

CQM REPORTS CATEGORIES

Core Reports

- NQF 0421 Adult Weight Screening and Follow-up
- NQF 0028a&b Tobacco Use and Intervention
- NQF 0013 Hypertension Blood Pressure Management

Alternate Core Reports

- NQF 0041 Preventative Care and Screening Influenza Immunization for Patients 50 Years and Older
- NQF 0038 Childhood Immunization Status
- NQF 0024 Weight Assessment and Counseling for Children and Adolescents

Specialty Reports

- NQF 003 Use of Appropriate Medications for Asthma
- NQF 0002 Appropriate Testing for Children with Pharyngitis
- NQF 0047 Asthma Pharmacological Therapy

## PATIENT POPULATIONS

### Initial Patient Population

Base patient population. This group is not included on the CQM reports.

### Eligible Instances

Total number of patients counted on the report. This is the denominator.

### Meets Performance

Patients in the numerator.

### Performance Exclusions

The patients in this category are added to the “meets performance population” when the performance percentage is calculated. Not all CQMs have exclusions.

### Performance Not Met Instances

The patients in this population are counted against your performance percentage.

### **Adult Weight Screening and Follow-up (NQF 0421) – Core Report**

Percentage of patients aged 18 years and older with calculated BMI in the past six months or during the current visit documented in the medical record AND if the most recent BMI is outside parameters, a follow-up plan is documented. The report looks at two patient populations: patients 65 years and older and patients 18-64 years old.

#### **Initial Patient Population**

Patients 65 years old or older or patients 18-64 years old

#### **Eligible Instances**

All patients in the initial patient population who had an encounter outpatient during the measurement period.

#### **Performance Exclusions**

Patients with a terminal illness, diagnosis pregnancy or that the physical exam was not completed for a patient or medical reason recorded 6 months before or simultaneous to the encounter outpatient.

#### **Meets Performance**

Patients 18-64 years with BMI between 18.5 and 25 occurring 6 month before or simultaneous to the encounter outpatient. Patients with BMI over 25 or under 18.5 must have a follow-up plan documented

#### **Meeting this Measure in PCC EHR**

Add Adult Weight Screening and Follow-up (ARRA) component in PCC EHR. The BMI will calculate automatically when vitals are entered. Billing code for follow-up plan and encounter outpatient on EEF.

#### **Denominator Qualifiers (Practice)**

CPT Codes for outpatient encounter: 90801-90802, 90804-90809, 97001, 97003, 97802-97803, 98960, 99201-99205, 99211-99215, 99324-99328, 99334-99337, 99341-99345, 99347-99350.

#### **Numerator Qualifiers**

BMI vitals, situational diagnosis or CPT Codes. Population 65 years & older BMI = 22 to 30; population 18 to 64 years BMI = 18.5 to 25. For BMI outside of designated range the following must be charted during the visit: V65.3 or 43644-5, 43770-4, 43842-8, 97804, 98961, 98962, 99078

#### **Exclusions**

Diagnosis codes pregnancy or terminal illness, recorded 6 months prior or simultaneous to the encounter. Pregnancy Codes: 630-633.1, 633.10-633.11, 633.21, 633.81, 633.91, 460.01, 640.03, 641.13, 641.21, 641.23, 641.31, 641.33, 641.81, 641.83, 641.91, 641.93, 642.01-642.03, 642.11-642.13, 642.21-642.23, 642.31-642.33, 642.62

**Appropriate Testing for Children with Pharyngitis (NQF 0002) – Specialty Report**

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.

**Initial Patient Population**

Patients 2 to 18 years old.

**Eligible Instances**

All patients in initial patient population that have an encounter ambulatory including pediatrics during the measurement period, patients with an active pharyngitis diagnosis and active pharyngitis medication.

**Performance Exclusions**

There are no exclusions for this report.

