RULE CATALOG

GIC Physician Quality Profiler (PQP)

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Behavioral Health

Depression avoid anxiolytic without antidepressant (222)

Measure Description:

This measure identifies patients newly diagnosed with depression during the first 9 months of the measurement year who have not received an anti-anxiety agent as the sole treatment for their depression.

Numerator: Patients in the denominator who have not received an anti-anxiety agent as sole treatment for their depression between 30 days before the onset of depression and 90 days after that.

Denominator: Patients with newly diagnosed depression during the first 9 months of the measurement year.

Specialties:

*Family Practice,*General Practice,*Internal Medicine,*Psychiatry

Citations:

Practice guideline for the treatment of patients with major depressive disorder, Third Ed. American Psychiatric Association. Oct 2010.

HEDIS antidepressant med at least 12 weeks (397)

Measure Description:

The percentage of members 18 years of age and older with a diagnosis of major depression who were treated with antidepressant medication, and who remained on medication for at least 12 weeks of a 114-day period following the earliest dispensing event.

Numerator: Patients in the denominator who were maintained on antidepressant therapy for at least 84 days in the 114-day period following start of antidepressant.

Denominator: Patients with at least one dispensing event for an antidepressant medication during the 12-month window starting on May 1 of the year prior to the measurement year and ending on April 30 of the measurement year, with a diagnosis of major depression within 60 days from the earliest dispensing event.

Specialties:

*Family Practice,*General Practice,*Internal Medicine,*Psychiatry

Citations:

National Committee for Quality Assurance. HEDIS 2016. Washington, DC: National Committee for Quality Assurance. Technical Specifications Vol 2, 2015.

HEDIS antidepressant med at least 6 months (388)

Measure Description:

The percentage of members 18 years of age and older with a diagnosis of major depression who were treated with antidepressant medication, and who remained on medication for at least 180 days of a 231-day period following the earliest dispensing event.

Numerator: Patients in the denominator who remained on medication for at least 180 days of a 231-day period following the start of an antidepressant.

Denominator: Patients with at least one dispensing event for an antidepressant medication during the 12-month window starting on May 1 of the year prior to the measurement year and ending on April 30 of the measurement year, with a diagnosis of major depression within 60 days from the earliest dispensing event.

Specialties:

*Family Practice,*General Practice,*Internal Medicine,*Psychiatry

Citations:

National Committee for Quality Assurance. HEDIS 2016. Washington, DC: National Committee for Quality Assurance. Technical Specifications Vol 2, 2015.

New bipolar disorder on antimanic agent (NQF) (2432)

Measure Description:

This measure identifies the percentage of patients with newly diagnosed bipolar disorder who have received at least 1 prescription for a mood-stabilizing agent during the measurement year.

Numerator: Patients in the denominator who have received at least 1 prescription for a mood-stabilizing agent during the measurement year.

Denominator: Patients newly diagnosed as having bipolar disorder earlier than 30 days before the end of the measurement year.

Specialties:

*Family Practice,*General Practice,*Internal Medicine,*Psychiatry

Citations:

American Psychiatric Association. Practice guideline for the treatment of patients with bipolar disorder (revision). Am J Psychiatry. 2002; 159(Suppl 4):1-50.

Chou JC, Fazzio L. Maintenance treatment of bipolar disorder: Applying research to clinical practice. J Psychiatr Pract. 2006; 12:283-299.

HEDIS ADHD med follow-up visit within 30 days (3804)

Measure Description:

This measure identifies patients age 6 to 12 years with an ambulatory prescription dispensed for attention-deficit/hyperactivity disorder (ADHD) medication who had one follow-up visit during the 30-day initiation period.

Numerator: Patients from the denominator with one ambulatory follow-up visit within 30 days after the index prescription start date.

Denominator: Patients age 6 to 12 years as of the index prescription episode start date who were dispensed an ADHD medication during the 12-month intake period (intake period occurs before the last 8 months of the measurement year). Measure excludes patients with any claims history for narcolepsy or inpatient admissions for other mental health or substance abuse admissions.

Specialties:

*Family Practice,*General Practice,*Pediatrics,*Psychiatry

Citations:

National Committee for Quality Assurance. HEDIS 2016. Washington, DC: National Committee for Quality Assurance. Technical Specifications Vol 2, 2015.

HEDIS ADHD med follow-up visits within 9 months (3812)

Measure Description:

This measure identifies patients age 6 to 12 years with an ambulatory prescription dispensed for attention-deficit/hyperactivity disorder (ADHD) medication who had one follow-up visit during the 30-day initiation period and at least 2 follow-up visits with a practitioner within 270 days after the Initiation phase ended.

Numerator: Patients from the denominator with one ambulatory follow-up visit with a practitioner with prescribing authority within 30 days after the index prescription start date AND at least 2 follow-up visits (one may be via telephone) 31 to 300 days after the index start date.

Denominator: Patients age 6 to 12 years as of the index prescription start date who were dispensed an ADHD medication during the 12-month intake period prior to the last 10 months of the measurement year, excluding patients with any claims history for narcolepsy.

Specialties:

*Family Practice,*General Practice,*Pediatrics,*Psychiatry

Citations:

National Committee for Quality Assurance. HEDIS 2016. Washington, DC: National Committee for Quality Assurance. Technical Specifications Vol 2, 2015.

Cancer Surveillance

Breast cancer history annual surveillance (NQF) (11923)

Measure Description:

This measure identifies female patients with history of breast cancer who had breast cancer surveillance in the past 12 months.

Numerator: Patients in the denominator who had breast cancer surveillance during the measurement year.

Denominator: Female patients over 18 years old with a history of breast cancer, excluding patients with a history of mastectomies and bilateral breast implants.

Specialties:

*Family Practice,*General Practice,*General Surgery,*Internal Medicine,*Obstetrics & Gynecology

Citations:

Kattlove H, Winn RJ. Ongoing care of patients after primary treatment for their cancer. CA Cancer J Clin. 2003;53:172-196.

National Comprehensive Cancer Network Practice Guidelines in Oncology- Breast Cancer V2.2008. www.NCCN.org

Smigal C, et al. Trends in breast cancer by race and ethnicity: Update 2006. CA Cancer J Clin. 2006; 56:168-183.

Prostate cancer annual cancer surveillance (NQF) (10220)

Measure Description:

This measure identifies male patients with history of prostate cancer who have had their PSA monitored during the measurement year.

Numerator: Patients in the denominator who have had a PSA test or evidence of PSA monitoring during the measurement year

Denominator: Male patients diagnosed with prostate cancer anytime in the past prior to the measurement year, excluding patients actively being treated for prostate cancer during the measurement year.

Specialties:

*Family Practice,*General Practice,*Internal Medicine,*Urology

Citations:

National Comprehensive Cancer Network Practice Guidelines in Oncology - Prostate Cancer v1.2009.

Smith RA, et al. American Cancer Society guidelines for the early detection of cancer: Update of early detection guidelines for prostate, colorectal, and endometrial cancers. CA Cancer J Clin. 2001; 51:38-75.

Cervical cancer no screen <21 years old (23122)

Measure Description:

This measure identifies female patients age 16-20 who appropriately did not receive cervical cancer screening tests during the measurement year.

Numerator: Patients in the denominator who were appropriately not screened for cervical cancer during the measurement year.

Denominator: Female patients between the ages of 16 and 20.

Specialties:

*Family Practice,*General Practice,*Internal Medicine,*Obstetrics & Gynecology,*Pediatrics

Citations:

National Committee for Quality Assurance. HEDIS 2016. Washington, DC: National Committee for Quality Assurance. Technical Specifications Vol 2, 2015.

Cardiovascular Measures: Atrial Fibrillation

Atrial fibrillation and stroke risk on warfarin (NQF) (11941)

Measure Description:

This measure identifies patients with atrial fibrillation and other stroke risk who are taking oral anticoagulants.

Numerator: Patients in the denominator who have evidence of oral anticoagulants use with days supply extending within 30 days of the analysis date, or evidence of long-term anticoagulation in the past.

Denominator: Adult patients at least 25 years old with atrial fibrillation and major stroke risk factors including prior stroke, mitral stenosis, or mitral valve replacement, or 2 of the following: age > 75, diabetes, hypertension, or CHF.

Specialties:

*Cardiology,*Family Practice,*General Practice,*Internal Medicine

Citations:

Fuster V, et al. ACC/AHA/ESC 2006 guidelines for the management of patients with atrial fibrillation: A report of the American College of Cardiology/American Heart Association Task Force on Practice Guidelines and the European Society of Cardiology Committee for Practice Guidelines (Writing Committee to Revise the 2001 Guidelines for the Management of Patients With Atrial Fibrillation). Circulation. 2006; 114:e257-e354.

Estes III NA, et al. ACC/AHA/Physician Consortium 2008 clinical performance measures for adults with nonvalvular atrial fibrillation or atrial flutter. J Am Coll Cardiol. 2008;51:865-884.

New atrial fibrillation: Thyroid function test (1972)

Measure Description:

This measure identifies patients with new-onset atrial fibrillation during the measurement year who had a thyroid function test 6 weeks before or after the diagnosis of atrial fibrillation.

Numerator: Patients in the denominator who had a thyroid function test 6 weeks before or after the diagnosis of atrial fibrillation.

Denominator: Adult patients with a new diagnosis of atrial fibrillation during the first 10.5 months of the measurement year.

Specialties:

*Cardiology,*Family Practice,*General Practice,*Internal Medicine

Citations:

Fuster V, et al. ACC/AHA/ESC 2006 guidelines for the management of patients with atrial fibrillation: A report of the American College of Cardiology/American Heart Association Task Force on Practice Guidelines and the European Society of Cardiology Committee for Practice Guidelines (Writing Committee to Revise the 2001 Guidelines for the Management of Patients With Atrial Fibrillation). Circulation. 2006; 114:e257-e354.

Atrial fibrillation warfarin INR check (211)

Measure Description:

This measure identifies patients with atrial fibrillation diagnosed during the measurement year who started warfarin and who had an INR test within 2 weeks after the warfarin start date.

Numerator: Patients in the denominator who had an INR test within 2 weeks after the warfarin start date.

Denominator: Patients diagnosed with atrial fibrillation newly started on warfarin, excluding those with any ER visit or hospitalization 14 days after the warfarin start date.

Specialties:

*Cardiology,*Family Practice,*General Practice,*Internal Medicine

Citations:

Hirsch J, Fuster V, Ansell J, Halperin JL. American Heart Association/American College of Cardiology Foundation guide to warfarin therapy. Circulation. 2003; 107:1692-1711.

Hirsh J, et al. American College of Chest Physicians executive summary. Antithrombotic and thrombolytic therapy 8th Ed: ACCP Guidelines. Chest 2008;133:71S-105S.

Cardiovascular Measures: Heart Failure

Heart failure ACE-I or ARB use (NQF) (11931)

Measure Description:

This measure identifies patients with heart failure who are on an ACE-I or ARB medication.

Numerator: Patients in the denominator who are on an ACE-I or ARB medication in the last month of the measurement year.

Denominator: Patients 18 years or older who have a history of heart failure.

Specialties:

*Cardiology,*Family Practice,*General Practice,*Internal Medicine

Citations:

Hunt SA, et al. 2009 Focused update incorporated into the ACC/AHA 2005 guidelines for the diagnosis and management of heart failure in adults. A report of the American College of Cardiology Foundation/American Heart Association Task Force on Practice Guidelines: Developed in collaboration with the International Society for Heart and Lung Transplantation. Circulation. 2009;119:e391-e479.

Heart failure on beta blocker (NQF) (11933)

Measure Description:

This measure identifies patients with heart failure who are on a beta blocker.

Numerator: Patients in the denominator who were prescribed a beta blocker during the measurement year.

Denominator: Patients with heart failure diagnosed prior to the measurement year.

Specialties:

*Cardiology,*Family Practice,*General Practice,*Internal Medicine

Citations:

Hunt SA, et al. 2009 Focused update incorporated into the ACC/AHA 2005 guidelines for the diagnosis and management of heart failure in adults. A report of the American College of Cardiology Foundation/American Heart Association Task Force on Practice Guidelines: Developed in collaboration with the International Society for Heart and Lung Transplantation. Circulation. 2009;119:e391-e479.

CHF avoid DHP calcium channel blocker (175)

Measure Description:

This measure identifies patients with HF who are not taking a non-dihydropyridine calcium channel blocker (non-DHP CCB).

Numerator: Patients in the denominator who were not taking a non-DHP CCB during the last 6 months of the measurement year.

Denominator: Patients with HF diagnosed prior to the measurement year.

Specialties:

*Cardiology,*Family Practice,*General Practice,*Internal Medicine

Citations:

Hunt SA, et al. 2009 focused update incorporated into the ACC/AHA 2005 guidelines for the diagnosis and management of heart failure in adults: A report of the American College of Cardiology Foundation/American Heart Association Task Force on Practice Guidelines: Developed in collaboration with the International Society for Heart and Lung Transplantation. Circulation. 2009;119:e391-e479.

HF beta blocker adherence PQP (23129)

Measure Description:

This measure identifies patients 18 years and older with CHF who were prescribed beta blockers and remained on that therapy for at least 80 percent of the treatment period.

Numerator: Patients in the denominator who remained on beta blocker therapy for at least 80 percent of the treatment period.

Denominator: Patients age 18 and older with CHF who had at least one prescription for beta blockers during the measurement year.

