM data element, BIPOLAR DISORDER, less than 4 months ends after start of measurement period equals Yes, include in Denominator Exclusion count. Denominator Exclusion is represented by letter c^3 in the sample calculation listed at the end of this measure stratification. Letter c^3 equals 1 patient in the sample calculation.
 - b. If the Diagnosis Active QDM data element, BIPOLAR DISORDER, less than 4 months ends after start of measurement period equals No, proceed to check Diagnosis Active.
- 10. Check for Diagnosis Active:
 - a. If the Diagnosis Active QDM data element, PERSONALITY DISORDER, less than 4 months ends after start of measurement period equals Yes, include in Denominator Exclusions count. Denominator Exclusion is represented by letter c^4 in the sample calculation listed at the end of this measure stratification. Letter c^4 equals 1 patient in the sample calculation.
 - b. If the Diagnosis Active QDM data element, PERSONALITY DISORDER, less than 4 months ends after start of measurement period equals No, go to check Encounter Performed
- 11. Check for Encounter Performed:
 - a. If the Encounter Performed QDM data element, CARE SERVICES IN LONG-TERM RESIDENTIAL FACILITY, less than 4 months ends after start of measurement period equals Yes, include in Denominator Exclusion count. Denominator Exclusion is represented by letter c^5 in the sample calculation listed at the end of this measure stratification. Letter c^5 equals 0 patients in the sample calculation.
 - b. If the Encounter Performed QDM data element, CARE SERVICES IN LONG-TERM RESIDENTIAL FACILITY, less than 4 months ends after start of measurement period equals No, include in Eligible Population and go to the Numerator.
- 12. Start Numerator 3
- 13. Check Risk Category Assessment:

- a. If the Risk Category Assessment QDM data element, PHQ-9 TOOL (result), less than 4 months ends after 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 measure stratification. Letter a equals 8 patients in the sample calculation. Stop Processing.
- b. If the Risk Category Assessment QDM data element, PHQ-9 TOOL (result), less than 4 months ends after start of measurement period equals No, include in the No/Missing Data Submitted count. Stop Processing.

SAMPLE CALCULATION: *Combination of Initial Population 3; Denominator 3; Numerator 3*

Performance Rate =

$$\frac{\text{Numerator (a=8 Patients)}}{\text{Denominator (b=10 Patients) – Denominator Exclusions (c}^1\text{ + c}^2\text{ + c}^3\text{ + c}^4\text{ + c}^5\text{ = 2 Patients) – Denominator Exceptions (N/A)}} = 100.00\%$$