

## 2012 Physician Quality Reporting System (Physician Quality Reporting) Measures List

The Physician Quality Reporting System (Physician Quality Reporting) measures were developed by various organizations for 2012. The following is a list of each measure, the measure developer, method of reporting available and contact information. Questions regarding the construct of a measure or its intent should be referred to the measure developer/contact as outlined in Appendix II (on page 33). Please note that gaps in measure numbering reflect retired 2007, 2008, 2009, 2010, and 2011 measures that are not included in 2012. This measure list is intended as a summary list to assist eligible professionals initially reviewing the measures and should not be used as a replacement for the measure specifications, which contain detailed reporting and coding instructions. A list of Physician Quality Reporting Measure Specifications and where they can be found on the CMS website is listed in Appendix I (on page 32).

#	NQF #	Measure Title & Description <sup>a</sup>	Measure Developer	Reporting Options/Methods
1. <i>GPRO DM-2</i>	0059	<b>Diabetes Mellitus: Hemoglobin A1c Poor Control in Diabetes Mellitus</b> Percentage of patients aged 18 through 75 years with diabetes mellitus who had most recent hemoglobin A1c greater than 9.0%	◆ NCQA	Claims, Registry <sup>b</sup> , EHR <sup>b</sup> , DM Measures Group (C/R), GPRO <sup>c</sup>
2. <i>GPRO DM-5</i>	0064	<b>Diabetes Mellitus: Low Density Lipoprotein (LDL-C) Control in Diabetes Mellitus</b> Percentage of patients aged 18 through 75 years with diabetes mellitus who had most recent LDL-C level in control (less than 100 mg/dL)	◆ NCQA	Claims, Registry <sup>b</sup> , EHR <sup>b</sup> , DM Measures Group (C/R), GPRO <sup>c</sup> , Cardiovascular Prevention Measures Group (C/R)
3. <i>GPRO DM-3</i>	0061	<b>Diabetes Mellitus: High Blood Pressure Control in Diabetes Mellitus</b> Percentage of patients aged 18 through 75 years with diabetes mellitus who had most recent blood pressure in control (less than 140/90 mmHg)	◆ NCQA	Claims, Registry <sup>b</sup> , EHR <sup>b</sup> , DM Measures Group (C/R), GPRO <sup>c</sup>
5. <i>GPRO HF-7</i>	0081	<b>Heart Failure: Angiotensin-Converting Enzyme (ACE) Inhibitor or Angiotensin Receptor Blocker (ARB) Therapy for Left Ventricular Systolic Dysfunction (LVSD)</b> Percentage of patients aged 18 years and older with a diagnosis of heart failure (HF) with a current or prior left ventricular ejection fraction (LVEF) < 40% who were prescribed ACE inhibitor or ARB therapy either within a 12 month period when seen in the outpatient setting or at each hospital discharge	▶ AMA-PCPI/ACCF/AHA	Registry <sup>b</sup> , EHR <sup>b</sup> , HF Measures Group (R), GPRO <sup>c</sup>
6. <i>GPRO CAD-1</i>	0067	<b>Coronary Artery Disease (CAD): Antiplatelet Therapy</b> Percentage of patients aged 18 years and older with a diagnosis of coronary artery disease seen within a 12 month period who were prescribed aspirin or clopidogrel	▶ AMA-PCPI/ACCF/AHA	Claims, Registry <sup>b</sup> , EHR <sup>b</sup> , CAD Measures Group (R), GPRO <sup>c</sup>
7.	0070	<b>Coronary Artery Disease (CAD): Beta-Blocker Therapy - Prior Myocardial Infarction (MI) or Left Ventricular Systolic Dysfunction (LVEF &lt; 40%)</b> Percentage of patients aged 18 years and older with a diagnosis of coronary artery disease seen within a 12 month period who also have prior MI OR a current or prior LVEF < 40% who were prescribed beta-blocker therapy	▶ AMA-PCPI/ACCF/AHA	Registry <sup>b</sup> , EHR <sup>b</sup>

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8. <i>GPRO HF-6</i>	0083	<b>Heart Failure: Beta-Blocker Therapy for Left Ventricular Systolic Dysfunction (LVSD)</b> Percentage of patients aged 18 years and older with a diagnosis of heart failure (HF) with a current or prior left ventricular ejection fraction (LVEF) < 40% who were prescribed beta-blocker therapy either within a 12 month period when seen in the outpatient setting or at each hospital discharge	▶ AMA-PCPI/ACCF/AHA	Registry <sup>b</sup> , EHR <sup>b</sup> , HF Measures Group (R), GPRO <sup>c</sup>
9.	0105	<b>Major Depressive Disorder (MDD): Antidepressant Medication During Acute Phase for Patients with MDD</b> Percentage of patients aged 18 years and older diagnosed with new episode of MDD and documented as treated with antidepressant medication during the entire 84-day (12-week) acute treatment phase	◆ NCQA	Claims, Registry <sup>b</sup> , EHR <sup>b</sup>
10.	0246	<b>Stroke and Stroke Rehabilitation: Computed Tomography (CT) or Magnetic Resonance Imaging (MRI) Reports</b> Percentage of final reports for CT or MRI studies of the brain performed either: <ul style="list-style-type: none"> <li>• In the hospital within 24 hours of arrival, OR</li> <li>• In an outpatient imaging center to confirm initial diagnosis of stroke, transient ischemic attack (TIA) or intracranial hemorrhage</li> </ul> For patients aged 18 years and older with either a diagnosis of ischemic stroke, TIA or intracranial hemorrhage OR at least one documented symptom consistent with ischemic stroke, TIA or intracranial hemorrhage that includes documentation of the presence or absence of each of the following: hemorrhage, mass lesion and acute infarction	* AMA-PCPI/NCQA	Claims, Registry <sup>b</sup>
12.	0086	<b>Primary Open Angle Glaucoma (POAG): Optic Nerve Evaluation</b> Percentage of patients aged 18 years and older with a diagnosis of POAG who have an optic nerve head evaluation during one or more office visits within 12 months	* AMA-PCPI/NCQA	Claims, Registry <sup>b</sup> , EHR <sup>b</sup>
14.	0087	<b>Age-Related Macular Degeneration (AMD): Dilated Macular Examination</b> Percentage of patients aged 50 years and older with a diagnosis of AMD who had a dilated macular examination performed which included documentation of the presence or absence of macular thickening or hemorrhage AND the level of macular degeneration severity during one or more office visits within 12 months	* AMA-PCPI/NCQA	Claims, Registry <sup>b</sup>
18.	0088	<b>Diabetic Retinopathy: Documentation of Presence or Absence of Macular Edema and Level of Severity of Retinopathy</b> Percentage of patients aged 18 years and older with a diagnosis of diabetic retinopathy who had a dilated macular or fundus exam performed which included documentation of the level of severity of retinopathy and the presence or absence of macular edema during one or more office visits within 12 months	* AMA-PCPI/NCQA	Claims, Registry <sup>b</sup> , EHR <sup>b</sup>
19.	0089	<b>Diabetic Retinopathy: Communication with the Physician Managing On-going Diabetes Care</b> Percentage of patients aged 18 years and older with a diagnosis of diabetic retinopathy who had a dilated macular or fundus exam performed with documented communication to the physician who manages the on-going care of the patient with diabetes mellitus regarding the findings of the macular or fundus exam at least once within 12 months	* AMA-PCPI/NCQA	Claims, Registry <sup>b</sup> , EHR <sup>b</sup>










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20.	0270	<p><b>Perioperative Care: Timing of Antibiotic Prophylaxis – Ordering Physician</b>                      Percentage of surgical patients aged 18 years and older undergoing procedures with the indications for prophylactic parenteral antibiotics, who have an order for prophylactic parenteral antibiotic to be given within one hour (if fluoroquinolone or vancomycin, two hours), prior to the surgical incision (or start of procedure when no incision is required)</p>	* AMA-PCPI/NCQA	Claims, Registry <sup>b</sup> , Periop Measures Group (C/R)
21.	0268	<p><b>Perioperative Care: Selection of Prophylactic Antibiotic – First OR Second Generation Cephalosporin</b>                      Percentage of surgical patients aged 18 years and older undergoing procedures with the indications for a first OR second generation cephalosporin prophylactic antibiotic, who had an order for cefazolin OR cefuroxime for antimicrobial prophylaxis</p>	* AMA-PCPI/NCQA	Claims, Registry <sup>b</sup> , Periop Measures Group (C/R)
22.	0271	<p><b>Perioperative Care: Discontinuation of Prophylactic Antibiotics (Non-Cardiac Procedures)</b>                      Percentage of non-cardiac surgical patients aged 18 years and older undergoing procedures with the indications for prophylactic parenteral antibiotics AND who received a prophylactic parenteral antibiotic, who have an order for discontinuation of prophylactic parenteral antibiotics within 24 hours of surgical end time</p>	* AMA-PCPI/NCQA	Claims, Registry <sup>b</sup> , Periop Measures Group (C/R)
23.	0239	<p><b>Perioperative Care: Venous Thromboembolism (VTE) Prophylaxis (When Indicated in ALL Patients)</b>                      Percentage of patients aged 18 years and older undergoing procedures for which VTE prophylaxis is indicated in all patients, who had an order for Low Molecular Weight Heparin (LMWH), Low-Dose Unfractionated Heparin (LDUH), adjusted-dose warfarin, fondaparinux or mechanical prophylaxis to be given within 24 hours prior to incision time or within 24 hours after surgery end time</p>	* AMA-PCPI/NCQA	Claims, Registry <sup>b</sup> , Periop Measures Group (C/R)
24.	0045	<p><b>Osteoporosis: Communication with the Physician Managing On-going Care Post-Fracture of Hip, Spine or Distal Radius for Men and Women Aged 50 Years and Older</b>                      Percentage of patients aged 50 years and older treated for a hip, spine or distal radial fracture with documentation of communication with the physician managing the patient's on-going care that a fracture occurred and that the patient was or should be tested or treated for osteoporosis</p>	* AMA-PCPI/NCQA	Claims, Registry <sup>b</sup>
28.	0092	<p><b>Aspirin at Arrival for Acute Myocardial Infarction (AMI)</b>                      Percentage of patients, regardless of age, with an emergency department discharge diagnosis of AMI who had documentation of receiving aspirin within 24 hours before emergency department arrival or during emergency department stay</p>	* AMA-PCPI/NCQA	Claims, Registry <sup>b</sup>
30.	0269	<p><b>Perioperative Care: Timely Administration of Prophylactic Parenteral Antibiotics</b>                      Percentage of surgical patients aged 18 years and older who receive an anesthetic when undergoing procedures with the indications for prophylactic parenteral antibiotics for whom administration of the prophylactic parenteral antibiotic ordered has been initiated within one hour (if fluoroquinolone or vancomycin, two hours) prior to the surgical incision (or start of procedure when no incision is required)</p>	* AMA-PCPI/NCQA	Claims, Registry <sup>b</sup>

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31.	0240	<p><b>Stroke and Stroke Rehabilitation: Deep Vein Thrombosis (DVT) Prophylaxis for Ischemic Stroke or Intracranial Hemorrhage</b>                      Percentage of patients aged 18 years and older with a diagnosis of ischemic stroke or intracranial hemorrhage who were administered DVT prophylaxis by end of hospital day two</p>	* AMA-PCPI/NCQA	Claims, Registry <sup>b</sup>
32.	0325	<p><b>Stroke and Stroke Rehabilitation: Discharged on Antithrombotic Therapy</b>                      Percentage of patients aged 18 years and older with a diagnosis of ischemic stroke or transient ischemic attack (TIA) who were prescribed antithrombotic therapy at discharge</p>	* AMA-PCPI/NCQA	Claims, Registry <sup>b</sup>
33.	0241	<p><b>Stroke and Stroke Rehabilitation: Anticoagulant Therapy Prescribed for Atrial Fibrillation (AF) at Discharge</b>                      Percentage of patients aged 18 years and older with a diagnosis of ischemic stroke or transient ischemic attack (TIA) with documented permanent, persistent, or paroxysmal atrial fibrillation who were prescribed an anticoagulant at discharge</p>	* AMA-PCPI/NCQA	Registry <sup>b</sup>
35.	0243	<p><b>Stroke and Stroke Rehabilitation: Screening for Dysphagia</b>                      Percentage of patients aged 18 years and older with a diagnosis of ischemic stroke or intracranial hemorrhage who receive any food, fluids or medication by mouth (PO) for whom a dysphagia screening was performed prior to PO intake in accordance with a dysphagia screening tool approved by the institution in which the patient is receiving care</p>	* AMA-PCPI/NCQA	Claims, Registry <sup>b</sup>
36.	0244	<p><b>Stroke and Stroke Rehabilitation: Rehabilitation Services Ordered</b>                      Percentage of patients aged 18 years and older with a diagnosis of ischemic stroke or intracranial hemorrhage for whom occupational, physical, or speech rehabilitation services were ordered at or prior to inpatient discharge OR documentation that no rehabilitation services are indicated at or prior to inpatient discharge</p>	* AMA-PCPI/NCQA	Claims, Registry <sup>b</sup>
39.	0046	<p><b>Screening or Therapy for Osteoporosis for Women Aged 65 Years and Older</b>                      Percentage of female patients aged 65 years and older who have a central dual-energy X-ray absorptiometry (DXA) measurement ordered or performed at least once since age 60 or pharmacologic therapy prescribed within 12 months</p>	* AMA-PCPI/NCQA	Claims, Registry <sup>b</sup> , EHR <sup>b</sup> , Prev Care Measures Group (C/R)
40.	0048	<p><b>Osteoporosis: Management Following Fracture of Hip, Spine or Distal Radius for Men and Women Aged 50 Years and Older</b>                      Percentage of patients aged 50 years and older with fracture of the hip, spine, or distal radius who had a central dual-energy X-ray absorptiometry (DXA) measurement ordered or performed or pharmacologic therapy prescribed</p>	* AMA-PCPI/NCQA	Claims, Registry <sup>b</sup>
41.	0049	<p><b>Osteoporosis: Pharmacologic Therapy for Men and Women Aged 50 Years and Older</b>                      Percentage of patients aged 50 years and older with a diagnosis of osteoporosis who were prescribed pharmacologic therapy within 12 months</p>	* AMA-PCPI/NCQA	Claims, Registry <sup>b</sup>
43.	0134	<p><b>Coronary Artery Bypass Graft (CABG): Use of Internal Mammary Artery (IMA) in Patients with Isolated CABG Surgery</b>                      Percentage of patients aged 18 years and older undergoing isolated CABG surgery using an IMA graft</p>	Ω STS	Claims, Registry <sup>b</sup> , CABG Measures Group (R)





