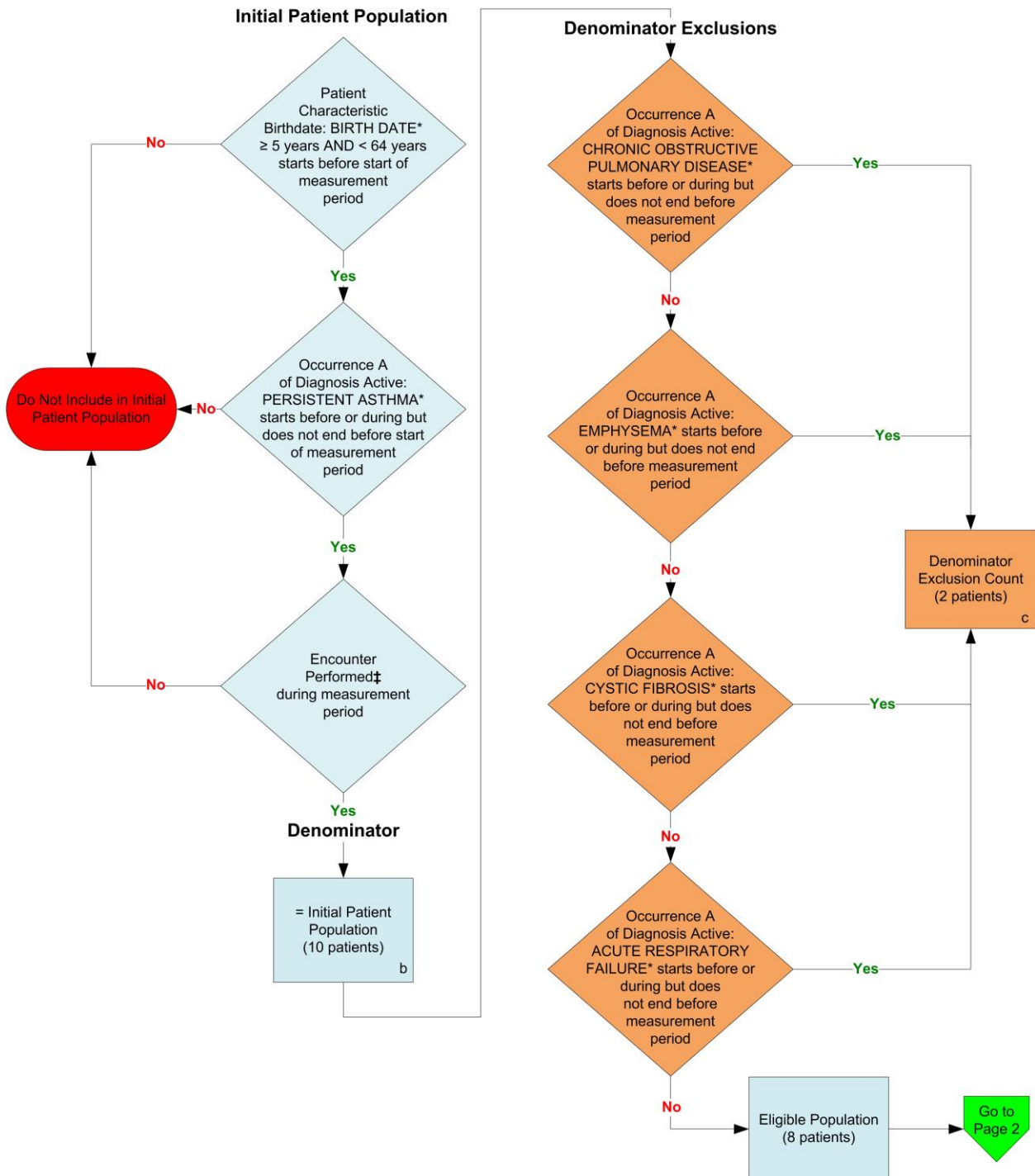
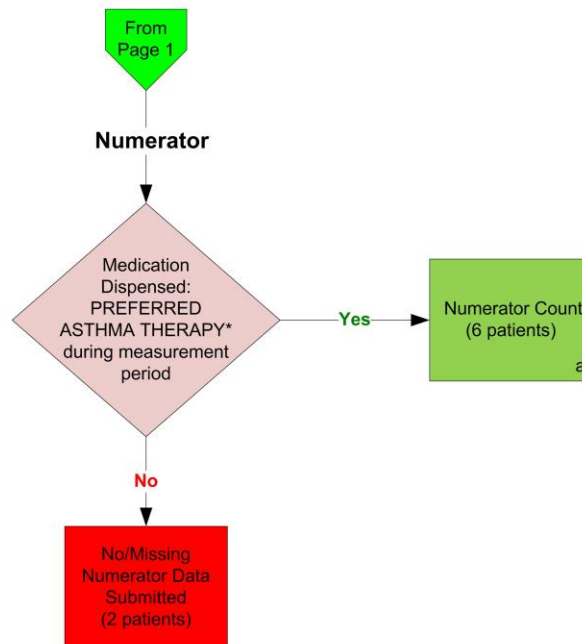


