CARDIOLOGY 2017 - 18

CARDIOLOGY 201		ure Ni	ımber								Data Submis			ssion Method(
Measure Title	eMeasure ID	eMea sure NQF	NQF	Qual ity No. (Q#)	Measure Description	NQS Domain	Measure Type	High Prio rity	Appr opri ate Use	Primary Measure Steward	Clai ms	CSV	EHR	CMS Web Inter face	Ad min Clai ms	istr	
Heart Failure (HF): Angiotensin- Converting Enzyme (ACE) Inhibitor or Angiotensin Receptor Blocker (ARB) Therapy for Left Ventricular Systolic Dysfunction (LVSD)	CMS135v5	2907	0081	005	Percentage of patients aged 18 years and older with a diagnosis of heart failure (HF) with a current or prior left ventricular ejection fraction (LVEF) < 40% who were prescribed ACE inhibitor or ARB therapy either within a 12 month period when seen in the outpatient setting OR at each hospital discharge	Effective Clinical Care	Process			Physician Consortium for Performance Improvement	-	-	X	1	-	х	
Coronary Artery Disease (CAD): Antiplatelet Therapy	N/A	N/A	0067	006	Percentage of patients aged 18 years and older with a diagnosis of coronary artery disease (CAD) seen within a 12 month period who were prescribed aspirin or clopidogrel	Effective Clinical Care	Process			American Heart Association'	-		1	-	-	х	
Coronary Artery Disease (CAD): Beta-Blocker Therapy-Prior Myocardial Infarction (MI) or Left Ventricular Systolic Dysfunction (LVEF <40%)	CMS145v5	N/A	0070	007	Percentage of patients aged 18 years and older with a diagnosis of coronary artery disease seen within a 12 month period who also have a prior MI or a current or prior LVEF <40% who were prescribed betablocker therapy	Effective Clinical Care	Process			Physician Consortium for Performance Improvement	-	-	X	1	-	х	
Heart Failure (HF): Beta-Blocker Therapy for Left Ventricular Systolic Dysfunction (LVSD)	CMS144v5	2908	0083	008	Percentage of patients aged 18 years and older with a diagnosis of heart failure (HF) with a current or prior left ventricular ejection fraction (LVEF) < 40% who were prescribed beta-blocker therapy either within a 12 month period when seen in the outpatient setting OR at each hospital discharge	Effective Clinical Care	Process			Physician Consortium for Performance Improvement	-	-	X	-	-	х	
Care Plan	N/A	N/A	0326	047	Percentage of patients aged 65 years and older who have an advance care plan or surrogate decision maker documented in the medical record or documentation in the medical record that an advance care plan was discussed but the patient did not wish or was not able to name a surrogate decision maker or provide an advance care plan	Communicati on and Care Coordination	Process	х		National Committee for Quality Assurance	Х	-	1	-	-	Х	
Coronary Artery Disease (CAD): Angiotensin-Converting Enzyme (ACE) Inhibitor or Angiotensin Receptor Blocker (ARB) Therapy- Diabetes or Left Ventricular Systolic Dysfunction (LVEF < 40%)	N/A	N/A	0066	118	Percentage of patients aged 18 years and older with a diagnosis of coronary artery disease seen within a 12 month period who also have diabetes OR a current or prior Left Ventricular Ejection Fraction (LVEF) < 40% who were prescribed ACE inhibitor or ARB therapy	Effective Clinical Care	Process			American Heart Association	-	-	'	-	-	Х	
Preventive Care and Screening: Body Mass Index (BMI) Screening and Follow-Up Plan	CMS69v5	N/A	0421	128	Percentage of patients aged 18 years and older with a BMI documented during the current encounter or during the previous six months AND with a BMI outside of normal parameters, a follow-up plan is documented during the encounter or during the previous six months of the current encounter Normal Parameters: Age 18 years and older BMI => 18.5 and < 25 kg/m2	Community/ Population Health	Process			Centers for Medicare & Medicaid Services	X	-	X	X	-	X	