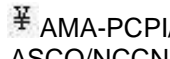
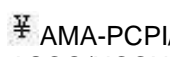



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44.	0236	<p><b>Coronary Artery Bypass Graft (CABG): Preoperative Beta-Blocker in Patients with Isolated CABG Surgery</b>                      Percentage of patients aged 18 years and older undergoing isolated CABG surgery who received a beta-blocker within 24 hours prior to surgical incision</p>	 CMS/QIP	Claims, Registry <sup>b</sup> , CABG Measures Group (R)
45.	0637	<p><b>Perioperative Care: Discontinuation of Prophylactic Antibiotics (Cardiac Procedures)</b>                      Percentage of cardiac surgical patients aged 18 years and older undergoing procedures with the indications for prophylactic antibiotics AND who received a prophylactic antibiotic, who have an order for discontinuation of prophylactic antibiotics within 48 hours of surgical end time</p>	 AMA-PCPI/NCQA	Claims, Registry <sup>b</sup>
46.	0097	<p><b>Medication Reconciliation: Reconciliation After Discharge from an Inpatient Facility</b>                      Percentage of patients aged 65 years and older <u>discharged from any inpatient facility</u> (e.g., hospital, skilled nursing facility, or rehabilitation facility) and <u>seen within 60 days following discharge</u> in the office by the physician providing on-going care who had a reconciliation of the discharge medications with the current medication list in the medical record documented</p>	 AMA-PCPI/NCQA	Claims, Registry <sup>b</sup> , GPRO <sup>c</sup>
47.	0326	<p><b>Advance Care Plan</b>                      Percentage of patients aged 65 years and older who have an advance care plan or surrogate decision maker documented in the medical record or documentation in the medical record that an advance care plan was discussed but the patient did not wish or was not able to name a surrogate decision maker or provide an advance care plan</p>	 AMA-PCPI/NCQA	Claims, Registry <sup>b</sup> , EHR <sup>b</sup>
48.	0098	<p><b>Urinary Incontinence: Assessment of Presence or Absence of Urinary Incontinence in Women Aged 65 Years and Older</b>                      Percentage of female patients aged 65 years and older who were assessed for the presence or absence of urinary incontinence within 12 months</p>	 AMA-PCPI/NCQA	Claims, Registry <sup>b</sup> , EHR <sup>b</sup> , Prev Care Measures Group (C/R)
49.	0099	<p><b>Urinary Incontinence: Characterization of Urinary Incontinence in Women Aged 65 Years and Older</b>                      Percentage of female patients aged 65 years and older with a diagnosis of urinary incontinence whose urinary incontinence was characterized at least once within 12 months</p>	 AMA-PCPI/NCQA	Claims, Registry <sup>b</sup>
50.	0100	<p><b>Urinary Incontinence: Plan of Care for Urinary Incontinence in Women Aged 65 Years and Older</b>                      Percentage of female patients aged 65 years and older with a diagnosis of urinary incontinence with a documented plan of care for urinary incontinence at least once within 12 months</p>	 AMA-PCPI/NCQA	Claims, Registry <sup>b</sup>
51.	0091	<p><b>Chronic Obstructive Pulmonary Disease (COPD): Spirometry Evaluation</b>                      Percentage of patients aged 18 years and older with a diagnosis of COPD who had spirometry evaluation results documented</p>	 AMA-PCPI	Claims, Registry <sup>b</sup> , COPD Measures Group (C/R)
52.	0102	<p><b>Chronic Obstructive Pulmonary Disease (COPD): Bronchodilator Therapy</b>                      Percentage of patients aged 18 years and older with a diagnosis of COPD and who have an FEV<sub>1</sub>/FVC less than 70% and have symptoms who were prescribed an inhaled bronchodilator</p>	 AMA-PCPI	Claims, Registry <sup>b</sup> , COPD Measures Group (C/R), GPRO <sup>c</sup>

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53.	0047	<b>Asthma: Pharmacologic Therapy for Persistent Asthma</b> Percentage of patients aged 5 through 50 years with a diagnosis of persistent asthma and at least one medical encounter for asthma during the measurement year who were prescribed long-term control medication	<input type="checkbox"/> AMA-PCPI/NCQA	Claims, Registry <sup>b</sup> , EHR <sup>b</sup> , Asthma Measures Group (C/R)
54.	0090	<b>Emergency Medicine: 12-Lead Electrocardiogram (ECG) Performed for Non-Traumatic Chest Pain</b> Percentage of patients aged 40 years and older with an emergency department discharge diagnosis of non-traumatic chest pain who had a 12-lead ECG performed	<input checked="" type="checkbox"/> AMA-PCPI/NCQA	Claims, Registry <sup>b</sup>
55.	0093	<b>Emergency Medicine: 12-Lead Electrocardiogram (ECG) Performed for Syncope</b> Percentage of patients aged 60 years and older with an emergency department discharge diagnosis of syncope who had a 12-lead ECG performed	<input checked="" type="checkbox"/> AMA-PCPI/NCQA	Claims, Registry <sup>b</sup>
56.	0232	<b>Emergency Medicine: Community-Acquired Pneumonia (CAP): Vital Signs</b> Percentage of patients aged 18 years and older with a diagnosis of community-acquired bacterial pneumonia with vital signs documented and reviewed	<input checked="" type="checkbox"/> AMA-PCPI/NCQA	Claims, Registry <sup>b</sup> , CAP Measures Group (C/R)
57.	0094	<b>Emergency Medicine: Community-Acquired Pneumonia (CAP): Assessment of Oxygen Saturation</b> Percentage of patients aged 18 years and older with a diagnosis of community-acquired bacterial pneumonia with oxygen saturation documented and reviewed	<input checked="" type="checkbox"/> AMA-PCPI/NCQA	Claims, Registry <sup>b</sup> , CAP Measures Group (C/R)
58.	0095	<b>Emergency Medicine: Community-Acquired Pneumonia (CAP): Assessment of Mental Status</b> Percentage of patients aged 18 years and older with a diagnosis of community-acquired bacterial pneumonia with mental status assessed	<input checked="" type="checkbox"/> AMA-PCPI/NCQA	Claims, Registry <sup>b</sup> , CAP Measures Group (C/R)
59.	0096	<b>Emergency Medicine: Community-Acquired Pneumonia (CAP): Empiric Antibiotic</b> Percentage of patients aged 18 years and older with a diagnosis of community-acquired bacterial pneumonia with an appropriate empiric antibiotic prescribed	<input checked="" type="checkbox"/> AMA-PCPI/NCQA	Claims, Registry <sup>b</sup> , CAP Measures Group (C/R)
64.	0001	<b>Asthma: Assessment of Asthma Control</b> Percentage of patients aged 5 through 50 years with a diagnosis of asthma who were evaluated at least once for asthma control (comprising asthma impairment and asthma risk)	<input type="checkbox"/> AMA-PCPI/NCQA	Claims, Registry <sup>b</sup> , EHR <sup>b</sup> , Asthma Measures Group (C/R)
65.	0069	<b>Treatment for Children with Upper Respiratory Infection (URI): Avoidance of Inappropriate Use</b> Percentage of children aged 3 months through 18 years with a diagnosis of URI who were <u>not prescribed or dispensed</u> an antibiotic prescription on or within 3 days of the initial date of service	<input checked="" type="checkbox"/> NCQA	Claims, Registry <sup>b</sup>
66.	0002	<b>Appropriate Testing for Children with Pharyngitis</b> Percentage of children aged 2 through 18 years with a diagnosis of pharyngitis, who were prescribed an antibiotic and who received a group A streptococcus (strep) test for the episode	<input checked="" type="checkbox"/> NCQA	Claims, Registry <sup>b</sup> , EHR <sup>b</sup>

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67.	0377	<b>Hematology: Myelodysplastic Syndrome (MDS) and Acute Leukemias: Baseline Cytogenetic Testing Performed on Bone Marrow</b> Percentage of patients aged 18 years and older with a diagnosis of MDS or an acute leukemia who had baseline cytogenetic testing performed on bone marrow	 AMA-PCPI/ASH	Claims, Registry <sup>b</sup>
68.	0378	<b>Hematology: Myelodysplastic Syndrome (MDS): Documentation of Iron Stores in Patients Receiving Erythropoietin Therapy</b> Percentage of patients aged 18 years and older with a diagnosis of MDS who are receiving erythropoietin therapy with documentation of iron stores prior to initiating erythropoietin therapy	 AMA-PCPI/ASH	Claims, Registry <sup>b</sup>
69.	0380	<b>Hematology: Multiple Myeloma: Treatment with Bisphosphonates</b> Percentage of patients aged 18 years and older with a diagnosis of multiple myeloma, not in remission, who were prescribed or received intravenous bisphosphonate therapy within the 12-month reporting period	 AMA-PCPI/ASH	Claims, Registry <sup>b</sup>
70.	0379	<b>Hematology: Chronic Lymphocytic Leukemia (CLL): Baseline Flow Cytometry</b> Percentage of patients aged 18 years and older with a diagnosis of CLL who had baseline flow cytometry studies performed	 AMA-PCPI/ASH	Claims, Registry <sup>b</sup>
71.	0387	<b>Breast Cancer: Hormonal Therapy for Stage IC-IIIC Estrogen Receptor/Progesterone Receptor (ER/PR) Positive Breast Cancer</b> Percentage of female patients aged 18 years and older with Stage IC through IIIC, ER or PR positive breast cancer who were prescribed tamoxifen or aromatase inhibitor (AI) during the 12-month reporting period	 AMA-PCPI/ASCO/NCCN	Claims, Registry <sup>b</sup> , EHR <sup>b</sup>
72.	0385	<b>Colon Cancer: Chemotherapy for Stage III Colon Cancer Patients</b> Percentage of patients aged 18 years and older with Stage IIIA through IIIC colon cancer who are referred for adjuvant chemotherapy, prescribed adjuvant chemotherapy, or have previously received adjuvant chemotherapy within the 12-month reporting period	 AMA-PCPI/ASCO/NCCN	Claims, Registry <sup>b</sup> , EHR <sup>b</sup>
76.	0464	<b>Prevention of Catheter-Related Bloodstream Infections (CRBSI): Central Venous Catheter (CVC) Insertion Protocol</b> Percentage of patients, regardless of age, who undergo CVC insertion for whom CVC was inserted with all elements of maximal sterile barrier technique [cap AND mask AND sterile gown AND sterile gloves AND a large sterile sheet AND hand hygiene AND 2% chlorhexidine for cutaneous antisepsis (or acceptable alternative antiseptics per current guideline)] followed	 AMA-PCPI	Claims, Registry <sup>b</sup>
81.	0323	<b>Adult Kidney Disease: Hemodialysis Adequacy: Solute</b> Percentage of calendar months within a 12-month period during which patients aged 18 years and older with a diagnosis of ESRD receiving hemodialysis three times a week who have a spKt/V $\geq 1.2$	 AMA-PCPI	Registry <sup>b</sup>
82.	0321	<b>Adult Kidney Disease: Peritoneal Dialysis Adequacy: Solute</b> Percentage of patients aged 18 years and older with a diagnosis of ESRD receiving peritoneal dialysis who have a total Kt/V $\geq 1.7$ per week measured once every 4 months	 AMA-PCPI	Registry <sup>b</sup>

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83.	0393	<b>Hepatitis C: Testing for Chronic Hepatitis C – Confirmation of Hepatitis C Viremia</b> Percentage of patients aged 18 years and older with a diagnosis of hepatitis C seen for an initial evaluation who had HCV RNA testing ordered or previously performed	▲ AMA-PCPI	Registry <sup>b</sup>
84.	0395	<b>Hepatitis C: Ribonucleic Acid (RNA) Testing Before Initiating Treatment</b> Percentage of patients aged 18 years and older with a diagnosis of chronic hepatitis C who are receiving antiviral treatment for whom quantitative HCV RNA testing was performed within 6 months prior to initiation of antiviral treatment	▲ AMA-PCPI	Claims, Registry <sup>b</sup> , Hep C Measures Group (C/R)
85.	0396	<b>Hepatitis C: HCV Genotype Testing Prior to Treatment</b> Percentage of patients aged 18 years and older with a diagnosis of chronic hepatitis C who are receiving antiviral treatment for whom HCV genotype testing was performed prior to initiation of antiviral treatment	▲ AMA-PCPI	Claims, Registry <sup>b</sup> , Hep C Measures Group (C/R)
86.	0397	<b>Hepatitis C: Antiviral Treatment Prescribed</b> Percentage of patients aged 18 years and older with a diagnosis of chronic hepatitis C who were prescribed a minimum peginterferon and ribavirin therapy within the 12-month reporting period	▲ AMA-PCPI	Claims, Registry <sup>b</sup> , Hep C Measures Group (C/R)
87.	0398	<b>Hepatitis C: HCV Ribonucleic Acid (RNA) Testing at Week 12 of Treatment</b> Percentage of patients aged 18 years and older with a diagnosis of chronic hepatitis C who are receiving antiviral treatment for whom quantitative HCV RNA testing was performed at no greater than 12 weeks from the initiation of antiviral treatment	▲ AMA-PCPI	Claims, Registry <sup>b</sup> , Hep C Measures Group (C/R)
89.	0401	<b>Hepatitis C: Counseling Regarding Risk of Alcohol Consumption</b> Percentage of patients aged 18 years and older with a diagnosis of hepatitis C who were counseled about the risks of alcohol use at least once within 12-months	▲ AMA-PCPI	Claims, Registry <sup>b</sup> , Hep C Measures Group (C/R)
90.	0394	<b>Hepatitis C: Counseling Regarding Use of Contraception Prior to Antiviral Therapy</b> Percentage of female patients aged 18 through 44 years and all men aged 18 years and older with a diagnosis of chronic hepatitis C who are receiving antiviral treatment who were counseled regarding contraception prior to the initiation of treatment	▲ AMA-PCPI	Claims, Registry <sup>b</sup> , Hep C Measures Group (C/R)
91.	0653	<b>Acute Otitis Externa (AOE): Topical Therapy</b> Percentage of patients aged 2 years and older with a diagnosis of AOE who were prescribed topical preparations	▲ AMA-PCPI	Claims, Registry <sup>b</sup>
92.	AQA adopted	<b>Acute Otitis Externa (AOE): Pain Assessment</b> Percentage of patient visits for those patients aged 2 years and older with a diagnosis of AOE with assessment for auricular or periauricular pain	▲ AMA-PCPI	Claims, Registry <sup>b</sup>
93.	0654	<b>Acute Otitis Externa (AOE): Systemic Antimicrobial Therapy – Avoidance of Inappropriate Use</b> Percentage of patients aged 2 years and older with a diagnosis of AOE who were <u>not</u> prescribed systemic antimicrobial therapy	▲ AMA-PCPI	Claims, Registry <sup>b</sup>
99.	0391	<b>Breast Cancer Resection Pathology Reporting: pT Category (Primary Tumor) and pN Category (Regional Lymph Nodes) with Histologic Grade</b> Percentage of breast cancer resection pathology reports that include the pT category (primary tumor), the pN category (regional lymph nodes), and the histologic grade	€ AMA-PCPI/CAP	Claims, Registry <sup>b</sup>