2014 eCQM Flow
Measure Identifier: CMS126v3
NQF 0036: Use of Appropriate Medications for Asthma



*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 list of appropriate encounters, please refer to the QDM data elements and associated value sets as specific data elements have not been listed.

2014 eCQM Flow
 Measure Identifier: CMS126v3
 NQF 0036: Use of Appropriate Medications for Asthma



*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 =

$$\frac{\text{Numerator (a = 6 patients)}}{\text{Denominator (b = 10 patients) – Denominator Exclusions (c = 2 patients) – Denominator Exceptions (N/A)}} = 75.00\%$$

2014 eCQM Flows
Measure Identifier: CMS126v3
NQF 0036: Use of Appropriate Medications for Asthma

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.

1. Start Initial Patient Population
2. Check Patient Characteristic Birth date:
 - a. If the QDM data element, BIRTH DATE, is greater than or equal to 5 years and less than 64 years before start of measurement period equals Yes, proceed to check Diagnosis Active.
 - b. If the QDM data element, BIRTH DATE, is greater than or equal to 5 years and less than 64 years before start of measurement period equals No, do not include in Initial Patient Population. Stop Processing.
3. Check Diagnosis Active:
 - a. If Occurrence A of Diagnosis Active of the QDM data element, PERSISTANT ASTHMA, starts before or during measurement period but does not end before start of measurement period equals Yes, proceed to check Encounter Performed.
 - b. If Occurrence A of Diagnosis Active of the QDM data element, PERSISTANT ASTHMA, starts before or during measurement period but does not end before start of measurement period equals No, do not include in the Initial Patient Population. Stop Processing.
4. Check Encounter Performed:
 - a. If the QDM data element, OFFICE VISIT, equals Yes, during the measurement period, include in the Initial Patient Population and continue on to the Denominator.
 - b. If the QDM data element, OFFICE VISIT, equals No, during the measurement period, proceed to check next Encounter Performed.
 - c. If the QDM data element, FACE-TO-FACE INTERACTION, equals Yes, during the measurement period, include in the Initial Patient Population and continue on to the Denominator.
 - d. If the QDM data element, FACE-TO-FACE INTERACTION, equals No, during the measurement period, proceed to check next Encounter Performed.
 - e. If the QDM data element, PREVENTIVE CARE SERVICES – ESTABLISHED OFFICE VISIT, 0 to 17, equals Yes, during the measurement period, include in the Initial Patient Population and continue on to the Denominator.
 - f. If the QDM data element, PREVENTIVE CARE SERVICES – ESTABLISHED OFFICE VISIT, 0 to 17, equals No, during the measurement period, proceed to check next Encounter Performed.
 - g. If the QDM data element, PREVENTIVE CARE SERVICES – ESTABLISHED OFFICE VISIT, 18 AND UP, equals Yes, during the measurement period, include in the Initial Patient Population and continue on to the Denominator.