Specialties:

*Cardiology,*Family Practice,*General Practice,*Internal Medicine

Citations:

Adapted from a 2015 Pharmacy Quality Alliance measure, http://www.pqaalliance.org

Cardiovascular Measures: Coronary Heart Disease

CHD post-MI on ACE inhibitor (NQF) (398)

Measure Description:

This measure identifies patients with ST elevation MI (STEMI), or non-ST elevation MI (NSTEMI) plus a history of hypertension, HF, and/or diabetes prior to the measurement year, and who are taking an ACE inhibitor or an ARB during the measurement year.

Numerator: Patients in the denominator with at least 1 prescription claim for an ACE inhibitor or an ARB during the measurement year.

Denominator: Patients with STEMI, or NSTEMI with hypertension, HF, and/or diabetes, prior to the measurement year who do not have a contraindication to ACEI/ARB therapy. Contraindications include hyperkalemia, active pregnancy, and renal artery stenosis.

Specialties:

*Cardiology,*Family Practice,*General Practice,*Internal Medicine

Citations:

Anderson JL, Adams CD, Antman EM. ACC/AHA 2007 guidelines for the management of patients with unstable angina/non-ST-elevation myocardial infarction: executive summary: A report of the American College of Cardiology/American Heart Association Task Force on Practice Guidelines (Writing Committee to Revise the 2002 Guidelines for the Management of Patients With Unstable Angina/Non-ST-Elevation Myocardial Infarction). Circulation. 2007;116:803-877.

Kushner FG, et al. ACC/AHA guidelines for the management of patients with ST-elevation myocardial infarction and ACC/AHA/SCAI guidelines on percutaneous coronary intervention: A report of the American College of Cardiology/American Heart Association Task Force on Practice Guidelines. Circulation. 2009; 120:2271-306.

CHD post-MI on beta blocker (157)

Measure Description:

This measure identifies patients diagnosed with acute myocardial infarction (AMI) prior to the measurement year who are taking a beta blocker during the measurement year.

Numerator: Patients in the denominator who have at least 1 prescription claim for a beta blocker during the measurement year.

Denominator: Patients with a diagnosis of AMI prior to the measurement year who do not have a contraindication to beta blockers. (Contraindications include history of asthma, presence of inhaled corticosteroids, hypotension, 2nd- or 3rd-degree heart block or sinus bradycardia with no history of pacemaker, and COPD.).

Specialties:

*Cardiology,*Family Practice,*General Practice,*Internal Medicine

Citations:

Anderson JL, Adams CD, Antman EM. ACC/AHA 2007 guidelines for the management of patients with unstable angina/non-ST-elevation myocardial infarction: executive summary: A report of the American College of Cardiology/American Heart Association Task Force on Practice Guidelines (Writing Committee to Revise the 2002 Guidelines for the Management of Patients With Unstable Angina/Non-ST-Elevation Myocardial Infarction). Circulation. 2007;116:803-877.

Antman EM, et al. ACC/AHA 2007 focused update of the ACC/AHA 2004 guidelines for the management of patients with ST-elevation myocardial infarction: A report of the ACC/AHA Task Force on Practice Guidelines. J Am Coll Cardiol. 2008; 51:210-247.

Bare metal stent antiplatelet within 30 days (2682)

Measure Description:

This measure identifies patients undergoing percutaneous coronary intervention (PCI) with placement of a bare metal intracoronary stent during the first 11 months of the measurement year, who had a prescription for an antiplatelet within 30 days after stent placement.

Numerator: Patients in the denominator with a prescription for an antiplatelet within 30 days following stent placement.

Denominator: Patients who underwent PCI with placement of a bare metal intracoronary stent, during the first 11 months of the measurement year, excluding those with contraindications to antiplatelets. Contraindications are approximated by a history within the past three years of peptic ulcer disease, intracranial hemorrhage, gastrointestinal bleeding, and hemorrhagic tendencies.

Specialties:

*Cardiology,*Family Practice,*General Practice,*Internal Medicine

Citations:

Levine GN et al. 2011 ACCF/AHA/SCAI guideline for percutaneous coronary intervention. A report of the American College of Cardiology Foundation/American Heart Association Task Force on Practice Guidelines and the Society for Cardiovascular Angiography and Interventions. J Am Coll Cardiol. 2011;58(24):e44-122.

Drug-eluting stent antiplatelet 3 months (NQF) (4141)

Measure Description:

This measure identifies patients undergoing percutaneous coronary intervention (PCI) with placement of a drug-eluting intracoronary stent during the first 9 months of the measurement year, who had consistent use of an antiplatelet prescription for 3 months following stent placement.

Numerator: Patients in the denominator who were taking an antiplatelet prescription consistently in the 3 months following placement of the drug-eluting intracoronary stent.

Denominator: Patients who underwent PCI with placement of a drug-eluting intracoronary stent, during the first 9 months of the measurement year, excluding those with contraindications to antiplatelets. Contraindications are approximated by a history within the past three years of peptic ulcer disease, intracranial hemorrhage, gastrointestinal bleeding, and hemorrhagic tendencies.

Specialties:

*Cardiology,*Family Practice,*General Practice,*Internal Medicine

Citations:

Kim B-K, et al. A new strategy for discontinuation of dual antiplatelet therapy: the RESET Trial (REal Safety and Efficacy of 3-month dual antiplatelet Therapy following Endeavor zotarolimus-eluting stent implantation; J Am Coll Cardiol. 2012; 60:1340-1348.

Valgimigli M, et al. Short- versus long-term duration of dual antiplatelet therapy after coronary stenting: A randomized multicentre trial. Circulation. 2012;125:2015-26.

HEDIS MI hospitalization beta blocker 6 months (383)

Measure Description:

The percentage of members 18 years of age and older during the measurement year who were hospitalized and discharged alive from 6 months prior to the measurement year to 6 months before the end of the measurement year with a diagnosis of AMI and who received persistent beta-blocker treatment for 6 months after discharge.

Numerator: Patients in the denominator who had 135 days supply of a beta blocker medication in the 6 months post-AMI discharge.

Denominator: Patients hospitalized and discharged with an AMI between July 1 of the year prior to the measurement year and June 30 of the measurement year, who do not have a contraindication to beta blockers. (Contraindications include history of asthma or use of asthma medications, hypotension, 2nd- or 3rd-degree heart block or sinus bradycardia with no history of pacemaker, and COPD.)

Specialties:

*Cardiology,*Family Practice,*General Practice,*Internal Medicine

Citations:

National Committee for Quality Assurance. HEDIS 2016. Washington, DC: National Committee for Quality Assurance. Technical Specifications Vol 2, 2015.

CHD statin prescription (23108)

Measure Description:

This measure identifies men 21-75 years and women 52-75 years of age during the measurement year who were identified as having clinical atherosclerotic cardiovascular disease (ASCVD) and who were dispensed at least moderate-intensity statin therapy during the measurement year.

Numerator: Patients in the denominator who had at least 1 prescription claim for a statin of moderate to high intensity during the measurement year.

Denominator: Male patients age 21-75 and female patients age 52-75 who were identified as having CHD during the measurement year.

Specialties:

*Cardiology,*Family Practice,*General Practice,*Internal Medicine

Citations:

National Committee for Quality Assurance. HEDIS 2016. Washington, DC: National Committee for Quality Assurance. Technical Specifications Vol 2, 2015.

CHD statin PDC 0.8 (23130)

Measure Description:

This measure identifies men 21-75 years of age and women 52-75 years of age during the measurement year who were identified as having clinical atherosclerotic cardiovascular disease (ASCVD) and who remained on at least moderate-intensity statin therapy for at least 80 percent of the treatment period.

Numerator: Patients in the denominator who were dispensed at least moderate-intensity statin therapy and remained on that therapy for at least 80 percent of the treatment period.

Denominator: Male patients age 21-75 and female patients age 52-75 who were identified as having ASCVD and were dispensed at least moderate-intensity statin therapy during the measurement year.

Specialties:

*Cardiology,*Family Practice,*General Practice,*Internal Medicine

Citations:

National Committee for Quality Assurance. HEDIS 2016. Washington, DC: National Committee for Quality Assurance. Technical Specifications Vol 2, 2015.

Cardiovascular Measures: Hypertension

New hypertension glucose test (152)

Measure Description:

This measure identifies patients with newly diagnosed hypertension during the measurement year with a lab claim for a serum glucose test at the time of diagnosis, if not done in the 6 months prior to diagnosis.

Numerator: Patients in the denominator who had a serum or plasma glucose test within 30 days after initial diagnosis of hypertension.

Denominator: Patients who meet criteria for newly diagnosed hypertension during the measurement year and who did not have a serum or plasma glucose test between 180 days and 31 days prior to diagnosis.

Specialties:

*Cardiology,*Family Practice,*General Practice,*Internal Medicine

Citations:

Chobanian AV, et al. The Seventh Report of the Joint National Committee on prevention, detection, and evaluation and treatment of high blood pressure. NHLBI writing team. Aug 2004. NIH Publication No. 04-5230.
American Diabetes Association. Standards of Medical Care in Diabetes – 2016. Diabetes Care Volume 39, S1, Jan 2016.

New hypertension potassium test (153)

Measure Description:

This measure identifies patients with newly diagnosed hypertension during the measurement year with a lab claim for a serum potassium test at the time of diagnosis, if not done in the 6 months prior to diagnosis.

Specialties:

*Cardiology,*Family Practice,*General Practice,*Internal Medicine

Citations:

Chobanian AV, et al. The Seventh Report of the Joint National Committee on prevention, detection, and evaluation and treatment of high blood pressure. NHLBI writing team. Aug 2004. NIH Publication No. 04-5230.

New hypertension lipid test (154)

Measure Description:

This measure identifies patients with newly diagnosed hypertension during the measurement year with a lab claim for a serum lipid panel test at the time of diagnosis, if not done in the year prior to diagnosis.

Numerator: Patients in the denominator who had a lipid panel test within 30 days after initial diagnosis of hypertension.

Denominator: Patients who meet criteria for newly diagnosed hypertension during the measurement year and who did not have a serum lipid panel test between 365 days and 31 days prior to diagnosis.

Specialties:

*Cardiology,*Family Practice,*General Practice,*Internal Medicine

Citations:

Chobanian AV, et al. The Seventh Report of the Joint National Committee on prevention, detection, and evaluation and treatment of high blood pressure. NHLBI writing team. Aug 2004. NIH Publication No. 04-5230.

Hypertension avoid SA DHP calcium channel blocker (174)

Measure Description:

This measure identifies the percentage of patients with hypertension diagnosed before the measurement year who had fewer than 2 prescription claims for short-acting dihydropyridine calcium channel blockers (SA-DHP-CCB) within the past 6 months.

Numerator: Patients in the denominator who had fewer than two prescription claims for SA-DHP-CCBs during the past 6 months.

Denominator: Patients with hypertension diagnosed before the measurement year.

Specialties:

*Cardiology,*Family Practice,*General Practice,*Internal Medicine

Citations:

Chobanian AV, et al. The Seventh Report of the Joint National Committee on prevention, detection, and evaluation and treatment of high blood pressure. NHLBI writing team. Aug 2004. NIH Publication No. 04-5230.

Furberg CD, Psaty BM, Meyer JV. Nifedipine. Dose-related increase in mortality in patients with coronary heart disease. Circulation. 1995; 92:1326-1331.

HTN Rx adherence PQP (23123)

Measure Description:

This measure identifies patients 18 years and older with hypertension (HTN) who were prescribed antihypertensive drugs and remained on that therapy for at least 80 percent of the treatment period.

Numerator: Patients in the denominator who remained on antihypertensive medication therapy for at least 80 percent of the treatment period.

Denominator: Patients age 18 and older with HTN who had at least one prescription for antihypertensive medication during the measurement year.

Specialties:

*Cardiology,*Family Practice,*General Practice,*Internal Medicine

Citations:

Adapted from a 2015 Pharmacy Quality Alliance measure, http://www.pqaalliance.org

Cardiovascular Measures: Other

AAA imaging follow-up (23105)

Measure Description:

This measure identifies patients 18 years of age or older undergoing endovascular abdominal aortic aneurysm repair (EVAR) who have at least one follow-up imaging study after 3 months and within 15 months of EVAR placement.

Numerator: Patients in the denominator who have at least one follow-up imaging study after 3 months and within 15 months of EVAR placement.

Denominator: Patients 18 years of age or older undergoing endovascular abdominal aortic aneurysm repair.

Specialties:

*Cardiology,*Diagnostic Radiology,*General Surgery,*Internal Medicine,*Interventional Radiology,*Vascular Surgery

Citations:

CMS Physician Quality Reporting System measure collection, http://www.cms.gov/pqri

Drug Safety Measures

Amiodarone baseline thyroid test (NQF) (412)

Measure Description:

This measure identifies patients who had a TSH baseline measurement at the start of amiodarone therapy.

Numerator: Patients in the denominator who had TSH baseline measurement within 60 days prior to or 30 days after the start of amiodarone.

Denominator: Adult patients who started amiodarone during the first 11 months of the measurement year, without evidence of total thyroidectomy in the past.

Specialties:

*Cardiology,*Family Practice,*General Practice,*Internal Medicine

Citations:

Baskin, HJ, et al; AACE Thyroid Task Force. American Association of Clinical Endocrinologists medical guidelines for clinical practice for the evaluation and treatment of hyperthyroidism and hypothyroidism. Endocrine Practice. 2002;8(6):457-469.