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100.	0392	<b>Colorectal Cancer Resection Pathology Reporting: pT Category (Primary Tumor) and pN Category (Regional Lymph Nodes) with Histologic Grade</b> Percentage of colon and rectum cancer resection pathology reports that include the pT category (primary tumor), the pN category (regional lymph nodes) and the histologic grade	 AMA-PCPI/CAP	Claims, Registry <sup>b</sup>
102.	0389	<b>Prostate Cancer: Avoidance of Overuse of Bone Scan for Staging Low-Risk Prostate Cancer Patients</b> Percentage of patients, regardless of age, with a diagnosis of prostate cancer at low risk of recurrence receiving interstitial prostate brachytherapy, OR external beam radiotherapy to the prostate, OR radical prostatectomy, OR cryotherapy who did <u>not</u> have a bone scan performed at any time since diagnosis of prostate cancer	 AMA-PCPI	Claims, Registry <sup>b</sup> , EHR <sup>b</sup>
104.	0390	<b>Prostate Cancer: Adjuvant Hormonal Therapy for High-Risk Prostate Cancer Patients</b> Percentage of patients, regardless of age, with a diagnosis of prostate cancer at high risk of recurrence receiving external beam radiotherapy to the prostate who were prescribed adjuvant hormonal therapy (GnRH agonist or antagonist)	 AMA-PCPI	Claims, Registry <sup>b</sup>
105.	0388	<b>Prostate Cancer: Three-Dimensional (3D) Radiotherapy</b> Percentage of patients, regardless of age, with a diagnosis of clinically localized prostate cancer receiving external beam radiotherapy as a primary therapy to the prostate with or without nodal irradiation (no metastases; no salvage therapy) who receive three-dimensional conformal radiotherapy (3D-CRT) or intensity modulated radiation therapy (IMRT)	 AMA-PCPI	Claims, Registry <sup>b</sup>
106.	0103	<b>Major Depressive Disorder (MDD): Diagnostic Evaluation</b> Percentage of patients aged 18 years and older with a new diagnosis or recurrent episode of MDD who met the DSM-IV criteria during the visit in which the new diagnosis or recurrent episode was identified during the measurement period	 AMA-PCPI	Claims, Registry <sup>b</sup>
107.	0104	<b>Major Depressive Disorder (MDD): Suicide Risk Assessment</b> Percentage of patients aged 18 years and older with a new diagnosis or recurrent episode of MDD who had a suicide risk assessment completed at each visit during the measurement period	 AMA-PCPI	Claims, Registry <sup>b</sup>
108.	0054	<b>Rheumatoid Arthritis (RA): Disease Modifying Anti-Rheumatic Drug (DMARD) Therapy</b> Percentage of patients aged 18 years and older who were diagnosed with RA and were prescribed, dispensed, or administered at least one ambulatory prescription for a DMARD	 NCQA	Claims, Registry <sup>b</sup> , RA Measures Group (C/R)
109.	0050	<b>Osteoarthritis (OA): Function and Pain Assessment</b> Percentage of patient visits for patients aged 21 years and older with a diagnosis of OA with assessment for function and pain	 AMA-PCPI	Claims, Registry <sup>b</sup>




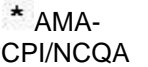
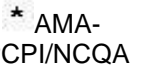
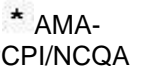
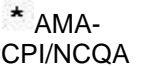
## 2012 Physician Quality Reporting System (Physician Quality Reporting) Measures List

#	NQF #	Measure Title & Description <sup>a</sup>	Measure Developer	Reporting Options/Methods
110. <i>GPRO Prev-7</i>	0041	<b>Preventive Care and Screening: Influenza Immunization</b> Percentage of patients aged 6 months and older seen for a visit between October 1 and March 31 of the one-year measurement period who received an influenza immunization OR who reported previous receipt of an influenza immunization	▲ AMA-PCPI	Claims, Registry <sup>b</sup> , EHR <sup>b</sup> , COPD Measures Group (C/R), Prev Care Measures Group (C/R), CKD Measures Group (C/R), GPRO <sup>c</sup>
111. <i>GPRO Prev-8</i>	0043	<b>Preventive Care and Screening: Pneumonia Vaccination for Patients 65 Years and Older</b> Percentage of patients aged 65 years and older who have ever received a pneumococcal vaccine	◆ NCQA	Claims, Registry <sup>b</sup> , EHR <sup>b</sup> , COPD Measures Group (C/R), Prev Care Measures Group (C/R), GPRO <sup>c</sup>
112. <i>GPRO Prev-5</i>	0031	<b>Preventive Care and Screening: Screening Mammography</b> Percentage of women aged 40 through 69 years who had a mammogram to screen for breast cancer within 24 months	◆ NCQA	Claims, Registry <sup>b</sup> , EHR <sup>b</sup> , Prev Care Measures Group (C/R), GPRO <sup>c</sup>
113. <i>GPRO Prev-6</i>	0034	<b>Preventive Care and Screening: Colorectal Cancer Screening</b> Percentage of patients aged 50 through 75 years who received the appropriate colorectal cancer screening	◆ NCQA	Claims, Registry <sup>b</sup> , EHR <sup>b</sup> , Prev Care Measures Group (C/R), GPRO <sup>c</sup>
116.	0058	<b>Antibiotic Treatment for Adults with Acute Bronchitis: Avoidance of Inappropriate Use</b> Percentage of adults aged 18 through 64 years with a diagnosis of acute bronchitis who were <u>not prescribed or dispensed</u> an antibiotic prescription on or within 3 days of the initial date of service	◆ NCQA	Claims, Registry <sup>b</sup>
117. <i>GPRO DM-7</i>	0055	<b>Diabetes Mellitus: Dilated Eye Exam in Diabetic Patient</b> Percentage of patients aged 18 through 75 years with a diagnosis of diabetes mellitus who had a dilated eye exam	◆ NCQA	Claims, Registry <sup>b</sup> , EHR <sup>b</sup> , DM Measures Group (C/R), GPRO <sup>c</sup>
118. <i>GPRO CAD-7</i>	0066	<b>Coronary Artery Disease (CAD): Angiotensin-Converting Enzyme (ACE) Inhibitor or Angiotensin Receptor Blocker (ARB) Therapy for Patients with CAD and Diabetes and/or Left Ventricular Systolic Dysfunction (LVSD)</b> Percentage of patients aged 18 years and older with a diagnosis of coronary artery disease seen within a 12 month period who also have diabetes OR a current or prior LVEF < 40% who were prescribed ACE inhibitor or ARB therapy	■ AMA-PCPI/ACCF/AHA	Registry <sup>b</sup> , GPRO <sup>c</sup>
119.	0062	<b>Diabetes Mellitus: Urine Screening for Microalbumin or Medical Attention for Nephropathy in Diabetic Patients</b> Percentage of patients aged 18 through 75 years with diabetes mellitus who received urine protein screening or medical attention for nephropathy during at least one office visit within 12 months	◆ NCQA	Claims, Registry <sup>b</sup> , EHR <sup>b</sup> , DM Measures Group (C/R)

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#	NQF #	Measure Title & Description <sup>a</sup>	Measure Developer	Reporting Options/Methods
121.	AQA adopted	<b>Adult Kidney Disease: Laboratory Testing (Lipid Profile)</b> Percentage of patients aged 18 years and older with a diagnosis of CKD (stage 3, 4, or 5, not receiving Renal Replacement Therapy [RRT]) who had a fasting lipid profile performed at least once within a 12-month period	▲ AMA-PCPI	Claims, Registry <sup>b</sup> , CKD Measures Group (C/R)
122.	AQA adopted	<b>Adult Kidney Disease: Blood Pressure Management</b> Percentage of patient visits for those patients aged 18 years and older with a diagnosis of CKD (stage 3, 4, or 5, not receiving Renal Replacement Therapy [RRT]) and documented proteinuria with a blood pressure < 130/80 mmHg OR ≥ 130/80 mmHg with a documented plan of care	▲ AMA-PCPI	Claims, Registry <sup>b</sup> , CKD Measures Group (C/R)
123.	AQA adopted	<b>Adult Kidney Disease: Patients On Erythropoiesis-Stimulating Agent (ESA) - Hemoglobin Level &gt; 12.0 g/dL</b> Percentage of calendar months within a 12-month period during which a Hemoglobin level is measured for patients aged 18 years and older with a diagnosis of advanced Chronic Kidney Disease (CKD) (stage 4 or 5, not receiving Renal Replacement Therapy [RRT]) or End Stage Renal Disease (ESRD) (who are on hemodialysis or peritoneal dialysis) who are also receiving ESA therapy AND have a Hemoglobin level > 12.0 g/dL	▲ AMA-PCPI	Claims, Registry <sup>b</sup> , CKD Measures Group (C/R)
124.	0488	<b>Health Information Technology (HIT): Adoption/Use of Electronic Health Records (EHR)</b> Documents whether provider has adopted and is using health information technology. To report this measure, the eligible professional must have adopted and be using a certified, Physician Quality Reporting System qualified or other acceptable EHR system	♣ CMS/QIP	Claims, Registry <sup>b</sup>
125.	0486	<i>Refer to the Electronic Prescribing (eRx) Incentive Program</i>	♣ CMS/QIP	---
126.	0417	<b>Diabetes Mellitus: Diabetic Foot and Ankle Care, Peripheral Neuropathy – Neurological Evaluation</b> Percentage of patients aged 18 years and older with a diagnosis of diabetes mellitus who had a neurological examination of their lower extremities within 12 months	♪ APMA	Claims, Registry <sup>b</sup>
127.	0416	<b>Diabetes Mellitus: Diabetic Foot and Ankle Care, Ulcer Prevention – Evaluation of Footwear</b> Percentage of patients aged 18 years and older with a diagnosis of diabetes mellitus who were evaluated for proper footwear and sizing	♪ APMA	Claims, Registry <sup>b</sup>
128.	0421  GPRO Prev-9	<b>Preventive Care and Screening: Body Mass Index (BMI) Screening and Follow-Up</b> Percentage of patients aged 18 years and older with a calculated BMI in the past six months or during the current visit documented in the medical record AND if the most recent BMI is <u>outside of normal</u> parameters, a follow-up plan is documented <u>Normal Parameters:</u> Age 65 years and older BMI ≥ 23 and < 30; Age 18 – 64 years BMI ≥ 18.5 and < 25	♣ CMS/QIP	Claims, Registry <sup>b</sup> , EHR <sup>b</sup> , Prev Care Measures Group (C/R), GPRO <sup>c</sup>

## 2012 Physician Quality Reporting System (Physician Quality Reporting) Measures List

#	NQF #	Measure Title & Description <sup>a</sup>	Measure Developer	Reporting Options/Methods
130.	0419	<p><b>Documentation of Current Medications in the Medical Record</b>                      Percentage of specified visits for patients aged 18 years and older for which the eligible professional attests to documenting a list of current medications to the best of his/her knowledge and ability. This list <b><i>must</i></b> include ALL prescriptions, over-the-counters, herbals, vitamin/mineral/dietary (nutritional) supplements AND <b><i>must</i></b> contain the medications' name, dosage, frequency and route</p>	 CMS/QIP	Claims, Registry <sup>b</sup>
131.	0420	<p><b>Pain Assessment and Follow-Up</b>                      Percentage of patients aged 18 years and older with documentation of a pain assessment through discussion with the patient including the use of a standardized tool(s) on each visit AND documentation of a follow-up plan when pain is present</p>	 CMS/QIP	Claims, Registry <sup>b</sup>
134.	0418	<p><b>Preventive Care and Screening: Screening for Clinical Depression and Follow-Up Plan</b>                      Percentage of patients aged 12 years and older screened for clinical depression using an age appropriate standardized tool AND follow-up plan documented</p>	 CMS/QIP	Claims, Registry <sup>b</sup>
137.	0650	<p><b>Melanoma: Continuity of Care – Recall System</b>                      Percentage of patients, regardless of age, with a current diagnosis of melanoma or a history of melanoma whose information was entered, at least once within a 12 month period, into a recall system that includes:</p> <ul style="list-style-type: none"> <li>• A target date for the next complete physical skin exam, AND</li> <li>• A process to follow up with patients who either did not make an appointment within the specified timeframe or who missed a scheduled appointment</li> </ul>	 AMA-PCPI/NCQA	Registry <sup>b</sup>
138.	0561	<p><b>Melanoma: Coordination of Care</b>                      Percentage of patient visits, regardless of patient age, with a new occurrence of melanoma who have a treatment plan documented in the chart that was communicated to the physician(s) providing continuing care within one month of diagnosis</p>	 AMA-PCPI/NCQA	Registry <sup>b</sup>
140.	0566	<p><b>Age-Related Macular Degeneration (AMD): Counseling on Antioxidant Supplement</b>                      Percentage of patients aged 50 years and older with a diagnosis of AMD and/or their caregiver(s) who were counseled within 12 months on the benefits and/or risks of the Age-Related Eye Disease Study (AREDS) formulation for preventing progression of AMD</p>	 AMA-PCPI/NCQA	Claims, Registry <sup>b</sup>
141.	0563	<p><b>Primary Open-Angle Glaucoma (POAG): Reduction of Intraocular Pressure (IOP) by 15% OR Documentation of a Plan of Care</b>                      Percentage of patients aged 18 years and older with a diagnosis of POAG whose glaucoma treatment has not failed (the most recent IOP was reduced by at least 15% from the pre-intervention level) OR if the most recent IOP was not reduced by at least 15% from the pre-intervention level, a plan of care was documented within 12 months</p>	 AMA-PCPI/NCQA	Claims, Registry <sup>b</sup>

