

## CLINICAL QUALITY PROGRAM INITIATIVES BY SPECIALTY — AMBULATORY AND PRIMARY CARE

\*\* denotes initiative presence on primary care pick list **Red Bold Text** indicates initiative required for all ambulatory specialties *Italics font* denotes measures supported by Epic Population Health Management Software but not currently built out for reporting purposes

CARDIOLOGY			
Category	Metric	Initiative Description	Steward
<b>BMI/Weight</b>	Preventive Care and Screening: Body Mass Index (BMI) Screening and Follow-up Plan**	Percentage of patients aged 18 years and older with a documented BMI during the current encounter or during the previous six months AND when the BMI is outside of normal parameters, a follow-up plan is documented during the encounter or during the previous six months of the encounter.	NQF 0421; ACO 16; PQRS 128
<b>Cardiovascular Disease</b>	Heart Failure (HF): Angiotensin-Converting Enzyme (ACE) Inhibitor or Angiotensin Receptor Blocker (ARB) Therapy for Left Ventricular Systolic Dysfunction (LVSD)	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	NQF 0081; PQRS 5
<b>Medication Management</b>	<b>Documentation of Current Medications in the Medical Record</b>	<b>Percentage of visits for patients aged 18 years and older for which the eligible professional attests to documenting a list of current medications using all immediate resources available on the date of the encounter.</b>	<b>NQF 0419; ACO 39; PQRS 130</b>
<b>Tobacco Use</b>	Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention**	Percentage of patients aged 18 years and older who were screened for tobacco use one or more times within 24 months AND who received cessation counseling intervention if identified as a tobacco use.	NQF 0028; ACO 17; PQRS 226
<b>Utilization</b>	<b>Closing the Referral Loop: Receipt of Specialist Report</b>	<b>Percentage of patients with referrals, regardless of age, for which the referring provider receives a report from the provider to whom the patient was referred.</b>	<b>PQRS 374</b>

ENDOCRINOLOGY & METABOLISM			
Category	Metric	Initiative Description	Steward
<b>BMI/Weight</b>	Preventive Care and Screening: Body Mass Index (BMI) Screening and Follow-up Plan**	Percentage of patients aged 18 years and older with a documented BMI during the current encounter or during the previous six months AND when the BMI is outside of normal parameters, a follow-up plan is documented during the encounter or during the previous six months of the encounter.	NQF 0421; ACO 16; PQRS 128
<b>Diabetes</b>	Comprehensive Diabetes Care: Hemoglobin A1c (HbA1c) Poor Control (> 9%)**	The percentage of patients 18-75 years of age with diabetes (type 1 and type 2) whose most recent HbA1c level during the measurement year was greater than 9.0% (poor control) or was missing a result, or if an HbA1c test was not done during the measurement year.	NQF 0059; CDC- H9; ACO 27; PQRS 1
<b>Medication Management</b>	<b>Documentation of Current Medications in the Medical Record</b>	<b>Percentage of visits for patients aged 18 years and older for which the eligible professional attests to documenting a list of current medications using all immediate resources available on the date of the encounter.</b>	<b>NQF 0419; ACO 39; PQRS 130</b>
<b>Utilization</b>	<b>Closing the Referral Loop: Receipt of Specialist Report</b>	<b>Percentage of patients with referrals, regardless of age, for which the referring provider receives a report from the provider to whom the patient was referred.</b>	<b>PQRS 374</b>

