

RECOMMENDED STARTER SET CLINICAL PERFORMANCE MEASURES FOR AMBULATORY CARE

At the January 17th – 18th meeting, the large stakeholder group directed the Performance Measurement Workgroup to propose a starter set of measures for ambulatory care, which align with agreed-upon parameters and address agreed-upon specific conditions/areas. The workgroup is recommending that the performance measures contained in this document serve as this starter set.

This recommendation was developed by the workgroup after significant discussion. The workgroup started with the “strawman” list of measures presented at the January meeting – all of which were part of the CMS-AMA Physician Consortium-NCQA ambulatory care performance measurement set that was submitted to NQF for expedited review. Utilizing a modified “Delphi” exercise to help facilitate the discussion, the workgroup considered and primarily selected measures based on their ability to meet the following criteria: (1) clinical importance and scientific validity; (2) feasibility; (3) relevance to physician performance; (4) consumer relevance; and (5) purchaser relevance. Other factors considered include whether measures were preliminarily approved by NQF’s expedited review process and comments made during the last stakeholder meeting in January.

While the workgroup believes that this is a sound set of measures that meets primary goals, such as addressing the IOM’s priority areas, they continue to recognize that this is an initial step in a multi-year process. Additional work needs to be done to build a more complete set of measures, which includes additional efficiency measures, sub-specialty measures, cross-cutting measures, patient experience measures and others.

Prevention Measures	
1. Breast Cancer Screening	Percentage of women who had a mammogram during the measurement year or year prior to the measurement year.
2. Colorectal Cancer Screening	The percentage of adults who had an appropriate screening for colorectal cancer. One or more of the following: FOBT – during measurement year; Flexible sigmoidoscopy - during the measurement year or the four years prior to the measurement year; DCBE – during the measurement year or the four years prior; Colonoscopy – during the measurement or nine years prior.
3. Cervical Cancer Screening	Percentage of women who had one or more Pap tests during the measurement year or the two prior years.
4. Tobacco Use	Percentage of patients who were queried about tobacco use one or more times during the two-year measurement period.
5. Advising Smokers to Quit	Percentage of patients who received advice to quit smoking.
6. Influenza	Percentage of patients 50-64 who received an influenza vaccination.

Vaccination	Note: NQF also preliminarily approved this measure for patients 65 and older.
7. Pneumonia Vaccination	Percentage of patients who ever received a pneumococcal vaccine.
Coronary Artery Disease (CAD)	
8. Drug Therapy for Lowering LDL Cholesterol	Percentage of patients with CAD who were prescribed a lipid-lowering therapy (based on current ACC/AHA guidelines).
9. Beta-Blocker Treatment after Heart Attack	Percentage of patients hospitalized with acute myocardial infarction (AMI) who received an ambulatory prescription for beta-blocker therapy (within 7 days discharge).
10. Beta-Blocker Therapy – Post MI	Percentage patients hospitalized with AMI who received persistent beta-blocker treatment (6 months after discharge). Note: This measure was not reviewed by the NQF and therefore it is not approved
Heart Failure	
11. ACE Inhibitor /ARB Therapy	Percentage of patients with heart failure who also have LVSD who were prescribed ACE inhibitor or ARB therapy. Angiotensin receptor blocker (ARB) drugs are collected under this measure.
12. LVF Assessment	Percentage of patients with heart failure with quantitative or qualitative results of LVF assessment recorded.
Diabetes	Note: These measures were not approved during the NQF expedited review, as NQF has taken previous action on diabetes measures.
13. HbA1C Management	Percentage of patients with diabetes with one or more A1C test(s) conducted during the measurement year.
14. HbA1C Management Control	Percentage of patients with diabetes with most recent A1C level greater than 9.0% (poor control).
15. Blood Pressure Management	Percentage of patients with diabetes who had their blood pressure documented in the past year less than 140/90 mm Hg.
16. Lipid Measurement	Percentage of patients with diabetes with at least one Low Density Lipoprotein cholesterol (LDL-C) test (or ALL component tests).
17. LDL Cholesterol Level (<130mg/dL)	Percentage of patients with diabetes with most recent LDL-C less than 100 mg/dL or less than 130 mg/dL.
18. Eye Exam	Percentage of patients who received a retinal or dilated eye exam by an eye care professional (optometrist or ophthalmologist) during the reporting year or during the prior year if patient is at low risk for retinopathy. A patient is considered low risk if all three of the following criteria are met: (1) the patient is not taking insulin; (2) has an A1C less than 8.0%; and (3) has no evidence of retinopathy in the prior year.
Asthma	
19. Use of Appropriate	Percentage of individuals who were identified as having persistent asthma

Medications for People w/ Asthma	during the year prior to the measurement year and who were appropriately prescribed asthma medications (e.g. inhaled corticosteroids) during the measurement year
20. Asthma: Pharmacologic Therapy	Percentage of all individuals with mild, moderate, or severe persistent asthma who were prescribed either the preferred long-term control medication (inhaled corticosteroid) or an acceptable alternative treatment.
Depression	
21. Antidepressant Medication Management	Acute Phase: Percentage of adults who were diagnosed with a new episode of depression and treated with an antidepressant medication and remained on an antidepressant drug during the entire 84-day (12-week) Acute Treatment Phase.
22. Antidepressant Medication Management	Continuation Phase: Percentage of adults who were diagnosed with a new episode of depression and treated with an antidepressant medication and remained on an antidepressant drug for at least 180 days (6 months).
Prenatal Care	
23. Screening for Human Immunodeficiency Virus	Percentage of patients who were screened for HIV infection during the first or second prenatal visit.
24. Anti-D Immune Globulin	Percentage of D (Rh) negative, unsensitized patients who received anti-D immune globulin at 26-30 weeks gestation.
Quality Measures Addressing Overuse or Misuse	
25. Appropriate Treatment for Children with Upper Respiratory Infection (URI)	Percentage of patients who were given a diagnosis of URI and were not dispensed an antibiotic prescription on or 3 days after the episode date.
26. Appropriate Testing for Children with Pharyngitis	Percentage of patients who were diagnosed with pharyngitis, prescribed an antibiotic and who received a group A streptococcus test for the episode.