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#	NQF #	Measure Title & Description <sup>a</sup>	Measure Developer	Reporting Options/Methods
142.	0051	<b>Osteoarthritis (OA): Assessment for Use of Anti-Inflammatory or Analgesic Over-the-Counter (OTC) Medications</b> Percentage of patient visits for patients aged 21 years and older with a diagnosis of OA with an assessment for use of anti-inflammatory or analgesic OTC medications	▲ AMA-PCPI	Claims, Registry <sup>b</sup>
143.	0384	<b>Oncology: Medical and Radiation – Pain Intensity Quantified</b> Percentage of patient visits, regardless of patient age, with a diagnosis of cancer currently receiving chemotherapy or radiation therapy in which pain intensity is quantified	▲ AMA-PCPI	Registry <sup>b</sup>
144.	0383	<b>Oncology: Medical and Radiation – Plan of Care for Pain</b> Percentage of patient visits, regardless of patient age, with a diagnosis of cancer currently receiving chemotherapy or radiation therapy who report having pain with a documented plan of care to address pain	▲ AMA-PCPI	Registry <sup>b</sup>
145.	0510	<b>Radiology: Exposure Time Reported for Procedures Using Fluoroscopy</b> Percentage of final reports for procedures using fluoroscopy that include documentation of radiation exposure or exposure time	▣ AMA-PCPI/NCQA	Claims, Registry <sup>b</sup>
146.	0508	<b>Radiology: Inappropriate Use of “Probably Benign” Assessment Category in Mammography Screening</b> Percentage of final reports for screening mammograms that are classified as “probably benign”	▣ AMA-PCPI/NCQA	Claims, Registry <sup>b</sup>
147.	0511	<b>Nuclear Medicine: Correlation with Existing Imaging Studies for All Patients Undergoing Bone Scintigraphy</b> Percentage of final reports for all patients, regardless of age, undergoing bone scintigraphy that include physician documentation of correlation with existing relevant imaging studies (e.g., x-ray, MRI, CT, etc.) that were performed	▲ AMA-PCPI	Claims, Registry <sup>b</sup>
148.	0322	<b>Back Pain: Initial Visit</b> The percentage of patients aged 18 through 79 years with a diagnosis of back pain or undergoing back surgery who had back pain and function assessed during the initial visit to the clinician for the episode of back pain	◆ NCQA	Back Pain Measures Group (C/R)
149.	0319	<b>Back Pain: Physical Exam</b> Percentage of patients aged 18 through 79 years with a diagnosis of back pain or undergoing back surgery who received a physical examination at the initial visit to the clinician for the episode of back pain	◆ NCQA	Back Pain Measures Group (C/R)
150.	0314	<b>Back Pain: Advice for Normal Activities</b> The percentage of patients aged 18 through 79 years with a diagnosis of back pain or undergoing back surgery who received advice for normal activities at the initial visit to the clinician for the episode of back pain	◆ NCQA	Back Pain Measures Group (C/R)











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#	NQF #	Measure Title & Description <sup>a</sup>	Measure Developer	Reporting Options/Methods
151.	0313	<p><b>Back Pain: Advice Against Bed Rest</b>                      The percentage of patients aged 18 through 79 years with a diagnosis of back pain or undergoing back surgery who received advice against bed rest lasting four days or longer at the initial visit to the clinician for the episode of back pain</p>	◆ NCQA	Back Pain Measures Group (C/R)
154.	AQA adopted	<p><b>Falls: Risk Assessment</b>                      Percentage of patients aged 65 years and older with a history of falls who had a risk assessment for falls completed within 12 months</p>	* AMA-PCPI/NCQA	Claims, Registry <sup>b</sup>
155.	AQA adopted	<p><b>Falls: Plan of Care</b>                      Percentage of patients aged 65 years and older with a history of falls who had a plan of care for falls documented within 12 months</p>	* AMA-PCPI/NCQA	Claims, Registry <sup>b</sup>
156.	0382	<p><b>Oncology: Radiation Dose Limits to Normal Tissues</b>                      Percentage of patients, regardless of age, with a diagnosis of pancreatic or lung cancer receiving 3D conformal radiation therapy with documentation in medical record that radiation dose limits to normal tissues were established prior to the initiation of a course of 3D conformal radiation for a minimum of two tissues</p>	▲ AMA-PCPI	Claims, Registry <sup>b</sup>
157.	0455	<p><b>Thoracic Surgery: Recording of Clinical Stage Prior to Lung Cancer or Esophageal Cancer Resection</b>                      Percentage of surgical patients aged 18 years and older undergoing resection for lung or esophageal cancer who had clinical staging provided prior to surgery</p>	Ω STS	Claims, Registry <sup>b</sup>
158.	0466	<p><b>Carotid Endarterectomy: Use of Patch During Conventional Carotid Endarterectomy</b>                      Percentage of patients aged 18 years and older undergoing conventional (non-eversion) carotid endarterectomy (CEA) who undergo patch closure of the arteriotomy</p>	† SVS	Claims, Registry <sup>b</sup>
159.	0404	<p><b>HIV/AIDS: CD4+ Cell Count or CD4+ Percentage</b>                      Percentage of patients aged 6 months and older with a diagnosis of HIV/AIDS for whom a CD4+ cell count or CD4+ cell percentage was performed at least once every 6 months</p>	□ AMA-PCPI/NCQA	Registry <sup>b</sup> , HIV/AIDS Measures Group (R)
160.	0405	<p><b>HIV/AIDS: Pneumocystis Jiroveci Pneumonia (PCP) Prophylaxis</b>                      Percentage of patients aged 6 years and older with a diagnosis of HIV/AIDS and CD4+ cell count &lt; 200 cells/mm<sup>3</sup> who were prescribed PCP prophylaxis within 3 months of low CD4+ cell count</p>	□ AMA-PCPI/NCQA	Registry <sup>b</sup> , HIV/AIDS Measures Group (R)
161.	0406	<p><b>HIV/AIDS: Adolescent and Adult Patients with HIV/AIDS Who Are Prescribed Potent Antiretroviral Therapy</b>                      Percentage of patients with a diagnosis of HIV/AIDS aged 13 years and older: who have a history of a nadir CD4+ cell count below 350/mm<sup>3</sup> or who have a history of an AIDS-defining condition, regardless of CD4+ cell count; or who are pregnant, regardless of CD4+ cell count or age, who were prescribed potent antiretroviral therapy</p>	□ AMA-PCPI/NCQA	Registry <sup>b</sup> , HIV/AIDS Measures Group (R)

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#	NQF #	Measure Title & Description <sup>a</sup>	Measure Developer	Reporting Options/Methods
162.	0407	<b>HIV/AIDS: HIV RNA Control After Six Months of Potent Antiretroviral Therapy</b> Percentage of patients aged 13 years and older with a diagnosis of HIV/AIDS who are receiving potent antiretroviral therapy, who have a viral load below limits of quantification after at least 6 months of potent antiretroviral therapy or patients whose viral load is not below limits of quantification after at least 6 months of potent antiretroviral therapy and have documentation of a plan of care	☐ AMA-PCPI/NCQA	Registry <sup>b</sup> , HIV/AIDS Measures Group (R)
163.	0056	<b>Diabetes Mellitus: Foot Exam</b> The percentage of patients aged 18 through 75 years with diabetes who had a foot examination	◆ NCQA	Claims, Registry <sup>b</sup> , EHR <sup>b</sup> , DM Measures Group (C/R), GPRO <sup>c</sup>
164.	0129	<b>Coronary Artery Bypass Graft (CABG): Prolonged Intubation</b> Percentage of patients aged 18 years and older undergoing isolated CABG surgery who require intubation > 24 hours	Ω STS	Registry <sup>b</sup> , CABG Measures Group (R)
165.	0130	<b>Coronary Artery Bypass Graft (CABG): Deep Sternal Wound Infection Rate</b> Percentage of patients aged 18 years and older undergoing isolated CABG surgery who, within 30 days postoperatively, develop deep sternal wound infection (involving muscle, bone, and/or mediastinum requiring operative intervention)	Ω STS	Registry <sup>b</sup> , CABG Measures Group (R)
166.	0131	<b>Coronary Artery Bypass Graft (CABG): Stroke</b> Percentage of patients aged 18 years and older undergoing isolated CABG surgery who have a <u>postoperative</u> stroke (i.e., any confirmed neurological deficit of abrupt onset caused by a disturbance in blood supply to the brain) that did not resolve within 24 hours	Ω STS	Registry <sup>b</sup> , CABG Measures Group (R)
167.	0114	<b>Coronary Artery Bypass Graft (CABG): Postoperative Renal Failure</b> Percentage of patients aged 18 years and older undergoing isolated CABG surgery (without pre-existing renal failure) who develop postoperative renal failure or require dialysis	Ω STS	Registry <sup>b</sup> , CABG Measures Group (R)
168.	0115	<b>Coronary Artery Bypass Graft (CABG): Surgical Re-Exploration</b> Percentage of patients aged 18 years and older undergoing isolated CABG surgery who require a return to the operating room (OR) during the current hospitalization for mediastinal bleeding with or without tamponade, graft occlusion, valve dysfunction, or other cardiac reason	Ω STS	Registry <sup>b</sup> , CABG Measures Group (R)
169.	0116	<b>Coronary Artery Bypass Graft (CABG): Antiplatelet Medications at Discharge</b> Percentage of patients aged 18 years and older undergoing isolated CABG surgery who were discharged on antiplatelet medication	Ω STS	Registry <sup>b</sup> , CABG Measures Group (R)
170.	0117	<b>Coronary Artery Bypass Graft (CABG): Beta-Blockers Administered at Discharge</b> Percentage of patients aged 18 years and older undergoing isolated CABG surgery who were discharged on beta-blockers	Ω STS	Registry <sup>b</sup> , CABG Measures Group (R)
171.	0118	<b>Coronary Artery Bypass Graft (CABG): Anti-Lipid Treatment at Discharge</b> Percentage of patients aged 18 years and older undergoing isolated CABG surgery who were discharged on a statin or other lipid-lowering regimen	Ω STS	Registry <sup>b</sup> , CABG Measures Group (R)

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#	NQF #	Measure Title & Description <sup>a</sup>	Measure Developer	Reporting Options/Methods
172.	0259	<b>Hemodialysis Vascular Access Decision-Making by Surgeon to Maximize Placement of Autogenous Arterial Venous (AV) Fistula</b> Percentage of patients aged 18 years and older with a diagnosis of advanced Chronic Kidney Disease (CKD) (stage 4 or 5) or End Stage Renal Disease (ESRD) requiring hemodialysis vascular access documented by surgeon to have received autogenous AV fistula	 SVS	Claims, Registry <sup>b</sup>
173.	AQA adopted	<b>Preventive Care and Screening: Unhealthy Alcohol Use – Screening</b> Percentage of patients aged 18 years and older who were screened for unhealthy alcohol use using a systematic screening method within 24 months	 AMA-PCPI	Claims, Registry <sup>b</sup> , EHR <sup>b</sup> , Prev Care Measures Group (C/R)
176.	AQA adopted	<b>Rheumatoid Arthritis (RA): Tuberculosis Screening</b> Percentage of patients aged 18 years and older with a diagnosis of RA who have documentation of a tuberculosis (TB) screening performed and results interpreted within 6 months prior to receiving a first course of therapy using a biologic disease-modifying anti-rheumatic drug (DMARD)	 AMA-PCPI/NCQA	Claims, Registry <sup>b</sup> , RA Measures Group (C/R)
177.	AQA adopted	<b>Rheumatoid Arthritis (RA): Periodic Assessment of Disease Activity</b> Percentage of patients aged 18 years and older with a diagnosis of RA who have an assessment and classification of disease activity within 12 months	 AMA-PCPI/NCQA	Claims, Registry <sup>b</sup> , RA Measures Group (C/R)
178.	AQA adopted	<b>Rheumatoid Arthritis (RA): Functional Status Assessment</b> Percentage of patients aged 18 years and older with a diagnosis of RA for whom a functional status assessment was performed at least once within 12 months	 AMA-PCPI/NCQA	Claims, Registry <sup>b</sup> , RA Measures Group (C/R)
179.	AQA adopted	<b>Rheumatoid Arthritis (RA): Assessment and Classification of Disease Prognosis</b> Percentage of patients aged 18 years and older with a diagnosis of RA who have an assessment and classification of disease prognosis at least once within 12 months	 AMA-PCPI/NCQA	Claims, Registry <sup>b</sup> , RA Measures Group (C/R)
180.	AQA adopted	<b>Rheumatoid Arthritis (RA): Glucocorticoid Management</b> Percentage of patients aged 18 years and older with a diagnosis of RA who have been assessed for glucocorticoid use and, for those on prolonged doses of prednisone ≥ 10 mg daily (or equivalent) with improvement or no change in disease activity, documentation of glucocorticoid management plan within 12 months	 AMA-PCPI/NCQA	Claims, Registry <sup>b</sup> , RA Measures Group (C/R)
181.	AQA adopted	<b>Elder Maltreatment Screen and Follow-Up Plan</b> Percentage of patients aged 65 years and older with documentation of a screen for elder maltreatment AND documented follow-up plan	 CMS/QIP	Claims, Registry <sup>b</sup>
182.	AQA adopted	<b>Functional Outcome Assessment</b> Percentage of patients aged 18 years and older with documentation of a current functional outcome assessment using a standardized functional outcome assessment tool AND documentation of a care plan based on identified functional outcome deficiencies	 CMS/QIP	Claims, Registry <sup>b</sup>
183.	0399	<b>Hepatitis C: Hepatitis A Vaccination in Patients with HCV</b> Percentage of patients aged 18 years and older with a diagnosis of hepatitis C who received at least one injection of hepatitis A vaccine, or who have documented immunity to hepatitis A	 AMA-PCPI	Claims, Registry <sup>b</sup> , Hep C Measures Group (C/R)