## CLINICAL QUALITY PROGRAM INITIATIVES BY SPECIALTY – AMBULATORY AND PRIMARY CARE

FAMILY MEDICINE			
Category	Metric	Initiative Description	Steward
<b>BMI/Weight</b>	Preventive Care and Screening: Body Mass Index (BMI) Screening and Follow-up Plan	Percentage of patients aged 18 years and older with a documented BMI during the current encounter or during the previous six months AND when the BMI is outside of normal parameters, a follow-up plan is documented during the encounter or during the previous six months of the encounter.	NQF 0421; ACO 16; PQRS 128
<b>Cancer Care and Screening</b>	Breast Cancer Screening	The percentage of women 50-74 years of age who had a mammogram to screen for breast cancer.	NQF 2372; HEDIS BCS; ACO 20
	Cervical Cancer Screening	Percentage of women 21–64 years of age who were screened for cervical cancer using either of the following criteria: Women age 21–64 who had cervical cytology performed every 3 years OR Women age 30–64 who had cervical cytology/ human papillomavirus (HPV) co-testing performed every 5 years.	NQF 0032; HEDIS CCS; PQRS 309
	Colorectal Cancer Screening	The percentage of patients 50–75 years of age who had appropriate screening for colorectal cancer.	NQF 0034; HEDIS COL; ACO 19
<b>Diabetes</b>	Comprehensive Diabetes Care: Hemoglobin A1c (HbA1c) Poor Control (> 9%)	The percentage of patients 18-75 years of age with diabetes (type 1 and type 2) whose most recent HbA1c level during the measurement year was greater than 9.0% (poor control) or was missing a result, or if an HbA1c test was not done during the measurement year.	NQF 0059; CDC- H9; ACO 27; PQRS 1
<b>Medication Management</b>	<b>Documentation of Current Medications in the Medical Record</b>	<b>Percentage of visits for patients aged 18 years and older for which the eligible professional attests to documenting a list of current medications using all immediate resources available on the date of the encounter.</b>	<b>NQF 0419; ACO 39; PQRS 130</b>
<b>Tobacco Use</b>	Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention	Percentage of patients aged 18 years and older who were screened for tobacco use one or more times within 24 months AND who received cessation counseling intervention if identified as a tobacco use.	NQF 0028; ACO 17; PQRS 226
<b>Utilization</b>	<b>Closing the Referral Loop: Receipt of Specialist Report</b>	<b>Percentage of patients with referrals, regardless of age, for which the referring provider receives a report from the provider to whom the patient was referred.</b>	<b>PQRS 374</b>

GASTROENTEROLOGY			
Category	Metric	Initiative Description	Steward
<b>Cancer Care and Screening</b>	Colorectal Cancer Screening**	The percentage of patients 50–75 years of age who had appropriate screening for colorectal cancer.	NQF 0034; HEDIS COL; ACO 19
<b>Medication Management</b>	<b>Documentation of Current Medications in the Medical Record</b>	<b>Percentage of visits for patients aged 18 years and older for which the eligible professional attests to documenting a list of current medications using all immediate resources available on the date of the encounter.</b>	<b>NQF 0419; ACO 39; PQRS 130</b>
<b>Utilization</b>	<b>Closing the Referral Loop: Receipt of Specialist Report</b>	<b>Percentage of patients with referrals, regardless of age, for which the referring provider receives a report from the provider to whom the patient was referred.</b>	<b>PQRS 374</b>

HEMATOLOGY & ONCOLOGY			
Category	Metric	Initiative Description	Steward
<b>Cancer Care and Screening</b>	Oncology: Medical and Radiation – Pain Intensity Quantified	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.	NQF 0384; PQRS 143
<b>Medication Management</b>	<b>Documentation of Current Medications in the Medical Record</b>	<b>Percentage of visits for patients aged 18 years and older for which the eligible professional attests to documenting a list of current medications using all immediate resources available on the date of the encounter.</b>	<b>NQF 0419; ACO 39; PQRS 130</b>
<b>Utilization</b>	<b>Closing the Referral Loop: Receipt of Specialist Report</b>	<b>Percentage of patients with referrals, regardless of age, for which the referring provider receives a report from the provider to whom the patient was referred.</b>	<b>PQRS 374</b>

CLINICAL QUALITY PROGRAM INITIATIVES BY SPECIALTY – AMBULATORY AND PRIMARY CARE

INFECTIOUS DISEASE			
Category	Metric	Initiative Description	Steward
Immunizations	Preventive Care and Screening: Influenza Vaccine	Percentage of patients aged 6 months and older seen for a visit between October 1 and March 31 who received an influenza immunization OR who reported previous receipt of an influenza immunization.	NQF 0041; ACO 14; PQRS 110
	Pneumococcal Vaccination for Older Adults	Percentage of patients 65 years of age and older who ever received a pneumococcal vaccination.	NQF 0043; HEDIS PNU; ACO 15
Medication Management	<b>Documentation of Current Medications in the Medical Record</b>	<b>Percentage of visits for patients aged 18 years and older for which the eligible professional attests to documenting a list of current medications using all immediate resources available on the date of the encounter.</b>	<b>NQF 0419; ACO 39; PQRS 130</b>
Utilization	<b>Closing the Referral Loop: Receipt of Specialist Report</b>	<b>Percentage of patients with referrals, regardless of age, for which the referring provider receives a report from the provider to whom the patient was referred.</b>	<b>PQRS 374</b>

