

15 Core Objectives – Required for All EPs

	Objective	Measure	New Threshold
1	Record Patient Demographics	Sex, race, ethnicity, date of birth and preferred language as structured data	50%
	Numerator: The number of patients in the denominator who have all the elements of demographics (or a specific exclusion in the patient declined to provide one or more elements or if recording an element is contrary to state law) recorded as structured data.		Denominator: Number of unique patients see by the EP during the EHR reporting period.
	Exclusions: No Exclusion		
2	Record Vital Signs and Chart Changes	Height, weight, blood pressure, BMI, and growth charts for children as structured data	50%
	Numerator: The number of patients in the denominator who have at least one entry of their height, weight and blood pressure recorded as structured data.		Denominator: Number of unique patients age 2 or over seen by the EP during the EHR reporting period.
	Exclusions: EP who believes all three vital signs of height, weight and blood pressure have no relevance to their scope of practice to so attest and be excluded. An EP who sees no patients 2 years old and older.		
3	Maintain Up-to-date Problem List of Current and Active Diagnoses	At least one entry recorded as structured data (even if entry is "none")	80%
	Numerator: The number of patients in the denominator that have at least one entry or an indication that no problems are known for the patient recorded as structured data		Denominator: Number of unique patients seen by the EP during reporting period
	Exclusions: No Exclusion		
4	Maintain Active Medication List	At least one entry recorded as structured data (even if entry is "none")	80%
	Numerator: The number of patients in the denominator who have a medication (or an indication that the patient is not currently prescribed any medications) recorded as structured data.		Denominator: Number of unique patients seen by the EP during reporting period
	Exclusions: No Exclusion		
5	Maintain Active Medication Allergy List	At least one entry recorded as structured data (even if entry is "none")	80%
	Numerator: The number of patients in the denominator who have at least one entry (or an indication that the patient has no known medication allergies) recorded as structured data		Denominator: Number of unique patients seen by the EP during the EHR reporting period
	Exclusions: No Exclusion		
6	Record Smoking Status	Patients age 13 and older as structured data	50%
	Numerator: The number of patients in the denominator with smoking status recorded as structured data.		Denominator: Number of unique patients age 13 or older seen by the EP during the EHR reporting period.
	Exclusions: EP who sees no patients 13 years old and older.		
7	Provide Patients with Clinical Summaries	For each office visit to patients within 3 business days	50%
	Numerator: The number of patients in the denominator who are provided a clinical summary of their visit within three business days.		Denominator: The number of unique patients seen by EP for an office visit during the EHR reporting period.
	Exclusions: EPs who have no office visits within the EHR reporting period.		



15 Core Objectives – Required for All EPs

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8	Electronic Copy of Health Information	Upon request, including diagnostic test results, problem list, medication list, and medication allergies	50% within 3 business days of request
		Numerator: The number of patients (or their agents) in the denominator who receive an electronic copy of their electronic health information within three business days.	Denominator: The number of patients of the EP who request an electronic copy of their electronic health information four business days prior to the end of the EHR reporting period.
		Exclusions: EPs who have no requests from patients or their agents for an electronic copy of their electronic health information during the EHR reporting period.	
9	Generate and Transmit Permissible Prescriptions Electronically	Using a certified EHR technology	40%
		Numerator: The number of prescriptions in the denominator generated and transmitted electronically	Denominator: Number of prescriptions written for drugs requiring a prescription in order to be dispensed other than controlled substances during the EHR reporting period
		Exclusions: If an EP writes fewer than one hundred (100) prescriptions during the EHR reporting period.	
10	Computerized Provider Order Entry (CPOE)	Patients with at least one medication in their medication list must have at least one medication ordered through CPOE	30% of Medication Orders Only
		Numerator: The number of patients in the denominator that have at least one medication order entered using CPOE	Denominator: Number of unique patients with at least one medication in their medication list seen by during reporting period
		Exclusions: If an EP writes fewer than one hundred (100) prescriptions during the EHR reporting period.	
11	Implement Drug-Drug and Drug-Allergy Interaction Checks	Enable functionality	Entire Reporting Period
		Numerator:	Denominator:
		Exclusions: No Exclusion.	
12	Implement Ability to Exchange Key Clinical Information	Electronically among providers and patient-authorized entities	At Least One Test
		Numerator:	Denominator:
		Exclusions: No Exclusion	
13	Implement Clinical Decision Support and Track Compliance	One Rule implemented and tracked	1 Rule
		Numerator:	Denominator:
		Exclusions: No Exclusion	
14	Implement Systems to Protect Privacy and Security of Patient Data in the EHR	Conduct/review a security risk analysis; implement security updates as necessary and correct security deficiencies	During Reporting Period
		Numerator:	Denominator:
		Exclusions: No Exclusion	