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#	NQF #	Measure Title & Description <sup>a</sup>	Measure Developer	Reporting Options/Methods
184.	0400	<b>Hepatitis C: Hepatitis B Vaccination in Patients with HCV</b> Percentage of patients aged 18 years and older with a diagnosis of hepatitis C who received at least one injection of hepatitis B vaccine, or who have documented immunity to hepatitis B	▲ AMA-PCPI	Claims, Registry <sup>b</sup> , Hep C Measures Group (C/R)
185.	0659	<b>Endoscopy &amp; Polyp Surveillance: Colonoscopy Interval for Patients with a History of Adenomatous Polyps – Avoidance of Inappropriate Use</b> Percentage of patients aged 18 years and older receiving a surveillance colonoscopy with a history of colonic polyp(s) in a previous colonoscopy, who had a follow-up interval of 3 or more years since their last colonoscopy documented in the colonoscopy report	⌘ AMA-PCPI/NCQA	Claims, Registry <sup>b</sup>
186.	AQA adopted	<b>Chronic Wound Care: Use of Compression System in Patients with Venous Ulcers</b> Percentage of patients aged 18 years and older with a diagnosis of venous ulcer who were prescribed compression therapy within the 12-month reporting period	⌘ AMA-PCPI/NCQA	Claims, Registry <sup>b</sup>
187.	0437	<b>Stroke and Stroke Rehabilitation: Thrombolytic Therapy</b> Percentage of patients aged 18 years and older with a diagnosis of acute ischemic stroke who arrive at the hospital within two hours of time last known well and for whom IV t-PA was initiated within three hours of time last known well	○ AHA/ASA/TJC	Registry <sup>b</sup>
188.	N/A	<b>Referral for Otologic Evaluation for Patients with Congenital or Traumatic Deformity of the Ear</b> Percentage of patients aged birth and older referred to a physician (preferably a physician with training in disorders of the ear) for an otologic evaluation subsequent to an audiologic evaluation after presenting with a congenital or traumatic deformity of the ear (internal or external)	⚡ AQC	Claims, Registry <sup>b</sup>
189.	N/A	<b>Referral for Otologic Evaluation for Patients with History of Active Drainage from the Ear Within the Previous 90 Days</b> Percentage of patients aged birth and older who have disease of the ear and mastoid processes referred to a physician (preferably a physician with training in disorders of the ear) for an otologic evaluation subsequent to an audiologic evaluation after presenting with a history of active drainage from the ear within the previous 90 days	⚡ AQC	Claims, Registry <sup>b</sup>
190.	N/A	<b>Referral for Otologic Evaluation for Patients with a History of Sudden or Rapidly Progressive Hearing Loss</b> Percentage of patients aged birth and older referred to a physician (preferably a physician with training in disorders of the ear) for an otologic evaluation immediately following an audiologic evaluation that verifies and documents sudden or rapidly progressive hearing loss	⚡ AQC	Claims, Registry <sup>b</sup>
191.	0565	<b>Cataracts: 20/40 or Better Visual Acuity within 90 Days Following Cataract Surgery</b> Percentage of patients aged 18 years and older with a diagnosis of uncomplicated cataract who had cataract surgery and no significant ocular conditions impacting the visual outcome of surgery and had best-corrected visual acuity of 20/40 or better (distance or near) achieved within 90 days following the cataract surgery	* AMA-PCPI/NCQA	Registry <sup>b</sup> , Cataract Measures Group (R)






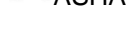



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#	NQF #	Measure Title & Description <sup>a</sup>	Measure Developer	Reporting Options/Methods
192.	0564	<p><b>Cataracts: Complications within 30 Days Following Cataract Surgery Requiring Additional Surgical Procedures</b>                      Percentage of patients aged 18 years and older with a diagnosis of uncomplicated cataract who had cataract surgery and had 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 IOL, retinal detachment, or wound dehiscence</p>	* AMA-PCPI/NCQA	Registry <sup>b</sup> , Cataract Measures Group (R)
193.	0454	<p><b>Perioperative Temperature Management</b>                      Percentage of patients, regardless of age, undergoing surgical or therapeutic procedures under general or neuraxial anesthesia of 60 minutes duration or longer, except patients undergoing cardiopulmonary bypass, for whom <i>either</i> active warming was used intraoperatively for the purpose of maintaining normothermia, OR at least one body temperature equal to or greater than 36 degrees Centigrade (or 96.8 degrees Fahrenheit) was recorded within the 30 minutes immediately before or the 15 minutes immediately after anesthesia end time</p>	▲ AMA-PCPI	Claims, Registry <sup>b</sup>
194.	0386	<p><b>Oncology: Cancer Stage Documented</b>                      Percentage of patients, regardless of age, with a diagnosis of breast, colon, or rectal cancer who are seen in the ambulatory setting who have a baseline AJCC cancer stage or documentation that the cancer is metastatic in the medical record at least once within 12 months</p>	♥ AMA-PCPI/ASCO	Claims, Registry <sup>b</sup>
195.	0507	<p><b>Radiology: Stenosis Measurement in Carotid Imaging Reports</b>                      Percentage of final reports for all patients, regardless of age, for carotid imaging studies (neck magnetic resonance angiography [MRA], neck computed tomography angiography [CTA], neck duplex ultrasound, carotid angiogram) performed that include direct or indirect reference to measurements of distal internal carotid diameter as the denominator for stenosis measurement</p>	* AMA-PCPI/NCQA	Claims, Registry <sup>b</sup>
196.	0065	<p><b>Coronary Artery Disease (CAD): Symptom and Activity Assessment</b>                      Percentage of patients aged 18 years and older with a diagnosis of coronary artery disease seen within a 12 month period for whom there are documented results of an evaluation of level of activity AND an evaluation of presence or absence of anginal symptoms in the medical record</p>	▶ AMA-PCPI/ACCF/AHA	Registry <sup>b</sup> , CAD Measures Group (R)
197. <i>GPRO CAD-2</i>	0074	<p><b>Coronary Artery Disease (CAD): Lipid Control</b>                      Percentage of patients aged 18 years and older with a diagnosis of coronary artery disease seen within a 12 month period who have a LDL-C result &lt; 100 mg/dL OR patients who have a LDL-C result ≥ 100 mg/dL and have a documented plan of care to achieve LDL-C &lt; 100 mg/dL, including at a minimum the prescription of a statin</p>	▶ AMA-PCPI/ACCF/AHA	Registry <sup>b</sup> , EHR <sup>b</sup> , CAD Measures Group (R), GPRO <sup>c</sup>
198. <i>GPRO HF-1</i>	0079	<p><b>Heart Failure: Left Ventricular Ejection Fraction (LVEF) Assessment</b>                      Percentage of patients aged 18 years and older with a diagnosis of heart failure for whom the quantitative or qualitative result (of a recent or prior [any time in the past] LVEF assessment) is documented within a 12 month period</p>	▶ AMA-PCPI/ACCF/AHA	Registry <sup>b</sup> , HF Measures Group (R), GPRO <sup>c</sup>

## 2012 Physician Quality Reporting System (Physician Quality Reporting) Measures List

#	NQF #	Measure Title & Description <sup>a</sup>	Measure Developer	Reporting Options/Methods
199.  <i>GPRO HF-5</i>	0082	<b>Heart Failure: Patient Education</b> Percentage of patients aged 18 years and older with a diagnosis of heart failure who were provided with patient education on disease management and health behavior changes during one or more visit(s) within 12 months	✦ CMS/QIP	GPRO <sup>c</sup>
200.	0084	<b>Heart Failure: Warfarin Therapy for Patients with Atrial Fibrillation</b> Percentage of all patients aged 18 and older with a diagnosis of heart failure and paroxysmal or chronic atrial fibrillation who were prescribed warfarin therapy	➤ AMA-PCPI/ACCF/AHA	EHR <sup>b</sup>
201.	0073	<b>Ischemic Vascular Disease (IVD): Blood Pressure Management Control</b> Percentage of patients aged 18 years and older with ischemic vascular disease (IVD) who had most recent blood pressure in control (less than 140/90 mmHg)	✦ NCQA	Claims, Registry <sup>b</sup> , EHR <sup>b</sup> , IVD Measures Group (C/R)
204.  <i>GPRO IVD-2</i>	0068	<b>Ischemic Vascular Disease (IVD): Use of Aspirin or Another Antithrombotic</b> Percentage of patients aged 18 years and older with ischemic vascular disease (IVD) with documented use of aspirin or other antithrombotic	✦ NCQA	Claims, Registry <sup>b</sup> , EHR <sup>b</sup> , IVD Measures Group (C/R), Cardiovascular Prevention Measures Group (C/R), GPRO <sup>c</sup>
205.	0409	<b>HIV/AIDS: Sexually Transmitted Disease Screening for Chlamydia and Gonorrhea</b> Percentage of patients aged 13 years and older with a diagnosis of HIV/AIDS for whom chlamydia and gonorrhea screenings were performed at least once since the diagnosis of HIV infection	☐ AMA-PCPI/NCQA	Registry <sup>b</sup> , HIV/AIDS Measures Group (R)
206.	0413	<b>HIV/AIDS: Screening for High Risk Sexual Behaviors</b> Percentage of patients aged 13 years and older with a diagnosis of HIV/AIDS who were screened for high risk sexual behaviors at least once within 12 months	☐ AMA-PCPI/NCQA	Registry <sup>b</sup> , HIV/AIDS Measures Group (R)
207.	0415	<b>HIV/AIDS: Screening for Injection Drug Use</b> Percentage of patients aged 13 years and older with a diagnosis of HIV/AIDS who were screened for injection drug use at least once within 12 months	☐ AMA-PCPI/NCQA	Registry <sup>b</sup> , HIV/AIDS Measures Group (R)
208.	0410	<b>HIV/AIDS: Sexually Transmitted Disease Screening for Syphilis</b> Percentage of patients aged 13 years and older with a diagnosis of HIV/AIDS who were screened for syphilis at least once within 12 months	☐ AMA-PCPI/NCQA	Registry <sup>b</sup> , HIV/AIDS Measures Group (R)
209.	0445	<b>Functional Communication Measure - Spoken Language Comprehension</b> Percentage of patients aged 16 years and older with a diagnosis of late effects of cerebrovascular disease (CVD) that make progress on the Spoken Language Comprehension Functional Communication Measure	🗝️ ASHA	Registry <sup>b</sup>
210.	0449	<b>Functional Communication Measure - Attention</b> Percentage of patients aged 16 years and older with a diagnosis of late effects of cerebrovascular disease (CVD) that make progress on the Attention Functional Communication Measure	🗝️ ASHA	Registry <sup>b</sup>

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#	NQF #	Measure Title & Description <sup>a</sup>	Measure Developer	Reporting Options/Methods
211.	0448	<b>Functional Communication Measure - Memory</b> Percentage of patients aged 16 years and older with a diagnosis of late effects of cerebrovascular disease (CVD) that make progress on the Memory Functional Communication Measure	 ASHA	Registry <sup>b</sup>
212.	0447	<b>Functional Communication Measure - Motor Speech</b> Percentage of patients aged 16 years and older with a diagnosis of late effects of cerebrovascular disease (CVD) that make progress on the Motor Speech Functional Communication Measure	 ASHA	Registry <sup>b</sup>
213.	0446	<b>Functional Communication Measure - Reading</b> Percentage of patients aged 16 years and older with a diagnosis of late effects of cerebrovascular disease (CVD) that make progress on the Reading Functional Communication Measure	 ASHA	Registry <sup>b</sup>
214.	0444	<b>Functional Communication Measure - Spoken Language Expression</b> Percentage of patients aged 16 years and older with a diagnosis of late effects of cerebrovascular disease (CVD) that make progress on the Spoken Language Expression Functional Communication Measure	 ASHA	Registry <sup>b</sup>
215.	0442	<b>Functional Communication Measure - Writing</b> Percentage of patients aged 16 years and older with a diagnosis of late effects of cerebrovascular disease (CVD) that make progress on the Writing Functional Communication Measure	 ASHA	Registry <sup>b</sup>
216.	0443	<b>Functional Communication Measure - Swallowing</b> Percentage of patients aged 16 years and older with a diagnosis of late effects of cerebrovascular disease (CVD) that make progress on the Swallowing Functional Communication Measure	 ASHA	Registry <sup>b</sup>
217.	0422	<b>Functional Deficit: Change in Risk-Adjusted Functional Status for Patients with Knee Impairments</b> Percentage of patients aged 18 or older that receive treatment for a functional deficit secondary to a diagnosis that affects the knee in which the change in their Risk-Adjusted Functional Status is measured	 FOTO	Registry <sup>b</sup>
218.	0423	<b>Functional Deficit: Change in Risk-Adjusted Functional Status for Patients with Hip Impairments</b> Percentage of patients aged 18 or older that receive treatment for a functional deficit secondary to a diagnosis that affects the hip in which the change in their Risk-Adjusted Functional Status is measured	 FOTO	Registry <sup>b</sup>
219.	0424	<b>Functional Deficit: Change in Risk-Adjusted Functional Status for Patients with Lower Leg, Foot or Ankle Impairments</b> Percentage of patients aged 18 or older that receive treatment for a functional deficit secondary to a diagnosis that affects the lower leg, foot or ankle in which the change in their Risk-Adjusted Functional Status is measured	 FOTO	Registry <sup>b</sup>

