## Attachment VII. — List of Quality and Efficiency Measures (included with recruitment letter)

**List of Measures Included in the CMS Impact Assessment**

**IQR measures**

***Measures Requiring Abstraction and Submission by the Hospital or Its Vendor***

**Acute Myocardial Infarction (AMI)**

* **AMI-1** Aspirin at Arrival
* **AMI-3** ACEI or ARB for LVSD
* **AMI-5** Beta-Blocker Prescribed at Discharge
* **AMI-7** Median Time to Fibrinolysis
* **AMI-7a** Fibrinolytic Therapy Received Within 30 Minutes of Hospital Arrival
* **AMI-8** Median Time to Primary PCI
* **AMI-8a** Timing of Receipt of Primary Percutaneous Coronary Intervention

**Heart Failure (HF)**

* HF-2 Evaluation of LVS Function

**Stroke (STK)**

* **STK-1** Venous Thromboembolism (VTE) Prophylaxis
* **STK-2** Discharged on Antithrombotic Therapy
* **STK-3** Anticoagulation Therapy for Atrial Fibrillation/Flutter
* **STK-4** Thrombolytic Therapy
* **STK-5** Antithrombotic Therapy By End of Hospital Day 2
* **STK-6** Discharged on Statin Medication
* **STK-8** Stroke Education
* **STK-10** Assessed for Rehabilitation

**Venous Thromboembolism (VTE**)

* **VTE-1** Venous Thromboembolism Prophylaxis
* **VTE-2** Intensive Care Unit Venous Thromboembolism Prophylaxis
* **VTE-3** Venous Thromboembolism Patients with Anticoagulation Overlap Therapy
* **VTE-4** Venous Thromboembolism Patients Receiving Unfractionated Heparin with Dosages/Platelet Count Monitoring by Protocol or Nomogram
* **VTE-5** Venous Thromboembolism Warfarin Therapy Discharge Instructions
* **VTE-6** Hospital Acquired Potentially-Preventable Venous Thromboembolism

**Pneumonia (PN)**

* **PN-3a** Blood Cultures Performed Within 24 Hours Prior to or 24 Hours After Hospital Arrival for Patients Who Were Transferred or Admitted to the ICU Within 24 Hours of Hospital Arrival
* **PN-6** Initial Antibiotic Selection for Community-Acquired Pneumonia (CAP) in Immunocompetent Patient
* **PN-6a** Initial Antibiotic Selection for CAP in Immunocompetent – ICU Patient
* **PN-6b** Initial Antibiotic Selection for CAP in Immunocompetent – Non–ICU Patient

**Children’s Asthma Care (CAC)**

* **CAC-1** Relievers for Inpatient Asthma
* **CAC-2** Systemic Corticosteroids for Inpatient Asthma
* **CAC-3** Home Management Plan of Care (HMPC) Document Given to Patient/Caregiver

**Surgical Care Improvement Project (SCIP)**

* **SCIP-Inf-1** Prophylactic Antibiotic Received Within One Hour Prior to Surgical Incision
* **SCIP-Inf-2** Prophylactic Antibiotic Selection for Surgical Patients
* **SCIP-Inf-3** Prophylactic Antibiotics Discontinued Within 24 Hours After Surgery End Time
* **SCIP-Inf-4** Cardiac Surgery Patients With Controlled Postoperative Blood Glucose
* **SCIP-Inf-6** Surgery Patients with Appropriate Hair Removal
* **SCIP-Inf-9** Urinary Catheter Removed on Postoperative Day 1 (POD 1) or Postoperative Day 2 (POD 2) with day of surgery being day zero (8,13)
* **SCIP-Card-2** Surgery Patients on Beta-Blocker Therapy Prior to Arrival Who received a Beta-Blocker During the Perioperative Period (6,12)
* **SCIP-VTE-2** Surgery Patients Who Received Appropriate Venous Thromboembolism Prophylaxis Within 24 Hours Prior to
* Surgery to 24 Hours After Surgery (3,12)

**Emergency Department (ED)**

* **ED-1a** Median Time from ED Arrival to ED Departure for Admitted ED Patients - Overall Rate
* **ED-1b** Median Time from ED Arrival to ED Departure for Admitted ED Patients – Reporting Measure
* **ED-1c** Median Time from ED Arrival to ED Departure for Admitted ED Patients – Observation Patients
* **ED-1d** Median Time from ED Arrival to ED Departure for Admitted ED Patients - Psychiatric/Mental Health Patients
* **ED-2a** Admit Decision Time to ED Departure Time for Admitted Patients – Overall Rate
* **ED-2b** Admit Decision Time to ED Departure Time for Admitted Patients - Reporting Measure (9,10)
* **ED-2c** Admit Decision Time to ED Departure Time for Admitted Patients - Psychiatric/Mental Health Patients