15 Core Objectives – Required for All EPs

	Objective	Measure	New Threshold
15	Report Clinical Quality Measures	To CMS or states	CY2011 provide aggregate numerator/denominator through attestation; CY2012 electronic submission of measures
	Numerator:	Denominator:	
	Exclusions: No Exclusion		



10 Menu Objectives – EPs Choose 5

	Objective	Measure	New Threshold
1	Implement Drug Formulary Checks	Must be implemented and must access at least one internal or external drug formulary	During Reporting Period
	Numerator:		Denominator:
	Exclusions: No Exclusion		
2	Incorporate Clinical Lab Test Results into EHR	Incorporated as structured data – positive/negative or numerical format – within the EHR	40%
	Numerator: The number of lab test results whose results are expressed in a positive or negative affirmation or as a number which are incorporated into structured data.		Denominator: Number of lab tests ordered during the EHR reporting period by the EP whose results are expressed in a positive or negative affirmation or as a number
	Exclusions: If an EP orders no lab tests whose results are either in a positive/negative or numeric format during the EHR reporting period.		
3	Generate Lists of Patients by Condition	For use in quality improvement, reduction of disparities, research or outreach.	At Least 1 List with a Specific Condition
	Numerator:		Denominator:
	Exclusions: No Exclusion		
4	Use EHR to Identify Patient-Specific Education Resources	Provide patient-specific education resources to patients, as appropriate	10%
	Numerator: The number of patients in the denominator who are provided patient education specific resources.		Denominator: Number of unique patients seen by EP during the EHR reporting period.
	Exclusions: No Exclusion		
5	Perform Medication Reconciliation	During transitions of care	50% during transitions of care
	Numerator: The number of transitions of care in the denominator where medication reconciliation was performed.		Denominator: The number of transitions of care during the EHR reporting period for which the EP was the receiving party of the transition.
	Exclusions: An EP who is not on the receiving end of a transition of care during the EHR reporting period.		
6	Provide Summary of Care Record	Patients referred or transitioned to another provider or setting	50%
	Numerator: The number of transitions of care and referrals in the denominator where a summary of care was provided.		Denominator: The number of transitions of care and referrals during the HER reporting period for which the EP was the transferring or referring provider.
	Exclusions: An EP who does not transfer a patient to another setting or refer a patient to another provider during the EHR reporting period.		
7	Submission of Electronic Immunization Data to Registry/Information Systems	Submission and follow-up submission (where registries can accept electronic submissions)	At Least One Test
	Numerator:		Denominator:
	Exclusions: If none of the immunization registries to which the EP submits such information have the capacity to receive the information. An EP that has not given any immunizations in the EHR reporting period.		
8	Submission of Electronic Syndromic Surveillance Data	Data submission and follow-up submission to Public Health agencies (where agencies can accept electronic data)	At Least One Test
	Numerator:		Denominator:
	Exclusions: An EP who does not collect any syndromic information on their patients during the EHR reporting period.		