**Meets Performance**

Lab performed for group A streptococcus before or simultaneous to the active pharyngitis medication

**Meeting this Measure in PCC EHR**

The practice needs to bill a CPT code for the encounter, order medication using Dr. First and complete a strep test in PCC HER. The diagnosis must be on the problem list.

**Denominator Qualifiers (Practice)**

CPT codes or diagnosis codes in the EHR Problem List. The codes are 99281-99285, 99201-99205, 99211-99215, 99217-99220, 99241-99245, 99341-99345, 99347-99350, 99384-99387, 99394-99397, 99401-99404, 99411-99412, 99420, 99429, 99455-99456. The diagnosis codes are V70.0, V70.3, V70.5, V70.6, V70.8, V70.9 **and** active diagnosis of 034.0 034.1, 462, 463 (Pharyngitis). Dispense the medication within three days.

**Numerator Qualifiers**

Medications, Strep Test (lab order) or CPT Code. Variety of Rx Norm Codes dispensed less than or equal to 3 days prior to or after Strep test. Loinc Code for Strep A Lab Test are 11268-0, 17656-0, 18481-2, 31971-5, 49610-9, 5036-9, 626-2, 6556-5, 6558-1, 6559-9 or CPT Code 87070.

**Exclusions**

Medication dispensed 30 days prior to the encounter.

**Asthma Pharmacologic Therapy (NQF 0047) – Specialty Report**

Percentage of patients aged 5 to 40 years old with a diagnosis of mild, moderate, or severe persistent asthma who were prescribed either the preferred long-term control medication (inhaled corticosteroid) or an acceptable alternative treatment.

**Initial Patient Population**

Patients between the ages of 5 and 40 before the beginning of the measurement period that have an active diagnosis of asthma and two outpatient consult visits.

**Eligible Instances**

All patients in initial patient population.

**Performance Exclusions**

Patients with a medication allergy to an asthma medication and the check box selected in the **Asthma Care (ARRA)** component in the protocol.

**Meets Performance**

Patients that have been prescribed an asthma medication through DrFirst.

**Meeting this Measure in PCC EHR**

Need to **add Asthma Care (ARRA) component** to protocols, bill two encounter outpatient consult visits and enter a diagnosis of asthma during one of those encounters

**Denominator Qualifiers (Practice)**

Diagnosis Codes noted in the EHR, Problem List or the Rcopia “Manage Problems” List. The Diagnosis Codes are 493.00-493.02, 493.10-493.12, 493.20-493.22, 493.81-493.82, 493.90-493.92, V70.0, V70.3, V70.5, V70.6, V70.8, V70.9

**Numerator Qualifiers**

CPT Codes: 99201-99205, 99212-99215, 97003, 97004, 90801-90815, 90845, 90862

**Exclusions**

Patients with a medication allergy to an asthma medication and the check box selected in the Asthma Care (ARRA) component in the protocol.

**Childhood Immunization Status (NQF 0038) – Alternate Core**

The percentage of children 2 years of age who had four DtaP, three IPV, one MMR, two HiB, three Hepatitis B, one VZV, four PCV, two Hepatitis A, two or three Rotavirus and two Influenza vaccines by their second birthday.

**Initial Patient Population**

Patients who will reach two years old during the measurement period. Patients that are more than 1 year of age and less than 2 years of age at the beginning of the measurement period.

**Eligible Instances**

All patients in initial patient population and have had an outpatient encounter before or simultaneous to the measurement end date.

**Performance Exclusions**

Patients with active or resolved diagnosis of Hep B, Hep A; resolved diagnosis of measles, mumps or rubella; allergy to an immunization or an immunization that has been contraindicated.

**Meets Performance**

Patients that have the following before the end of the measurement period: 4 DtaP, 3 IPV, 1 MMR, 2 HiB, 3 Hepatitis B, 1 VZV, 4 PCV, 2Hepatitis A, 2 or 3 Rotavirus and 2 Influenza vaccines by their second birthday.