INTERNAL MEDICINE			
Category	Metric	Initiative Description	Steward
<b>BMI/Weight</b>	Preventive Care and Screening: Body Mass Index (BMI) Screening and Follow-up Plan	Percentage of patients aged 18 years and older with a documented BMI during the current encounter or during the previous six months AND when the BMI is outside of normal parameters, a follow-up plan is documented during the encounter or during the previous six months of the encounter.	NQF 0421; ACO 16; PQRS 128
<b>Cancer Care and Screening</b>	Breast Cancer Screening	The percentage of women 50-74 years of age who had a mammogram to screen for breast cancer.	NQF 2372; HEDIS BCS; ACO 20
	Cervical Cancer Screening	Percentage of women 21–64 years of age who were screened for cervical cancer using either of the following criteria: Women age 21–64 who had cervical cytology performed every 3 years OR Women age 30–64 who had cervical cytology/ human papillomavirus (HPV) co-testing performed every 5 years.	NQF 0032; HEDIS CCS; PQRS 309
	Colorectal Cancer Screening	The percentage of patients 50–75 years of age who had appropriate screening for colorectal cancer.	NQF 0034; HEDIS COL; ACO 19
<b>Diabetes</b>	Comprehensive Diabetes Care: Hemoglobin A1c (HbA1c) Poor Control (> 9%)	The percentage of patients 18-75 years of age with diabetes (type 1 and type 2) whose most recent HbA1c level during the measurement year was greater than 9.0% (poor control) or was missing a result, or if an HbA1c test was not done during the measurement year.	NQF 0059; CDC- H9; ACO 27; PQRS 1
<b>Medication Management</b>	<b>Documentation of Current Medications in the Medical Record</b>	<b>Percentage of visits for patients aged 18 years and older for which the eligible professional attests to documenting a list of current medications using all immediate resources available on the date of the encounter.</b>	<b>NQF 0419; ACO 39; PQRS 130</b>
<b>Tobacco Use</b>	Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention	Percentage of patients aged 18 years and older who were screened for tobacco use one or more times within 24 months AND who received cessation counseling intervention if identified as a tobacco use.	NQF 0028; ACO 17; PQRS 226
<b>Utilization</b>	<b>Closing the Referral Loop: Receipt of Specialist Report</b>	<b>Percentage of patients with referrals, regardless of age, for which the referring provider receives a report from the provider to whom the patient was referred.</b>	<b>PQRS 374</b>

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NEPHROLOGY			
Category	Metric	Initiative Description	Steward
<b>Hypertension</b>	<i>Controlling High Blood Pressure</i>	<i>The percentage of patients 18 to 85 years of age who had a diagnosis of hypertension (HTN) and whose blood pressure (BP) was adequately controlled (&lt;140/90) during the measurement year.</i>	<i>NQF 0018; HEDIS CBP; ACO 28; PQRS 236</i>
<b>Medication Management</b>	<b>Documentation of Current Medications in the Medical Record</b>	<b>Percentage of visits for patients aged 18 years and older for which the eligible professional attests to documenting a list of current medications using all immediate resources available on the date of the encounter.</b>	<b>NQF 0419; ACO 39; PQRS 130</b>
<b>Tobacco Use</b>	Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention**	Percentage of patients aged 18 years and older who were screened for tobacco use one or more times within 24 months AND who received cessation counseling intervention if identified as a tobacco use.	NQF 0028; ACO 17; PQRS 226
<b>Utilization</b>	<b>Closing the Referral Loop: Receipt of Specialist Report</b>	<b>Percentage of patients with referrals, regardless of age, for which the referring provider receives a report from the provider to whom the patient was referred.</b>	<b>PQRS 374</b>

NEUROLOGY			
Category	Metric	Initiative Description	Steward
Dementia Care	Dementia Cognitive Assessment	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	PQRS 281
Medication Management	Documentation of Current Medications in the Medical Record	Percentage of visits for patients aged 18 years and older for which the eligible professional attests to documenting a list of current medications using all immediate resources available on the date of the encounter.	NQF 0419; ACO 39; PQRS 130
Safety	Falls: Screening for Future Fall Risk	This is a clinical process measure that assesses falls prevention in older adults. The measure has three rates: A) Screening for Future Fall Risk: Percentage of patients aged 65 years and older who were screened for future fall risk at least once within 12 months. B) Falls Risk Assessment: Percentage of patients aged 65 years and older with a history of falls who had a risk assessment for falls completed within 12 months. C) Plan of Care for Falls: 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.	NQF 0101; ACO 13; PQRS 154
Utilization	Closing the Referral Loop: Receipt of Specialist Report	Percentage of patients with referrals, regardless of age, for which the referring provider receives a report from the provider to whom the patient was referred.	PQRS 374