10 Menu Objectives – EPs Choose 5

	Objective	Measure	New Threshold
9	Send Reminders to Patients	Preventative and follow-up care for patients aged 65+ or age 5 or less	20%
		Numerator: The number of patients in the denominator who were sent the appropriate reminder.	Denominator: Number of unique patients 65 years and older or 5 years old and younger
		Exclusions: An EP who sees no patients 65 years old or older or 5 years old or younger.	
10	Timely Electronic Access to Health Information	Including lab results, problem list, medication list, medication allergies – within 4 days of being updated in the EHR	10%
		Numerator: The number of patients in the denominator who have timely (available to the patient within four business days of being updated in the certified EHR technology) electronic access to their health information online.	Denominator: The number of unique patients seen by the EP during the EHR reporting period.
		Exclusions: An EP that neither orders nor creates any of the listed information during the EHR reporting period.	



TABLE 6: Clinical Quality Measures for Submission by Medicare or Medicaid EPs for the 2011 and 2012 Payment Year⁴ (Core)

NQF Measure Number & PQRI Implementation Number	Clinical Quality Measure Title & Description	Clinical Quality Measure Steward & Contact Information	Electronic Measure Specifications Information
NQF 0421 PQRI 128	Title: Adult Weight Screening and Follow-Up Description: Percentage of patients aged 18 years and older with a calculated BMI in the past six months or during the current visit documented in the medical record AND if the most recent BMI is outside parameters, a follow-up plan is documented.	CMS/Quality Insights of Pennsylvania (QIP) Contact Information: www.usqualitymeasures.org	http://www.cms.gov/QualityMeasures/03_ElectronicSpecifications.asp#TopOfPage
NQF 0013	Title: Hypertension: Blood Pressure Measurement Description: Percentage of patient visits for patients aged 18 years and older with a diagnosis of hypertension who have been seen for at least 2 office visits, with blood pressure (BP) recorded.	AMA-PCPI Contact Information: cpe@ama-assn.org	http://www.cms.gov/QualityMeasures/03_ElectronicSpecifications.asp#TopOfPage
NQF 0028	Title: Preventive Care and Screening Measure Pair: a. Tobacco Use Assessment, b. Tobacco Cessation Intervention Description: Percentage of patients aged 18 years and older who have been seen for at least 2 office visits who were queried about tobacco use one or more times within 24 months b. Percentage of patients aged 18 years and older identified as tobacco users within the past 24 months and have been seen for at least 2 office visits who received cessation intervention.	AMA-PCPI Contact Information: cpe@ama-assn.org	http://www.cms.gov/QualityMeasures/03_ElectronicSpecifications.asp#TopOfPage

TABLE 6: Clinical Quality Measures for Submission by Medicare or Medicaid EPs for the 2011 and 2012 Payment Year⁴ (Alternate Core)

NQF Measure Number & PQRI Implementation Number	Clinical Quality Measure Title & Description	Clinical Quality Measure Steward & Contact Information	Electronic Measure Specifications Information
NQF 0041 PQRI 110	Title: Preventive Care and Screening: Influenza Immunization for Patients ≥ 50 Years Old Description: Percentage of patients aged 50 years and older who received an influenza immunization during the flu season (September through February).	AMA-PCPI Contact Information: cpe@ama-assn.org	http://www.cms.gov/QualityMeasures/03_ElectronicSpecifications.asp#TopOfPage
NQF 0024	Title: Weight Assessment and Counseling for Children and Adolescents Description: Percentage of patients 2 -17 years of age who had an outpatient visit with a Primary Care Physician (PCP) or OB/GYN and who had evidence of BMI percentile documentation, counseling for nutrition and counseling for physical activity during the measurement year.	NCQA Contact Information: www.ncqa.org	http://www.cms.gov/QualityMeasures/03_ElectronicSpecifications.asp#TopOfPage
NQF 0038	Title: Childhood Immunization Status Description: Percentage of children 2 years of age who had four diphtheria, tetanus and acellular pertussis (DTaP); three polio(IPV), one measles, mumps and rubella (MMR); two H influenza type B (HiB); three hepatitis B (Hep B); one chicken pox (VZV); four pneumococcal conjugate (PCV); two hepatitis A (Hep A); two or three rotavirus (RV); and two influenza (flu) vaccines by their second birthday. The measure calculates a rate for each vaccine and nine separate combination rates.	NCQA Contact Information: www.ncqa.org	http://www.cms.gov/QualityMeasures/03_ElectronicSpecifications.asp#TopOfPage