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#	NQF #	Measure Title & Description <sup>a</sup>	Measure Developer	Reporting Options/Methods
220.	0425	<b>Functional Deficit: Change in Risk-Adjusted Functional Status for Patients with Lumbar Spine Impairments</b> Percentage of patients aged 18 or older that receive treatment for a functional deficit secondary to a diagnosis that affects the lumbar spine in which the change in their Risk-Adjusted Functional Status is measured	☪ FOTO	Registry <sup>b</sup>
221.	0426	<b>Functional Deficit: Change in Risk-Adjusted Functional Status for Patients with Shoulder Impairments</b> Percentage of patients aged 18 or older that receive treatment for a functional deficit secondary to a diagnosis that affects the shoulder in which the change in their Risk-Adjusted Functional Status is measured	☪ FOTO	Registry <sup>b</sup>
222.	0427	<b>Functional Deficit: Change in Risk-Adjusted Functional Status for Patients with Elbow, Wrist or Hand Impairments</b> Percentage of patients aged 18 or older that receive treatment for a functional deficit secondary to a diagnosis that affects the elbow, wrist or hand in which the change in their Risk-Adjusted Functional Status is measured	☪ FOTO	Registry <sup>b</sup>
223.	0428	<b>Functional Deficit: Change in Risk-Adjusted Functional Status for Patients with Neck, Cranium, Mandible, Thoracic Spine, Ribs, or Other General Orthopedic Impairments</b> Percentage of patients aged 18 or older that receive treatment for a functional deficit secondary to a diagnosis that affects the neck, cranium, mandible, thoracic spine, ribs, or other general orthopedic impairment in which the change in their Risk-Adjusted Functional Status is measured	☪ FOTO	Registry <sup>b</sup>
224.	0562	<b>Melanoma: Overutilization of Imaging Studies in Melanoma</b> Percentage of patients, regardless of age, with a current diagnosis of melanoma or a history of melanoma, without signs or symptoms, seen for an office visit during the one-year measurement period, for whom no diagnostic imaging studies were ordered	* AMA-PCPI/NCQA	Registry <sup>b</sup>
225.	0509	<b>Radiology: Reminder System for Mammograms</b> Percentage of patients aged 40 years and older undergoing a screening mammogram whose information is entered into a reminder system with a target due date for the next mammogram	☐ AMA-PCPI/NCQA	Claims, Registry <sup>b</sup>
226.	0028	<b>Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention</b> Percentage of patients aged 18 years and older who were screened for tobacco use one or more times within 24 months <u>AND</u> who received cessation counseling intervention if identified as a tobacco user	▲ AMA-PCPI	Claims, Registry <sup>b</sup> , EHR <sup>b</sup> , CAD Measures Group (R), COPD Measures Group (C/R), HF Measures Group (R), IBD Measures Group (R), IVD Measures Group (C/R), Prev Care Measures Group (C/R), Cardiovascular Prevention Measures Group (C/R), GPRO <sup>c</sup>

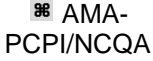
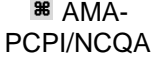
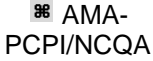






## 2012 Physician Quality Reporting System (Physician Quality Reporting) Measures List

#	NQF #	Measure Title & Description <sup>a</sup>	Measure Developer	Reporting Options/Methods
228. <i>GPRO HF-2</i>	N/A	<b>Heart Failure (HF): Left Ventricular Function (LVF) Testing</b> Percentage of patients 18 years and older with LVF testing performed during the measurement period for patients hospitalized with a principal diagnosis of HF during the reporting period	♣ CMS/QIP	Registry <sup>b</sup> , GPRO <sup>c</sup>
231.	N/A	<b>Asthma: Tobacco Use: Screening - Ambulatory Care Setting</b> Percentage of patients (or their primary caregiver) aged 5 through 50 years with a diagnosis of asthma who were queried about tobacco use and exposure to second hand smoke within their home environment at least once during the one-year measurement period	▣ AMA-PCPI/NCQA	Claims, Registry <sup>b</sup> , Asthma Measures Group (C/R)
232.	N/A	<b>Asthma: Tobacco Use: Intervention - Ambulatory Care Setting</b> Percentage of patients (or their primary caregiver) aged 5 through 50 years with a diagnosis of asthma who were identified as tobacco users (patients who currently use tobacco AND patients who do not currently use tobacco, but are exposed to second hand smoke in their home environment) who received tobacco cessation intervention at least once during the one-year measurement period	▣ AMA-PCPI/NCQA	Claims, Registry <sup>b</sup> , Asthma Measures Group (C/R)
233.	0457	<b>Thoracic Surgery: Recording of Performance Status Prior to Lung or Esophageal Cancer Resection</b> Percentage of patients aged 18 years and older undergoing resection for lung or esophageal cancer who had performance status documented and reviewed within 2 weeks prior to surgery	Ω STS	Registry <sup>b</sup>
234.	0458	<b>Thoracic Surgery: Pulmonary Function Tests Before Major Anatomic Lung Resection (Pneumonectomy, Lobectomy, or Formal Segmentectomy)</b> Percentage of thoracic surgical patients aged 18 years and older undergoing at least one pulmonary function test within 12 months prior to a major lung resection (pneumonectomy, lobectomy, or formal segmentectomy)	Ω STS	Registry <sup>b</sup>
235.	0017	<b>Hypertension (HTN): Plan of Care</b> Percentage of patient visits for patients aged 18 years and older with a diagnosis of HTN during which either systolic blood pressure ≥ 140 mmHg OR diastolic blood pressure ≥ 90mm Hg, with documented plan of care for hypertension	♣ CMS/QIP	Claims, Registry <sup>b</sup>
236. <i>GPRO HTN-2</i>	0018	<b>Hypertension (HTN): Controlling High Blood Pressure</b> Percentage of patients aged 18 through 85 years of age who had a diagnosis of hypertension (HTN) and whose BP was adequately controlled (< 140/90 mmHg)	♣ NCQA	EHR <sup>b</sup> , GPRO <sup>c</sup> , Cardiovascular Prevention Measures Group (C/R)
237.	0013	<b>Hypertension (HTN): Blood Pressure Measurement</b> Percentage of patient visits for patients aged 18 years and older with a diagnosis of HTN with blood pressure (BP) recorded	▲ AMA-PCPI	EHR <sup>b</sup>

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#	NQF #	Measure Title & Description <sup>a</sup>	Measure Developer	Reporting Options/Methods
238.	0022	<b>Drugs to be Avoided in the Elderly</b> Percentage of patients ages 65 years and older who received at least one drug to be avoided in the elderly and/or two different drugs to be avoided in the elderly in the measurement period	◆ NCQA	EHR <sup>b</sup>
239.	0024	<b>Weight Assessment and Counseling for Children and Adolescents</b> Percentage of children 2 through 18 years of age whose weight is classified based on BMI percentile for age and gender	◆ NCQA	EHR <sup>b</sup>
240.	0038	<b>Childhood Immunization Status</b> The percentage of children two years of age who had four DTaP/DT, three IPV, one MMR, three influenza type B, three hepatitis B, one chicken pox vaccine (VZV) and four pneumococcal conjugate vaccines by their second birthday	◆ NCQA	EHR <sup>b</sup>
241. <i>GPRO IVD-1</i>	0075	<b>Ischemic Vascular Disease (IVD): Complete Lipid Panel and Low Density Lipoprotein (LDL-C) Control</b> Percentage of patients aged 18 years and older with Ischemic Vascular Disease (IVD) who received at least one lipid profile within 12 months and whose most recent LDL-C level was in control (less than 100 mg/dL)	◆ NCQA	Claims, Registry <sup>b</sup> , EHR <sup>b</sup> , IVD Measures Group (C/R), Cardiovascular Prevention Measures Group (C/R), GPRO <sup>c</sup>
242.	N/A	<b>Coronary Artery Disease (CAD): Symptom Management</b> Percentage of patients aged 18 years and older with a diagnosis of coronary artery disease seen within a 12-month period and with results of an evaluation of level of activity AND an assessment for the presence <u>or</u> absence of anginal symptoms, with a plan of care to manage anginal symptoms, if present	▶ AMA-PCPI/ACCF/AHA	Registry <sup>b</sup>
243.	0643	<b>Cardiac Rehabilitation Patient Referral from an Outpatient Setting</b> Percentage of patients evaluated in an outpatient setting who within the past 12 months have experienced an acute myocardial infarction (MI), coronary artery bypass graft (CABG) surgery, a percutaneous coronary intervention (PCI), cardiac valve surgery, or cardiac transplantation, or who have chronic stable angina (CSA) and have not already participated in an early outpatient cardiac rehabilitation/secondary prevention (CR) program for the qualifying event/diagnosis who were referred to a CR program	● ACCF-AHA	Registry <sup>b</sup>
244.	N/A	<b>Hypertension: Blood Pressure Management</b> Percentage of patients aged 18 years and older with a diagnosis of hypertension seen within a 12 month period with a blood pressure < 140/90 mmHg OR patients with a blood pressure ≥ 140/90 mmHg and prescribed two or more anti-hypertensive medications during the most recent office visit	▶ AMA-PCPI/ACCF/AHA	Registry <sup>b</sup>
245.	AQA adopted	<b>Chronic Wound Care: Use of Wound Surface Culture Technique in Patients with Chronic Skin Ulcers</b> Percentage of patient visits for those patients aged 18 years and older with a diagnosis of chronic skin ulcer <u>without</u> the use of a wound surface culture technique	⌘ AMA-PCPI/NCQA	Claims, Registry <sup>b</sup>

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#	NQF #	Measure Title & Description <sup>a</sup>	Measure Developer	Reporting Options/Methods
246.	AQA adopted	<p><b>Chronic Wound Care: Use of Wet to Dry Dressings in Patients with Chronic Skin Ulcers</b>                      Percentage of patient visits for those patients aged 18 years and older with a diagnosis of chronic skin ulcer <u>without</u> a prescription or recommendation to use wet to dry dressings</p>		Claims, Registry <sup>b</sup>
247.	AQA adopted	<p><b>Substance Use Disorders: Counseling Regarding Psychosocial and Pharmacologic Treatment Options for Alcohol Dependence</b>                      Percentage of patients aged 18 years and older with a diagnosis of current alcohol dependence who were counseled regarding psychosocial AND pharmacologic treatment options for alcohol dependence within the 12-month reporting period</p>		Claims, Registry <sup>b</sup>
248.	AQA adopted	<p><b>Substance Use Disorders: Screening for Depression Among Patients with Substance Abuse or Dependence</b>                      Percentage of patients aged 18 years and older with a diagnosis of current substance abuse or dependence who were screened for depression within the 12-month reporting period</p>		Claims, Registry <sup>b</sup>
249.	N/A	<p><b>Barrett's Esophagus</b>                      Percentage of esophageal biopsy reports that document the presence of Barrett's mucosa that also include a statement about dysplasia</p>		Claims, Registry <sup>b</sup>
250.	N/A	<p><b>Radical Prostatectomy Pathology Reporting</b>                      Percentage of radical prostatectomy pathology reports that include the pT category, the pN category, the Gleason score and a statement about margin status</p>		Claims, Registry <sup>b</sup>
251.	N/A	<p><b>Immunohistochemical (IHC) Evaluation of Human Epidermal Growth Factor Receptor 2 Testing (HER2) for Breast Cancer Patients</b>                      This is a measure based on whether quantitative evaluation of Human Epidermal Growth Factor Receptor 2 Testing (HER2) by immunohistochemistry (IHC) uses the system recommended in the ASCO/CAP Guidelines for Human Epidermal Growth Factor Receptor 2 Testing in breast cancer</p>		Claims, Registry <sup>b</sup>
252.	0503	<p><b>Anticoagulation for Acute Pulmonary Embolus Patients</b>                      Anticoagulation ordered for patients who have been discharged from the emergency department (ED) with a diagnosis of acute pulmonary embolus</p>		Claims, Registry <sup>b</sup>
253.	0502	<p><b>Pregnancy Test for Female Abdominal Pain Patients</b>                      Percentage of female patients aged 14 to 50 who present to the emergency department (ED) with a chief complaint of abdominal pain for whom a pregnancy test ordered</p>		Claims, Registry <sup>b</sup>
254.	0651	<p><b>Ultrasound Determination of Pregnancy Location for Pregnant Patients with Abdominal Pain</b>                      Percentage of pregnant female patients aged 14 to 50 who present to the emergency department (ED) with a chief complaint of abdominal pain or vaginal bleeding who receive a trans-abdominal or trans-vaginal ultrasound to determine pregnancy location</p>		Claims, Registry <sup>b</sup>



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#	NQF #	Measure Title & Description <sup>a</sup>	Measure Developer	Reporting Options/Methods
255.	0652	<b>Rh Immunoglobulin (Rhogam) for Rh-Negative Pregnant Women at Risk of Fetal Blood Exposure</b> Percentage of Rh-negative pregnant women aged 14-50 years at risk of fetal blood exposure who receive Rh-Immunoglobulin (Rhogam) in the emergency department (ED)	 ACEP	Claims, Registry <sup>b</sup>
256.	N/A	<b>Surveillance after Endovascular Abdominal Aortic Aneurysm Repair (EVAR)</b> Percentage of 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 that documents aneurysm sac diameter and endoleak status	 SVS	Registry <sup>b</sup>
257.	N/A	<b>Statin Therapy at Discharge after Lower Extremity Bypass (LEB)</b> Percentage of patients aged 18 years and older undergoing infra-inguinal lower extremity bypass who are prescribed a statin medication at discharge	 SVS	Registry <sup>b</sup>
258.	N/A	<b>Rate of Open Elective Repair of Small or Moderate Abdominal Aortic Aneurysms (AAA) without Major Complications (Discharged to Home by Post-Operative Day #7)</b> Percent of patients undergoing open repair of small or moderate sized abdominal aortic aneurysms who do not experience a major complication (discharge to home no later than post-operative day #7)	 SVS	Registry <sup>b</sup>
259.	N/A	<b>Rate of Elective Endovascular Aortic Repair (EVAR) of Small or Moderate Abdominal Aortic Aneurysms (AAA) without Major Complications (Discharged to Home by Post-Operative Day #2)</b> Percent of patients undergoing endovascular repair of small or moderate abdominal aortic aneurysms (AAA) that do not experience a major complication (discharged to home no later than post-operative day #2)	 SVS	Registry <sup>b</sup>
260.	N/A	<b>Rate of Carotid Endarterectomy (CEA) for Asymptomatic Patients, without Major Complications (Discharged to Home Post-Operative Day #2)</b> Percent of asymptomatic patients undergoing CEA who are discharged to home no later than post-operative day #2	 SVS	Registry <sup>b</sup>
261.	N/A	<b>Referral for Otologic Evaluation for Patients with Acute or Chronic Dizziness</b> Percentage of patients aged birth and older referred to a physician (preferably a physician specially trained in disorders of the ear) for an otologic evaluation subsequent to an audiologic evaluation after presenting with acute or chronic dizziness	 AQC	Claims, Registry <sup>b</sup>
262.	N/A	<b>Image Confirmation of Successful Excision of Image-Localized Breast Lesion</b> Image confirmation of lesion(s) targeted for image guided excisional biopsy or image guided partial mastectomy in patients with nonpalpable, image-detected breast lesion(s). Lesions may include: microcalcifications, mammographic or sonographic mass or architectural distortion, focal suspicious abnormalities on magnetic resonance imaging (MRI) or other breast imaging amenable to localization such as positron emission tomography (PET) mammography, or a biopsy marker demarcating site of confirmed pathology as established by previous core biopsy	 ASBS	Claims, Registry <sup>b</sup>