**Meeting this Measure in PCC EHR**

The following CVX codes need to be entered into Partner (Immunization & Disease Table)

DtaP: 110, 120, 20, 50	IPV: 10, 120	MMR: 3, 94	HiB: 120, 46, 47, 48-51
Hep B: 8, 110, 44, 51	VZV: 21, 94	PCV: 100, 133	Hep A: 83
Rotavirus: 116, 119	Influenza: 135, 15		

**Denominator Qualifiers (Practice)**

CPT Codes: 99201-99205, 99211-99215, 99217-99220, 99241-99245, 99341-99345, 99347-99350, 99384-99387, 99394-99397, 99401-99404, 99411-99412, 99420, 99429, 99455-99456 Or Diagnosis Codes: V45.5, V61.5, V61.6, V61.7, V69.2, V72.3, V72.4, V70.0, V70.3

**Numerator Qualifiers**

CPT Codes: 4 DtaP, 3 IPV, 1 MMR, 2 HiB, 3 Hepatitis B, 1 VZV, 4 PCV, 2 Hepatitis A, 2 or 3 Rotavirus and 2 Influenza vaccines by their second birthday.

**Exclusions**

323.51(Encephalopathy), 070.0-.1(Hep A), 070.2-.3, V02.61 (Hep B), 279 (Immunodeficiency), 200,202,204-8 (Leukemia), 203 (Myeloma), 055 (Measles), 055 (Mumps), 056 (Rubella), 052-053 (VZV). Exclusions are specific to appropriate related immunization.

**Hypertension: Blood Pressure Management (NQF 0013) – Core Report**

Percentage of patient visits for patients aged 18 years or older with a diagnosis of hypertension that has been seen for at least two office visits, with a blood pressure (BP) recorded.

**Initial Patient Population**

Patients 18 years old or older before the beginning of the measurement period have an active diagnosis of hypertension and at least two counts of encounter outpatient or encounter nursing facility.

**Eligible Instances**

All patients in initial patient population.

**Performance Exclusions**

There are no exclusions for this report.

**Meets Performance**

Patients with physical exam finding of systolic blood pressure or a physical exam finding of diastolic blood pressure

**Meeting this Measure in PCC EHR**

The findings of systolic or diastolic blood pressure pull directly from the blood pressure entered in the vitals section. The two office visits do not have to be with the same provider or the EP.

**Denominator Qualifiers: (EP)**

CPT Codes for Two Outpatient Encounters or Diagnosis Code for Hypertension (Problem List). The CPT Codes: 99201-99205, 99212-99215, 99241-99245, 99324-99328, 99334-99337, 99341-99345, 99347-99350, 99304, 99305-99310. The Diagnosis Codes: 401.0-401.1, 401.9, 402.00-402.01, 402.10-402.11, 403.90-403.91, 404.00-404.03, 404.10-404.13, 404.90-404.93

**Numerator Qualifiers**

Blood Pressure, vitals entered in the chart

**Exclusions**

None

**Preventive Care and Screening: Influenza Immunization for Patients 50 Years or Older  
(NQF 0041) Alternate Core**

Percentage of patients aged 50 years or older who received an influenza immunization during the flu season (Sept through Feb).

**Initial Patient Population**

Patients 50 years or older that have two encounter outpatients or one of the following: encounter preventative med 40 and older, encounter preventative med group counseling, encounter preventative med individual counseling, encounter preventative med other services, encounter nursing facility or encounter nursing discharge.

**Eligible Instances**

All patients in initial patient population that have encounter influenza before, after, or simultaneous to the beginning of the measurement period.

**Performance Exclusions**

Patients with a refused immunization, medically contraindicated immunization or have an allergy to eggs recorded before or simultaneous to the encounter influenza.

**Meets Performance**

Patients that have an influenza vaccine administered before or simultaneous to the encounter influenza.

**Meeting this Measure in PCC EHR**

Enter the CVX code 135 or 15 in Partner. 15 Influenza, split (incl. purified surface antigen) 135 Influenza, high dose seasonal.