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NQF Measure Number & PQRI Implementation Number	Clinical Quality Measure Title & Description	Clinical Quality Measure Steward & Contact Information	Electronic Measure Specifications Information
NQF 0001 PQRI 64	Title: Asthma Assessment Description: Percentage of patients aged 5 through 40 years with a diagnosis of asthma and who have been seen for at least 2 office visits, who were evaluated during at least one office visit within 12 months for the frequency (numeric) of daytime and nocturnal asthma symptoms.	AMA-PCPI Contact Information: cpe@ama-assn.org	http://www.cms.gov/QualityMeasures/03_ElectronicSpecifications.asp#TopOfPage
NQF 0002 PQRI 66	Title: Appropriate Testing for Children with Pharyngitis Description: Percentage of children 2-18 years of age who were diagnosed with pharyngitis, dispensed an antibiotic and received a group A streptococcus (strep) test for the episode.	NCQA Contact Information: www.ncqa.org	http://www.cms.gov/QualityMeasures/03_ElectronicSpecifications.asp#TopOfPage
NQF 0004	Title: Initiation and Engagement of Alcohol and Other Drug Dependence Treatment: (a) Initiation, (b) Engagement Description: The percentage of adolescent and adult patients with a new episode of alcohol and other drug (AOD) dependence who initiate treatment through an inpatient AOD admission, outpatient visit, intensive outpatient encounter or partial hospitalization within 14 days of the diagnosis and who initiated treatment and who had two or more additional services with an AOD diagnosis within 30 days of the initiation visit.	NCQA Contact Information: www.ncqa.org	http://www.cms.gov/QualityMeasures/03_ElectronicSpecifications.asp#TopOfPage
NQF 0012	Title: Prenatal Care: Screening for Human Immunodeficiency Virus (HIV) Description: Percentage of patients, regardless of age, who gave birth during a 12-month period who were screened for HIV infection during the first or second prenatal care visit.	AMA-PCPI Contact Information: cpe@ama-assn.org	http://www.cms.gov/QualityMeasures/03_ElectronicSpecifications.asp#TopOfPage
NQF 0014	Title: Prenatal Care: Anti-D Immune Globulin Description: Percentage of D (Rh) negative, unsensitized patients, regardless of age, who gave birth during a 12-month period who received anti-D immune globulin at 26-30 weeks gestation.	AMA-PCPI Contact Information: cpe@ama-assn.org	http://www.cms.gov/QualityMeasures/03_ElectronicSpecifications.asp#TopOfPage
NQF 0018	Title: Controlling High Blood Pressure Description: The percentage of patients 18-85 years of age who had a diagnosis of hypertension and whose BP was adequately controlled during the measurement year	NCQA Contact Information: www.ncqa.org	http://www.cms.gov/QualityMeasures/03_ElectronicSpecifications.asp#TopOfPage
NQF 0027 PQRI 115	Title: Smoking and Tobacco Use Cessation, Medical assistance: a. Advising Smokers and Tobacco Users to Quit, b. Discussing Smoking and Tobacco Use Cessation Medications, c. Discussing Smoking and Tobacco Use Cessation Strategies Description: Percentage of patients 18 years of age and older who were current smokers or tobacco users, who were seen by a practitioner during the measurement year and who received advice to quit smoking or tobacco use or whose practitioner recommended or discussed smoking or tobacco use cessation medications, methods or strategies.	NCQA Contact Information: www.ncqa.org	http://www.cms.gov/QualityMeasures/03_ElectronicSpecifications.asp#TopOfPage



