

PREVENTIVE CARE (PC)
Algorithm for Measures Calculation – EHRS

PATIENT SELECTION CRITERIA

Include if **ALL** the following criteria are met:

- At least two **face-to-face office visits** with the physician, physicians’ assistant, or nurse practitioner during the measurement period for one of the chronic conditions listed below:
 - Alzheimer’s and Mental Health
 - Cancer
 - Congestive Heart Failure
 - Coronary Artery Disease
 - Diabetes Mellitus
 - Kidney Disease
 - Lung Disease
 - Other Chronic Cardiac or Circulatory Disease
 - Other Chronic Diseases (Osteoporosis and Arthritis)

➤ *List of Data Elements located in Appendix A*

Measure Owner Designation
♣ AMA/PCPI is the measure owner
▲ CMS is the measure owner
■ NCQA is the measure owner

**PREVENTIVE CARE (PC)
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At least two face-to-face office visits with physician, physicians’ assistant, or nurse practitioner occurring during the measurement period:

ENCOUNTER CODE** (C4)
99201-99205, 99212-99215,
99241-99245, 99354, 99355,
99385-99387, 99395-99397,
99401-99404

AND

Patient has a documented diagnosis of at least one of these listed chronic conditions:

Alzheimer’s and Mental Health

DX CODE (I9)
290.0-290.9, 294.0-294.9,
296.00-296.99, 298.0,
300.4, 309.1, 309.28, 310.0-310.9,
311, 331.0-331.3,
331.7, 331.89, 797

OR

Cancer

DX CODE (I9)
140.0-208.9, 230.0-239.9

OR

Congestive Heart Failure

DX CODE (I9)
398.91, 402.01, 402.11,
402.91, 404.01, 404.03,
404.11, 404.13, 404.91,
404.93, 428.0-428.9

OR

[PCCONFIRMED]*=1

* Bracketed element names reflect MCMP-PAT element names

** Encounter Code box will not be repeated for every measure, but is a required element for every measure

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Coronary Artery Disease

DX CODE (I9)
410.00-414.9, V45.81, V45.82

OR

Diabetes

DX CODE (I9)
250.00-250.93, 357.2,
362.01-362.07, 366.41
648.00-648.04

OR

Kidney Disease

DX CODE (I9)
016.00-016.06, 095.4, 189.0,
189.9, 223.0, 236.91,
250.40-250.43, 271.4,
274.10-274.19, 283.11,
403.00-404.93, 440.1,442.1
572.4, 580.0-588.9, 591,
753.12-753.29, 794.4,
V45.1, V56.0-V56.8

OR

Lung Disease

DX CODE (I9)
491.1-492.8, 493.10-493.22,
493.82-493.92

OR

Other Chronic Cardiac or Circulatory Disease

DX CODE (I9)
401.0-401.9, 402.00, 402.10,
402.90, 430-432.9,
434.00-440.9

OR

Other Chronic Diseases (Osteoporosis and Arthritis)

DX CODE (I9)
714.0-714.33, 715.00-715.98,
733.00-733.09

[PCCONFIRMED]=1

**PREVENTIVE CARE (PC)
Algorithm for Measures Calculation – EHRS**

Blood Pressure Measurement (*PC-1): Percentage of patient visits with blood pressure (BP) measurement recorded

Denominator: All visits for patients with chronic conditions ≥ 18 years of age

Denominator Inclusions

All patient office visits with at least one of the chronic conditions and 18 years or older at the beginning of the measurement period.

[DATEOFBIRTH] ≥ 18
[PCCONFIRMED]=1

AND

ENCOUNTER CODE** (C4)
99201-99205, 99212-99215,
99241-99245, 99354, 99355,
99385-99387, 99395-99397,
99401-99404

[HFPCVISITDATE]
AND
[HFPCINVALID]=0

Numerator: Patient visits with blood pressure measurement recorded

Numerator Inclusions

Patient visits with a blood pressure measurement recorded during the measurement period.

Both the systolic and diastolic blood pressure measurements are required for inclusion.