OB-GYN			
Category	Metric	Initiative Description	Steward
Cancer Care and Screening	Breast Cancer Screening**	The percentage of women 50-74 years of age who had a mammogram to screen for breast cancer.	NQF 2372; HEDIS BCS; ACO 20
	Cervical Cancer Screening**	Percentage of women 21–64 years of age who were screened for cervical cancer using either of the following criteria: Women age 21–64 who had cervical cytology performed every 3 years OR Women age 30–64 who had cervical cytology/human papillomavirus (HPV) co-testing performed every 5 years.	NQF 0032; HEDIS CCS; PQRS 309
Medication Management	Documentation of Current Medications in the Medical Record	Percentage of visits for patients aged 18 years and older for which the eligible professional attests to documenting a list of current medications using all immediate resources available on the date of the encounter.	NQF 0419; ACO 39; PQRS 130
Utilization	Closing the Referral Loop: Receipt of Specialist Report	Percentage of patients with referrals, regardless of age, for which the referring provider receives a report from the provider to whom the patient was referred.	PQRS 374

## CLINICAL QUALITY PROGRAM INITIATIVES BY SPECIALTY – AMBULATORY AND PRIMARY CARE

PEDIATRICS			
Category	Metric	Initiative Description	Steward
BMI/Weight	<i>Weight Assessment and Counseling for Children - BMI Percentile Documentation</i>	<i>Percentage of patients 3-17 years of age who had an outpatient visit with a primary care physician (PCP) or an OB/GYN and who had evidence of the following during the measurement year: Body mass index (BMI) percentile documentation, Counseling for nutrition, OR Counseling for physical activity.</i>	NQF 0024; HEDIS WCC
	Weight Assessment and Counseling for Children - Counseling for Nutrition	Percentage of patients 3-17 years of age who had an outpatient visit with a primary care physician (PCP) or an OB/GYN and who had evidence of the following during the measurement year: Body mass index (BMI) percentile documentation, Counseling for nutrition, OR Counseling for physical activity.	NQF 0024; HEDIS WCC
	<i>Weight Assessment and Counseling for Adolescents - Counseling for Physical Activity</i>	<i>Percentage of patients 3-17 years of age who had an outpatient visit with a primary care physician (PCP) or an OB/GYN and who had evidence of the following during the measurement year: Body mass index (BMI) percentile documentation, Counseling for nutrition, OR Counseling for physical activity.</i>	NQF 0024; HEDIS WCC
Immunizations	Childhood Immunizations- Combo 10	Percentage of children 2 years of age who had four diphtheria, tetanus and acellular pertussis (DtaP); three polio (IPV); one measles, mumps and rubella (MMR); three H influenza type B (HiB); three hepatitis B (HepB); one chicken pox (VZV); four pneumococcal conjugate (PCV) vaccines by their second birthday. The measure calculates a rate for each vaccine and nine separate combination rates.	NQF 0038; HEDIS CIS-10
Medication Management	Appropriate Treatment for Children with Upper Respiratory Infection	Percentage of children 3 months to 18 years of age with a diagnosis of upper respiratory infection (URI) who were not dispensed an antibiotic medication.	NQF 0069
Miscellaneous	Appropriate Testing for Children with Pharyngitis	The percentage of children 2–18 years of age who were diagnosed with pharyngitis, dispensed an antibiotic and received a group A streptococcus (strep) test for the episode.	NQF 0002; HEDIS CWP
Utilization	<b>Closing the Referral Loop: Receipt of Specialist Report</b>	<b>Percentage of patients with referrals, regardless of age, for which the referring provider receives a report from the provider to whom the patient was referred.</b>	<b>PQRS 374</b>

