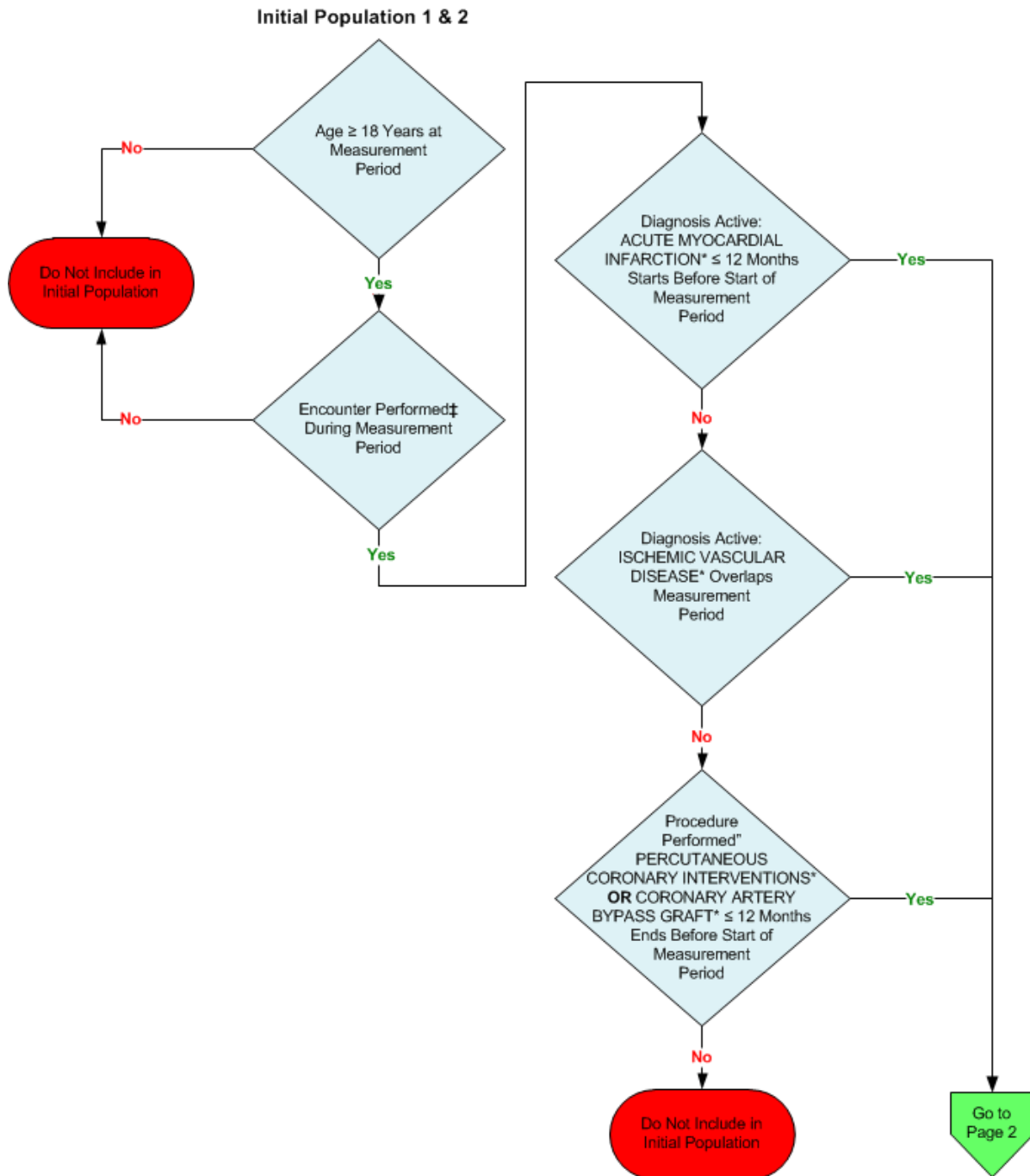


2014 eCQM Flow
Measure Identifier: CMS182v5.1

NQF 0075: Ischemic Vascular Disease (IVD): Complete Lipid Panel and LDL Control