TOPIC_EVALUATION_CODES Table list applicable SNOMED (SNM), CPT (C4) and Category II (C4) codes for inclusion:

SYSTOLIC CODE (SNM)	SYSTOLIC CODE (C4)
72313002, 271649006,	3076F, 3077F

AND

DIASTOLIC CODE (SNM)	DIASTOLIC CODE (C4)
67726005, 271650006,	3078F, 3079F, 3080F

OR

BP CODE (C4)
2000F

[PCBPMEASURE]=1

**PREVENTIVE CARE (PC)
Algorithm for Measures Calculation – EHRS**

Breast Cancer Screening (PC-5): The percentage of women 40 - 69 years of age who had a mammogram to screen for breast cancer

Denominator: Women 42 - 69 years of age on the last day of the measurement period
*

Denominator Inclusions

Women with a documented diagnosis of at least one of the chronic conditions and 42-69 years of age on the last day of the measurement period.

(Note: Given the measurement look back period, * women 40-69 will be captured in this measure.)

**The look back period is described as the year prior to the beginning of the measurement period.*

**[DATEOFBIRTH]=40-69
[PCCONFIRMED]=1**

Numerator: One or more mammograms during the measurement period or the year prior to the measurement period

Numerator Inclusions

All women 42-69 years of age on the last day of the measurement period with one or more mammograms during the measurement period or the year prior to the measurement period.

TOPIC_EVALUATION_CODES Table lists applicable ICD-9 (I9), CPT (C4), and HCPCS (HCPCS) codes for inclusion:

BREAST CANCER SCREEN CODE (I9)	BREAST CANCER SCREEN CODE (C4)	BREAST CANCER SCREEN CODE (HCPCS)
87.36, 87.37,	76083, 76090-76092	G0202
V76.11, V76.12	77051-77059	

[PCMAMMOGRAM]=1

**PREVENTIVE CARE (PC)
Algorithm for Measures Calculation – EHRS**

Denominator Exclusions (*Exclusions only apply if mammograms not performed during the measurement period or the year prior to the measurement period*)

TOPIC_MEDICAL_EXCLUSION Table lists applicable ICD-9 (I9) and CPT (C4) codes for medical reason exclusion:

(Note: If there is evidence of two separate mastectomies, this patient may be excluded from the measure. [Unilateral mastectomy patients must have two separate occurrences on two different dates.] The bilateral mastectomy must have occurred by the end of the measurement period.)

EXCLUSION CODE (I9)	EXCLUSION CODE (C4)
85.41-85.48	19180, 19200, 19220, 19240

[PCMAMMOGRAM]=3

**PREVENTIVE CARE (PC)
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Colorectal Cancer Screening (*PC-6): Percentage of patients screened for colorectal cancer during the one-year measurement period

Denominator: All patients ≥ 50 years of age at the beginning of the one-year measurement period

Denominator Inclusions

All patient visits with a documented diagnosis of at least one of the chronic conditions and ≥ 50 years of age at the beginning of the measurement period.
[DATEOFBIRTH] ≥ 50
[PCCONFIRMED]=1

Numerator: Patients with any of the recommended colorectal cancer screening test(s) performed

Numerator Inclusions

TOPIC_EVALUATION_CODES Table lists applicable CPT (C4), LOINC (LN) and CPT Category II (C4) codes for inclusion:

BARIUM ENEMA CODE (C4)	
74270, 74280	
Every 5 Years	

OR

SIGMOIDOSCOPY CODE (C4)	
45330-45335,	
45337-45342, 45345	
Every 5 Years	

OR

COLONOSCOPY CODE (C4)	
44388-44394, 44397, 45355,	
45378-45387	
Every 10 Years	

OR

OCCULT BLOOD CODE (C4)	OCCULT BLOOD CODE (LN)
82270, 82274	2335-8, 12503-9, 12504-7, 14563-1,
	14564-9, 14565-6, 27396-1,
	27401-9, 27925-7, 27926-5, 29771-3
Annually	

OR

COLORECTAL SCREEN CODE (C4)	
3017F	

[PCFOBTPERFORM]=1

PREVENTIVE CARE (PC)
Algorithm for Measures Calculation – EHRS

Denominator Exclusions (*Exclusions only applied if the patient was not recommended to have colorectal cancer screening tests*)