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NQF 0031 PQRI 112	Title: Breast Cancer Screening Description: Percentage of women 40-69 years of age who had a mammogram to screen for breast cancer.	NCQA Contact Information: www.ncqa.org	http://www.cms.gov/QualityMeasures/03_ElectronicSpecifications.aspx#TopOfPage
NQF 0032	Title: Cervical Cancer Screening Description: Percentage of women 21-64 years of age, who received one or more Pap tests to screen for cervical cancer	NCQA Contact Information: www.ncqa.org	http://www.cms.gov/QualityMeasures/03_ElectronicSpecifications.aspx#TopOfPage
NQF 0033	Title: Chlamydia Screening for Women Description: Percentage of women 15- 24 years of age who were identified as sexually active and who had at least one test for chlamydia during the measurement year.	NCQA Contact Information: www.ncqa.org	http://www.cms.gov/QualityMeasures/03_ElectronicSpecifications.aspx#TopOfPage
NQF 0034 PQRI 113	Title: Colorectal Cancer Screening Description: Percentage of adults 50-75 years of age who had appropriate screening for colorectal cancer.	NCQA Contact Information: www.ncqa.org	http://www.cms.gov/QualityMeasures/03_ElectronicSpecifications.aspx#TopOfPage
NQF 0036	Title: Use of Appropriate Medications for Asthma Description: Percentage of patients 5 - 50 years of age who were identified as having persistent asthma and were appropriately prescribed medication during the measurement year. Report three age stratifications (5-11 years, 12-50 years, and total).	NCQA Contact Information: www.ncqa.org	http://www.cms.gov/QualityMeasures/03_ElectronicSpecifications.aspx#TopOfPage
NQF 0043 PQRI 111	Title: Pneumonia Vaccination Status for Older Adults Description: Percentage of patients 65 years of age and older who have ever received a pneumococcal vaccine.	NCQA Contact Information: www.ncqa.org	http://www.cms.gov/QualityMeasures/03_ElectronicSpecifications.aspx#TopOfPage
NQF 0047 PQRI 53	Title: Asthma Pharmacologic Therapy Description: Percentage of patients aged 5 through 40 years with a diagnosis of mild, moderate, or severe persistent asthma who were prescribed either the preferred long-term control medication (inhaled corticosteroid) or an acceptable alternative treatment.	AMA-PCPI Contact Information: cpe@ama-assn.org	http://www.cms.gov/QualityMeasures/03_ElectronicSpecifications.aspx#TopOfPage
NQF 0052	Title: Low Back Pain: Use of Imaging Studies Description: Percentage of patients with a primary diagnosis of low back pain who did not have an imaging study (plain x-ray, MRI, CT scan) within 28 days of diagnosis.	NCQA Contact Information: www.ncqa.org	http://www.cms.gov/QualityMeasures/03_ElectronicSpecifications.aspx#TopOfPage