**Denominator Qualifiers: (Practice)**

CPT Codes: 99201-99205, 99212-99215, 99241-99245, 99324-99328, 99334-99337, 99341-99345, 99347-99350, 99386-99387, 99396-99397 (Preventative Medical 40 & Over).

**Numerator Qualifiers**

Diagnosis Codes V04.81, V06.6 or CPT Codes: 90656, 90658, 90660, 90661, 90662.

**Exclusions**

995.68, V15.03 (Allergy to Eggs)



**Tobacco Use and Intervention (NQF 0028a)-Tobacco Use Assessment- Core Report**

Percentage of patients aged 18 years or older who have been seen for at least two office visits, who were queried about tobacco use one or more times within 24 months.

**Initial Patient Population**

Patients 18 years old or older before the beginning of the measurement period and have 2 counts of any of the following: encounter office visit, encounter health and behavior assessment, encounter occupational therapy or encounter psychiatric and psychological during the measurement period.

**Eligible Instances**

All patients in initial patient population.

**Performance Exclusions**

There are no exclusions for this report

**Meets Performance**

Patient has been marked as a tobacco user or a tobacco non-user.

**Meeting this Measure in PCC EHR**

This report will pull from the Smoking Status (ARRA) component in PCC HER during the qualifying visit or 24 months prior to reporting period.

**Denominator Qualifiers (EP)**

Entire population.

**Numerator Qualifiers**

Two Encounters: 99201-99205, 99212-99215 (OVs) 90801-90802, 90804-90815, 90845, 90862 (Counseling) 96150, 96152 (Behavior Assessment) 97003-4 (Occupational Therapy).

One Encounter: 99411-2 (Preventative Group Counseling), 99420-99429 (Preventative Other Services), 99385-7, 99395-7 (Preventative Services Over 18), 99401-4 (Preventative Individual Counseling).

**Exclusions**

None

**Tobacco Use and Intervention (NQF 0028b)-Tobacco Cessation Intervention - Core Report**

Percentages of patients aged 18 years or older identified as tobacco users within the past 24 months and have been seen for at least two office visits, who received cessation intervention.

**Initial Patient Population**

Patients 18 years old or older before the beginning of the measurement period who have during the measurement period two counts of encounters: office visit, health & behavior assessment, occupational therapy or psychiatric & psychological or one count of: preventative medical services 18 and older, preventative medical individual counseling or preventative medical group\_counseling.

**Eligible Instances**

All patients in initial patient population who have patient characteristic of tobacco user before or simultaneous to encounter.

**Performance Exclusions**

There are no exclusions for this report.

**Meets Performance**

Patient has procedure performed: tobacco use cessation counseling before or simultaneous to encounter or has a smoking cessation medication prescribed.

**Meeting this Measure in PCC EHR**

This smoking status will pull from the ARRA component. The provider must bill for tobacco cessation counseling or prescribe a cessation medication through DrFirst.

**Denominator Qualifiers (EP)**

Two encounters: 99201-99205, 99212-99215 (OVs), 90801-90802, 90804-90815, 90845, 90862 (Counseling), 96150, 96152 (Behavior Assessment). 97003-4 (Occupational Therapy).

One Encounter: 99411-2 (Preventative Group Counseling), 99420-99429 (Preventative Other Services), 99385-7, 99395-7 (Preventative Services over 18).

**Numerator Qualifiers**

CPT Codes: 99401-4 (Preventative Individual Counseling), 99406-7 (Tobacco Use Cessation) or Rxnorm Codes: 105075, 198029, 198030, 198031, 198406, 198407, 199677, 227177, 250983, 311975, 314119, 359817, 359818, 388082

**Exclusions**

None

**Use of Appropriate Medications for Asthma (NQF 0036) - Specialty Report**

Percentage of patients 5-50 years of age during the measurement period who were identified as having persistent asthma and were appropriately prescribed medication during the measurement year. Report looks at three different populations: 5-11 years, 12-50 years, and 5-50 years.