TOPIC_MEDICAL_EXCLUSION Table lists applicable CPT (C4) codes for medical exclusions:

EXCLUSION CODE (C4)
44210-44212, 44150-44153, 44155, 44156, 45121

[PCFOBTPERFORM]=3

OR

TOPIC_MEDICAL_EXCLUSION Table lists an applicable CPT Category II (C4) code for medical reason exclusion:

MEDICAL REASON (C4)
3017F-1P

[PCFOBTPERFORM]=3

OR

TOPIC_MEDICAL_EXCLUSION Table lists an applicable CPT Category II (C4) code for patient reason exclusion:

PATIENT REASON (C4)
3017F-2P

[PCFOBTPERFORM]=4

OR

TOPIC_MEDICAL_EXCLUSION Table lists an applicable CPT Category II (C4) code for system reason exclusion:

SYSTEM REASON (C4)
3017F-3P

[PCFOBTPERFORM]=5

**PREVENTIVE CARE (PC)
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Influenza Immunization (*PC-7): Percentage of patients who received an influenza immunization during the one-year measurement period

Denominator: All patients ≥ 50 years of age at the beginning of the one-year measurement period

Denominator Inclusions

Patients with a documented diagnosis of at least one of the chronic conditions and ≥ 50 years of age at the beginning of the measurement period.
[DATEOFBIRTH] ≥ 50
[PCCONFIRMED]=1

Numerator: Patients who received an influenza immunization from September through February of the year prior to the measurement period

Numerator Inclusions

Patients who received an influenza immunization from September through February of the year prior to the measurement period.

TOPIC_EVALUATION_CODES Table lists applicable ICD-9 (I9), CPT (C4), HL7 Vaccination (CVX), SNOMED (SNM), HCPCS (HCPCS), and CPT Category II (C4) codes for inclusion:

INFLUENZA CODE (I9)	INFLUENZA CODE (C4)
99.52, V04.81	90656, 90658, 90660

OR

INFLUENZA CODE (CVX)	INFLUENZA CODE (SNM)
15, 16, 88	40969001, 86198006,

OR

INFLUENZA CODE (HCPCS)	INFLUENZA CODE (C4)
G0008	4037F

OR

INFLU-PNEUMO CODE (I9)
V06.6

[PCFLUSHOT]=1

**PREVENTIVE CARE (PC)
Algorithm for Measures Calculation – EHRS**

Denominator Exclusions (*Exclusions only applied if the patient was not recommended to receive an influenza immunization*)

TOPIC_MEDICAL_EXCLUSION Table lists applicable ICD-9 (I9) and SNOMED (SNM) codes for medical reason exclusion:

ALLERGY CODE (I9)	ALLERGY CODE (SNM)
693.1, V14.7, V15.03	91930004, 294647003,
	315631004, 407594006,

OR

TOPIC_MEDICAL_EXCLUSION Table lists applicable ICD-9 (I9) codes for adverse effects exclusion where an ADVERSE_EFFECT_1 code must be accompanied by an ADVERSE_EFFECT_2 code:

ADVERSE EFFECT 1 CODE (I9)	ADVERSE EFFECT 2 CODE (I9)
995.2, 995.27, 995.29, 995.3,	E949.6
999.4, 999.5, 995.68	

OR

TOPIC_MEDICAL_EXCLUSION Table lists applicable SNOMED (SNM) codes for adverse effect exclusions:

ADVERSE EFFECT CODE (SNM)
21904007, 223144009, 288310001, 293111007

[PCFLUSHOT]=3

OR

TOPIC_MEDICAL_EXCLUSION Table lists applicable SNOMED (SNM) and CPT Category II (C4) codes for medical reason exclusions:

MEDICAL REASON (SNM)	MEDICAL REASON (C4)
390796006, 407573008	4035F-1P

[PCFLUSHOT]=3

OR

TOPIC_MEDICAL_EXCLUSION Table lists applicable SNOMED (SNM) and CPT Category II (C4) codes for patient reason exclusions:

PATIENT REASON (SNM)	PATIENT REASON (C4)
315640000	4035F-2P

[PCFLUSHOT]=4

OR

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TOPIC_MEDICAL_EXCLUSION Table lists applicable CPT Category II (C4) code for system reason exclusion:

SYSTEM REASON (C4)
4035F-3P

[PCFLUSHOT]=5

**PREVENTIVE CARE (PC)
Algorithm for Measures Calculation – EHRS**

Pneumonia Vaccination (PC-8) The percentage of patients 65 years and older who ever received a pneumococcal vaccination

Denominator: All patients ≥ 65 years of age on the last day of the measurement period

Denominator Inclusions

Patients with a documented diagnosis of at least one of the chronic conditions and ≥ 65 years of age on the last day of the measurement period.
[DATEOFBIRTH] ≥ 65
[PCCONFIRMED]=1

Numerator: Patients who have ever received a pneumococcal vaccination

Numerator Inclusions

Patients who have already received or are administered a pneumococcal vaccination.

Note: Look for the most recent documentation of administration of pneumococcal vaccination in the medical record; do not limit search to the reporting year.

TOPIC_EVALUATION_CODES Table lists an applicable ICD-9 (I9), CPT (C4), CPT Category II (C4), HCPCS (HCPCS), SNOMED (SNM), and HL7 Vaccination (CVX) codes for inclusion:

PNEUMO VAC CODE (I9)	PNEUMO VAC CODE (C4)	PNEUMO VAC CODE (C4)
V03.82	90732	4040F

OR

PNEUMO VAC CODE (HCPCS)	PNEUMO VAC CODE (SNM)	PNEUMO VAC CODE (CVX)
G0009	12866006, 310578008, 333598008	33, 100, 109

OR

INFLU-PNEUMO CODE (I9)
V06.6

[PCPNEUMOSHOT]=1

**PREVENTIVE CARE (PC)
Algorithm for Measures Calculation – EHRS**

Denominator Exclusions (*Exclusions only applied if the patient did not receive a pneumococcal vaccination*)

TOPIC_MEDICAL_EXCLUSION Table lists applicable ICD-9 (I9) and SNOMED (SNM) codes for medical reason exclusion:

ALLERGY CODE (I9)	ALLERGY CODE (SNM)
V14.7	294652008, 315789000, 414373006

OR

TOPIC_MEDICAL_EXCLUSION Table lists applicable ICD-9 (I9) codes for adverse effects exclusion where an ADVERSE_EFFECT_1 code must be accompanied by an ADVERSE_EFFECT_2 code:

ADVERSE EFFECT 1 CODE (I9)	ADVERSE EFFECT 2 CODE (I9)
995.0, 995.2, 995.27, 995.29	E948.8

OR

TOPIC_MEDICAL_EXCLUSION Table lists applicable SNOMED (SNM) codes for adverse effects exclusion:

ADVERSE EFFECT CODE (SNM)
21904007, 223144009, 288310001, 293104008 293116002, 413378005

[PCPNEUMOSHOT]=3

OR

TOPIC_MEDICAL_EXCLUSION Table lists applicable SNOMED (SNM) and CPT Category II (C4) codes for medical reason exclusion.

MEDICAL REASON (SNM)	MEDICAL REASON (C4)
390795005, 415119001	4040F-1P

[PCPNEUMOSHOT]=3

OR

TOPIC_MEDICAL_EXCLUSION Table lists applicable SNOMED (SNM) and CPT Category II (C4) codes for patient reason exclusion.