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#	NQF #	Measure Title & Description <sup>a</sup>	Measure Developer	Reporting Options/Methods
263.	N/A	<b>Preoperative Diagnosis of Breast Cancer</b> The percent of patients undergoing breast cancer operations who obtained the diagnosis of breast cancer preoperatively by a minimally invasive biopsy method (excludes open/incisional biopsies)	✿ ASBS	Claims, Registry <sup>b</sup>
264.	N/A	<b>Sentinel Lymph Node Biopsy for Invasive Breast Cancer</b> The percentage of clinically node negative (clinical stage T1N0M0 or T2N0M0) breast cancer patients who undergo a sentinel lymph node (SLN) procedure	✿ ASBS	Registry <sup>b</sup>
265.	0645	<b>Biopsy Follow-Up</b> Percentage of patients whose biopsy results have been reviewed and communicated to the primary care/referring physician and patient by the performing physician	✦ AAD	Registry <sup>b</sup>
266.	N/A	<b>Epilepsy: Seizure Type(s) and Current Seizure Frequency(ies)</b> Percentage of patient visits with a diagnosis of epilepsy who had the type(s) of seizure(s) and current seizure frequency(ies) for each seizure type documented in the medical record	⚡ AAN	Claims, Registry <sup>b</sup>
267.	N/A	<b>Epilepsy: Documentation of Etiology of Epilepsy or Epilepsy Syndrome</b> All visits for patients with a diagnosis of epilepsy who had their etiology of epilepsy or with epilepsy syndrome(s) reviewed and documented if known, or documented as unknown or cryptogenic	⚡ AAN	Claims, Registry <sup>b</sup>
268.	N/A	<b>Epilepsy: Counseling for Women of Childbearing Potential with Epilepsy</b> All female patients of childbearing potential (12-44 years old) diagnosed with epilepsy who were counseled about epilepsy and how its treatment may affect contraception and pregnancy at least once a year	⚡ AAN	Claims, Registry <sup>b</sup>
269.	N/A	<b>Inflammatory Bowel Disease (IBD): Type, Anatomic Location and Activity All Documented</b> Percentage of patients aged 18 years and older with a diagnosis of inflammatory bowel disease who have documented the disease type, anatomic location and activity, at least once during the reporting period	▣ AGA	IBD Measures Group (R)
270.	N/A	<b>Inflammatory Bowel Disease (IBD): Preventive Care: Corticosteroid Sparing Therapy</b> Percentage of patients aged 18 years and older with a diagnosis of inflammatory bowel disease who have been managed by corticosteroids greater than or equal to 10mg/day for 60 or greater consecutive days that have been prescribed corticosteroid sparing therapy in the last reporting year	▣ AGA	IBD Measures Group (R)
271.	N/A	<b>Inflammatory Bowel Disease (IBD): Preventive Care: Corticosteroid Related Iatrogenic Injury – Bone Loss Assessment</b> Percentage of patients aged 18 years and older with a diagnosis of inflammatory bowel disease who have received dose of corticosteroids greater than or equal to 10 mg/day for 60 or greater consecutive days and were assessed for risk of bone loss once per the reporting year	▣ AGA	IBD Measures Group (R)












## 2012 Physician Quality Reporting System (Physician Quality Reporting) Measures List

#	NQF #	Measure Title & Description <sup>a</sup>	Measure Developer	Reporting Options/Methods
272.	N/A	<b>Inflammatory Bowel Disease (IBD): Preventive Care: Influenza Immunization</b> Percentage of patients aged 18 years and older with a diagnosis of inflammatory bowel disease for whom influenza immunization was recommended, administered or previously received during the reporting year	▣ AGA	IBD Measures Group (R)
273.	N/A	<b>Inflammatory Bowel Disease (IBD): Preventive Care: Pneumococcal Immunization</b> Percentage of patients aged 18 years and older with a diagnosis of inflammatory bowel disease that had pneumococcal vaccination administered or previously received	▣ AGA	IBD Measures Group (R)
274.	N/A	<b>Inflammatory Bowel Disease (IBD): Testing for Latent Tuberculosis (TB) Before Initiating Anti-TNF (Tumor Necrosis Factor) Therapy</b> Percentage of patients aged 18 years and older with a diagnosis of inflammatory bowel disease for whom a tuberculosis (TB) screening was performed and results interpreted within 6 months prior to receiving a first course of anti-TNF (tumor necrosis factor) therapy	▣ AGA	IBD Measures Group (R)
275.	N/A	<b>Inflammatory Bowel Disease (IBD): Assessment of Hepatitis B Virus (HBV) Status Before Initiating Anti-TNF (Tumor Necrosis Factor) Therapy</b> Percentage of patients aged 18 years and older with a diagnosis of inflammatory bowel disease who had Hepatitis B Virus (HBV) status assessed and results interpreted within one year prior to receiving a first course of anti-TNF (tumor necrosis factor) therapy	▣ AGA	IBD Measures Group (R)
276.	N/A	<b>Sleep Apnea: Assessment of Sleep Symptoms</b> Percentage of visits for patients aged 18 years and older with a diagnosis of obstructive sleep apnea that includes documentation of an assessment of symptoms, including presence or absence of snoring and daytime sleepiness	⌘ AMA-PCPI/NCQA	Sleep Apnea Measures Group (R)
277.	N/A	<b>Sleep Apnea: Severity Assessment at Initial Diagnosis</b> Percentage of patients aged 18 years and older with a diagnosis of obstructive sleep apnea who had an apnea hypopnea index (AHI) or a respiratory disturbance index (RDI) measured at the time of initial diagnosis	⌘ AMA-PCPI/NCQA	Sleep Apnea Measures Group (R)
278.	N/A	<b>Sleep Apnea: Positive Airway Pressure Therapy Prescribed</b> Percentage of patients aged 18 years and older with a diagnosis of moderate or severe obstructive sleep apnea who were prescribed positive airway pressure therapy	⌘ AMA-PCPI/NCQA	Sleep Apnea Measures Group (R)
279.	N/A	<b>Sleep Apnea: Assessment of Adherence to Positive Airway Pressure Therapy</b> Percentage of visits for patients aged 18 years and older with a diagnosis of obstructive sleep apnea who were prescribed positive airway pressure therapy who had documentation that adherence to positive airway pressure therapy was objectively measured	⌘ AMA-PCPI/NCQA	Sleep Apnea Measures Group (R)
280.	N/A	<b>Dementia: Staging of Dementia</b> Percentage of patients, regardless of age, with a diagnosis of dementia whose severity of dementia was classified as mild, moderate or severe at least once within a 12 month period	▲ AMA-PCPI	Dementia Measures Group (R)
281.	N/A	<b>Dementia: Cognitive Assessment</b> Percentage of patients, regardless of age, with a diagnosis of dementia for whom an assessment of cognition is performed and the results reviewed at least once within a 12 month period	▲ AMA-PCPI	Dementia Measures Group (R)

## 2012 Physician Quality Reporting System (Physician Quality Reporting) Measures List

#	NQF #	Measure Title & Description <sup>a</sup>	Measure Developer	Reporting Options/Methods
282.	N/A	<b>Dementia: Functional Status Assessment</b> Percentage of patients, regardless of age, with a diagnosis of dementia for whom an assessment of patient's functional status is performed and the results reviewed at least once within a 12 month period	▲ AMA-PCPI	Dementia Measures Group (R)
283.	N/A	<b>Dementia: Neuropsychiatric Symptom Assessment</b> Percentage of patients, regardless of age, with a diagnosis of dementia and for whom an assessment of patient's neuropsychiatric symptoms is performed and results reviewed at least once in a 12 month period	▲ AMA-PCPI	Dementia Measures Group (R)
284.	N/A	<b>Dementia: Management of Neuropsychiatric Symptoms</b> Percentage of patients, regardless of age, with a diagnosis of dementia who have one or more neuropsychiatric symptoms who received or were recommended to receive an intervention for neuropsychiatric symptoms within a 12 month period	▲ AMA-PCPI	Dementia Measures Group (R)
285.	N/A	<b>Dementia: Screening for Depressive Symptoms</b> Percentage of patients, regardless of age, with a diagnosis of dementia who were screened for depressive symptoms within a 12 month period	▲ AMA-PCPI	Dementia Measures Group (R)
286.	N/A	<b>Dementia: Counseling Regarding Safety Concerns</b> Percentage of patients, regardless of age, with a diagnosis of dementia or their caregiver(s) who were counseled or referred for counseling regarding safety concerns within a 12 month period	▲ AMA-PCPI	Dementia Measures Group (R)
287.	N/A	<b>Dementia: Counseling Regarding Risks of Driving</b> Percentage of patients, regardless of age, with a diagnosis of dementia or their caregiver(s) who were counseled regarding the risks of driving and driving alternatives within a 12 month period	▲ AMA-PCPI	Dementia Measures Group (R)
288.	N/A	<b>Dementia: Caregiver Education and Support</b> Percentage of patients, regardless of age, with a diagnosis of dementia whose caregiver(s) were provided with education on dementia disease management and health behavior changes AND referred to additional sources for support within a 12 month period	▲ AMA-PCPI	Dementia Measures Group (R)
289.	N/A	<b>Parkinson's Disease: Annual Parkinson's Disease Diagnosis Review</b> All patients with a diagnosis of Parkinson's disease who had an annual assessment including a review of current medications (e.g., medications that can produce Parkinson-like signs or symptoms) and a review for the presence of atypical features (e.g., falls at presentation and early in the disease course, poor response to levodopa, symmetry at onset, rapid progression [to Hoehn and Yahr stage 3 in 3 years], lack of tremor or dysautonomia) at least annually	⚡ AAN	Parkinson's Disease Measures Group (R)
290.	N/A	<b>Parkinson's Disease: Psychiatric Disorders or Disturbances Assessment</b> All patients with a diagnosis of Parkinson's disease who were assessed for psychiatric disorders or disturbances (e.g., psychosis, depression, anxiety disorder, apathy, or impulse control disorder) at least annually	⚡ AAN	Parkinson's Disease Measures Group (R)

## 2012 Physician Quality Reporting System (Physician Quality Reporting) Measures List

#	NQF #	Measure Title & Description <sup>a</sup>	Measure Developer	Reporting Options/Methods
291.	N/A	<b>Parkinson's Disease: Cognitive Impairment or Dysfunction Assessment</b> All patients with a diagnosis of Parkinson's disease who were assessed for cognitive impairment or dysfunction at least annually	 AAN	Parkinson's Disease Measures Group (R)
292.	N/A	<b>Parkinson's Disease: Querying about Sleep Disturbances</b> All patients with a diagnosis of Parkinson's disease (or caregivers, as appropriate) who were queried about sleep disturbances at least annually.	 AAN	Parkinson's Disease Measures Group (R)
293.	N/A	<b>Parkinson's Disease: Rehabilitative Therapy Options</b> All patients with a diagnosis of Parkinson's disease (or caregiver(s), as appropriate) who had rehabilitative therapy options (e.g., physical, occupational, or speech therapy) discussed at least annually	 AAN	Parkinson's Disease Measures Group (R)
294.	N/A	<b>Parkinson's Disease: Parkinson's Disease Medical and Surgical Treatment Options Reviewed</b> All patients with a diagnosis of Parkinson's disease (or caregiver(s), as appropriate) who had the Parkinson's disease treatment options (e.g., non-pharmacological treatment, pharmacological treatment, or surgical treatment) reviewed at least once annually	 AAN	Parkinson's Disease Measures Group (R)
295.	N/A	<b>Hypertension: Appropriate Use of Aspirin or Other Antiplatelet or Anticoagulant Therapy</b> Percentage of patients aged 15 through 90 years old with a diagnosis of hypertension who were prescribed aspirin or other anticoagulant/antiplatelet therapy	 ABIM	Hypertension Measures Group (R)
296.	N/A	<b>Hypertension: Complete Lipid Profile</b> Percentage of patients aged 15 through 90 years old with a diagnosis of hypertension who received a complete lipid profile within 24 months	 ABIM	Hypertension Measures Group (R)
297.	N/A	<b>Hypertension: Urine Protein Test</b> Percentage of patients aged 15 through 90 years old with a diagnosis of hypertension who either have chronic kidney disease diagnosis documented or had a urine protein test done within 36 months	 ABIM	Hypertension Measures Group (R)
298.	N/A	<b>Hypertension: Annual Serum Creatinine Test</b> Percentage of patients aged 15 through 90 years old with a diagnosis of hypertension who had a serum creatinine test done within 12 months	 ABIM	Hypertension Measures Group (R)
299.	N/A	<b>Hypertension: Diabetes Mellitus Screening Test</b> Percentage of patients aged 15 through 90 years old with a diagnosis of hypertension who had a diabetes screening test within 36 months	 ABIM	Hypertension Measures Group (R)
300.	N/A	<b>Hypertension: Blood Pressure Control</b> Percentage of patients aged 15 through 90 years old with a diagnosis of hypertension who had most recent blood pressure level under control (at goal)	 ABIM	Hypertension Measures Group (R)
301.	N/A	<b>Hypertension: Low Density Lipoprotein (LDL-C) Control</b> Percentage of patients aged 15 through 90 years old with a diagnosis of hypertension who had most recent LDL cholesterol level under control (at goal)	 ABIM	Hypertension Measures Group (R)