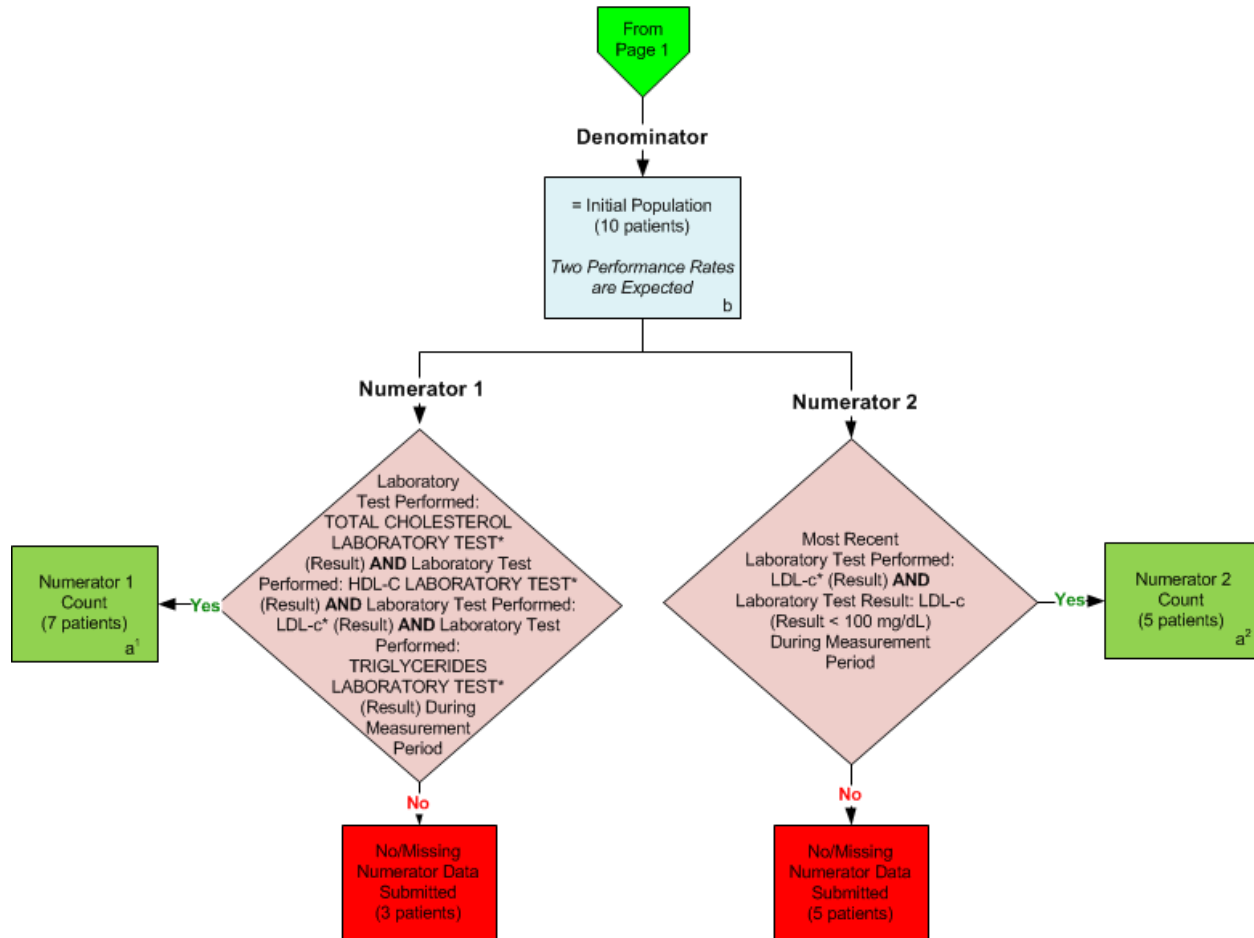
This eCQM requires the reporting of two Performance Rates



*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.