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NQF Measure Number & PQRI Implementation Number	Clinical Quality Measure Title & Description	Clinical Quality Measure Steward & Contact Information	Electronic Measure Specifications Information
NQF 0055 PQRI 117	Title: Diabetes: Eye Exam Description: Percentage of patients 18 -75 years of age with diabetes (type 1 or type 2) who had a retinal or dilated eye exam or a negative retinal exam (no evidence of retinopathy) by an eye care professional.	AMA-PCPI Contact Information: cpe@ama-assn.org	http://www.cms.gov/QualityMeasures/03_ElectronicSpecifications.asp#TopOfPage
NQF 0056 PQRI 163	Title: Diabetes: Foot Exam Description: The percentage of patients aged 18 – 75 years with diabetes (type 1 or type 2) who had a foot exam (visual inspection, sensory exam with monofilament, or pulse exam).	NCQA Contact Information: www.ncqa.org	http://www.cms.gov/QualityMeasures/03_ElectronicSpecifications.asp#TopOfPage
NQF 0059 PQRI 1	Title: Diabetes: Hemoglobin A1c Poor Control Description: Percentage of patients 18 - 75 years of age with diabetes (type 1 or type 2) who had hemoglobin A1c > 9.0%.	National Committee for Quality Assurance (NCQA) Contact Information: www.ncqa.org	http://www.cms.gov/QualityMeasures/03_ElectronicSpecifications.asp#TopOfPage
NQF 0061 PQRI 3	Title: Diabetes: Blood Pressure Management Description: Percentage of patients 18 - 75 years of age with diabetes (type 1 or type 2) who had blood pressure <140/90 mmHg.	NCQA Contact Information: www.ncqa.org	http://www.cms.gov/QualityMeasures/03_ElectronicSpecifications.asp#TopOfPage
NQF 0062 PQRI 119	Title: Diabetes: Urine Screening Description: Percentage of patients 18 - 75 years of age with diabetes (type 1 or type 2) who had a nephropathy screening test or evidence of nephropathy.	NCQA Contact Information: www.ncqa.org	http://www.cms.gov/QualityMeasures/03_ElectronicSpecifications.asp#TopOfPage
NQF 0064 PQRI 2	Title: Diabetes: Low Density Lipoprotein (LDL) Management and Control Description: Percentage of patients 18-75 years of age with diabetes (type 1 or type 2) who had LDL-C < 100 mg/dL).	NCQA Contact Information: www.ncqa.org	http://www.cms.gov/QualityMeasures/03_ElectronicSpecifications.asp#TopOfPage
NQF 0067 PQRI 6	Title: Coronary Artery Disease (CAD): Oral Antiplatelet Therapy Prescribed for Patients with CAD Description: Percentage of patients aged 18 years and older with a diagnosis of CAD who were prescribed oral antiplatelet therapy.	AMA-PCPI Contact Information: cpe@ama-assn.org	http://www.cms.gov/QualityMeasures/03_ElectronicSpecifications.asp#TopOfPage



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NQF Measure Number & PQRI Implementation Number	Clinical Quality Measure Title & Description	Clinical Quality Measure Steward & Contact Information	Electronic Measure Specifications Information
NQF 0068 PQRI 204	<p>Title: Ischemic Vascular Disease (IVD): Use of Aspirin or Another Antithrombotic Description: Percentage of patients 18 years of age and older who were discharged alive for acute myocardial infarction (AMI), coronary artery bypass graft (CABG) or percutaneous transluminal coronary angioplasty (PTCA) from January 1-November 1 of the year prior to the measurement year, or who had a diagnosis of ischemic vascular disease (IVD) during the measurement year and the year prior to the measurement year and who had documentation of use of aspirin or another antithrombotic during the measurement year.</p>	NCQA Contact Information: www.ncqa.org	http://www.cms.gov/QualityMeasures/03_ElectronicSpecifications.asp#TopOfPage
NQF 0070 PQRI 7	<p>Title: Coronary Artery Disease (CAD): Beta-Blocker Therapy for CAD Patients with Prior Myocardial Infarction (MI) Description: Percentage of patients aged 18 years and older with a diagnosis of CAD and prior MI who were prescribed beta-blocker therapy.</p>	AMA-PCPI Contact Information: cpe@ama-assn.org	http://www.cms.gov/QualityMeasures/03_ElectronicSpecifications.asp#TopOfPage
NQF 0073 PQRI 201	<p>Title: Ischemic Vascular Disease (IVD): Blood Pressure Management Description: Percentage of patients 18 years of age and older who were discharged alive for acute myocardial infarction (AMI), coronary artery bypass graft (CABG) or percutaneous transluminal coronary angioplasty (PTCA) from January 1- November 1 of the year prior to the measurement year, or who had a diagnosis of ischemic vascular disease (IVD) during the measurement year and the year prior to the measurement year and whose recent blood pressure is in control (<140/90 mmHg).</p>	NCQA Contact Information: www.ncqa.org	http://www.cms.gov/QualityMeasures/03_ElectronicSpecifications.asp#TopOfPage
NQF 0074 PQRI 197	<p>Title: Coronary Artery Disease (CAD): Drug Therapy for Lowering LDL-Cholesterol Description: Percentage of patients aged 18 years and older with a diagnosis of CAD who were prescribed a lipid-lowering therapy (based on current ACC/AHA guidelines).</p>	AMA-PCPI Contact Information: cpe@ama-assn.org	http://www.cms.gov/QualityMeasures/03_ElectronicSpecifications.asp#TopOfPage
NQF 0075	<p>Title: Ischemic Vascular Disease (IVD): Complete Lipid Panel and LDL Control Description: Percentage of patients 18 years of age and older who were discharged alive for acute myocardial infarction (AMI), coronary artery bypass graft (CABG) or percutaneous transluminal angioplasty (PTCA) from January 1-November1 of the year prior to the measurement year, or who had a diagnosis of ischemic vascular disease (IVD) during the measurement year and the year prior to the measurement year and who had a complete lipid profile performed during the measurement year and whose LDL-C<100 mg/dL.</p>	NCQA Contact Information: www.ncqa.org	http://www.cms.gov/QualityMeasures/03_ElectronicSpecifications.asp#TopOfPage