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Documentation of Current Medications in the Medical Record	CMS68v6	N/A	0419	130	Percentage of visits for patients aged 18 years and older for which the eligible professional attests to documenting a list of current medications using all immediate resources available on the date of the encounter. This list must include ALL known prescriptions, over-the-counters, herbals, and vitamin/mineral/dietary (nutritional) supplements AND must contain the medications' name, dosage, frequency and route of administration.	Patient Safety	Process	X		Centers for Medicare & Medicaid Services	X	1	X	-	-	X
Ischemic Vascular Disease (IVD): Use of Aspirin or Another Antiplatelet	CMS164v5	N/A	0068	204	Percentage of patients 18 years of age and older who were diagnosed with acute myocardial infarction (AMI), coronary artery bypass graft (CABG) or percutaneous coronary interventions (PCI) in the 12 months prior to the measurement period, or who had an active diagnosis of ischemic vascular disease (IVD) during the measurement period, and who had documentation of use of aspirin or another antiplatelet during the measurement period.	Effective Clinical Care	Process			National Committee for Quality Assurance	Х	1	X	X	-	X
Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention	CMS138v5	N/A	0028	226	Percentage of patients aged 18 years and older who were screened for tobacco use one or more times within 24 months AND who received cessation counseling intervention if identified as a tobacco user	Community/ Population Health	Process			Physician Consortium for Performance Improvement	Х	1	X	X	1	Х
Controlling High Blood Pressure	CMS165v5	N/A	0018	236	Percentage of patients 18-85 years of age who had a diagnosis of hypertension and whose blood pressure was adequately controlled (<140/90mmHg) during the measurement period	Effective Clinical Care	Interme diate Outcome	х		National Committee for Quality Assurance	Х	1	X	X	-	Х
Preventive Care and Screening: Screening for High Blood Pressure and Follow-Up Documented	CMS22v5	N/A	N/A	317	Percentage of patients aged 18 years and older seen during the reporting period who were screened for high blood pressure AND a recommended follow-up plan is documented based on the current blood pressure (BP) reading as indicated	Community/ Population Health	Process			Centers for Medicare & Medicaid Services	Х	1	X	-	-	х
Cardiac Stress Imaging Not Meeting Appropriate Use Criteria: Preoperative Evaluation in Low Risk Surgery Patients	N/A	N/A	N/A	322	Percentage of stress single-photon emission computed tomography (SPECT) myocardial perfusion imaging (MPI), stress echocardiogram (ECHO), cardiac computed tomography angiography (CCTA), or cardiac magnetic resonance (CMR) performed in low risk surgery patients 18 years or older for preoperative evaluation during the 12-month reporting period	Efficiency and Cost Reduction	Efficienc y	х	х	American College of Cardiology	-	1	-	-	-	х
Cardiac Stress Imaging Not Meeting Appropriate Use Criteria: Routine Testing After Percutaneous Coronary Intervention (PCI)	N/A	N/A	N/A	323	Percentage of all stress single-photon emission computed tomography (SPECT) myocardial perfusion imaging (MPI), stress echocardiogram (ECHO), cardiac computed tomography angiography (CCTA), and cardiovascular magnetic resonance (CMR) performed in patients aged 18 years and older routinely after percutaneous coronary intervention (PCI), with reference to timing of test after PCI and symptom status	Efficiency and Cost Reduction	Efficienc y	Х	Х	American College of Cardiology	-	ı	-	-	-	X

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Cardiac Stress Imaging Not Meeting Appropriate Use Criteria: Testing in Asymptomatic, Low- Risk Patients	N/A	N/A	N/A	324	Percentage of all stress single-photon emission computed tomography (SPECT) myocardial perfusion imaging (MPI), stress echocardiogram (ECHO), cardiac computed tomography angiography (CCTA), and cardiovascular magnetic resonance (CMR) performed in asymptomatic, low coronary heart disease (CHD) risk patients 18 years and older for initial detection and risk assessment	Efficiency and Cost Reduction	Efficienc y	x	x	American College of Cardiology	,	1	-	,	-	X
Atrial Fibrillation and Atrial Flutter: Chronic Anticoagulation Therapy	N/A	N/A	1525	326	Percentage of patients aged 18 years and older with a diagnosis of nonvalvular atrial fibrillation (AF) or atrial flutter whose assessment of the specified thromboembolic risk factors indicate one or more highrisk factors or more than one moderate risk factor, as determined by CHADS2 risk stratification, who are prescribed warfarin OR another oral anticoagulant drug that is FDA approved for the prevention of thromboembolism	Effective Clinical Care	Process			American College of Cardiology	Х	1	-	,	-	х
Closing the Referral Loop: Receipt of Specialist Report	CMS50v5	N/A	N/A	374	Percentage of patients with referrals, regardless of age, for which the referring provider receives a report from the provider to whom the patient was referred	Communicati on and Care Coordination	Process	х		Centers for Medicare & Medicaid Services	ı		X	,	-	-
Tobacco Use and Help with Quitting Among Adolescents	N/A	N/A	N/A	402	The percentage of adolescents 12 to 20 years of age with a primary care visit during the measurement year for whom tobacco use status was documented and received help with quitting if identified as a tobacco user	Community/ Population Health	Process			National Committee for Quality Assurance	-	-	-	-	-	Х
Preventive Care and Screening: Unhealthy Alcohol Use: Screening & Brief Counseling	N/A	N/A	2152	431	Percentage of patients aged 18 years and older who were screened for unhealthy alcohol use using a systematic screening method at least once within the last 24 months AND who received brief counseling if identified as an unhealthy alcohol user	Community/ Population Health	Process			Physician Consortium for Performance Improvement	1	1	-	,	-	X
Statin Therapy for the Prevention and Treatment of Cardiovascular Disease	N/A	N/A	N/A	438	Percentage of the following patients—all considered at high risk of cardiovascular events—who were prescribed or were on statin therapy during the measurement period: • Adults aged ≥ 21 years who were previously diagnosed with or currently have an active diagnosis of clinical atherosclerotic cardiovascular disease (ASCVD); OR • Adults aged ≥21 years who have ever had a fasting or direct low-density lipoprotein cholesterol (LDL-C) level ≥ 190 mg/dL or were previously diagnosed with or currently have an active diagnosis of familial or pure hypercholesterolemia; OR • Adults aged 40-75 years with a diagnosis of diabetes with a fasting or direct LDL-C level of 70-189 mg/dL	Effective Clinical Care	Process			Centers for Medicare & Medicaid Services	-	-	-	х	-	X