**Immunization (IMM)**

* **IMM-1a** Pneumococcal Immunization – Overall Rate
* **IMM-1b** Pneumococcal Immunization – Age 65 and older
* **IMM-1c** Pneumococcal Immunization – High Risk Populations (Age 5 through 64 years)
* **IMM-2** Influenza Immunization

**Healthcare Associated Infection Measure (HAI)**

* Central-Line Associated Bloodstream Infection (CLABSI)
* Surgical Site Infection (SSI-colon, SSI-abdominal hysterectomy)
* Catheter-Associated Urinary Tract Infection (CAUTI)
* MRSA Bacteremia (10)*Clostridium Difficile* (*C.difficile*)
* Healthcare Personnel Influenza Vaccination

**Hospital Consumer Assessment of Healthcare Providers and Systems Survey (HCAHPS)**

* Hospital Consumer Assessment of Healthcare Providers and Systems Survey

**Tobacco Treatment (TOB)**

* **TOB-1** Tobacco Use Screening
* **TOB-2** Tobacco Use Treatment Provided or Offered
* **TOB-2a** Tobacco Use Treatment
* **TOB-3** Tobacco Use Treatment Provided or Offered at Discharge
* **TOB-3a** Tobacco Use Treatment at Discharge
* **TOB-4** Tobacco Use: Assessing Status After Discharge

**Substance Use**

* **(SUB)SUB-1** Alcohol Use Screening
* **SUB-2** Alcohol Use Brief Intervention Provided or Offered
* **SUB-2a** Alcohol Use Brief Intervention
* **SUB-3** Alcohol and Other Drug Use Disorder Treatment Provided or Offered at Discharge
* **SUB-3a** Alcohol and Other Drug Use Disorder Treatment at Discharge
* **SUB-4** Alcohol and Drug Use: Assessing Status after Discharge

***Measures Requiring Web-Based Hospital Data Entry***

**Structural Measures**

* Participation in a Systematic Database for Cardiac Surgery
* Participation in a Systematic Clinical Database Registry for Stroke Care
* Participation in a Systematic Clinical Database Registry for Nursing Sensitive Care
* Participation in a Systematic Clinical Database Registry for General Surgery

**Data Accuracy and Completeness Acknowledgement**

* Data Accuracy and Completeness Acknowledgement

**Perinatal Care**

* **PC-01** Elective Delivery Prior to 39 Completed Weeks Gestation: Percentage of Babies Electively Delivered Prior to 39 Completed Weeks Gestation

***Measure Information Obtained from Claims-Based Data***

**Mortality Measures (Medicare patients)**

* **MORT-30-AMI** Acute Myocardial Infarction (AMI) 30-Day Mortality Rate
* **MORT-30-HF** Heart Failure (HF) 30-Day Mortality Rate
* **MORT-30-PN** Pneumonia (PN) 30-Day Mortality Rate
* **MORT-30-COPD** Chronic Obstructive Pulmonary Disease (COPD) 30-Day Mortality Rate
* **MORT-30-STK** Acute Ischemic Stroke (STK) 30-Day Mortality Rate

**Readmission Measures (Medicare patients)**

* **READM-30-AMI** Acute Myocardial Infarction (AMI) 30-Day Readmission Rate
* **READM-30-HF** Heart Failure (HF) 30-Day Readmission Rate
* **READM-30-PN** Pneumonia (PN) 30-Day Readmission Rate
* **Hip/Knee Readmission** Hospital-Level 30-Day All-Cause Risk- Standardized Readmission Rate (RSRR) Following Elective Total Hip Arthroplasty (THA)/Total Knee Arthroplasty (TKA)
* **HWR** Hospital-Wide All-Cause Unplanned Readmission (HWR)
* **READM-30-COPD** Chronic Obstructive Pulmonary Disease (COPD) 30-Day Readmission Rate
* **READM-30-STK** Stroke (STK) 30-Day Readmission Rate

**Agency for Healthcare Research and Quality (AHRQ) Measures**

* **PSI 90** Complication/Patient Safety for Selected Indicators
* **PSI 4** Death Among Surgical Patients with Serious Treatable Complications (Harmonized with Nursing Sensitive Care Measure, Failure to Rescue)

