## INCENTIVE PROGRAM

## 2011-2012 Eligible Hospital & Critical Access Hospital Clinical Quality Measures (CQMs)

NQF#	Title	Description
		p
NQF 0495	Emergency Department (ED)-1 Emergency Department Throughput – Median time from ED arrival to ED departure for admitted ED patients	Median time from emergency department arrival to time of departure from the emergency room for patients admitted to the facility from the emergency department.
NQF 0497	ED-2 Emergency Department Throughput – Admitted patients – Admit decision time to ED departure time for admitted patients	Median time from admit decision time to time of departure from the emergency department for emergency department patients admitted to inpatient status.
NQF 0435	Stroke-2 Ischemic stroke – Discharged on anti-thrombotic therapy	Ischemic stroke patients prescribed antithrombotic therapy at hospital discharge.
NQF 0436	Stroke-3 Ischemic stroke – Anticoagulation Therapy for Atrial Fibrillation/Flutter	Ischemic stroke patients with atrial fibrillation/flutter who are prescribed anticoagulation therapy at hospital discharge.
NQF 0437	Stroke-4 Ischemic stroke – Thrombolytic Therapy	Acute ischemic stroke patients who arrive at this hospital within 2 hours (120 minutes) of time last known well and for whom IV t-PA was initiated at this hospital within 3 hours (180 minutes) of time last known well.
NQF 0438	Stroke-5 Ischemic stroke – Antithrombotic therapy by end of hospital day two	Ischemic stroke patients administered antithrombotic therapy by the end of hospital day two.
NQF 0439	Stroke-6 Ischemic stroke – Discharged on Statin Medication	Ischemic stroke patients with LDL greater than or equal to 100 mg/dL, or LDL not measured, or, who were on a lipid-lowering medication prior to hospital arrival are prescribed statin medication at hospital discharge.

CQMs: Must R	CQMs: Must Report All *		
NQF#	Title	Description	
NQF 0440	Stroke-8 Ischemic or hemorrhagic stroke – Stroke education	Ischemic or hemorrhagic stroke patients or their caregivers who were given educational materials during the hospital stay addressing all of the following: activation of emergency medical system, need for follow-up after discharge, medications prescribed at discharge, risk factors for stroke, and warning signs and symptoms of stroke.	
NQF 0441	Stroke-10 Ischemic or hemorrhagic stroke – Assessed for rehabilitation	Ischemic or hemorrhagic stroke patients who were assessed for rehabilitation services.	
NQF 0371	Venous Thromboembolism (VTE)-1 VTE prophylaxis	This measure assesses the number of patients who received VTE prophylaxis or have documentation why no VTE prophylaxis was given the day of or the day after hospital admission or surgery end date for surgeries that start the day of or the day after hospital admission.	
NQF 0372	VTE-2 Intensive Care Unit (ICU) VTE prophylaxis	This measure assesses the number of patients who received VTE prophylaxis or have documentation why no VTE prophylaxis was given the day of or the day after the initial admission (or transfer) to the Intensive Care Unit (ICU) or surgery end date for surgeries that start the day of or the day after ICU admission (or transfer).	

CQMs: Must Re	eport All *	
NQF#	Title	Description
NQF 0373	VTE-3 VTE Patients with Overlap of Anticoagulation Therapy	This measure assesses the number of patients diagnosed with confirmed VTE who received an overlap of parenteral (intravenous [IV] or subcutaneous [subcu]) anticoagulation and warfarin therapy. For patients who received less than five days of overlap therapy, they must be discharged on both medications. Overlap therapy must be administered for at least five days with an international normalized ratio (INR) = 2 prior to discontinuation of the parenteral anticoagulation therapy or the patient must be discharged on both medications.
NQF 0374	VTE-4 VTE Patients Unfractionated Heparin (UFH) Dosages/Platelet Count Monitoring by Protocol (or Nomogram) Receiving Unfractionated Heparin (UFH) with Dosages/ Platelet Count Monitored by Protocol (or Nomogram)	This measure assesses the number of patients diagnosed with confirmed VTE who received intravenous (IV) UFH therapy dosages AND had their platelet counts monitored using defined parameters such as a nomogram or protocol.
NQF 0375	VTE-5 VTE discharge instructions	This measure assesses the number of patients diagnosed with confirmed VTE that are discharged to home, to home with home health, or home hospice on warfarin with written discharge instructions that address all four criteria: compliance issues, dietary advice, follow-up monitoring, and information about the potential for adverse drug reactions/interactions.

NQF#	Title	Description
NQF 0376	VTE-6 Incidence of potentially preventable VTE	This measure assesses the number of patients diagnosed with confirmed VTE during hospitalization (not present on arrival) who did not receive VTE prophylaxis between hospital admission and the day before the VTE diagnostic testing order date.