- h. If the QDM data element, PREVENTIVE CARE SERVICES – ESTABLISHED OFFICE VISIT, 18 AND UP, equals No, during the measurement period, proceed to check next Encounter Performed.
 - i. If the QDM data element, PREVENTIVE CARE SERVICES – INITIAL OFFICE VISIT, 18 AND UP, equals Yes, during the measurement period, include in the Initial Patient Population and continue on to the Denominator.
 - j. If the QDM data element, PREVENTIVE CARE SERVICES – INITIAL OFFICE VISIT, 18 AND UP, equals No, during the measurement period, proceed to check next Encounter Performed.
 - k. If the QDM data element, PREVENTIVE CARE SERVICES – INITIAL OFFICE VISIT, 0 to 17, equals Yes, during the measurement period, include in the Initial Patient Population and continue on to the Denominator.
 - l. If the QDM data element, PREVENTIVE CARE SERVICES – INITIAL OFFICE VISIT, 0 to 17, equals No, during the measurement period, proceed to check next Encounter Performed.
 - m. If the QDM data element, HOME HEALTHCARE SERVICES, equals Yes, during the measurement period, include in the Initial Patient Population and continue on to the Denominator.
 - n. If the QDM data element, HOME HEALTHCARE SERVICES, equals No, during the measurement period, do not include in the Initial Patient Population. Stop Processing.
5. Start Denominator
- a. Denominator equals the Initial Patient 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
7. Check Diagnosis Active:
- a. If Occurrence A of the QDM data element, CHRONIC OBSTRUCTIVE PULMONARY DISEASE, starts before or during measurement period but does not end before start of measurement period equals Yes, include in the Denominator Exclusion Count which is represented by letter C in the sample calculation listed at the end of this document. Letter C equals 2 patients in the sample calculation. Stop Processing.
 - b. If Occurrence A of the QDM data element, CHRONIC OBSTRUCTIVE PULMONARY DISEASE, starts before or during measurement period but does not end before start of measurement period equals No, do not include in the Denominator Exclusion Count and proceed to check next Diagnosis Active.
8. Check Diagnosis Active:
- a. If Occurrence A of the QDM data element, EMPHYSEMA, starts before or during measurement period but does not end before start of measurement period equals Yes, include in the Denominator Exclusion Count which is represented by letter C in the sample calculation listed at the end of this document. Letter C equals 2 patients in the sample calculation. Stop Processing.

- b. If Occurrence A of the QDM data element, EMPHYSEMA, starts before or during measurement period but does not end before start of measurement period equals No, do not include in the Denominator Exclusion Count and proceed to check next Diagnosis Active.
 9. Check Diagnosis Active:
 - a. If Occurrence A of the QDM data element, CYSTIC FIBROSIS, starts before or during measurement period but does not end before start of measurement period equals Yes, include in the Denominator Exclusion Count which is represented by letter C in the sample calculation listed at the end of this document. Letter C equals 2 patients in the sample calculation. Stop Processing.
 - b. If Occurrence A of the QDM data element, CYSTIC FIBROSIS, starts before or during measurement period but does not end before start of measurement period equals No, do not include in the Denominator Exclusion Count and proceed to check next Diagnosis Active.
 10. Check Diagnosis Active:
 - a. If Occurrence A of the QDM data element, ACUTE RESPIRATORY FAILURE, starts before or during measurement period but does not end before start of measurement period equals Yes, include in the Denominator Exclusion Count which is represented by letter C in the sample calculation listed at the end of this document. Letter C equals 2 patients in the sample calculation. Stop Processing.
 - b. If Occurrence A of the QDM data element, ACUTE RESPIRATORY FAILURE, starts before or during measurement period but does not end before start of measurement period equals No, do not include in the Denominator Exclusion Count and proceed to the Numerator.
 11. Start Numerator
 12. Check Medication Dispensed:
 - a. If the QDM data element, PERFORMED ASTHMA THERAPY, during measurement period equals No, include in the No/Missing Data Submitted count. Stop Processing.
 - b. If the QDM data element, PERFORMED ASTHMA THERAPY, during measurement period equals Yes, include in Numerator Count, which is represented by letter A in the sample calculation listed at the end of this document. Letter A equals 6 patients in the sample calculation. Stop Processing.

SAMPLE CALCULATIONS

Performance Rate =

Numerator (a=6 patients)

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Denominator (b=10 patients) – Denominator Exclusions (c=2) – *Denominator Exceptions (N/A)*

= 75.00%