**Surgical Complications**

* **Hip/Knee Complications** Hospital-Level Risk-Standardized Complication Rate (RSCR) Following Elective Primary Total Hip Arthroplasty (THA) and Total Knee Arthroplasty (TKA)

**Cost Efficiency Measures**

* Medicare Spending per Beneficiary (MSPB)
* Acute Myocardial Infarction (AMI) Payment per Episode of Care

***Measures for Electronic Reporting via Certified Electronic Health Record Technology (CEHRT) (voluntary participation CY 2014)***

* **STK-2** Discharged on Antithrombotic Therapy
* **STK-3** Anticoagulation Therapy for Atrial Fibrillation/Flutter
* **STK-4** Thrombolytic Therapy
* **STK-5** Antithrombotic Therapy By End of Hospital Day 2
* **STK-6** Discharged on Statin Medication
* **TK-8** Stroke Education
* **STK-10** Assessed for Rehabilitation
* **VTE-1** Venous Thromboembolism Prophylaxis
* **VTE-2** Intensive Care Unit Venous Thromboembolism Prophylaxis
* **VTE-3** Venous Thromboembolism Patients with Anticoagulation Overlap Therapy
* **VTE-4** Venous Thromboembolism Patients Receiving Unfractionated Heparin with Dosages/Platelet Count Monitoring by Protocol or Nomogram**V**
* **TE-5** Venous Thromboembolism Warfarin Therapy Discharge Instructions
* **VTE-6** Hospital Acquired Potentially-Preventable Venous Thromboembolism (10,14)
* **ED-1** Median Time from ED Arrival to ED Departure for Admitted ED Patients
* **ED-2** Admit Decision Time to ED Departure Time for Admitted Patients
* **PC-01** Elective Delivery Prior to 39 Completed Weeks Gestation: Percentage of Babies Electively Delivered Prior to 39 Completed Weeks Gestation

**OQR measures**

**Cardiac Care (AMI and CP) Measures**

* **OP-1:** Median Time to Fibrinolysis
* **OP-2:** Fibrinolytic Therapy Received Within 30 Minutes
* **OP-3:** Median Time to Transfer to Another Facility for Acute Coronary Intervention
* **OP-4:** Aspirin at Arrival
* **OP-5:** Median Time to ECG

**Surgery**

* **OP-6** Timing of Antibiotic Prophylaxis
* **OP-7** Antibiotic Selection

**Imaging Efficiency Measures**

* **OP-8:** MRI Lumbar Spine for Low Back Pain
* **OP-9:** Mammography Follow-up Rates
* **OP-10:** Abdomen CT – Use of Contrast Material
* **OP-11:** Thorax CT – Use of Contrast Material
* **OP-13:** Cardiac Imaging for Preoperative Risk Assessment for Non Cardiac Low Risk Surgery
* **OP-14:** Simultaneous Use of Brain Computed Tomography (CT) and Sinus CT

**ED-Throughput**

* **OP-18** Median Time from ED Arrival to ED Departure for Discharged ED Patients
* **OP-20** Door to Diagnostic Evaluation by a Qualified Medical Professional
* **OP-22** Left Without Being Seen

**Pain Management**

* **OP-21** Median Time to Pain Management for Long Bone Fracture

**Stroke**

* **OP-23** Head CT or MRI Scan Results for Acute Ischemic Stroke or Hemorrhagic Stroke Patients who Received Head CT or MRI Scan Interpretation Within 45 minutes of ED Arrival

**Structural and Web-Based Measures**

* **OP-12:** The Ability for Providers with HIT to Receive Laboratory Data Electronically Directly into their ONC-Certified EHR System as Discrete Searchable Data
* **OP-17:** Tracking Clinical Results between Visits
* **OP-25:** Safe Surgery Checklist Use
* **OP-26:** Hospital Outpatient Volume Data on Selected Outpatient Surgical Procedures
* **OP-27:** Influenza Vaccination Coverage among Healthcare Personnel
* **OP-29** Endoscopy/Polyp Surveillance: Appropriate Follow-up Interval for Normal Colonoscopy in Average Risk
* **OP-30** Endoscopy/Polyp Surveillance: Colonoscopy Interval for Patients with a History of Adenomatous Polyps – Avoidance of Inappropriate Use
* **OP-31** Cataracts – Improvement in Patient’s Visual Function within 90 Days Following Cataract Surgery