## 2012 Physician Quality Reporting System (Physician Quality Reporting) Measures List

#	NQF #	Measure Title & Description <sup>a</sup>	Measure Developer	Reporting Options/Methods
302.	N/A	<b>Hypertension: Dietary and Physical Activity Modifications Appropriately Prescribed</b> Percentage of patients aged 15 through 90 years old with a diagnosis of hypertension who received dietary and physical activity counseling at least once within 12 months	● ABIM	Hypertension Measures Group (R)
303.	N/A	<b>Cataracts: Improvement in Patient's Visual Function within 90 Days Following Cataract Surgery</b> Percentage of patients aged 18 years and older in sample who had cataract surgery and had improvement in visual function achieved within 90 days following the cataract surgery, based on completing a pre-operative and post-operative visual function survey	✿ AAO	Registry <sup>b</sup> , Cataract Measures Group (R)
304.	N/A	<b>Cataracts: Patient Satisfaction within 90 Days Following Cataract Surgery</b> Percentage of patients aged 18 years and older in sample who had cataract surgery and were satisfied with their care within 90 days following the cataract surgery, based on completion of the Consumer Assessment of Healthcare Providers and Systems Surgical Care Survey	✿ AAO	Registry <sup>b</sup> , Cataract Measures Group (R)
305.	0004	<b>Initiation and Engagement of Alcohol and Other Drug Dependence Treatment: (a) Initiation, (b) Engagement</b> Percentage of adolescent and adult patients with a new episode of alcohol or other drug (AOD) dependence who initiate treatment through an inpatient AOD admission, outpatient visit, intensive outpatient encounter or partial hospitalization within 14 days of the diagnosis and who initiated treatment <u>AND</u> who had two or more additional services with an AOD diagnosis within 30 days of the initial visit	◆ NCQA	EHR <sup>b</sup>
306.	0012	<b>Prenatal Care: Screening for Human Immunodeficiency Virus (HIV)</b> Percentage of patients, regardless of age, who gave birth during a 12-month period who were screened for HIV infection during the first or second prenatal visit	▲ AMA-PCPI	EHR <sup>b</sup>
307.	0014	<b>Prenatal Care: Anti-D Immune Globulin</b> Percentage of D (Rh) negative, unsensitized patients, regardless of age, who gave birth during a 12-month period who received anti-D immune globulin at 26-30 weeks gestation	▲ AMA-PCPI	EHR <sup>b</sup>
308.	0027	<b>Smoking and Tobacco Use Cessation, Medical Assistance: a. Advising Smokers and Tobacco Users to Quit, b. Discussing Smoking and Tobacco Use Cessation Medications, c. Discussing Smoking and Tobacco Use Cessation Strategies</b> Percentage of patients aged 18 years and older who were current smokers or tobacco users, who were seen by a practitioner during the measurement year and who received advice to quit smoking or tobacco use or whose practitioner recommended or discussed smoking or tobacco use cessation medications, methods or strategies	◆ NCQA	EHR <sup>b</sup>
309.	0032	<b>Cervical Cancer Screening</b> Percentage of women aged 21 through 63 years who received one or more Pap tests to screen for cervical cancer	◆ NCQA	EHR <sup>b</sup>
310.	0033	<b>Chlamydia Screening for Women</b> Percentage of women aged 15 through 24 years who were identified as sexually active and who had at least one test for chlamydia during the measurement year	◆ NCQA	EHR <sup>b</sup>

## 2012 Physician Quality Reporting System (Physician Quality Reporting) Measures List

#	NQF #	Measure Title & Description <sup>a</sup>	Measure Developer	Reporting Options/Methods
311.	0036	<b>Use of Appropriate Medications for Asthma</b> Percentage of patients aged 5 through 50 years of age who were identified as having persistent asthma and were appropriately prescribed medication during the measurement year	◆ NCQA	EHR <sup>b</sup>
312.	0052	<b>Low Back Pain: Use of Imaging Studies</b> Percentage of patients with a primary diagnosis of low back pain who did not have an imaging study (plain X-ray, MRI, CT scan) within 28 days of diagnosis	◆ NCQA	EHR <sup>b</sup>
313. <i>GPRO DM-10</i>	0575	<b>Diabetes Mellitus: Hemoglobin A1c Control (&lt;8%)</b> The percentage of patients 18 through 75 years of age with a diagnosis of diabetes (type 1 or type 2) who had HbA1c < 8%	◆ NCQA	EHR <sup>b</sup> , GPRO <sup>c</sup>
314. <i>GPRO DM-11</i>	0729 <b>Compo-site only</b>	<b>Diabetes Mellitus: Daily Aspirin Use for Patients with Diabetes and Ischemic Vascular Disease</b> Percentage of patients aged 18 to 75 years of age with diabetes mellitus and ischemic vascular disease with documented daily aspirin use during the measurement year unless contraindicated	🎵 MNCM	GPRO <sup>c</sup>
315. <i>GPRO DM-12</i>	0729 <b>Compo-site only</b>	<b>Diabetes Mellitus: Tobacco Non Use</b> Percentage of patients with a diagnosis of diabetes who indicated they were tobacco non-users	🎵 MNCM	GPRO <sup>c</sup>
316.	N/A	<b>Preventive Care and Screening: Cholesterol – Fasting Low Density Lipoprotein (LDL) Test Performed AND Risk-Stratified Fasting LDL</b> Percentage of patients aged 20 through 79 years whose risk factors* have been assessed and a fasting LDL test has been performed AND who had a fasting LDL test performed and whose risk-stratified* fasting LDL is at or below the recommended LDL goal	🏠 CMS/QIP	EHR <sup>b</sup>
317. <i>GPRO Prev-11</i>	N/A	<b>Preventive Care and Screening: Screening for High Blood Pressure</b> Percentage of patients aged 18 and older who are screened for high blood pressure	🏠 CMS/QIP	Claims, Registry <sup>b</sup> , Cardiovascular Prevention Measures Group (C/R), EHR <sup>b</sup> , GPRO <sup>c</sup>
318. <i>GPRO Care-2</i>	0101	<b>Falls: Screening for Future Fall Risk</b> Percentage of patients aged 65 years and older who were screened for future fall risk at least once within 12 months	🏠 AMA-PCPI/NCQA	GPRO <sup>c</sup>

Physician Quality Reporting measures, including patient-level measure(s), may be reported for the same patient by multiple eligible professionals practicing under the same Tax Identification Number (TIN). If a patient sees multiple providers during the reporting period, that patient can be counted for each individual NPI reporting if the patient encounter(s) meet denominator inclusion. The following is an example of two provider NPIs (National Provider Identifiers), billing under the same TIN who are intending to report Physician Quality Reporting Measure #6: Coronary Artery Disease (CAD): Oral Antiplatelet Therapy Prescribed for Patients with CAD. Provider A sees a patient on February 2, 2012 and prescribes an aspirin and reports the appropriate quality-data code (QDC) for measure

## 2012 Physician Quality Reporting System (Physician Quality Reporting) Measures List

#6. Provider B sees the same patient at an encounter on July 16, 2012 and verifies that the patient has been prescribed and is currently taking an aspirin. Provider B must also report the appropriate QDCs for the patient at the July encounter to receive credit for reporting measure #6.

<sup>a</sup>Measure titles and descriptions for some measures may vary by measure reporting options/methods for a particular program year. This is due to the timing of measure specification preparation for the various reporting options/methods. The titles and descriptions referenced in this document refer to the claims/registry measure specifications. Please refer to the measure specifications that apply to the other reporting options/methods for the measure details (e.g. measure titles and descriptions) that apply to those specific options/methods. Titles and descriptions for some measures may vary between measure reporting options/methods. This is due to the timing of measure preparation for the different reporting options/methods.

<sup>b</sup>A list of qualified Registries and EHR Vendors for the 2012 program will be available on the Alternative Reporting Mechanisms section available from the navigation bar on the left side of the CMS Physician Quality Reporting website at <http://www.cms.gov/pqrs>. Please visit this site periodically for updates and contact your EHR vendor or registry to determine if they are planning to become qualified for upcoming program years.

<sup>c</sup>The Group Practice Reporting Option (GPRO) is only available to those group practices who have been selected. For information on how to become a selected group practice, refer to the downloads on the Group Practice Reporting Option section available from the navigation bar on the left side of the CMS Physician Quality Reporting System website at <http://www.cms.gov/pqrs>. Please visit this site periodically for updates.

Appendix I - Measure Specifications		
Reporting Option/Method	Measure Specification Name	CMS Physician Quality Reporting website location
<b>Claims</b>	2012 Physician Quality Reporting Measure Specifications Manual for Claims and Registry Reporting of Individual Measures	<a href="http://www.cms.gov/pqrs">http://www.cms.gov/pqrs</a> > Measures Codes page > 2012 Physician Quality Reporting Measure Specifications Manual for Claims and Registry Reporting of Individual Measures and Release Notes ZIP file
<b>Registry</b>	2012 Physician Quality Reporting Measure Specifications Manual for Claims and Registry Reporting of Individual Measures	<a href="http://www.cms.gov/pqrs">http://www.cms.gov/pqrs</a> > Measures Codes page > 2012 Physician Quality Reporting Measure Specifications Manual for Claims and Registry Reporting of Individual Measures and Release Notes ZIP file
<b>EHR</b> <i>Electronic Health Record</i>	2012 EHR Measure Specifications	<a href="http://www.cms.gov/pqrs">http://www.cms.gov/pqrs</a> > Alternative Reporting Mechanisms page > EHR Documents for Eligible Professionals ZIP file
<b>Measures Groups</b>	2012 Physician Quality Reporting Measures Groups Specifications Manual and Release Notes  <i>NOTE: Refer to these measure specifications for more information on which reporting mechanism (claims or registry) may be used to submit each Measures Group.</i>	<a href="http://www.cms.gov/pqrs">http://www.cms.gov/pqrs</a> > Measures Codes page > 2012 Physician Quality Reporting Measures Groups Specifications Manual and Release Notes ZIP file



## 2012 Physician Quality Reporting System (Physician Quality Reporting) Measures List

Appendix I - Measure Specifications		
Reporting Option/Method	Measure Specification Name	CMS Physician Quality Reporting website location
<b>GPRO</b> <i>Group Practice Reporting Option</i>	2012 Physician Quality Reporting GPRO Narrative Measure Specifications and Release Notes	<a href="http://www.cms.gov/pqrs">http://www.cms.gov/pqrs</a> > Group Practice Reporting Option page > 2012 Physician Quality Reporting GPRO Narrative Measure Specifications and Release Notes ZIP file

## 2012 Physician Quality Reporting System (Physician Quality Reporting) Measures List

Appendix II - Measure Developer/Contact Information		
Acronym	Full Name	Contact
AAD	American Academy of Dermatology	e-mail questions and comments to <a href="http://www.aad.org/education-and-quality-care/performance-measurement-and-quality-reporting">http://www.aad.org/education-and-quality-care/performance-measurement-and-quality-reporting</a>
AAN	American Academy of Neurology	e-mail questions and comments to <a href="mailto:ggjorvad@aan.com">ggjorvad@aan.com</a>
AAO	American Academy of Ophthalmology	e-mail questions and comments to <a href="mailto:flum@aao.org">flum@aao.org</a> or <a href="mailto:kkurth@aaodc.org">kkurth@aaodc.org</a>
ABIM	American Board of Internal Medicine	e-mail questions and comments to <a href="mailto:measures@abim.org">measures@abim.org</a>
ACC	American College of Cardiology	e-mail questions and comments to <a href="mailto:mshahria@acc.org">mshahria@acc.org</a>
ACEP	American College of Emergency Physicians	e-mail questions and comments to <a href="mailto:Dchambers@acep.org">Dchambers@acep.org</a>
AGA	American Gastroenterological Association	e-mail questions and comments to <a href="mailto:drobin@gastro.org">drobin@gastro.org</a>
AHA	American Heart Association	e-mail questions and comments to <a href="mailto:guidelinesinfo@heart.org">guidelinesinfo@heart.org</a>
AMA-PCPI	American Medical Association-sponsored Physician Consortium on Performance Improvement	e-mail questions and comments to the PCPI at <a href="mailto:cpe@ama-assn.org">cpe@ama-assn.org</a>
APMA	American Podiatric Medical Association	e-mail questions and comments at <a href="http://www.apma.org/s_apma/secmember.asp?CID=421&amp;DID=17174">http://www.apma.org/s_apma/secmember.asp?CID=421&amp;DID=17174</a>
ASBS	American Society of Breast Surgeons	e-mail questions and comments to <a href="mailto:sqrutman@breastsurgeons.org">sqrutman@breastsurgeons.org</a>
ASH	American Society of Hematology	e-mail questions and comments to <a href="mailto:ash@hematology.org">ash@hematology.org</a>
ASCO	American Society of Clinical Oncology	<a href="http://www.asco.org">http://www.asco.org</a> and click on "Contact Us"
ASHA	American Speech-Language-Hearing Association	e-mail questions and comments to <a href="mailto:rmullen@asha.org">rmullen@asha.org</a>
ASA	American Stroke Association	<a href="http://www.heart.org/HEARTORG/General/Contact-Us_UCM_308813_Article.jsp">http://www.heart.org/HEARTORG/General/Contact-Us_UCM_308813_Article.jsp</a>
AQC	Audiology Quality Consortium	<a href="http://www.asha.org/advocacy/audiologypqri">http://www.asha.org/advocacy/audiologypqri</a>
CAP	College of American Pathologists	e-mail questions and comments to <a href="http://www.cap.org">http://www.cap.org</a>
CMS	Centers for Medicare & Medicaid Services	e-mail questions and comments to <a href="mailto:qnetsupport@sdps.org">qnetsupport@sdps.org</a>
MNCM	Minnesota Community Measurement	e-mail questions and comments to <a href="mailto:info@mncm.org">info@mncm.org</a>
QIP	Quality Insights of Pennsylvania	e-mail questions and comments to <a href="http://usqualitymeasures.org/qm/contact.aspx">http://usqualitymeasures.org/qm/contact.aspx</a>
FOTO	Focus on Therapeutic Outcomes	e-mail questions and comments to <a href="mailto:foto@fotoinc.com">foto@fotoinc.com</a>
NCCN	National Comprehensive Cancer Network	<a href="http://www.nccn.org/about/contact.asp">http://www.nccn.org/about/contact.asp</a>
NCQA	National Committee for Quality Assurance	<a href="http://www.ncqa.org">http://www.ncqa.org</a> and click on "Contact Us"
STS	The Society of Thoracic Surgeons	e-mail questions and comments to <a href="mailto:sts@sts.org">sts@sts.org</a>
SVS	Society of Vascular Surgeons	e-mail questions and comments at <a href="http://www.vascularweb.org">http://www.vascularweb.org</a>

*The symbols provided in this list denote the measure developer/contact responsible for the 2012 Physician Quality Reporting quality measure. Copyright detail for each measure developer is included in the 2012 Physician Quality Reporting Measure Specifications Manual for Claims and Registry.*