## PSYCHIATRY & ADDICTION MEDICINE

Category	Metric	Initiative Description	Steward
<b>Depression</b>	<i>Adult Major Depressive Disorder (MDD): Suicide Risk Assessment</i>	<i>Percentage of patients aged 18 years and older with a diagnosis of major depressive disorder (MDD) with a suicide risk assessment completed during the visit in which a new diagnosis or recurrent episode was identified</i>	NQF 0104; PQRS 107
<b>Medication Management</b>	<b>Documentation of Current Medications in the Medical Record</b>	<b>Percentage of visits for patients aged 18 years and older for which the eligible professional attests to documenting a list of current medications using all immediate resources available on the date of the encounter.</b>	<b>NQF 0419; ACO 39; PQRS 130</b>
<b>Utilization</b>	<b>Closing the Referral Loop: Receipt of Specialist Report</b>	<b>Percentage of patients with referrals, regardless of age, for which the referring provider receives a report from the provider to whom the patient was referred.</b>	<b>PQRS 374</b>

## PULMONOLOGY

Category	Metric	Initiative Description	Steward
<b>Chronic Obstructive Pulmonary Disease (COPD)</b>	<i>COPD: Spirometry Evaluation</i>	<i>Percentage of patients aged 18 years and older with a diagnosis of COPD who had spirometry results documented.</i>	NQF 0091; PQRS 51
<b>Medication Management</b>	<b>Documentation of Current Medications in the Medical Record</b>	<b>Percentage of visits for patients aged 18 years and older for which the eligible professional attests to documenting a list of current medications using all immediate resources available on the date of the encounter.</b>	<b>NQF 0419; ACO 39; PQRS 130</b>
<b>Tobacco Use</b>	Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention**	Percentage of patients aged 18 years and older who were screened for tobacco use one or more times within 24 months AND who received cessation counseling intervention if identified as a tobacco use.	NQF 0028; ACO 17; PQRS 226
<b>Utilization</b>	<b>Closing the Referral Loop: Receipt of Specialist Report</b>	<b>Percentage of patients with referrals, regardless of age, for which the referring provider receives a report from the provider to whom the patient was referred.</b>	<b>PQRS 374</b>

## CLINICAL QUALITY PROGRAM INITIATIVES BY SPECIALTY — AMBULATORY AND PRIMARY CARE

RHEUMATOLOGY			
Category	Metric	Initiative Description	Steward
Medication Management	<b>Documentation of Current Medications in the Medical Record</b>	<b>Percentage of visits for patients aged 18 years and older for which the eligible professional attests to documenting a list of current medications using all immediate resources available on the date of the encounter.</b>	<b>NQF 0419; ACO 39; PQRS 130</b>
Rheumatoid Arthritis	<i>Disease-Modifying Anti-Rheumatic Drug Therapy for Rheumatoid Arthritis</i>	<i>The percentage of patients 18 years and older who were diagnosed with rheumatoid arthritis and who were dispensed at least one ambulatory prescription for a disease-modifying anti-rheumatic drug (DMARD).</i>	NQF 0054
Utilization	<b>Closing the Referral Loop: Receipt of Specialist Report</b>	<b>Percentage of patients with referrals, regardless of age, for which the referring provider receives a report from the provider to whom the patient was referred.</b>	<b>PQRS 374</b>

URGENT CARE MEDICINE			
Category	Metric	Initiative Description	Steward
Medication Management	Appropriate Treatment for Children with Upper Respiratory Infection**	Percentage of children 3 months to 18 years of age with a diagnosis of upper respiratory infection (URI) who were not dispensed an antibiotic medication.	NQF 0069
	<i>Avoidance of Antibiotic Treatment in Adults with Bronchitis</i>	<i>The percentage of adults 18–64 years of age with a diagnosis of acute bronchitis who were not dispensed an antibiotic prescription.</i>	<i>NQF 0058; HEDIS AAB</i>
	<b>Documentation of Current Medications in the Medical Record</b>	<b>Percentage of visits for patients aged 18 years and older for which the eligible professional attests to documenting a list of current medications using all immediate resources available on the date of the encounter.</b>	<b>NQF 0419; ACO 39; PQRS 130</b>
Miscellaneous	Appropriate Testing for Children with Pharyngitis**	The percentage of children 2–18 years of age who were diagnosed with pharyngitis, dispensed an antibiotic and received a group A streptococcus (strep) test for the episode.	NQF 0002; HEDIS CWP
Utilization	<b>Closing the Referral Loop: Receipt of Specialist Report</b>	<b>Percentage of patients with referrals, regardless of age, for which the referring provider receives a report from the provider to whom the patient was referred.</b>	<b>PQRS 374</b>