Batcher EL, Tang C. Thyroid Function abnormalities during amiodarone therapy for persistent atrial fibrillation. AJM. 2007. 120:880-885.

Siddoway LA. Amiodarone: Guidelines for use and monitoring. Am Fam Physician. 2003; 68:2189-2196.

Amiodarone annual thyroid test (20442)

Measure Description:

This measure identifies patients on chronic amiodarone therapy who had annual TSH measurement.

Numerator: Patients in the denominator who had annual TSH measurement during the measurement year.

Denominator: Adult patients on chronic amiodarone therapy for at least 18 months before the end of the measurement period, without evidence of total thyroidectomy in the past.

Specialties:

*Cardiology,*Family Practice,*General Practice,*Internal Medicine

Citations:

Baskin, HJ, et al; AACE Thyroid Task Force. American Association of Clinical Endocrinologists medical guidelines for clinical practice for the evaluation and treatment of hyperthyroidism and hypothyroidism. Endocrine Practice. 2002;8(6):457-469.

Batcher EL, Tang C. Thyroid Function abnormalities during amiodarone therapy for persistent atrial fibrillation. AJM. 2007. 120:880-885.

Siddoway LA. Amiodarone: Guidelines for use and monitoring. Am Fam Physician. 2003; 68:2189-2196.

HEDIS ACEI or ARB annual potassium and creatinine (395)

Measure Description:

This measure identifies patients age 18 or older who received at least a 180-day supply for ACE inhibitors or ARBs during the measurement year, and who had at least 1 serum potassium and a serum creatinine test during the measurement year.

Numerator: Patients in the denominator who had at least 1 serum potassium and 1 serum creatinine test during the measurement year.

Denominator: Patients who had at least a 180-day supply for ACE inhibitors or ARBs during the measurement year.

Specialties:

*Cardiology,*Family Practice,*General Practice,*Internal Medicine

Citations:

National Committee for Quality Assurance. HEDIS 2016. Washington, DC: National Committee for Quality Assurance. Technical Specifications Vol 2, 2015.

Digoxin annual potassium and creatinine (377)

Measure Description:

This measure identifies patients age 18 or older who had at least a 180-day supply for digoxin during the measurement year, and who had at least 1 serum potassium and 1 serum creatinine therapeutic monitoring test during the measurement year.

Numerator: Patients in the denominator who had at least 1 serum potassium and 1 serum creatinine test during the measurement year.

Denominator: Patients who had at least 180 days supply for digoxin during the measurement year.

Specialties:

*Cardiology,*Family Practice,*General Practice,*Internal Medicine

Citations:

Adapted from National Committee for Quality Assurance. HEDIS 2016. Washington, DC: National Committee for Quality Assurance. Technical Specifications Vol 2, 2015.

HEDIS diuretics annual potassium and creatinine (394)

Measure Description:

This measure identifies patients age 18 or older who had at least a 180-day supply for diuretics during the measurement year, and who had at least 1 serum potassium and 1 serum creatinine therapeutic monitoring test during the measurement year.

Numerator: Patients in the denominator who had at least 1 serum potassium and 1 serum creatinine therapeutic monitoring test during the measurement year.

Denominator: Patients who had at least a 180-day supply for diuretics during the measurement year.

Specialties:

*Cardiology,*Family Practice,*General Practice,*Internal Medicine

Citations:

National Committee for Quality Assurance. HEDIS 2016. Washington, DC: National Committee for Quality Assurance. Technical Specifications Vol 2, 2015.

Clozapine white blood cell count (401)

Measure Description:

This measure identifies the percentage of patients taking clozapine during the measurement year who have had a WBC test.

Numerator: Patients in the denominator who had at least 1 WBC test during the measurement year.

Denominator: Patients who were prescribed clozapine during the measurement year.

Specialties:

*Family Practice,*General Practice,*Internal Medicine,*Psychiatry

Citations:

Clozaril (clozapine) prescribing information. http://www.accessdata.fda.gov/drugsatfda_docs/label/2010/019758s062lbl.pdf

Gerson, SL, Meltzer, H. Mechanisms of clozapine-induced agranulocytosis. Drug Saf. 1992; 7(Suppl 1):17-25.

Lithium annual creatinine test (NQF) (2427)

Measure Description:

This measure identifies the percentage of patients taking lithium who have had at least one creatinine test after the earliest observed lithium prescription during the measurement year.

Numerator: Patients in the denominator who had at least 1 serum creatinine test after starting lithium during the measurement year.

Denominator: Patients who had at least a 180-day supply for lithium during the measurement year.

Specialties:

*Family Practice,*General Practice,*Internal Medicine,*Psychiatry

Citations:

American Psychiatric Association. Practice guideline for the treatment of patients with bipolar disorder (revision). Am J Psychiatry. 2002; 159(Suppl 4):1-50.

Freeman MP, Freeman SA. Lithium: clinical considerations in internal medicine. Am J Med. 2006; 119:478-481.

Lithium annual thyroid function test (NQF) (2428)

Measure Description:

This measure identifies the percentage of patients taking lithium who have had at least one thyroid function test after the earliest observed lithium prescription during the measurement year.

Numerator: Patients in the denominator who received a thyroid function test after the earliest observed lithium prescription during the measurement year.

Denominator: Patients who received at least a 292-day supply of lithium during the measurement year.

Specialties:

*Family Practice,*General Practice,*Internal Medicine,*Psychiatry

Citations:

American Psychiatric Association. Practice guideline for the treatment of patients with bipolar disorder (revision). Am J Psychiatry. 2002; 159(Suppl 4):1-50.

Freeman MP, Freeman SA. Lithium: Clinical considerations in internal medicine. Am J Med. 2006; 119:478-481.

Lithium annual drug level test (NQF) (2424)

Measure Description:

This measure identifies the percentage of patients taking lithium who have had at least one lithium level test after the earliest observed lithium prescription during the measurement year.

Numerator: Patients in the denominator who received a lithium level test after the earliest observed lithium prescription during the measurement year.

Denominator: Patients who received at least a 292-day supply of lithium during the measurement year.

Specialties:

*Family Practice,*General Practice,*Internal Medicine,*Psychiatry

Citations:

American Psychiatric Association. Practice guideline for the treatment of patients with bipolar disorder (revision). Am J Psychiatry. 2002; 159(Suppl 4):1-50.

Benign prostatic hypertrophy avoid anticholinergic (423)

Measure Description:

This measure identifies the percentage of male patients with benign prostatic hyperplasia (BPH) without claims for anticholinergic medication in the last 6 months of the measurement year.

Numerator: Patients in the denominator without prescriptions for anticholinergic medications in the last 6 months of the measurement year.

Denominator: Men with history of BPH, but without history of TURP procedure or radical prostatectomy.

Specialties:

*Family Practice,*General Practice,*Internal Medicine,*Urology

Citations:

Fick DM, et al. Updating the Beers criteria for potentially inappropriate medication use in older adults: Results of a U.S. consensus panel of experts. Arch Intern Med. 2003; 163:2716-2724. Erratum in Arch Intern Med 2004;164(3): 298.

HEDIS elderly with dementia avoid harmful meds (13650)

Measure Description:

This measure identifies patients with a history of dementia or dementia medications who have not been prescribed antiemetics, antipsychotics, benzodiazepines, tricyclic antidepressants, H2 receptor antagonists, nonbenzodiazepine hypnotics or anticholinergic agents.

Numerator: Patients without a prescription for antiemetics, antipsychotics, benzodiazepines, tricyclic antidepressants, H2 receptor antagonists, nonbenzodiazepine hypnotics or anticholinergic agents from the earliest identified date of dementia diagnosis or medication to December 31 of the current year.

Denominator: Patients over 65 years old with a diagnosis of dementia or a dementia medication from January 1 of the previous year to December 1 of the current year.

Specialties:

*Family Practice,*General Practice,*Internal Medicine

Citations:

National Committee for Quality Assurance. HEDIS 2016. Washington, DC: National Committee for Quality Assurance. Technical Specifications Vol 2, 2015.

HEDIS elderly chronic renal failure avoid harmful med (13649)

Measure Description:

This measure identifies patients with a history of chronic renal failure who have not been prescribed an NSAID or Cox-2 Selective NSAID.

Numerator: Patients without a prescription for a nonaspirin NSAID or a Cox-2 Selective NSAID from the earliest identified date of chronic renal failure to December 1 of the current year.

Denominator: Patients over 65 years old with a diagnosis of chronic renal failure from January 1 of the previous year to December 1 of the current year.

Specialties:

*Family Practice,*General Practice,*Internal Medicine,*Nephrology

Citations:

National Committee for Quality Assurance. HEDIS 2016. Washington, DC: National Committee for Quality Assurance. Technical Specifications Vol 2, 2015.

New start atypical antipsychotic diabetes screening (16869)

Measure Description:

This measure identifies patients of any age, including pediatric patients, with a new start of an atypical antipsychotic medication who have had a diabetes screening test since starting the medication.

Numerator: Patients with a screening test for hyperglycemia in the 16 weeks following the start of the atypical antipsychotic agent. Acceptable hyperglycemia tests fasting plasma glucose, HbA1c, or random plasma glucose.

Denominator: Patients newly started on an atypical antipsychotic agent with no atypical antipsychotic use in the previous 6 months. Targeted drugs include iloperidone, paliperidone, risperidone, clozapine, quetiapine, asenapine, olanzapine, aripiprazole, lurasidone, and ziprasidone.

Specialties:

*Family Practice,*General Practice,*Internal Medicine,*Psychiatry

Citations:

Haupt D, Newcomer J. Hyperglycemia and antipsychotic medications. J Clin Psychiatry 2001; 62(Suppl 27):15-26.

Taylor V, MacQueen G. Association between bipolar disorder and metabolic syndrome: A review. J Clin Psychiatry. 2006;67(7):1034-1041.

Cohn T, Sernyak M. Metabolic monitoring for patients treated with antipsychotic medications. Can J Psychiatry. 2006;51(8):492-501.

Warfarin 2 month prothrombin time test (NQF) (219)

Measure Description:

This measure identifies patients taking warfarin during the measurement year who had at least 1 PT/INR test within 60 days after the earliest detected warfarin prescription.

Numerator: Patients in the denominator who had a PT/INR test within 60 days after the earliest observed warfarin prescription during the measurement year.

Denominator: Patients who are taking warfarin during the measurement year, excluding those with any ER visit or hospitalization during the 60 days after the earliest observed warfarin prescription during the measurement year.

Specialties:

*Family Practice,*General Practice,*Internal Medicine

Citations:

Hirsh J, et al. American College of Chest Physicians executive summary. Antithrombotic and thrombolytic therapy 8th Ed: ACCP Guidelines. Chest 2008;133:71S-105S.

Endocrine Measures: Diabetes

DM and insulin use evidence of self monitoring (NQF) (10228)

Measure Description:

This measure identifies patients with diabetes taking insulin who have evidence of proper self-monitoring blood glucose testing during the measurement year.

Numerator: Patients in the denominator who filled a prescription for a glucometer, blood glucose test strips, or other supplies used for blood glucose self-monitoring, during the measurement year and the 3 months prior to the start of the measurement year.

Denominator: Patients between 18 and 75 years old with a diagnosis of diabetes or who took an oral hypoglycemic prescription during the measurement year or the year prior to the measurement year, who have also filled a prescription for insulin in the last 7 months of the measurement year.

Specialties:

*Endocrinology,*Family Practice,*General Practice,*Internal Medicine

Citations:

American Diabetes Association. Standards of Medical Care in Diabetes - 2008. Diabetes Care. 2008;31 (suppl 1):S12-54.

DM on meds had creatinine test (NQF) (11399)

Measure Description:

This measure identifies adults with diabetes who have had a serum creatinine test during the measurement year.

Numerator: Patients in the denominator who have had a serum creatinine test during the 15 months prior to the end of the measurement period.

Denominator: Patients between 18 and 75 years old with a diagnosis of diabetes or patients who have an oral hypoglycemic or insulin prescription during the measurement year or the year prior. Exclude members with at least 1 or more encounters during the

measurement year for polycystic ovaries, gestational diabetes, or steroid-induced diabetes.

Specialties:

*Endocrinology,*Family Practice,*General Practice,*Internal Medicine

Citations:

American Diabetes Association. Standards of Medical Care in Diabetes - 2011. Diabetes Care. 2011; 34(Suppl 1):S11-61.

HEDIS diabetes annual hemoglobin A1c (381)

Measure Description:

This measure identifies patients between 18 and 75 years old who have diabetes and who had at least 1 HbA1c test during the measurement year.

Numerator: Patients in the denominator who had at least 1 serum HbA1c test during the measurement year.

Denominator: Patients with diabetes diagnosed during the measurement year or the year prior to the measurement year, excluding members with a history of polycystic ovaries, or encounters for gestational diabetes or steroid-induced diabetes during the 2 years prior to the end of the measurement period.

Specialties:

*Endocrinology,*Family Practice,*General Practice,*Internal Medicine

Citations:

National Committee for Quality Assurance. HEDIS 2016. Washington, DC: National Committee for Quality Assurance. Technical Specifications Vol 2, 2015.

HEDIS diabetes annual nephropathy screening (382)

Measure Description:

This measure identifies patients between 18 and 75 years old who have diabetes and at least one nephropathy screening; or who had evidence of medical attention for existing nephropathy (diagnosis or treatment of nephropathy), who are taking ACE inhibitors or ARBs, or who have had at least one visit with a nephrologist.

