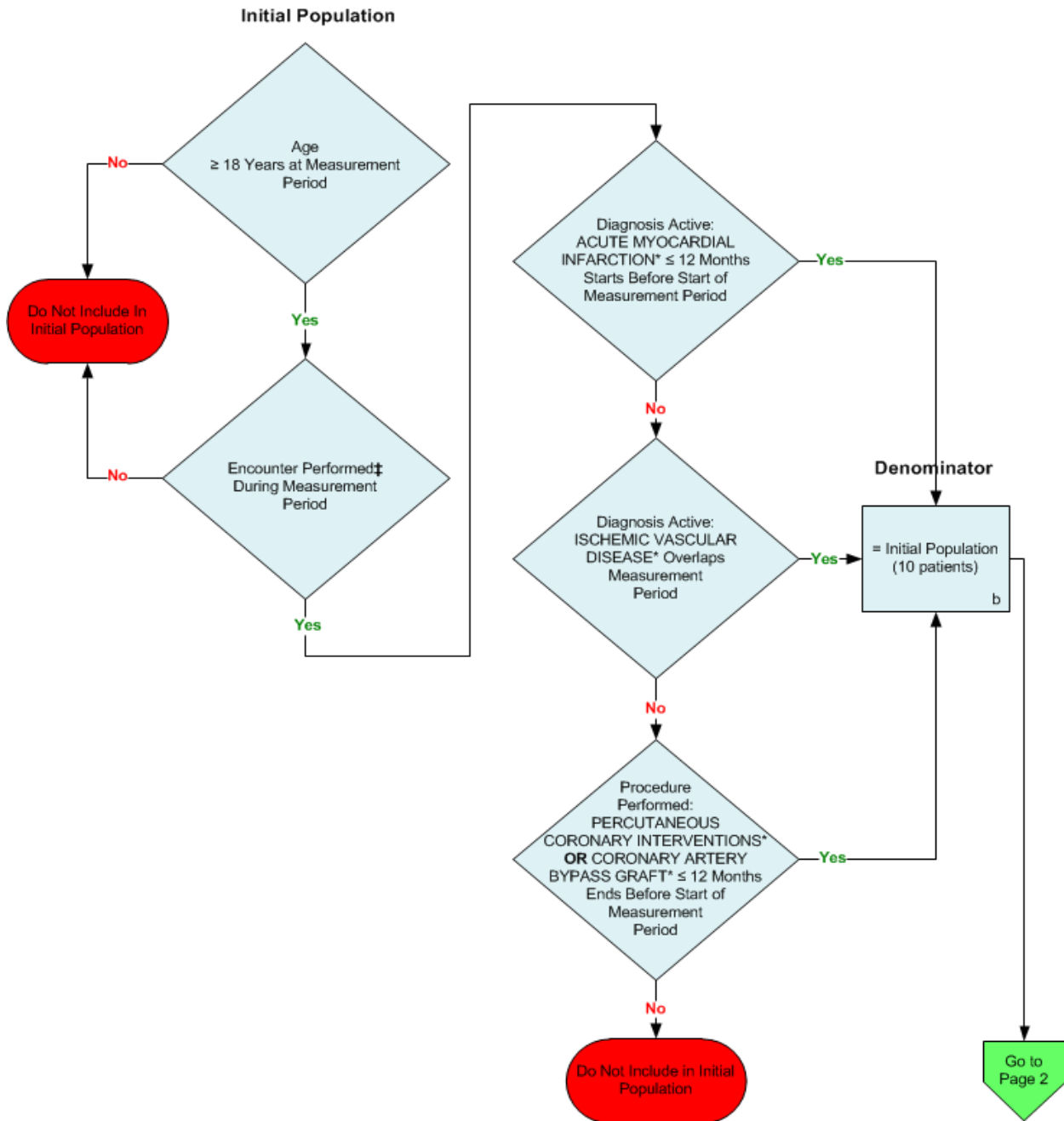


**2014 eCQM Flow**  
**Measure Identifier: CMS164v4**

NQF 0068: Ischemic Vascular Disease (IVD): Use of Aspirin or Another Antithrombotic

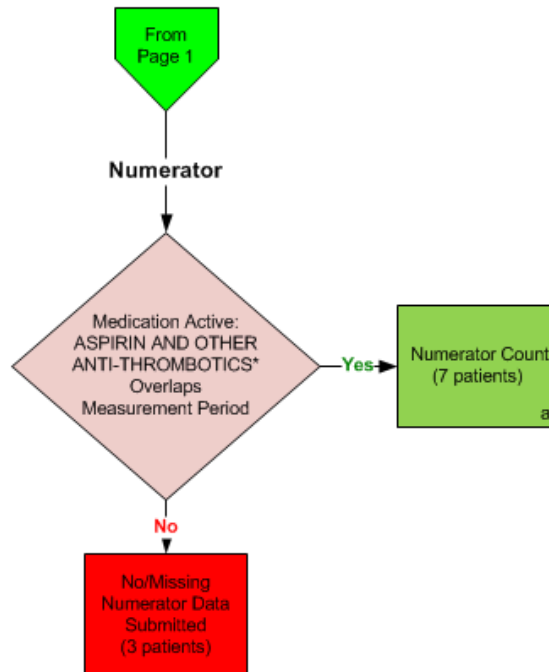


\*Please refer to the specific section of the eCQM to identify the QDM data elements and associated value sets for use in reporting this eCQM.