‡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: CMS182v5.1
 NQF 0075: Ischemic Vascular Disease (IVD): Complete Lipid Panel and LDL Control



*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; Denominator; Numerator 1

Performance Rate =

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

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

Performance Rate =

$$\frac{\text{Numerator (a=5 patients)}}{\text{Denominator (b=10 patients) – Denominator Exclusions (N/A) – Denominator Exceptions (N/A)}} = 50.00\%$$

2014 eCQM Flows

Measure Identifier: CMS182v5.1

NQF 0075: Ischemic Vascular Disease (IVD): Complete Lipid Panel and LDL Control

This eCQM requires the reporting of two 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
2. Check Age:
 - a. If the AGE is greater than or equal to 18 years at measurement period equals No, do not include in Initial Population and stop processing.
 - b. If the AGE is greater than or equal to 18 years 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 QDM data element, OFFICE VISIT during the measurement period equals No, proceed to check next Encounter Performed.
 - c. 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 check Diagnosis Active.
 - d. If the Encounter Performed QDM data element, FACE-TO-FACE INTERACTION during the measurement period equals No, proceed to check next Encounter Performed.
 - e. 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 check Diagnosis Active.
 - f. 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.
 - g. 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 check Diagnosis Active.
 - h. 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.
 - i. If the Encounter Performed QDM data element, HOME HEALTHCARE SERVICES during the measurement period equals Yes, include in the Initial Population and proceed to check Diagnosis Active.

- j. If the Encounter Performed QDM data element, HOME HEALTHCARE SERVICES during the measurement period equals No, proceed to check next Encounter Performed.
 - k. If the Encounter Performed QDM data element, ANNUAL WELLNESS VISIT during the measurement period equals Yes, include in the Initial Population and proceed to check Diagnosis Active.
 - l. If the Encounter Performed QDM 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 QDM 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 CORONARYARTERY 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 CORONARYARTERY BYPASS GRAFT, less than or equal to 12 months ends before start of measurement period equals No, do not include in Initial Population. 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 1 (There are Two Performance Rates)
9. Check Laboratory Test Performed:
- a. If the Laboratory Test Performed QDM data element, TOTAL CHOLESTEROL LABORATORY TEST (result), AND Laboratory Test Performed, QDM data element,

- HDL-C LABORATORY TEST (result), AND Laboratory Test Performed QDM data element, LDL-c (result) AND Laboratory Test Performed QDM data element, TRIGLYCERIDES LABORATORY TEST (result), during the 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. Proceed to Numerator 2.
- b. If the Laboratory Test Performed QDM data element, TOTAL CHOLESTEROL LABORATORY TEST (result), AND Laboratory Test Performed, QDM data element, HDL-C LABORATORY TEST (result), AND Laboratory Test Performed QDM data element, LDL-c (result) AND Laboratory Test Performed QDM data element, TRIGLYCERIDES LABORATORY TEST (result), during the measurement period equals No, include in the No/Missing Numerator Data Submitted count and stop processing for Numerator 1 and proceed to Numerator 2.
10. Start Numerator 2
11. Check Most Recent Laboratory Test Performed:
- a. If Most Recent Laboratory Test Performed QDM data element, LDL-c (result) AND Laboratory Test (result) QDM data element, LDL-C (result < 100 mg/dL), during measurement period equals Yes, include in Numerator count. Numerator is represented by the Letter a² in the sample calculation listed at the end of this document. Letter a² equals 5 patients in the sample calculation.
- b. If Most Recent Laboratory Test Performed QDM data element, LDL-c (result) AND Laboratory Test (result) QDM data element, LDL-C (result < 100 mg/dL), during measurement period equals No, include in No/Missing Numerator Data Submitted count. Stop Processing.

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

Performance Rate =

$$\frac{\text{Numerator (a}^1\text{=7 patients)}}{\text{Denominator (b=10 patients) – Denominator Exclusions (N/A) – Denominator Exceptions (N/A)}} = 70.00\%$$

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

Performance Rate =

$$\frac{\text{Numerator (a}^2\text{=5 patients)}}{\text{Denominator (b=10 patients) – Denominator Exclusions (N/A) – Denominator Exceptions (N/A)}} = 50.00\%$$