Numerator: The number of patients from the denominator who during the measurement year had at least one test for nephropathy screening; or who had evidence of medical attention for existing nephropathy (diagnosis or treatment of nephropathy), who are taking ACE inhibitors or ARBs, or who have had at least one visit with a nephrologist.

Denominator: Patients with diabetes diagnosed during the measurement year or the year prior to the measurement year, excluding members with a history of polycystic ovaries, or encounters for gestational diabetes or steroid-induced diabetes during the 2 years prior to the end of the measurement period.

Specialties:

*Endocrinology,*Family Practice,*General Practice,*Internal Medicine

Citations:

National Committee for Quality Assurance. HEDIS 2016. Washington, DC: National Committee for Quality Assurance. Technical Specifications Vol 2, 2015.

New diabetes on metformin (2431)

Measure Description:

This measure identifies the percentage of patients newly diagnosed with diabetes type 2 who were treated with metformin within 3 months following diagnosis, excluding patients who were immediately started on insulin therapy.

Numerator: Patients in the denominator who have received at least 1 prescription claim for metformin from diabetes diagnosis to 90 days after diagnosis.

Denominator: Patients newly diagnosed with diabetes type 2 during the first 9 months of the measurement year, excluding those with insulin prescription claims.

Specialties:

*Endocrinology,*Family Practice,*General Practice,*Internal Medicine

Citations:

Nathan DM, et al. Medical management of hyperglycemia in type 2 diabetes: A consensus algorithm for the initiation and adjustment of therapy: a consensus statement from the American Diabetes Association and the European Association for the Study of Diabetes. Diabetes Care. 2009; 32:193-203.

DM Statin Rx PQP (23118)

Measure Description:

This measure identifies men 40-75 years of age and women 52-75 years of age with diabetes, who do not have clinical atherosclerotic cardiovascular disease (ASCVD) and who were dispensed a statin of any dosage intensity during the measurement year.

Numerator: Patients in the denominator who were dispensed a statin of any intensity during the measurement year.

Denominator: Men 40-75 years of age and women 52-75 years of age with diabetes.

Exclusions: Members with ASCVD, cirrhosis, end-stage renal disease, myalgia, myositis, myopathy, or rhabdomyolysis. The rule excludes members who were pregnant and those who were dispensed clomiphene during the measurement year or the year before the measurement year.

Specialties:

*Cardiology,*Endocrinology,*Family Practice,*Geriatric Medicine,*Internal Medicine

Citations:

National Committee for Quality Assurance. HEDIS 2016. Washington, DC: National Committee for Quality Assurance. Technical Specifications Vol 2, 2015.

DM Statin PDC 0.8 PQP (23115)

Measure Description:

This measure identifies patients with diabetes mellitus who were prescribed statins and remained on that therapy for at least 80 percent of the treatment period.

Numerator: Patients in the denominator who remained on statin therapy for at least 80 percent of the treatment period.

Denominator: Patients age 18 and older with diabetes mellitus who were prescribed statins during the measurement year.

Specialties:

*Cardiology,*Endocrinology,*Family Practice,*General Practice,*Internal Medicine

Citations:

2015 Pharmacy Quality Alliance measure, http://www.pqaalliance.org

DM non-insulin hypoglycemics PDC 0.8 (23114)

Measure Description:

This measure identifies patients with diabetes mellitus who were prescribed non-insulin hypoglycemic diabetic agents and remained on that therapy for at least 80 percent of the treatment period.

Numerator: Patients who remained on non-insulin hypoglycemic diabetic agent therapy for at least 80 percent of the treatment period.

Denominator: Patients age 18 and older with diabetes mellitus who were prescribed non-insulin hypoglycemic diabetic agents during the measurement year.

Specialties:

*Endocrinology,*Family Practice,*General Practice,*Internal Medicine

Citations:

2015 Pharmacy Quality Alliance measure, http://www.pqaalliance.org

DM ACE ARB PDC 0.8 (23113)

Measure Description:

This measure identifies patients with diabetes mellitus who were prescribed RAS agents and remained on that therapy for at least 80 percent of the treatment period.

Numerator: Patients who remained on RAS therapy for at least 80 percent of the treatment period.

Denominator: Patients age 18 and older with diabetes mellitus who were prescribed RAS agents during the measurement year.

Specialties:

*Endocrinology,*Family Practice,*General Practice,*Internal Medicine

Citations:

2015 Pharmacy Quality Alliance measure, http://www.pqaalliance.org

DM pediatric HbA1c PQP (23117)

Measure Description:

This measure identifies patients age 5-17 years with diabetes who had an HbA1c test during the measurement year.

Numerator: Patients in the denominator who had an HbA1c test during the measurement year.

Denominator: Patients age 5-17 years who have diabetes.

Specialties:

*Endocrinology,*Family Practice,*General Practice,*Pediatrics

Citations:

National Quality Forum. Measure steward: National Committee for Quality Assurance

DM eye exam HEDIS (23119)

Measure Description:

This measure identifies patients between 18 and 75 years old who have diabetes and who had a retinal eye exam from an eye care professional in the last 2 years.

Numerator: Patients in the denominator who had a retinal eye exam from an eye care professional in the last 2 years.

Denominator: Patients between the ages of 18 and 75 who have diabetes.

Specialties:

*Endocrinology,*Family Practice,*General Practice,*Internal Medicine

Citations:

National Committee for Quality Assurance. HEDIS 2016. Washington, DC: National Committee for Quality Assurance. Technical Specifications Vol 2, 2015.

Diabetes and Hypertension and CKD Patients on ACE-I or ARB (24845)

Measure Description:

This measure identifies patients with diabetes and hypertension and nephropathy who are taking an ACE inhibitor or ARB during the measurement year.

Numerator: Patients in the denominator who had at least 1 claim for an ACE inhibitor, ARB, or direct renin inhibitor.

Denominator: Patients with a diagnosis of diabetes (rule based) and hypertension (rule based) and chronic kidney disease (rule-based), who are age 18 or greater, and eligible for pharmacy benefits during the measurement year.

Specialties:

*Endocrinology

Citations:

Evidence-Based Guideline for the Management of High Blood Pressure in Adults - Joint National Committee, Feb 2014.

Endocrine Measures: Dyslipidemia

Lipid Rx noncompliance (NQF) (11373)

Measure Description:

This measure identifies patients on a lipid medication who have remained adherent to taking the medication regularly.

Numerator: Patients in the denominator who have taken their lipid-lowering medication at least 80% of the time during the 6-month period after the initial prescription fill date.

Denominator: Patients at least 19 years old with a diagnosis of hyperlipidemia who filled a prescription for a lipid-lowering medication sometime between 6 and 18 months before the end of the measurement year, and who had at least 60 days of medication supply in the 6 months following the earliest prescription fill in this time period.

Specialties:

*Cardiology,*Endocrinology,*Family Practice,*General Practice,*Internal Medicine

Citations:

ICSI. Health Care Guideline: Lipid Management in Adults. 2007 [cited January 9, 2008]; 10th edition:[Available from: http://www.icsi.org/lipid_management_3/lipid_management_in_adults_4.html.

Miller NH, et al., The multilevel compliance challenge: recommendations for a call to action. A statement for healthcare professionals. Circulation, 1997. 95(4):1085-90.

Third Report of the National Cholesterol Education Program (NCEP) Expert Panel on Detection, Evaluation, and Treatment of High Blood Cholesterol in Adults (Adult Treatment Panel III) final report. Circulation, 2002. 106(25):3143-421.

Dyslipidemia new med 3 month lipid panel (NQF) (185)

Measure Description:

This measure identifies patients who started lipid-lowering medication during the measurement year and had a lipid panel checked within 3 months after starting drug therapy.

Numerator: Patients in the denominator who had a serum lipid panel drawn within 3 months following start of lipid-lowering therapy.

Denominator: Patients newly started on lipid-lowering therapy during the first 9 months of the measurement year.

Specialties:

*Cardiology,*Endocrinology,*Family Practice,*General Practice,*Internal Medicine

Citations:

Grundy SM, Cleeman JI, Merz CN, et al. Implications of recent clinical trials for the National Cholesterol Education Program Adult Treatment Panel III guidelines. Circulation. 2004; 110:227-239.

NCEP Expert Panel on Detection, Evaluation, and Treatment of High Blood Cholesterol in Adults Final Report (ATP III), National Heart, Lung, and Blood Institute. Sept 2002. NIH Publication No. 02-5215, Bethesda, MD.

Endocrinology

Thyroid Nodule TSH PQP (24994)

Measure Description:

This rule identifies patients with a diagnosis of thyroid nodule(s) who had a TSH measurement 30 days before to 90 days after their initial diagnosis.

Numerator: Patients in the denominator who had at least 1 claim for an TSH level from 30 days before to 90 days after the thyroid nodule diagnosis.

Denominator: Patients age 18 or older who have a claim for a thyroid nodule 15 to 3 months before the analysis date

Specialties:

*Endocrinology

Citations:

Haugen BR et al. Thyroid. 2015 American Thyroid Association Management Guidelines for Adult Patients with Thyroid Nodules and Differentiated Thyroid Cancer: The American Thyroid Association Guidelines Task Force on Thyroid Nodules and Differentiated Thyroid Cancer. 2016 Jan;26(1):1-133.

Thyroid Nodule U/S PQP (25007)

Measure Description:

This rule identifies patients with a diagnosis of thyroid nodule(s) who had a thyroid sonogram performed 30 days before to 90 days after their initial diagnosis.

Numerator: Patients in the denominator who had at least 1 claim for a thyroid sonogram level 30 days before to 90 days after the thyroid nodule diagnosis.

Denominator: Patients age 18 or older who have a claim for a thyroid nodule 15 to 3 months before the analysis date.

Specialties:

*Endocrinology

Citations:

Haugen BR et al. Thyroid. 2015 American Thyroid Association Management Guidelines for Adult Patients with Thyroid Nodules and Differentiated Thyroid Cancer: The American Thyroid Association Guidelines Task Force on Thyroid Nodules and Differentiated Thyroid Cancer. 2016 Jan;26(1):1-133.

Gastroenterology

IBD and chronic steroid bone density test (413)

Measure Description:

This measure identifies patients with inflammatory bowel disease (Crohn's disease, ulcerative colitis) who have taken chronic steroids during the measurement year and have undergone a bone mineral density test within the past 2 years.

Numerator: Patients in the denominator who have undergone a bone mineral density test within the past 2 years.

Denominator: Patients with inflammatory bowel disease (Crohn's disease, ulcerative colitis) diagnosed before the measurement year, who have taken chronic steroids over 80% MPR during the first half of the measurement year.

Specialties:

*Family Practice,*Gastroenterology,*General Practice,*Internal Medicine

Citations:

Bernstein CN, Leslie WD, Leboff MS. AGA technical review on osteoporosis in gastrointestinal diseases. Gastroenterology. 2003; 124:795-841.

National Osteoporosis Foundation. Clinician's Guide to Prevention and Treatment of Osteoporosis. Washington, DC: National Osteoporosis Foundation; Jan 2010.

Hepatitis C viral load testing (NQF) (426)

Measure Description:

This measure identifies patients with Hepatitis C (HCV) who began HCV antiviral therapy during the measurement year and had HCV viral load testing prior to initiation of antiviral therapy.

Numerator: Patients in the denominator who had an HCV viral load test prior to initiation of antiviral therapy.

Denominator: HCV patients who started HCV antiviral therapy during the measurement year.

Specialties:

*Family Practice,*Gastroenterology,*General Practice,*Internal Medicine

Citations:

Dienstag, JL, McHutchison, JG. American Gastroenterological Association medical position statement on the management of hepatitis C. Gastroenterology. 2006; 130:225.

Ghany MG, et al.; American Association for the Study of Liver Diseases. Diagnosis, management, and treatment of hepatitis C: An update. Hepatology. 2009;49(4):1335-74.

Strader DB, et al. Diagnosis, management, and treatment of hepatitis C. Hepatology. 2004; 39:1147-1171.

Hepatitis C high risk needs screening (17915)

Measure Description:

This measure identifies patients at high risk for Hepatitis C (i.e., members who have HIV) who received an appropriate Hepatitis C screening test. The measure only considers a recent initial diagnosis of HIV to identify individuals at high risk of current infection with Hepatitis C virus (HCV). Consideration of other recognized risk factors is not feasible because information is not available concerning when the initial exposure occurred, and whether HCV testing had already been performed, preceding the time span covered by the administrative data set.

Numerator: Patients in the denominator who were screened for Hepatitis C during the measurement year.

Denominator: Patients at least 18 years with HIV diagnosed prior to the measurement year.

Specialties:

*Family Practice,*Gastroenterology,*General Practice,*Internal Medicine

Citations:

Ghany MG, et al.; American Association for the Study of Liver Diseases. Diagnosis, management, and treatment of hepatitis C: An update. Hepatology. 2009;49(4):1335-74.

No colorectal cancer screening > 85 (17914)

Measure Description:

This measure identifies patients 86 years or older who did not receive an inappropriate colorectal cancer screening.

Numerator: Patients in the denominator who did not receive an inappropriate colorectal cancer screening.

Denominator: Patients age 86 years or older.

Specialties:

*Gastroenterology

Citations:

U.S. Preventive Services Task Force. Guide to Clinical Preventive Services: 2010-11. Agency for Healthcare Research and Quality. http://www.ahrq.gov/clinic/pocketgd1011/

Gynecology

Endometrial ablation appropriate prior workup (NQF) (10217)

Measure Description:

This measure identifies female patients who have had appropriate endometrial sampling performed prior to undergoing an endometrial ablation procedure.