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NQF 0081 PQRI 5	<p>Title: Heart Failure (HF): Angiotensin-Converting Enzyme (ACE) Inhibitor or Angiotensin Receptor Blocker (ARB) Therapy for Left Ventricular Systolic Dysfunction (LVSD)</p> <p>Description: Percentage of patients aged 18 years and older with a diagnosis of heart failure and LVSD (LVEF < 40%) who were prescribed ACE inhibitor or ARB therapy.</p>	<p>American Medical Association-sponsored Physician Consortium for Performance Improvement (AMA-PCPI)</p> <p>Contact Information: cpe@ama-assn.org</p>	<p>http://www.cms.gov/QualityMeasures/03_ElectronicSpecifications.asp#TopOfPage</p>
NQF 0083 PQRI 8	<p>Title: Heart Failure (HF): Beta-Blocker Therapy for Left Ventricular Systolic Dysfunction (LVSD)</p> <p>Description: Percentage of patients aged 18 years and older with a diagnosis of heart failure who also have LVSD (LVEF < 40%) and who were prescribed betablocker therapy.</p>	<p>AMA-PCPI</p> <p>Contact Information: cpe@ama-assn.org</p>	<p>http://www.cms.gov/QualityMeasures/03_ElectronicSpecifications.asp#TopOfPage</p>
NQF 0084 PQRI 200	<p>Title: Heart Failure (HF): Warfarin Therapy Patients with Atrial Fibrillation</p> <p>Description: Percentage of all patients aged 18 years and older with a diagnosis of heart failure and paroxysmal or chronic atrial fibrillation who were prescribed warfarin therapy.</p>	<p>AMA-PCPI</p> <p>Contact Information: cpe@ama-assn.org</p>	<p>http://www.cms.gov/QualityMeasures/03_ElectronicSpecifications.asp#TopOfPage</p>
NQF 0086 PQRI 12	<p>Title: Primary Open Angle Glaucoma (POAG): Optic Nerve Evaluation</p> <p>Description: Percentage of patients aged 18 years and older with a diagnosis of POAG who have been seen for at least two office visits who have an optic nerve head evaluation during one or more office visits within 12 months.</p>	<p>AMA-PCPI</p> <p>Contact Information: cpe@ama-assn.org</p>	<p>http://www.cms.gov/QualityMeasures/03_ElectronicSpecifications.asp#TopOfPage</p>
NQF 0088 PQRI 18	<p>Title: Diabetic Retinopathy: Documentation of Presence or Absence of Macular Edema and Level of Severity of Retinopathy</p> <p>Description: Percentage of patients aged 18 years and older with a diagnosis of diabetic retinopathy who had a dilated macular or fundus exam performed which included documentation of the level of severity of retinopathy and the presence or absence of macular edema during one or more office visits within 12 months.</p>	<p>AMA-PCPI</p> <p>Contact Information: cpe@ama-assn.org</p>	<p>http://www.cms.gov/QualityMeasures/03_ElectronicSpecifications.asp#TopOfPage</p>
NQF 0089 PQRI 19	<p>Title: Diabetic Retinopathy: Communication with the Physician Managing Ongoing Diabetes Care</p> <p>Description: Percentage of patients aged 18 years and older with a diagnosis of diabetic retinopathy who had a dilated macular or fundus exam performed with documented communication to the physician who manages the ongoing care of the patient with diabetes mellitus regarding the findings of the macular or fundus exam at least once within 12 months.</p>	<p>AMA-PCPI</p> <p>Contact Information: cpe@ama-assn.org</p>	<p>http://www.cms.gov/QualityMeasures/03_ElectronicSpecifications.asp#TopOfPage</p>