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

**2014 eCQM Flow**  
**Measure Identifier: CMS164v4**

NQF 0068: Ischemic Vascular Disease (IVD): Use of Aspirin or Another Antithrombotic



\*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 =**

$$\frac{\text{Numerator (a=7 patients)}}{\text{Denominator (b=10 patients) – Denominator Exclusions (N/A) – Denominator Exceptions (N/A)}} = 70.00\%$$

## 2014 eCQM Flows

Measure Identifier: CMS164v4

NQF 0068: Ischemic Vascular Disease (IVD): Use of Aspirin or Another Antithrombotic

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 18 years of age at measurement period equals No, do not include in Initial Population. Stop Processing.
  - b. If the Age greater than or equal to 18 years of age at measurement period equals Yes continue processing and proceed to check Encounter Performed.
3. Check Encounter Performed:
  - a. If the Encounter Performed QDM data element, OFFICE VISIT, during the measurement period equals Yes, include in the Initial Population and proceed to check Diagnosis Active.
  - b. If the Encounter Performed data element, OFFICE VISIT, during the measurement period equals No, proceed to check next Encounter Performed.
  - c. If the Encounter Performed data element, FACE-TO-FACE INTERACTION, during the measurement period equals Yes, proceed to check Diagnosis Active.
  - d. If the Encounter Performed data element, FACE-TO-FACE INTERACTION, during the measurement period equals No, proceed to check next Encounter Performed.
  - e. If the Encounter Performed data element, PREVENTIVE CARE SERVICES – ESTABLISHED OFFICE VISIT, 18 AND UP, during the measurement period equals Yes, proceed to check Diagnosis Active.
  - f. If the Encounter Performed data element, PREVENTIVE CARE SERVICES – ESTABLISHED OFFICE VISIT, 18 AND UP, during the measurement period equals No, proceed to check next Encounter Performed.
  - g. If the Encounter Performed data element, PREVENTIVE CARE SERVICES – INITIAL OFFICE VISIT, 18 AND UP, during the measurement period equals Yes, proceed to check Diagnosis Active.
  - h. If the Encounter Performed data element, PREVENTIVE CARE SERVICES – INITIAL OFFICE VISIT, 18 AND UP, during the measurement period equals No, proceed to check next Encounter Performed.
  - i. If the Encounter Performed data element, HOME HEALTHCARE SERVICES, during the measurement period equals Yes, proceed to check Diagnosis Active.
  - j. If the Encounter Performed data element, HOME HEALTHCARE SERVICES, during the measurement period equals No, proceed to check next Encounter Performed.
  - k. If the Encounter Performed data element, ANNUAL WELLNESS VISIT, during the measurement period equals Yes, proceed to check Diagnosis Active.

- I. If the Encounter Performed data element, ANNUAL WELLNESS VISIT, during the measurement period equals No, do not include in Initial Population and stop processing.
4. Check Diagnosis Active:
  - a. If the Diagnosis Active data element, ACUTE MYOCARDIAL INFARCTION, less than or equal to 12 months starts before start of measurement period equals Yes, include in the Initial Population and proceed to the Denominator.
  - b. If the Diagnosis Active QDM data element, ACUTE MYOCARDIAL INFARCTION, less than or equal to 12 months starts before start of measurement period equals No, proceed to check Diagnosis Active.
5. Check Diagnosis Active:
  - a. If the Diagnosis Active QDM data element, ISCHEMIC VASCULAR DISEASE, overlaps measurement period equals Yes, include in the Initial Population and proceed to the Denominator.
  - b. If the Diagnosis Active QDM data element, ISCHEMIC VASCULAR DISEASE, overlaps measurement period equals No, proceed to check Procedure Performed.
6. Check Procedure Performed:
  - a. If the Procedure Performed QDM data element, PERCUTANEOUS CORONARY INTERVENTIONS, or QDM data element, CORONARY ARTERY BYPASS GRAFT, less than or equal to 12 months ends before start of measurement period equals Yes, include in the Initial Population and proceed to the Denominator.
  - b. If the Procedure Performed QDM data element, PERCUTANEOUS CORONARY INTERVENTIONS, or QDM data element, CORONARY ARTERY BYPASS GRAFT, less than or equal to 12 months ends before start of measurement period equals No, do not include in Initial Population and stop processing.
7. Start Denominator
  - a. Denominator equals the Initial Population. Denominator is represented by the Letter b in the sample calculation listed at the end of this document. Letter b equals 10 patients in the sample calculation.
8. Start Numerator
9. Check Medication Active:
  - a. If the Medication Active QDM data element, ASPIRIN AND OTHER ANTI-THROMBOTICS overlaps measurement period equals Yes, include in Numerator count. Numerator is represented by the Letter a in the sample calculation listed at the end of this document. Letter a equals 7 patients in the sample calculation.
  - b. If the Medication Active QDM data element, ASPIRIN AND OTHER ANTI-THROMBOTICS, overlaps measurement period equals No, include in the No/Missing Numerator Data Submitted count and stop processing.

**SAMPLE CALCULATION:**

**Performance Rate =**  
$$\frac{\text{Numerator (a=7 patients)}}{\text{Denominator (b=10 patients) - Denominator Exclusions (N/A) - Denominator Exceptions (N/A)}} = 70.00\%$$