Numerator: Patients in the denominator who received endometrial sampling or hysteroscopy with biopsy during the 12-month period prior to the date of endometrial ablation.

Denominator: Female patients who had an endometrial ablation procedure during the measurement year.

Specialties:

*Obstetrics & Gynecology,*Gynecology

Citations:

Endometrial Ablation. ACOG Practice Bulletin 2007 [cited 2007 August 1, 2007].

McCausland AM, McCausland VM. Long-term complications of endometrial ablation: Cause, diagnosis, treatment, and prevention. J Minim Invasive Gynecol. 2007. 14(4):399-406.

Hematology Measures

Pulmonary embolism antithrombotic med (NQF) (424)

Measure Description:

This measure identifies patients with pulmonary embolism (PE) on anticoagulation for at least 3 months after the diagnosis.

Numerator: Patients in the denominator who had at least 3 months of oral anticoagulation after the event or patients showing compliance with anticoagulation therapy as indicated by a home PT monitoring device or multiple instances of prothrombin time testing over the 3-month period.

Denominator: Patients diagnosed with a PE more than 3 months prior to the end of the measurement year, who do not have contraindications to oral anticoagulation therapy. and who do not have an IVC filter in the 90 days after the onset of PE. Contraindications include: evidence of eye surgery, GI bleed, aortic dissection, cerebral aneurysm, pericarditis, bacterial endocarditis, pregnancy, bleeding diatheses, or head trauma during or 1 year prior to the measurement year.

Specialties:

*Family Practice,*General Practice,*Hematology & Oncology,*Internal Medicine,*Pulmonary Disease

Citations:

Hirsh J, et al. American College of Chest Physicians executive summary. Antithrombotic and thrombolytic therapy 8th Ed: ACCP Guidelines. Chest 2008;133:71S-105S.

Deep vein thrombosis antithrombotic med (NQF) (425)

Measure Description:

This measure identifies patients with lower extremity deep vein thrombosis (DVT) on anticoagulation for at least 3 months after diagnosis.

Numerator: Patients in the denominator who had at least 3 months of oral anticoagulation after the event or patients showing compliance with anticoagulation therapy as indicated by a Home PT Monitoring device or multiple instances of prothrombin time testing over the 3-month period.

Denominator: Patients diagnosed with a lower extremity DVT more than 3 months prior to the end of the measurement year, who do not have contraindications to oral anticoagulation therapy and who do not have an IVC filter in the 90 days after the onset of PE. Contraindications include: evidence of eye surgery, GI bleed, aortic dissection, cerebral aneurysm, pericarditis, bacterial endocarditis, pregnancy, bleeding diatheses, or head trauma during the measurement year or 1 year prior to the measurement year.

Specialties:

*Family Practice,*General Practice,*Hematology & Oncology,*Internal Medicine

Citations:

Hirsh J, et al. American College of Chest Physicians executive summary. Antithrombotic and thrombolytic therapy 8th Ed: ACCP Guidelines. Chest 2008;133:71S-105S.

Nephrology

Chronic kidney disease need annual lipid test (NQF) (11382)

Measure Description:

This measure identifies patients with chronic kidney disease who have been screened for dyslipidemia.

Numerator: Patients in the denominator who have had a lipid profile during the measurement year.

Denominator: Patients at least 12 years old who have been diagnosed with chronic kidney disease.

Specialties:

*Family Practice,*General Practice,*Internal Medicine,*Nephrology

Citations:

KDIGO guidelines for the evaluation and management of CKD. Found at: http://www.kdigo.org/clinical_practice_guidelines/ckd.php

Chronic kidney disease monitor calcium (NQF) (11378)

Measure Description:

This measure identifies patients with chronic kidney disease who are not on dialysis and who have had the appropriate monitoring of their calcium level.

Numerator: Patients in the denominator who have had a calcium level test within 12 months after the date of chronic kidney disease diagnosis.

Denominator: Patients with chronic kidney disease without dialysis during the year prior to the measurement year.

Specialties:

*Family Practice,*General Practice,*Internal Medicine,*Nephrology

Citations:

KDIGO Clinical Practice Guideline for the Diagnosis, Evaluation, Prevention, and Treatment of Chronic Kidney Disease-Mineral and Bone Disorder (CKD-MBD), Kidney International (2009) 76 (Suppl 113), S50-S99; doi:10.1038/ki.2009.192. Found at: http://www.kdigo.org/guidelines/mbd/index.html

Chronic kidney disease monitor parathyroid hormone (11374)

Measure Description:

This measure identifies patients with chronic kidney disease who are not on dialysis and who have had the appropriate monitoring of their parathyroid hormone (PTH) level.

Numerator: Patients who have had a PTH level test within 12 months after the date of chronic kidney disease diagnosis.

Denominator: Patients with chronic kidney disease stages 4-5 without dialysis during the year prior to the measurement year who also do not have history of parathyroidectomy at any time prior to the diagnosis of chronic kidney disease.

Specialties:

*Family Practice,*General Practice,*Internal Medicine,*Nephrology

Citations:

KDIGO Clinical Practice Guideline for the Diagnosis, Evaluation, Prevention, and Treatment of Chronic Kidney Disease-Mineral and Bone Disorder (CKD-MBD), Kidney International (2009) 76 (Suppl 113), S50-S99; doi:10.1038/ki.2009.192. Found at: http://www.kdigo.org/guidelines/mbd/index.html

Chronic kidney disease monitor phosphorus (NQF) (11379)

Measure Description:

This measure identifies patients with chronic kidney disease who are not on dialysis and who have had the appropriate monitoring for their blood phosphorus level annually.

Numerator: Patients in the denominator who have had a phosphorus level test within 12 months after the date of chronic kidney disease diagnosis.

Denominator: Patients with chronic kidney disease without dialysis during the year prior to the measurement year.

Specialties:

*Family Practice,*General Practice,*Internal Medicine,*Nephrology

Citations:

KDIGO Clinical Practice Guideline for the Diagnosis, Evaluation, Prevention, and Treatment of Chronic Kidney Disease-Mineral and Bone Disorder (CKD-MBD), Kidney International (2009) 76 (Suppl 113), S50-S99; doi:10.1038/ki.2009.192. Found at: http://www.kdigo.org/guidelines/mbd/index.html

Hypertension and CKD Patients on ACE-I or ARB (24846)

Measure Description:

This measure identifies patients with hypertension and nephropathy who are taking an ACE inhibitor or ARB during the measurement year.

Numerator: Patients in the denominator who had at least 1 claim for an ACE inhibitor, ARB, or direct renin inhibitor.

Denominator: Patients age 18 or older who have a diagnosis of hypertension (rule based) and chronic kidney disease (rule-based) and eligible for pharmacy benefits during the measurement year.

Specialties:

*Cardiology,*Family Practice,*General Practice,*Internal Medicine,*Nephrology

Citations:

Evidence-Based Guideline for the Management of High Blood Pressure in Adults - Joint National Committee, Feb 2014.

Neurology

Migraine had prophylactic medication (NQF) (11401)

Measure Description:

This measure identifies patients with migraines who frequently take acute (abortive) medications and who are on a prophylactic medication for migraine control.

Numerator: Patients in the denominator who have filled an anticonvulsant, beta-blocker, calcium channel blocker, or tricyclic antidepressant during the last 4 months of the measurement year and 3 months after the end of the measurement year.

Denominator: Patients 18 years or older diagnosed with migraine who are taking over 36 tablets of an oral triptan prescription, over 24 doses of subcutaneous triptan prescription, 24 spray bottles of nasal triptan Rx, 12.5ml of butorphanol tartrate, 12ml of dihydroergotamine mesylate, or 12 procedures for dihydroergotamine mesylate injections, 100 tablets of butalbital containing medication, or 150 capsules of midrin type medication, over the last 4 months of the measurement year.

Specialties:

*Family Practice,*General Practice,*Internal Medicine,*Neurology

Citations:

American Academy of Neurology. Practice parameter: evidence-based guidelines for migraine headaches (an evidence-based review). Report on the Quality Standards Subcommittee of the American Academy of Neurology. Neurology. 2000; 55:754-63.

Institute for Clinical Systems Improvement (ICSI). Health Care Guideline: Diagnosis and Treatment of Headache, Ninth Edition (Released Jan 2011). URL: http:www.icsi.org

New dementia thyroid and B12 tests (2686)

Measure Description:

This measure identifies the percentage of patients at least 50 years old newly diagnosed with dementia during the first 9 months of the measurement year who have received TSH and B12 testing from time of dementia diagnosis through the end of the measurement year.

Numerator: Patients in the denominator who have received TSH and B12 lab testing from time of dementia diagnosis through the end of the measurement year.

Denominator: Patients at least 50 years old newly diagnosed with dementia during the first 9 months of the measurement year.

Specialties:

*Family Practice,*General Practice,*Internal Medicine,*Neurology

Citations:

Knopman DS, DeKosky ST. Practice parameter: Diagnosis of dementia (an evidence-based review). Report of the Quality Standards Subcommittee of the American Academy of Neurology. Neurology. 2001; 56:1143-1153.

Rabins PV, Lyketsos CG, Steele CD. Practical dementia care. New York: Oxford University Press, 1999:46.

Santacruz KS, Swagerty D. Early diagnosis of dementia. Am Fam Physician. 2001; 63:703-14.

Ophthalmology

Cataract surgery and no post-op complication (4393)

Measure Description:

This measure identifies adult patients with a diagnosis of uncomplicated cataract who had cataract surgery during the measurement year and did not have any of a specified list of surgical procedures in the 30 days following cataract surgery, which would indicate the occurrence of any of the following major complications: retained nuclear fragments, endophthalmitis, dislocated or wrong power intraocular lens, retinal detachment, or wound dehiscence.

Specialties:

*Ophthalmology

Citations:

Eye Care Physician Performance Measurement Set. American Academy of Ophthalmology/Physician Consortium for Performance Improvement/ National Committee for Quality Assurance. Oct 2007.

Otolaryngology

Otitis media effusion no systemic antimicrobials (4396)

Measure Description:

This measure identifies patients age 2 months through 12 years with a diagnosis of otitis media with effusion (OME) during the measurement year who were appropriately not prescribed systemic antimicrobials.

Numerator: Patients from the denominator who did not receive systemic antimicrobial therapy for OME.

Denominator: All patients age 2 months through 12 years with a diagnosis of OME during the measurement year.

Specialties:

*Family Practice,*General Practice,*Otolaryngology,*Pediatrics

Citations:

Acute Otitis Externa (AOE)/Otitis Media with Effusion (OME) Physician Performance Measurement Set. American Academy of Otolaryngology - Head and Neck Surgery (AAO-HNS) Foundation/Physician Consortium for Performance Improvement. Mar 2007.

Acute otitis externa avoid systemic antibiotics (4397)

Measure Description:

This measure identifies patients age 2 years and older with a diagnosis of acute otitis externa (AOE) who were not prescribed systemic antimicrobial therapy within 7 days after the AOE episode.

Numerator: Patients from the denominator who did not receive systemic antimicrobial therapy within 7 days after the AOE episode.

Denominator: All patients age 2 years and older with a diagnosis of AOE during the measurement year.

Specialties:

*Family Practice,*General Practice,*Internal Medicine,*Otolaryngology,*Pediatrics

Citations:

Acute Otitis Externa (AOE)/Otitis Media with Effusion (OME) Physician Performance Measurement Set. American Academy of Otolaryngology - Head and Neck Surgery (AAO-HNS) Foundation/Physician Consortium for Performance Improvement. March 2007

Tympanostomy tube hearing test (NQF) (4399)

Measure Description:

This measure identifies patients age 2 months through 12 years with OME who received tympanostomy tube(s) insertion during the measurement year and had a hearing test performed 6 months prior to tube placement.

Numerator: Patients from the denominator who had their hearing tested at any time during the 6 month period preceding the tympanostomy procedure.

Denominator: Patients age 2 through 12 years old with OME who received tympanostomy tube(s) insertion during the measurement year.

Specialties:

*Family Practice,*General Practice,*Otolaryngology,*Pediatrics

Citations:

Acute Otitis Externa (AOE)/Otitis Media with Effusion (OME) Physician Performance Measurement Set. American Academy of Otolaryngology - Head and Neck Surgery (AAO-HNS) Foundation/Physician Consortium for Performance Improvement. March 2007.

Lieberthal AS, et al. Clinical Practice Guideline: The diagnosis and management of acute otitis media. Pediatrics 2013; 131:e964-e999.

Postoperative complications within one week of tonsillectomy (17912)

Measure Description:

This measure identifies patients who had a tonsillectomy during the measurement year and did not experience intraoperative complications during the procedure or postoperative complications within one week of the procedure.

Specialties:

*Otolaryngology

Citations:

Baugh RF, et al.; American Academy of Otolaryngology-Head and Neck Surgery Foundation. Clinical practice guideline: Tonsillectomy in children. Otolaryngol Head Neck Surg. 2011;144(1 Suppl):S1-30.

Postoperative complications within one week of septoplasty (17913)

Measure Description:

This measure identifies patients who had a septoplasty during the measurement year and did not experience intraoperative complications during the procedure or postoperative complications within one week of the procedure.