PATIENT REASON (SNM)	PATIENT REASON (C4)
401086001	4040F-2P

[PCPNEUMOSHOT]=4

APPENDIX A
PC MEASURES WITH CORRESPONDING DATA ELEMENTS

Ambulatory Care Measure	Short Name	Description
PC-1 Blood Pressure Measurement		
	TOPIC TYPE	Topic that is being reported on
	TOPIC INDICATOR	The specific indicator or measure
	BIRTHDATE	Birth date
	MEASURE START DATE	Date the measurement year begins
	MEASURE END DATE	Date the measurement year ends
	ENCOUNTER CODING SYSTEM	Type of coding system applicable to face-to-face office visit (CPT4)
	ENCOUNTER CODE	Code used for encounter
	ENCOUNTER DATE	Date of encounter
	DX CODING SYSTEM	Type of coding system applicable to the diagnosis code (ICD9)
	DX CODE	Diagnosis code
	DX DATE	Date of diagnosis
	SYSTOLIC CODING SYSTEM	Type of coding system applicable for a systolic blood pressure (SNOMED, CPT4, CPT Category II)
	SYSTOLIC CODE	Systolic blood pressure code
	SYSTOLIC DATE	Date systolic blood pressure documented
	SYSTOLIC RESULT	Numeric result for systolic blood pressure measurement
	DIASTOLIC CODING SYSTEM	Type of coding system applicable for a diastolic blood pressure (SNOMED, CPT4, CPT Category II)
	DIASTOLIC CODE	Diastolic blood pressure code
	DIASTOLIC DATE	Date diastolic blood pressure documented
	DIASTOLIC RESULT	Numeric result for diastolic blood pressure measurement
	BP CODING SYSTEM	Type of coding system applicable for a blood pressure measurement (CPT Category II)
	BP CODE	Blood pressure code
	BP DATE	Date blood pressure was documented

Shaded data elements apply to each measure

APPENDIX A
PC MEASURES WITH CORRESPONDING DATA ELEMENTS

Ambulatory Care Measure	Short Name	Description
PC-5 Breast Cancer Screening		
	TOPIC TYPE	Topic that is being reported on
	TOPIC INDICATOR	The specific indicator or measure
	BIRTHDATE	Birth date
	MEASURE START DATE	Date the measurement year begins
	MEASURE END DATE	Date the measurement year ends
	ENCOUNTER CODING SYSTEM	Type of coding system applicable to face-to-face office visit (CPT4)
	ENCOUNTER CODE	Code used for encounter
	ENCOUNTER DATE	Date of encounter
	DX CODING SYSTEM	Type of coding system applicable to the diagnosis code (ICD9)
	DX CODE	Diagnosis code
	DX DATE	Date of diagnosis
	BREAST CANCER SCREEN CODING SYSTEM	Type of coding system applicable for breast cancer screening (ICD9, CPT4, HCPCS)
	BREAST CANCER SCREEN CODE	Breast cancer screening code
	BREAST CANCER SCREEN DATE	Date breast cancer screening was performed
	EXCLUSION CODING SYSTEM	Type of coding system applicable for medical exclusions (ICD9, CPT4)
	EXCLUSION CODE	Code used for medical exclusion
	EXCLUSION DATE	Date medical exclusion documented

Shaded data elements apply to each measure

APPENDIX A
PC MEASURES WITH CORRESPONDING DATA ELEMENTS

Ambulatory Care Measure	Short Name	Description
*PC-6 Colorectal Cancer Screening		
	TOPIC TYPE	Topic that is being reported on
	TOPIC INDICATOR	The specific indicator or measure
	BIRTHDATE	Birth date
	MEASURE START DATE	Date the measurement year begins
	MEASURE END DATE	Date the measurement year ends
	ENCOUNTER CODING SYSTEM	Type of coding system applicable to face-to-face office visit (CPT4)
	ENCOUNTER CODE	Code used for encounter
	ENCOUNTER DATE	Date of encounter
	DX CODING SYSTEM	Type of coding system applicable to the diagnosis code (ICD9)
	DX CODE	Diagnosis code
	DX DATE	Date of diagnosis
	SIGMOIDOSCOPY CODING SYSTEM	Type of coding system applicable for a sigmoidoscopy (CPT4)
	SIGMOIDOSCOPY CODE	Code used for sigmoidoscopy
	SIGMOIDOSCOPY DATE	Date sigmoidoscopy performed
	BARIUM ENEMA CODING SYSTEM	Type of coding system applicable for a barium enema (CPT4)
	BARIUM ENEMA CODE	Code used for barium enema
	BARIUM ENEMA DATE	Date barium enema performed
	COLONOSCOPY CODING SYSTEM	Type of coding system applicable for a colonoscopy (CPT4)
	COLONOSCOPY CODE	Code used for colonoscopy
	COLONOSCOPY DATE	Date colonoscopy performed
	OCCULT BLOOD CODING SYSTEM	Type of coding system applicable for occult blood (CPT4, LOINC)
	OCCULT BLOOD CODE	Code used for occult blood
	OCCULT BLOOD DATE	Date occult blood test performed
	COLORECTAL SCREEN CODING SYSTEM	Type of coding system applicable for colorectal screening (CPT Category II)
	COLORECTAL SCREEN CODE	Code used for colorectal screen
	COLORECTAL SCREEN DATE	Date colorectal screening performed
	EXCLUSION CODING SYSTEM	Type of coding system applicable for medical exclusions (CPT4)
	EXCLUSION CODE	Code used for medical exclusion
	EXCLUSION DATE	Date medical exclusion documented