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NQF 0105 PQRI 9	<p>Title: Anti-depressant medication management: (a) Effective Acute Phase Treatment,(b)Effective Continuation Phase Treatment</p> <p>Description: The percentage of patients 18 years of age and older who were diagnosed with a new episode of major depression, treated with antidepressant medication, and who remained on an antidepressant medication treatment.</p>	<p>NCQA Contact Information: www.ncqa.org</p>	<p>http://www.cms.gov/QualityMeasures/03_ElectronicSpecifications.asp#TopOfPage</p>
NQF 0385 PQRI 72	<p>Title: Oncology Colon Cancer: Chemotherapy for Stage III Colon Cancer Patients</p> <p>Description: Percentage of patients aged 18 years and older with Stage IIIA through IIIC colon cancer who are referred for adjuvant chemotherapy, prescribed adjuvant chemotherapy, or have previously received adjuvant chemotherapy within the 12-month reporting period.</p>	<p>AMA-PCPI Contact Information: cpe@ama-assn.org</p>	<p>http://www.cms.gov/QualityMeasures/03_ElectronicSpecifications.asp#TopOfPage</p>
NQF 0387 PQRI 71	<p>Title: Oncology Breast Cancer: Hormonal Therapy for Stage IC-IIIC Estrogen Receptor/Progesterone Receptor (ER/PR) Positive Breast Cancer</p> <p>Description: Percentage of female patients aged 18 years and older with Stage IC through IIIC, ER or PR positive breast cancer who were prescribed tamoxifen or aromatase inhibitor (AI) during the 12-month reporting period.</p>	<p>AMA-PCPI Contact Information: cpe@ama-assn.org</p>	<p>http://www.cms.gov/QualityMeasures/03_ElectronicSpecifications.asp#TopOfPage</p>
NQF 0389 PQRI 102	<p>Title: Prostate Cancer: Avoidance of Overuse of Bone Scan for Staging Low Risk Prostate Cancer Patients</p> <p>Description: Percentage of patients, regardless of age, with a diagnosis of prostate cancer at low risk of recurrence receiving interstitial prostate brachytherapy, OR external beam radiotherapy to the prostate, OR radical prostatectomy, OR cryotherapy who did not have a bone scan performed at any time since diagnosis of prostate cancer.</p>	<p>AMA-PCPI Contact Information: cpe@ama-assn.org</p>	<p>http://www.cms.gov/QualityMeasures/03_ElectronicSpecifications.asp#TopOfPage</p>
NQF 0575	<p>Title: Diabetes: Hemoglobin A1c Control (<8.0%)</p> <p>Description: The percentage of patients 18-75 years of age with diabetes (type 1 or type 2) who had hemoglobin A1c <8.0%.</p>	<p>NCQA Contact Information: www.ncqa.org</p>	<p>http://www.cms.gov/QualityMeasures/03_ElectronicSpecifications.asp#TopOfPage</p>

⁴In the event that new clinical quality measures are not adopted by 2013, the clinical quality measures in this Table would continue to apply.