**Initial Patient Population**

Patients who will reach 5-50 years during the measurement period.

**Eligible Instances**

All patients in initial patient population who have one encounter ED and active asthma diagnosis less than 1 year or simultaneous to the measurement period; 1 encounter acute inpatient and active diagnosis less than 1 year or simultaneous to the measurement period; 4 counts of encounter outpatient, active asthma diagnosis and 2 counts of asthma medication or 4 counts of asthma medication less than 1 year or simultaneous to the measurement period.

**Performance Exclusions**

Patients with an active diagnosis of COPD, cystic fibrosis, emphysema or acute respiratory failure

**Meets Performance**

Patients that have one count of an asthma medication prescribed during the measurement period.

**Meeting this Measure in PCC EHR**

Bill for the office visit(s), enter a diagnosis on the medical summary screen (if applicable), and prescribe the asthma medication in DrFirst.

**Denominator Qualifiers (Practice)**

Four encounters: 99201-99205, 99211-99215, 99217-99220, 99241-99245, 99341-99345, 99347-99350, 99384-99387, 99394-99397, 99401-99404, 99411-99415, 99420-99456 **or** V70.0, V70.3, V70.5, V70.6, V70.8, V70.9 **or** one encounter: 99281-99285 **or** two encounters: 99221-99223, 99231-99233, 99238-99239, 99251-99255, 99291 **or** encounters with asthma diagnosis: 493, 493.0, 493.00-493.02, 493.1, 493.10-493.12, 493.2, 493.20-493.22, 493.8, 493.81-493.82, 493.9, 493.90-493.92 **or** 4 asthma medications, other than lucotrine inhibitors. If 4 plus of lucotrine inhibitors, then must have asthma diagnosis.

**Numerator Qualifiers**

Asthma Medication through Dr. First.

**Exclusions**

CPT Codes 277.0, 277.00-277.03, 277.09 (CF), 492, 492.0, 492.8, 518.1-518.2 (emphysema), 491.2, 491.20-491.22, 492.0, 493.2, 493.20-493.22, 496, 506.4 (COPD) or Diagnosis Code: 518.81 (Acute Respiratory Failure).

**Weight Assessment and Counseling for Children and Adolescents (NQF 0024)**

**Alternate Core Report**

Percentage of patients 2-17 years of age who had an outpatient visit with a PCP or OB/GYN and who had evidence of BMI percentile documentation, counseling for nutrition and counseling for physical activity during the measurement year. Report looks at three different populations: 2-16 years, 2-10 years and 11-16 years. Three different items report in each patient population: physical exam finding: BMI percentile during encounter, counseling for nutrition and counseling for physical activity.

**Initial Patient Population**

Patients 2-17 years old, 2-10 years old or 2-17 years old.

**Eligible Instances**

All patients in initial patient population that have an encounter outpatient with PCP or OB/GYN and does not have a diagnosis of pregnancy or an encounter pregnancy.

**Performance Exclusions**

There are no exclusions for this report

**Meets Performance**

Physical exam finding: BMI percentile calculated during encounter outpatient, counseling for nutrition during the encounter and counseling for physical activity during the encounter outpatient.

**Meeting this Measure in PCC EHR**

Need to bill for BMI percentile, counseling for nutrition and counseling for physical activity.

**Denominator Qualifiers (Practice)**

CPT Codes : 99201-99205, 99211-99215, 99217-99220, 99241-99245, 99341-99345, 99347-99350, 99384-99387, 99394-99397, 99401-99404, 99411-99412, 99420-99429, 99455-99456

**Numerator Qualifiers:**

BMI Vital and Situational Diagnosis and/or CPT Codes: V65.3 (Nutrition Counseling), V65.1 (Physical Activity Counseling), V85.5-85.51-85.54 (BMI percentiles). 97802-97804 (Medical nutrition therapy) - Must be billable by a certified nationalist.

**Exclusions**

CPT Codes