Shaded data elements apply to each measure

APPENDIX A
PC MEASURES WITH CORRESPONDING DATA ELEMENTS

Ambulatory Care Measure	Short Name	Description
PC-6 Colorectal Cancer Screening		
	MEDICAL REASON CODING SYSTEM	Type of coding system applicable for a medical reason code (CPT Category II)
	MEDICAL REASON CODE	Code used for medical reason
	MEDICAL REASON DATE	Date medical reason documented
	PATIENT REASON CODING SYTEM	Type of coding system applicable for a patient reason code (CPT Category II)
	PATIENT REASON CODE	Code used for patient reason
	PATIENT REASON DATE	Date patient reason documented
	SYSTEM REASON CODING SYSTEM	Type of coding system applicable for a system reason code (CPT Category II)
	SYSETM REASON CODE	Code used for system reason
	SYSTEM REASON DATE	Date patient reason documented

APPENDIX A
PC MEASURES WITH CORRESPONDING DATA ELEMENTS

Ambulatory Care Measure	Short Name	Description
PC-7 Influenza Immunization		
	TOPIC TYPE	Topic that is being reported on
	TOPIC INDICATOR	The specific indicator or measure
	BIRTHDATE	Birth date
	MEASURE START DATE	Date the measurement year begins
	MEASURE END DATE	Date the measurement year ends
	ENCOUNTER CODING SYSTEM	Type of coding system applicable to face-to-face office visit (CPT4)
	ENCOUNTER CODE	Code used for encounter
	ENCOUNTER DATE	Date of encounter
	DX CODING SYSTEM	Type of coding system applicable to the diagnosis code (ICD9)
	DX CODE	Diagnosis code
	DX DATE	Date of diagnosis
	INFLUENZA CODING SYSTEM	Type of coding system applicable for influenza immunization (ICD9, CPT4, CVX, SNOMED, HCPCS, CPT Category II)
	INFLUENZA CODE	Code for influenza immunization
	INFLUENZA DATE	Date influenza immunization documented
	INFLU-PNEUMO CODING SYSTEM	Type of coding system applicable for a pneumococcal vaccination (ICD9)
	INFLU-PNEUMO CODE	Code for pneumococcal vaccination
	INFLU-PNEUMO DATE	Date pneumococcal vaccination documented
	ALLERGY CODING SYSTEM	Type of coding system applicable for an allergy (ICD9, SNOMED)
	ALLERGY CODE	Code used for allergy
	ALLERGY DATE	Date allergy documented
	ADVERSE EFFECT 1 CODING SYSTEM	Type of coding system applicable for an adverse effect 1 (ICD9)
	ADVERSE EFFECT 1 CODE	Code used for adverse effect
	ADVERSE EFFECT 1 DATE	Date adverse effect 1 documented
	ADVERSE EFFECT 2 CODING SYSTEM	Type of coding system applicable for an adverse effect 2 (ICD9 E code)
	ADVERSE EFFECT 2 CODE	Code used for adverse effect 2
	ADVERSE EFFECT 2 DATE	Date an adverse effect documented
	ADVERSE EFFECT CODING SYSTEM	Type of coding system applicable for an adverse effect (SNOMED)
	ADVERSE EFFECT CODE	Code used for an adverse effect
	ADVERSE EFFECT DATE	Date adverse effect documented