Specialties:

*Otolaryngology

Citations:

Baugh RF, et al.; American Academy of Otolaryngology-Head and Neck Surgery Foundation. Clinical practice guideline: Tonsillectomy in children. Otolaryngol Head Neck Surg. 2011;144(1 Suppl):S1-30.

Tonsillectomy No Perioperative Antibiotics PQP (24999)

Measure Description:

This rule identifies members with a tonsillectomy and/or adenoidectomy, who were appropriately not prescribed perioperative antibiotics.

Numerator: Patients in the denominator who were not dispensed an antibiotic within 3 days following the tonsillectomy.

Denominator: Patients age 1-17 years who have at least 1 claim for a tonsillectomy during the measurement year.

Specialties:

*Otolaryngology

Citations:

Baugh et al. Clinical practice guideline: tonsillectomy in children. Otolaryngol Head Neck Surg. 2011 Jan;144(1 Suppl):S1-30.

Prenatal Care Measures

Pregnant woman needs Hepatitis B screening (NQF) (11387)

Measure Description:

This measure identifies women who had Hepatitis B screening during pregnancy.

Numerator: Individuals in the denominator who had Hepatitis B screening during the 280-day period prior to delivery.

Denominator: Women who were pregnant during the measurement year.

Specialties:

*Family Practice,*General Practice,*Internal Medicine,*Obstetrics & Gynecology

Citations:

CDC STD Screening guidelines, 2010: http://www.cdc.gov/std/treatment/2010/specialpops.htm

U.S. Preventive Services Task Force. Screening for Hepatitis B Infection: Recommendation Statement. February 2004. Agency for Healthcare Research and Quality, Rockville, MD. http://www.ahrq.gov/clinic/3rduspstf/hepbscr/hepbrs.htm

Pregnant woman needs HIV screening (NQF) (11381)

Measure Description:

This measure identifies women who had a HIV test during pregnancy.

Numerator: Individuals in the denominator who had HIV testing during the 280-day period prior to delivery.

Denominator: Women who were pregnant during the measurement year.

Specialties:

*Family Practice,*General Practice,*Obstetrics & Gynecology

Citations:

ACOG Committee on Obstetric Practice. ACOG committee opinion number 304, November 2004. Prenatal and perinatal human immunodeficiency virus testing: expanded recommendations. Obstet Gynecol. 2004;104(5 Pt 1):1119-24.

CDC. Revised recommendations for HIV screening of pregnant women. MMWR 2001; 50(No. RR-19). Available at: http://www.cdc.gov.mmwr/. Accessed November 2005.

American Academy of Pediatrics and American College of Obstetricians and Gynecologists. Guidelines for Prenatal Care, 5th Edition. Elk Grove Village, IL, AAP/ACOG, 2002.

CDC STD Screening guidelines, 2010: http://www.cdc.gov/std/treatment/2010/specialpops.htm

U.S. Preventive Services Task Force. Screening for HIV: Recommendation Statement. Issued July 2005, amended April 2, 2007. AHRQ Publication No. 07-0597-EF-2. Agency

for Healthcare Research and Quality, Rockville, MD. http://www.ahrq.gov/clinic/uspstf05/hiv/hivrs.htm

Working Group on Antiretroviral Therapy and Medical Management of HIV-Infected Children. Guidelines for the Use of Antiretroviral Agents in Pediatric HIV Infection. October 26, 2006 1-126. Available at http://aidsinfo.nih.gov/ContentFiles/PediatricGuidelines.pdf. Accessed July 25, 2007

Pregnant woman needs syphilis screening (NQF) (11386)

Measure Description:

This measure identifies women who had syphilis screening during pregnancy.

Numerator: Individuals in the denominator who had syphilis screening during the 280-day period prior to delivery.

Denominator: Women who were pregnant during the measurement year.

Specialties:

*Family Practice,*General Practice,*Internal Medicine,*Obstetrics & Gynecology

Citations:

CDC STD Screening guidelines, 2010: http://www.cdc.gov/std/treatment/2010/specialpops.htm

Screening for Syphilis Infection, Topic Page. July 2004. U.S. Preventive Services Task Force. Agency for Healthcare Research and Quality, Rockville, MD. http://www.ahrq.gov/clinic/uspstf/uspssyph.htm

Preventive Health Measures: Women's Health

High risk cervical cancer screening (NQF) (168)

Measure Description:

This measure identifies women age 12 to 65 diagnosed with cervical dysplasia, cervical carcinoma-in-situ, or HIV/AIDS prior to the measurement year, and who still have a cervix, who had a cervical cancer screen during the measurement year.

Numerator: Patients in the denominator who had a cervical cancer screen during the measurement year.

Denominator: Women who are 12-65 years of age who have a diagnosis of cervical dysplasia, cervical carcinoma-in-situ, or HIV/AIDS diagnosed prior to the measurement year, and who still have a cervix. (Excludes women with a hysterectomy.)

Specialties:

*Family Practice,*General Practice,*Internal Medicine,*Obstetrics & Gynecology,*Pediatrics,*Gynecology

Citations:

American College of Obstetricians and Gynecologists. Guidelines for Women's Health Care. 2nd ed. Washington, DC: ACOG. 2002; 121-134, 140-141.

U.S. Preventive Services Task Force. Guide to Clinical Preventive Services: 2008. Agency for Healthcare Research and Quality. (Orig 2003 Release Date)

Cervical cancer screen 24-29 years of age (20542)

Measure Description:

This rule identifies women between 24-29 years of age who received one or more Pap tests during the measurement year or the two years prior to the measurement year.

Numerator: Patients in the denominator who received one or more Pap tests during the measurement year or the two years prior to the measurement year.

Denominator: Women who are 24-29 years of age as of the end of the measurement year who have a cervix. (Excludes women with a hysterectomy.)

Specialties:

*Family Practice,*General Practice,*Internal Medicine,*Obstetrics & Gynecology,*Gynecology

Citations:

National Committee for Quality Assurance. HEDIS 2016. Washington, DC: National Committee for Quality Assurance. Technical Specifications Vol 2, 2015.

Cervical cancer screen 35-64 years of age (183)

Measure Description:

This rule identifies women between 35 and 64 years of age who had a cervical cancer screening during the measurement year or the two years prior to the measurement year, or who had cervical cytology/HPV co-testing performed in the last 3 years.

Numerator: Patients in the denominator had a cervical cancer screening during the measurement year or the two years prior to the measurement year, or who had cervical cytology/HPV co-testing performed in the last 3 years.

Denominator: Women who are 35-64 years of age as of the end of the measurement year who have a cervix. (Excludes women with a hysterectomy.)

Specialties:

*Family Practice,*General Practice,*Internal Medicine,*Obstetrics & Gynecology,*Gynecology

Citations:

Adapted from the National Committee for Quality Assurance. HEDIS 2016. Washington, DC: National Committee for Quality Assurance. Technical Specifications Vol 2, 2015.

Chlamydia annual screening (384)

Measure Description:

This measure identifies women age 16 to 24 identified as sexually active who had at least 1 chlamydia test during the measurement year.

Numerator: Patients in the denominator who had 1 or more tests for chlamydia during the measurement year.

Denominator: Women 16-24 years of age who were identified as sexually active based on codes from claims during the measurement year that indicate pregnancy or abortion, as well as prescription claims for contraception.

Exclusion: The rule excludes members with menstrual disorders, polycystic ovaries or acne diagnoses. These diagnoses can explain the use of contraceptives in the absence of sexual activity.

Specialties:

*Family Practice,*General Practice,*Internal Medicine,*Obstetrics & Gynecology,*Pediatrics,*Gynecology

Citations:

Adapted from National Committee for Quality Assurance. HEDIS 2016. Washington, DC: National Committee for Quality Assurance. Technical Specifications Vol 2, 2015.

HEDIS breast cancer screening in past 2 years (182)

Measure Description:

This measure identifies women age 52-74 as of Dec 31st of the measurement year who had a mammogram during the measurement year or during the year prior to the measurement year.

Numerator: Patients in the denominator who had a mammogram during the measurement year or during year prior to the measurement year.

Denominator: Women who are 52-74 years of age by Dec 31st of the measurement year without evidence of history of breast cancer or mastectomy.

Specialties:

*Family Practice,*General Practice,*Internal Medicine,*Obstetrics & Gynecology,*Gynecology

Citations:

National Committee for Quality Assurance. HEDIS 2016. Washington, DC: National Committee for Quality Assurance. Technical Specifications Vol 2, 2015.

Preventive Health Measures: Well Child Visits

Age 0-1 year old appropriate office visits (5607)

Measure Description:

This measure identifies infants who have had at least 5 office visits during their first year of life.

Numerator: Patients in the denominator who have had at least 5 office visits.

Denominator: Children who turn 1 year old during the measurement year.

Specialties:

*Family Practice,*General Practice,*Pediatrics

Citations:

American Academy of Pediatrics and Bright Futures. Recommendations for Preventive Pediatric Health Care. 2008, American Academy of Pediatrics.

Age 1-3 years old appropriate office visits (5608)

Measure Description:

This measure identifies children who turned 3 years old during the measurement year and had at least 5 office visits from the age of 1 through 3.

Numerator: Patients in the denominator who have had at least 5 office visits from the age of 1 through 3.

Denominator: Children who turn 3 years old during the measurement year.

Specialties:

*Family Practice,*General Practice,*Pediatrics

Citations:

American Academy of Pediatrics and Bright Futures. Recommendations for Preventive Pediatric Health Care. 2008, American Academy of Pediatrics.

Age 3-11 years old appropriate office visits (7842)

Measure Description:

This measure identifies children whose 4th through 11th birthdays occur during the measurement year who have at least 1 office visit during the measurement year.

Numerator: Patients in the denominator who have had at least 1 office visit during the measurement year.

Denominator: Children who are at least 3 years old and less than 11 years old at the start of the measurement year.

Specialties:

*Family Practice,*General Practice,*Pediatrics

Citations:

American Academy of Pediatrics and Bright Futures. Recommendations for Preventive Pediatric Health Care. 2008, American Academy of Pediatrics.

Age 12-18 years old appropriate office visits (7843)

Measure Description:

This measure identifies children whose 12th through 18th birthdays occur during the measurement year who have at least one office visit during the measurement year.

Numerator: Patients in the denominator who have had at least one office visit during the measurement year.

Denominator: Children who are at least 11 years old and less than 18 years old at the start of the measurement year.

Specialties:

*Family Practice,*General Practice,*Pediatrics

Citations:

American Academy of Pediatrics and Bright Futures. Recommendations for Preventive Pediatric Health Care. 2008, American Academy of Pediatrics.

Pulmonary Measures: Asthma

Persistent asthma beta-2 agonist (228)

Measure Description:

This measure identifies patients age 5 or older with persistent asthma present during the first 6 months of the measurement year who have filled a prescription for a short-term beta-2 agonist inhaler within the last 2 years.

Numerator: Patients in the denominator who received a short-term beta-2 agonist inhaler medication anytime during the measurement year or the year prior to the measurement year.

Denominator: Patients with persistent asthma activity (based on NCQA/HEDIS definition) during the first 6 months of the measurement year.

Specialties:

*Allergy & Immunology,*Family Practice,*General Practice,*Internal Medicine,*Pediatrics,*Pulmonary Disease,*Pediatric Allergy,*Pediatric Pulmonology

Citations:

Global Strategy for Asthma Management and Prevention, Global Initiative for Asthma (GINA) 2008. Available from: http://www.ginasthma.org.

National Asthma Education and Prevention Program Expert Panel Report: Guidelines for the diagnosis and management of asthma update on selected topics-2002. J Allergy Clin Immunol. 2002; 110:S141-S219.

HEDIS persistent asthma appropriate med (2376)

Measure Description:

This measure identifies patients 5 to 64 years of age during the measurement year who were identified as having persistent asthma and who were appropriately prescribed controller medication during the measurement year.

Numerator: Patients in the denominator who were appropriately prescribed controller medication during the measurement year.

Denominator: Patients 5 to 64 years of age who have asthma.

Specialties:

*Allergy & Immunology,*Family Practice,*General Practice,*Internal Medicine,*Pediatrics,*Pulmonary Disease,*Pediatric Allergy,*Pediatric Pulmonology

Citations:

National Committee for Quality Assurance. HEDIS 2016. Washington, DC: National Committee for Quality Assurance. Technical Specifications Vol 2, 2015.

Asthma inappropriate ED use (17895)

Measure Description:

This measure identifies asthmatic patients who did not visit the Emergency Department (ED) for asthma related conditions during the measurement year.

Numerator: Patients in the denominator who did not visit the ED for asthma related conditions during the measurement year.

Denominator: Patients at least 5 years old or older who have asthma.

Specialties:

*Family Practice,*General Practice,*Internal Medicine,*Pediatrics,*Pulmonary Disease,*Pediatric Pulmonology

Citations:

NHLBI, National Asthma Education and Prevention Program. Expert Panel Report 3: Guidelines for the Diagnosis and Management of Asthma. 2007. www.nhlbi.nih.gov/guidelines/asthma/asthgdln.pdf.

Asthma spirometry to confirm diagnosis (17945)

Measure Description:

This measure identifies patients 11 years of age or older during the measurement year who have been newly diagnosed with asthma who received appropriate spirometry testing to confirm the diagnosis.

Numerator: Patients in the denominator who had a spirometry test either 2 years before or 6 months after the initial asthma diagnosis date.

Denominator: Patients 11 years of age or older as of December 31 of the measurement year with a new diagnosis of asthma from the 6 months preceding the measurement year through the first 6 months of the measurement year.

Specialties:

*Family Practice,*General Practice,*Internal Medicine,*Pediatrics,*Pulmonary Disease,*Pediatric Pulmonology

Citations:

National Heart, Lung, and Blood Institute, National Asthma Education and Prevention Program. Expert Panel Report 3: Guidelines for the Diagnosis and Management of Asthma. 2007.

Asthma needs periodic spirometry (17910)

Measure Description:

This measure identifies patients 10 years or older with a diagnosis of asthma at least two years ago who have had spirometry testing in the past two years.

Numerator: Patients in the denominator who had a spirometry test during the past two years.

Denominator: Patients turning 10 years of age or older during the measure year with asthma diagnosed at least two years ago.

Specialties:

*Family Practice,*General Practice,*Internal Medicine,*Pediatrics,*Pulmonary Disease,*Pediatric Pulmonology

Citations:

National Heart, Lung, and Blood Institute, National Asthma Education and Prevention Program. Expert Panel Report 3: Guidelines for the Diagnosis and Management of Asthma. 2007.

Asthma medication management 0.5 MPR (23120)

Measure Description:

This measure identifies members 5-85 years of age during the measurement year who were identified as having persistent asthma, and who remained on an asthma controller medication for at least 50% of their treatment period.

Numerator: Patients in the denominator who remained on an asthma controller medication for at least 50% of their treatment period (from the earliest prescription to the end of the measurement period).

Denominator: Patients between the ages of 5 and 85 as of the end of the measurement year who were identified as having persistent asthma during the measurement year and the year before the measurement year.

Specialties:

*Family Practice,*General Practice,*Internal Medicine,*Pulmonary Disease

Citations:

National Committee for Quality Assurance. HEDIS 2016. Washington, DC: National Committee for Quality Assurance. Technical Specifications Vol 2, 2015.

HEDIS Asthma Medication Ratio Adults PQP (25000)

Measure Description:

The measure identifies members 19-85 years of age who were identified as having persistent asthma and had a ratio of controller medications to total asthma medications of 0.50 or greater during the measurement year.

Numerator: Patients in the denominator whose ratio of controller medications (oral, subq, inhalers) to total asthma medications was 0.50 or greater during the measurement year.

Denominator: Patients age 19-85 as of the end of the measurement year who were identified as having persistent asthma during the measurement year and the year before the measurement year.

Specialties:

*Allergy & Immunology,*Family Practice,*General Practice,*Internal Medicine,*Pulmonary Disease

Citations:

National Committee for Quality Assurance. HEDIS 2016. Washington, DC: National Committee for Quality Assurance. Technical Specifications Vol 2, 2015.

HEDIS Asthma Medication Ratio Peds PQP (25022)

Measure Description:

The measure identifies members 5-18 years of age who were identified as having persistent asthma and had a ratio of controller medications to total asthma medications of 0.50 or greater during the measurement year.

Numerator: Patients in the denominator whose ratio of controller medications (oral, subq, inhalers) to total asthma medications was 0.50 or greater during the measurement year.

Denominator: Patients age 19-85 as of the end of the measurement year who were identified as having persistent asthma during the measurement year and the year before the measurement year.

Specialties:

*Allergy & Immunology,*Family Practice,*General Practice,*Internal Medicine,*Pediatrics,*Pulmonary Disease

Citations:

National Committee for Quality Assurance. HEDIS 2016. Washington, DC: National Committee for Quality Assurance. Technical Specifications Vol 2, 2015.

Pulmonary Measures: COPD

COPD on long acting bronchodilator (NQF) (11397)

Measure Description:

This measure identifies members who have had a COPD exacerbation and who were prescribed a long-acting bronchodilator medication in the last 6 months.

Numerator: Patients in the denominator on a long-acting bronchodilator in the last 6 months of the measurement year.

Denominator: Patients 40 years or older with COPD exacerbations in the measurement year.

Specialties:

*Family Practice,*General Practice,*Internal Medicine,*Pulmonary Disease

Citations:

Global Strategy for the Diagnosis, Management and Prevention of COPD, Global Initiative for Chronic Obstructive Lung Disease (GOLD) 2006. Available from: http://www.goldcopd.org

COPD spirometry to confirm diagnosis (NQF) (10216)

Measure Description:

This measure identifies patients age 40 or older who have been newly diagnosed with COPD who received appropriate spirometry testing to confirm the diagnosis.

Numerator: Patients in the denominator who had a spirometry test either 2 years before or 6 months after the initial COPD diagnosis date.

Denominator: Patients at least 42 years or older with a new diagnosis of COPD during the 12 month period starting 6 months prior to the measurement year to the first 6 months of the measurement year.

Specialties:

*Family Practice,*General Practice,*Internal Medicine,*Pulmonary Disease

Citations:

Institute for Clinical Systems Improvement (ICSI). Health Care Guideline: Chronic Obstructive Pulmonary Disease. Third edition, December 2003. Available at http://www.icsi.org. Accessed September 2004.

Mannino DM, et al. Chronic obstructive pulmonary disease surveillance - United States, 1971-2000. MMWR. 2002; 51(6):1-16.

National Heart, Lung, and Blood Institute/ World Health Organization. Global strategy for the diagnosis, management, and prevention of chronic obstructive pulmonary disease: Global Initiative for Chronic Obstructive Lung Disease (GOLD). Executive Summary, updated 2004. Available at http://www.goldcopd.com. Accessed September 2004.

Snow V, et al. Special report: The evidence base for management of acute exacerbations of COPD, Clinical Practice Guideline, Part 1. Chest 2001; 119: 1185-1189.

Asthma or COPD avoid beta-2 agonist overuse (225)

Measure Description:

This measure identifies patients with asthma or COPD who are not overusing beta-2 agonists.

Numerator: Patients in the denominator who have more than 12.86 days per canister equivalent of short acting B2 agonists.

Denominator: Patients age 18 or older with asthma or COPD.

Specialties:

*Family Practice,*General Practice,*Internal Medicine,*Pediatrics,*Pulmonary Disease,*Pediatric Pulmonology

Citations:

Global Initiative for Chronic Obstructive Lung Disease (GOLD), World Health Organization (WHO), National Heart, Lung and Blood Institute (NHLBI). Global strategy for the diagnosis, management, and prevention of chronic obstructive pulmonary disease. Bethesda, MD; 2005.

Global Strategy for Asthma Management and Prevention, Global Initiative for Asthma (GINA) 2008. Available from: http://www.ginasthma.org.

National Asthma Education and Prevention Program. National Asthma Education and Prevention Program Expert Panel Report: Guidelines for the diagnosis and management of asthma update on selected topics-2002. J Allergy Clin Immunol. 2002; 110:S141-S219.

HEDIS COPD corticosteroid post discharge (6747)

Measure Description:

This measure is used to assess the percentage of COPD exacerbations for members 40 years of age and older who had an acute inpatient discharge or Emergency Department (ED) encounter between January 1 to December 1 of the measurement year and who were dispensed a systemic corticosteroid within 14 days of the event.

Numerator: Patients from the denominator who were dispensed a prescription for systemic corticosteroid within 14 days after the COPD episode date.

Denominator: Patients 40 years of age or older as of January 1 of the measurement year with a COPD exacerbation as indicated by an acute inpatient discharge or ED encounter with a principal diagnosis of COPD.

Specialties:

*Family Practice,*General Practice,*Internal Medicine,*Pulmonary Disease

Citations:

National Committee for Quality Assurance. HEDIS 2016. Washington, DC: National Committee for Quality Assurance. Technical Specifications Vol 2, 2015.

HEDIS COPD bronchodilator post discharge (7304)

Measure Description:

This measure is used to assess the percentage of exacerbations for members 40 years of age and older who had an acute inpatient discharge or emergency department (ED) encounter between January 1 to December 1 of the measurement year and who were dispensed a bronchodilator within 30 days of the event.

Numerator: Patients from the denominator who were dispensed a prescription for a bronchodilator on or 30 days after the COPD episode date. Bronchodilators as per NCQA/HEDIS: anticholinergic agents (albuterol-ipratropium, ipratropium, tiotropium), beta 2-agonists (albuterol, arformoterol, budesonide-formoterol, fluticasone-salmeterol, formoterol, levalbuterol, metaproterenol, pirbuterol, salmeterol), methylxanthines (dyphylline-guaifenesin, guaifenesin-theophylline, potassium iodide-theophylline).

Denominator: Patients 40 years of age or older as of January 1 of the measurement year with a COPD exacerbation as indicated by an acute inpatient discharge or encounter with a principal diagnosis of COPD.

Specialties:

*Family Practice,*General Practice,*Internal Medicine,*Pulmonary Disease

Citations:

National Committee for Quality Assurance. HEDIS 2016. Washington, DC: National Committee for Quality Assurance. Technical Specifications Vol 2, 2015.

COPD inappropriate ED use (17911)

Measure Description:

This measure identifies COPD patients who did not visit the Emergency Department (ED) for asthma related conditions during the measurement year.

Numerator: Patients from the denominator who did not visit the ED for asthma related conditions during the measurement year.

Denominator: Patients age 18 or older who have asthma.

Specialties:

*Family Practice,*General Practice,*Internal Medicine,*Pulmonary Disease

Citations:

NHLBI, National Asthma Education and Prevention Program. Expert Panel Report 3: Guidelines for the Diagnosis and Management of Asthma. 2007. www.nhlbi.nih.gov/guidelines/asthma/asthgdln.pdf.

Pulmonary Measures: Other Respiratory

HEDIS pharyngitis appropriate testing (385)

Measure Description:

This measure identifies children 2-18 years of age who were diagnosed with pharyngitis prior to or during the measurement year, dispensed an antibiotic, and had a test for group A streptococcus for the episode.

Numerator: Patients in the denominator who had a test for group A streptococcus (strep) for the episode of pharyngitis.

Denominator: Children age 2 to 18 years who were diagnosed with pharyngitis and dispensed an antibiotic within 6 months prior to the measurement year or during the first 6 months of the measurement year.

Specialties:

*Family Practice,*General Practice,*Pediatrics

Citations:

National Committee for Quality Assurance. HEDIS 2016. Washington, DC: National Committee for Quality Assurance. Technical Specifications Vol 2, 2015.

HEDIS upper respiratory infection appropriate med (386)

Measure Description:

This measure identifies children age 3 months to 18 years who were diagnosed with an upper respiratory infection (URI) who did not receive an antibiotic prescription within 3 days after diagnosis.

Numerator: Patients in the denominator who did not receive an antibiotic prescription within 3 days after the diagnosis.

Denominator: Children age 3 months old as of 18 months prior to the end of the measurement year to 18 years old 6 months prior to the end of the measurement year who were diagnosed with URI between 545 and 180 days prior to the end of the measurement year.

Specialties:

*Family Practice,*General Practice,*Pediatrics

Citations:

National Committee for Quality Assurance. HEDIS 2016. Washington, DC: National Committee for Quality Assurance. Technical Specifications Vol 2, 2015.

HEDIS acute bronchitis avoid antibiotics (3817)

Measure Description:

This measure identifies patients age 18-64 years with a diagnosis of acute bronchitis who were not dispensed an antibiotic prescription on or within 3 days after the index episode start date.

Numerator: Patients from the denominator who were not dispensed a prescription for antibiotic medication on or within 3 days after the index episode start date.

Denominator: Patients age 18-64 years, with a negative medication history, a negative comorbid condition history and a negative competing diagnosis, who had an outpatient or emergency department (ED) visit with any diagnosis of acute bronchitis during the intake period.

Specialties:

*Family Practice,*General Practice,*Internal Medicine,*Pulmonary Disease

Citations:

National Committee for Quality Assurance. HEDIS 2016. Washington, DC: National Committee for Quality Assurance. Technical Specifications Vol 2, 2015.

Reproductive

Cesarean section prelabor risk factors (23106)

Measure Description:

This measure identifies female members age 18 or older who had cesarean sections performed for accepted prelabor risk factors. The numerator of this measure serves to control for common pre-labor cesarean risk factors, which may fall beyond the control of an individual physician, and might account for differing case mix. Since physicians are scored relative to their peers, the measure is useful to identify physicians performing the procedure at rates significantly higher than the main stream.

Numerator: Patients in the denominator with at least one claim for prelabor cesarean risk factors, pregnancy risk factors, prior cesarean delivery, or fetal heart rate abnormality.

Denominator: Women age 18 or older with at least one claim for cesarean delivery during the measurement year.

Specialties:

*Obstetrics & Gynecology

Citations:

Adapted from a Joint Commission on Accreditation of Healthcare Organizations measure, http://www.jointcommission.org/

Rheumatology: Osteoporosis

Osteoporosis on pharmacological therapy (NQF) (11380)

Measure Description:

This measure identifies osteoporosis patients who are on osteoporosis therapy.

Numerator: Patients in the denominator who had osteoporosis therapy during the measurement year.

Denominator: Women 55 or older and men 50 or older who have been diagnosed with osteoporosis in the year prior to the measurement year.

Specialties:

*Family Practice,*General Practice,*Internal Medicine,*Rheumatology

Citations:

Qaseem A, et al.; Clinical Efficacy Assessment Subcommittee of the American College of Physicians. Pharmacologic treatment of low bone density or osteoporosis to prevent fractures: A clinical practice guideline from the American College of Physicians. Ann Intern Med. 2008;149:404-415.