Shaded data elements apply to each measure

APPENDIX A
PC MEASURES WITH CORRESPONDING DATA ELEMENTS

Ambulatory Care Measure	Short Name	Description
*PC-7 Influenza Immunization		
	MEDICAL REASON CODING SYSTEM	Type of coding system applicable for a medical reason (SNOMED, CPT Category II)
	MEDICAL REASON CODE	Code used for medical reason
	MEDICAL REASON DATE	Date medical reason documented
	PATIENT REASON CODING SYSTEM	Type of code applicable for a patient reason (SNOMED, CPT Category II)
	PATIENT REASON CODE	Code used for patient reason
	PATIENT REASON DATE	Date patient reason documented
	SYSTEM REASON CODING SYSTEM	Type of code applicable for a system reason (CPT Category II)
	SYSTEM REASON CODE	Code used for system reason
	SYSTEM REASON DATE	Date system reason documented

APPENDIX A
PC MEASURES WITH CORRESPONDING DATA ELEMENTS

Ambulatory Care Measure	Short Name	Description
PC-8 Pneumococcal Immunization		
	TOPIC TYPE	Topic that is being reported on
	TOPIC INDICATOR	The specific indicator or measure
	BIRTHDATE	Birth date
	MEASURE START DATE	Date the measurement year begins
	MEASURE END DATE	Date the measurement year ends
	ENCOUNTER CODING SYSTEM	Type of coding system applicable to face-to-face office visit (CPT4)
	ENCOUNTER CODE	Code used for encounter
	ENCOUNTER DATE	Date of encounter
	DX CODING SYSTEM	Type of coding system applicable to the diagnosis code (ICD9)
	DX CODE	Diagnosis code
	DX DATE	Date of diagnosis
	PNEUMO VAC CODING SYSTEM	Type of coding system applicable for pneumococcal vaccination (ICD9, CPT4, CVX, SNOMED, HCPCS, CPT Category II)
	PNEUMO VAC CODE	Code for pneumococcal vaccination
	PNEUMO VAC DATE	Date pneumococcal vaccination documented
	INFLU-PNEUMO CODING SYSTEM	Type of coding system applicable for a pneumococcal vaccination (ICD9)
	INFLU-PNEUMO CODE	Code for pneumococcal vaccination
	INFLU-PNEUMO DATE	Date pneumococcal vaccination documented
	ALLERGY CODING SYSTEM	Type of coding system applicable for an allergy (ICD9, SNOMED)
	ALLERGY CODE	Code used for allergy
	ALLERGY DATE	Date allergy documented
	ADVERSE EFFECT 1 CODING SYSTEM	Type of coding system applicable for an adverse effect 1 (ICD9)
	ADVERSE EFFECT 1 CODE	Code used for adverse effect
	ADVERSE EFFECT 1 DATE	Date adverse effect 1 documented
	ADVERSE EFFECT 2 CODING SYSTEM	Type of coding system applicable for an adverse effect 2 (ICD9 E code)
	ADVERSE EFFECT 2 CODE	Code used for adverse effect 2
	ADVERSE EFFECT 2 DATE	Date adverse effect 2 documented
	ADVERSE EFFECT CODING SYSTEM	Type of coding system applicable for an adverse effect (SNOMED)
	ADVERSE EFFECT CODE	Code used for an adverse effect
	ADVERSE EFFECT DATE	Date adverse effect documented

Shaded data elements apply to each measure

APPENDIX A
PC MEASURES WITH CORRESPONDING DATA ELEMENTS

Ambulatory Care Measure	Short Name	Description
PC-8 Pneumococcal Immunization		
	MEDICAL REASON CODING SYSTEM	Type of coding system applicable for a medical reason (SNOMED, CPT Category II)
	MEDICAL REASON CODE	Code used for medical reason
	MEDICAL REASON DATE	Date medical reason documented
	PATIENT REASON CODING SYSTEM	Type of code applicable for a patient reason (SNOMED, CPT Category II)
	PATIENT REASON CODE	Code used for patient reason
	PATIENT REASON DATE	Date patient reason documented

DISCLAIMER INFORMATION REGARDING PREVENTIVE CARE MEASURES

This disclaimer from the AMA is applicable for the following measures:

- Blood Pressure Measurement (*PC-1)
- Colorectal Cancer Screening (*PC-6)
- Influenza Immunization (*PC-7)

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