Osteopenia and chronic steroids on osteoporosis Rx (NQF) (10226)

Measure Description:

This measure identifies patients (females 55 years or older, or males 50 years or older) who have been diagnosed with osteopenia, are on a long-term steroid, and are on an appropriate osteoporosis therapy.

Numerator: Patients in the denominator who are on an osteoporosis therapy during the measurement year or have taken testosterone in the last 6 months of the measurement year.

Denominator: Female patients 55 years or older and male patients 50 years or older who have a diagnosis of osteopenia within the measurement year without history of osteoporosis and who have taken a steroid over the last 6 months of the measurement year.

Specialties:

*Family Practice,*General Practice,*Internal Medicine,*Obstetrics & Gynecology,*Rheumatology,*Gynecology

Citations:

Qaseem A, et al.; Clinical Efficacy Assessment Subcommittee of the American College of Physicians. Pharmacologic treatment of low bone density or osteoporosis to prevent fractures: A clinical practice guideline from the American College of Physicians. Ann Intern Med. 2008;149:404-415.

Steroid use osteoporosis screening (NQF) (11390)

Measure Description:

This measure identifies patients on chronic steroids for at least 6 months in the last 9 months of the measurement year who have had a bone density evaluation for osteoporosis screening.

Numerator: Patients in the denominator who have had a bone density evaluation or osteoporosis treatment in the measurement year.

Denominator: Patients over 18 years old who have been on chronic steroids for 6 out of the last 9 months of the measurement year.

Specialties:

*Family Practice,*General Practice,*Internal Medicine,*Rheumatology

Citations:

Qaseem A, et al.; Clinical Efficacy Assessment Subcommittee of the American College of Physicians. Pharmacologic treatment of low bone density or osteoporosis to prevent fractures: A clinical practice guideline from the American College of Physicians. Ann Intern Med. 2008;149:404-415.

HEDIS osteoporosis management post fracture (389)

Measure Description:

This measure identifies women age 67-85 who had a bone fracture and had either a bone mineral density (BMD) test or a prescription for a drug to treat or prevent osteoporosis during the 6 months after the date of fracture.

Numerator: Patients in the denominator who had either a bone mineral density test or a prescription for a drug to treat or prevent osteoporosis in the 6 months after the date of fracture.

Denominator: Women who are 67-85 years who had a bone fracture during the 6 months prior to the measurement year or during the first 6 months of the measurement year.

Specialties:

*Family Practice,*General Practice,*Internal Medicine,*Obstetrics & Gynecology,*Orthopedic Surgery,*Rheumatology,*Gynecology

Citations:

National Committee for Quality Assurance. HEDIS 2016. Washington, DC: National Committee for Quality Assurance. Technical Specifications Vol 2, 2015.

Rheumatology: Rheumatoid Arthritis

HEDIS rheumatoid arthritis DMARD therapy (3794)

Measure Description:

This measure identifies patients with a diagnosis of RA and who were dispensed at least one ambulatory prescription for a disease-modifying anti-rheumatic drug (DMARD) during the measurement year.

Numerator: Patients in the denominator who were dispensed at least one ambulatory prescription for a DMARD.

Denominator: Patients age 18 or older who have been diagnosed with RA.

Specialties:

*Family Practice,*General Practice,*Internal Medicine,*Rheumatology

Citations:

National Committee for Quality Assurance. HEDIS 2016. Washington, DC: National Committee for Quality Assurance. Technical Specifications Vol 2, 2015.

Rheumatoid arthritis DMARD baseline CBC (NQF) (4311)

Measure Description:

This measure identifies adult patients with a diagnosis of rheumatoid arthritis who received appropriate baseline complete blood count (CBC) testing within 90 days before to 14 days after the new start of sulfasalazine, methotrexate, leflunomide, azathioprine, D-penicillamine, intramuscular gold, oral gold, cyclosporine, or cyclophosphamide during the measurement year.

Numerator: Patients in the denominator who received CBC testing within 90 days before to 14 days after the new start of the DMARD. •

Denominator: Patients at least 18 years old with a history of rheumatoid arthritis and a new start of DMARD needing baseline CBC (specifically, sulfasalazine, methotrexate,

leflunomide, azathioprine, D-penicillamine, intramuscular gold, oral gold, cyclosporine, or cyclophosphamide) during the measurement year.

Specialties:

*Family Practice,*General Practice,*Internal Medicine,*Rheumatology

Citations:

Saag KG, et al. American College of Rheumatology 2008 recommendations for the use of nonbiologic and biologic disease-modifying antirheumatic drugs in rheumatoid arthritis. Arthritis Rheum. 2008;59(6):762-784.

American College of Rheumatology's Starter Set of Measures for Quality in the Care for Rheumatic and Musculoskeletal Diseases, February 2006. American College of Rheumatology.

Marmor MF, et al. Revised recommendations on screening for chloroquine and hydroxychloroquine retinopathy. Ophthalmology. 2011;118(2):415-22. doi: 10.1016/j.ophtha.2010.11.017

Rheumatoid arthritis DMARD baseline creatinine (NQF) (4361)

Measure Description:

This measure identifies adult patients with a diagnosis of rheumatoid arthritis who received appropriate baseline serum creatinine testing within 90 days before to 14 days after a new start of methotrexate, leflunomide, azathioprine, D-penicillamine, intramuscular gold, cyclosporine, or cyclophosphamide during the measurement year.

Specialties:

*Family Practice,*General Practice,*Internal Medicine,*Rheumatology

Citations:

Saag KG, et al. American College of Rheumatology 2008 recommendations for the use of nonbiologic and biologic disease-modifying antirheumatic drugs in rheumatoid arthritis. Arthritis Rheum. 2008;59(6):762-784.

American College of Rheumatology's Starter Set of Measures for Quality in the Care for Rheumatic and Musculoskeletal Diseases, February 2006. American College of Rheumatology.

Marmor MF, et al. Revised recommendations on screening for chloroquine and hydroxychloroquine retinopathy. Ophthalmology. 2011;118(2):415-22. doi: 10.1016/j.ophtha.2010.11.017

Rheumatoid arthritis DMARD baseline AST or ALT (NQF) (4362)

Measure Description:

This measure identifies adult patients with a diagnosis of rheumatoid arthritis who received appropriate baseline AST or ALT testing within 90 days before to 14 days after a new start of sulfasalazine, methotrexate, leflunomide, azathioprine, cyclosporine or cyclophosphamide during the measurement year.

Numerator: Patients in the denominator who received serum creatinine testing within 90 days before to 14 days after the new start of DMARD needing baseline AST or ALT. •

Denominator: Patients at least 18 years old with a history of rheumatoid arthritis and a new start of DMARD needing baseline AST or ALT (specifically, sulfasalazine, methotrexate, leflunomide, azathioprine, cyclosporine or cyclophosphamide) during the measurement year.

Specialties:

*Family Practice,*General Practice,*Internal Medicine,*Rheumatology

Citations:

Saag KG, et al. American College of Rheumatology 2008 recommendations for the use of nonbiologic and biologic disease-modifying antirheumatic drugs in rheumatoid arthritis. Arthritis Rheum. 2008;59(6):762-784.

American College of Rheumatology's Starter Set of Measures for Quality in the Care for Rheumatic and Musculoskeletal Diseases, February 2006. American College of Rheumatology.

Marmor MF, et al. Revised recommendations on screening for chloroquine and hydroxychloroquine retinopathy. Ophthalmology. 2011;118(2):415-22. doi: 10.1016/j.ophtha.2010.11.017

Rheumatoid arthritis hydroxychloroquine eye exam (NQF) (2426)

Measure Description:

This measure identifies patients with rheumatoid arthritis or lupus erythematosus newly started on hydroxychloroquine who had a baseline screening eye exam.

Numerator: Patients in the denominator who had a baseline screening eye exam from 90 days before to 365 days after starting hydroxychloroquine.

Denominator: Patients with a diagnosis of RA or lupus erythematosus who were prescribed at least a 292-day supply of hydroxychloroquine during the measurement year, excluding those with a prior history of blindness.

Specialties:

*Family Practice,*General Practice,*Internal Medicine,*Ophthalmology,*Rheumatology

Citations:

Marmor MF, et al. Revised recommendations on screening for chloroquine and hydroxychloroquine retinopathy. Ophthalmology. 2011;118(2):415-22. doi: 10.1016/j.ophtha.2010.11.017

Methotrexate 3 month CBC test (NQF) (2690)

Measure Description:

This measure identifies adult patients with rheumatoid arthritis who were prescribed at least a 6-month supply of methotrexate during the measurement year and who received a CBC test within 120 days (3 months + 1 month grace period) following the earliest observed methotrexate prescription claim.

Numerator: Patients in the denominator who received a CBC test in the 120 days following the earliest observed methotrexate prescription claim.

Denominator: Patients at least at least 18 years old with rheumatoid arthritis who have received at least a 6-month supply of oral methotrexate during the measurement year.

Specialties:

*Family Practice,*General Practice,*Internal Medicine,*Rheumatology

Citations:

American College of Rheumatology 2008 Recommendations for the use of nonbiologic and biologic disease-modifying antirheumatic drugs in rheumatoid arthritis. Arthritis Rheum. 2008;59(6):762-784.

Methotrexate 3 month creatinine test (NQF) (2688)

Measure Description:

This measure identifies adult patients with rheumatoid arthritis who were prescribed at least a 6-month supply of methotrexate during the measurement year and received a serum creatinine test in the 120 days (3 months + 1 month grace period) after the earliest observed methotrexate prescription claim.

Numerator: Patients in the denominator who received a serum creatinine test in the 120 days following the earliest observed methotrexate prescription claim.

Denominator: Patients at least at least 18 years old with rheumatoid arthritis who have received at least a 6-month supply of oral methotrexate during the measurement year.

Specialties:

*Family Practice,*General Practice,*Internal Medicine,*Rheumatology

Citations:

Saag KG, et al. American College of Rheumatology 2008 recommendations for the use of nonbiologic and biologic disease-modifying antirheumatic drugs in rheumatoid arthritis. Arthritis Rheum. 2008;59(6):762-784.

Marmor MF, et al. Revised recommendations on screening for chloroquine and hydroxychloroquine retinopathy. Ophthalmology. 2011;118(2):415-22. doi: 10.1016/j.ophtha.2010.11.017

Methotrexate 3 month liver function test (NQF) (2687)

Measure Description:

This measure identifies adult patients with rheumatoid arthritis who were prescribed at least a 6-month supply of methotrexate during the measurement year and who received a liver function test in the 120 days (3 months + 1 month grace period) following the earliest observed methotrexate prescription claim.

Numerator: Patients in the denominator who received a liver function test in the 120 days following the earliest observed methotrexate prescription claim.

Denominator: Patients at least at least 18 years old with rheumatoid arthritis who have received at least a 6-month supply of oral methotrexate during the measurement year.

Specialties:

*Family Practice,*General Practice,*Internal Medicine,*Rheumatology

Citations:

Saag KG, et al. American College of Rheumatology 2008 recommendations for the use of nonbiologic and biologic disease-modifying antirheumatic drugs in rheumatoid arthritis. Arthritis Rheum. 2008;59(6):762-784.

Marmor MF, et al. Revised recommendations on screening for chloroquine and hydroxychloroquine retinopathy. Ophthalmology. 2011;118(2):415-22. doi: 10.1016/j.ophtha.2010.11.017

RA on biologic DMARD TB screen (23128)

Measure Description:

This measure identifies patients 18 years and older with a diagnosis of rheumatoid arthritis (RA) who have a tuberculosis (TB) screening performed within 6 months prior to receiving a first course of therapy using a biologic disease-modifying antirheumatic drug (DMARD).

Numerator: Patients in the denominator who had TB screening performed within 6 months prior to the first course of DMARD therapy .

Denominator: Patients age 18 and older with RA who have been prescribed a DMARD.

Specialties:

*Family Practice,*General Practice,*Internal Medicine,*Rheumatology

Citations:

AMA Physician Consortium for Performance Improvement measure collection, https://www.ama-assn.org/ama/pub/physician-resources/physician-consortium-performance-improvement.page

Surgical Procedure

THA TKA Complications (25002)

Measure Description:

This rule identifies physician-level complication rate (RSCR) following elective primary total hip arthroplasty (THA) and/or total knee arthroplasty (TKA). Risk adjustment is performed by a different rule.

Numerator: Patients in the denominator who had medical or surgical complications within 3 months of the THA or TKA procedure.

Denominator: Patients age 18 or older who had elective primary total hip arthroplasty or total knee arthoplasty 15 to 3 months before the analysis date.

Specialties:

*Orthopedic Surgery

Citations:

Yale New Haven Health Services Corporation/Center for Outcomes Research & Evaluation. Prepared for Centers for Medicare & Medicaid Services (CMS). 2015.

THA TKA Readmissions (25003)

Measure Description:

This rule identifies members with an elective primary total hip arthroplasty (THA) and/or total knee arthroplasty (TKA) who had an unplanned readmission within 30 days of the procedure.

Numerator: Patients in the denominator who were admitted to the hospital within 30 days of discharge, excluding admissions for osteonecrosis/arthopathy, and nonacute inpatient stays.

Denominator: Patients age 18 or older who had elective primary total hip arthroplasty or total knee arthoplasty 15 to 3 months before the analysis date.

Specialties:

*Orthopedic Surgery

Citations:

Yale New Haven Health Services Corporation/Center for Outcomes Research & Evaluation. Prepared for Centers for Medicare & Medicaid Services (CMS). 2015.