

Measure Specifications (Spring 2010)
Select AQA Alliance Starter Measures for Physician Clinical Quality Review

The following is a list of the AQA Alliance (AQA) approved measures used in MHI's Spring 2010 Clinical Quality Review. These measures were developed by the National Committee for Quality Assurance (NCQA) or the American Medical Association's Physician Consortium for Performance Improvement (AMA-PCPI). You can view the specific definition of each measure by clicking on the name of the measure from the list below. Each definition includes a link to the corresponding NCQA or AMA-PCPI website where you can find additional information on each measure.

[Diabetes: Eye Exam](#)

[Hemoglobin A1c Testing](#)

[Diabetes: Urine Protein Screening](#)

[Diabetes: Lipid Profile](#)

[AMI: Persistence of Beta-Blocker Treatment](#)

[IVD: Complete Lipid Profile](#)

[CHF: Warfarin Therapy for A. Fib](#)

[CHF: LV Function Assessment](#)

[CAD: Drug Therapy for Lowering LDL-Cholesterol](#)

[Therapeutic Monitoring: Digoxin](#)

[Therapeutic Monitoring: ACE/ARB](#)

[Therapeutic Monitoring: Diuretics](#)

[Low Back Pain: Use of Imaging Studies](#)

[Appropriate ABX Treatment: Acute Bronchitis, Adult](#)

[Appropriate ABX Treatment: URI, Peds](#)

[Cervical Cancer Screening](#)

[Breast Cancer Screening](#)

	Description	Numerator	Denominator	Exclusions	Source
<p><i>Cardiovascular:</i></p> <p><u>Persistence of beta-blocker treatment after heart attack</u></p>	<p>Percentage of patients 18 years of age and older during the measurement year who were hospitalized and discharged alive from July 1 of the year prior to the measurement year to June 30 of the measurement year with a diagnosis of acute myocardial infarction (AMI) and who received persistent beta-blocker treatment for six months after discharge.</p>	<p>Identify all patients in the denominator population whose dispensed days supply is ≥ 135 days in the 180 days following discharge. Persistence of treatment for this measure is defined as at least 75 percent of the days supply filled.</p>	<p>All patients aged 18 years and older as of December 31 of the measurement year, discharged alive from and acute inpatient setting with an AMI between July 1 of the year prior to the measurement year through June 30 of the measurement year.</p>	<p>Exclude patients who are identified as having a contraindication to beta-blocker therapy or previous adverse reaction to beta-blocker therapy.</p>	<p>NCQA</p>
<p><u>Drug therapy for lowering LDL cholesterol</u></p>	<p>Percentage of patients who were prescribed lipid-lowering therapy (based on current ACC/AHA guidelines).</p>	<p>Patients who were prescribed lipid-lowering therapy.</p>	<p>All patients with CAD.</p>	<p>Documentation of medical reason(s) for not prescribing lipid-lowering therapy.</p>	<p>AMA-PCPI</p>
<p><u>Lipid profile testing for ischemic vascular disease</u></p>	<p>Percentage of patients 18 years and older with IVD who had a complete lipid profile.</p>	<p>A complete lipid profile performed during the measurement year, as identified by claim/encounter or automated laboratory data.</p>	<p>1) All patients aged 18 years and older who were discharged alive for AMI, CABG or PTCA on or between 1/11-11/1 of the year prior to the measurement year. AMI & CABG cases should be from inpatient claims only. All cases of PTCA should be included regardless of setting, OR 2) All patients aged 18 years and older</p>	<p>Exclude patient self-report or self-monitoring, LDL to HDL ratio and findings reported on progress notes or other non-laboratory documentation.</p>	<p>NCQA</p>

			who have IVD, who met at least one of the two criteria (IVD diagnosis or IVD visit), during both the measurement year and the year prior to the measurement year (criteria need not be the same across two years).		
<i>Heart Failure:</i> <u>Left ventricular ejection fraction testing (LVF Assessment)</u>	Percentage of patients with quantitative or qualitative results of LVF assessment recorded.	Patients with quantitative or qualitative results of LVF assessment recorded.	All patients aged ≥18 years with HF.		AMA-PCPI
<u>Warfarin therapy for patients with atrial fibrillation</u>	Percentage of HF patients who also have paroxysmal or chronic atrial fibrillation who were prescribed warfarin therapy.	Patients prescribed warfarin therapy.	All HF patients aged ≥18 years with paroxysmal or chronic atrial fibrillation.	Exclude patients with documented medical reason(s) for not prescribing warfarin.	AMA-PCPI
<i>Diabetes:</i> <u>Eye exam for retinopathy</u>	Percentage of patients 18-75 years of age with diabetes (type1 or type 2) who had eye exam (retinal) performed.	Diabetics who had either a retinal or dilated eye exam by an eye care professional (optometrist or ophthalmologist) in the measurement year OR a negative retinal exam (no evidence of retinopathy) by an eye care professional in the year prior to the	Patients 18-75 years of age as of December 31 of the measurement year who had a diagnosis of diabetes (type 1 or type 2).	See exclusions under Hemoglobin A1C testing.	NCQA

		measurement year.			
<u>Hemoglobin A1C testing</u>	Percentage of patients 18-75 years of age with diabetes (type 1 or type 2) who had Hemoglobin A1c (HbA1c) testing.	An HbA1c test performed during the measurement year, as identified by claim/encounter or automated laboratory data.	Patients 18-75 years of age as of December 31 of the measurement year who had a diagnosis of diabetes (type 1 or type 2).	Exclude patients with 1) diagnosis of polycystic ovaries who did not have any face-to-face encounters with a diagnosis of diabetes, in any setting, during the measurement or year prior to the measurement year; 2) gestational diabetes or steroid induced diabetes who did not have any face-to-face encounters with the diagnosis of diabetes, in any setting, during the measurement year or year prior to the measurement year.	NCQA
<u>Lipid profile testing</u>	Percentage of patients 18-75 years of age with diabetes (type 1 or type 2) who had LDL-C screening.	An LDL-C test performed during the measurement year, as identified by claim/encounter or automated laboratory data.	Patients 18-75 years of age as of December 31 of the measurement year who had a diagnosis of diabetes (type 1 or type 2).	See exclusions under Hemoglobin A1C testing.	NCQA
<u>Urine protein testing for nephropathy</u>	Percentage of patients 18-75 years of age with diabetes (type 1 or type 2) who had medical attention for nephropathy.	A nephropathy screening test, evidence of nephropathy, a nephrologist visit, a positive urine macroalbumin or evidence of ACE	Patients 18-75 years of age as of December 31 of the measurement year who had a diagnosis of diabetes (type 1 or type 2).	See exclusions under Hemoglobin A1C testing.	NCQA

		inhibitor/ARB therapy during the measurement year.			
<i>Respiratory Conditions:</i> <u>Appropriate antibiotic treatment in adults with acute bronchitis</u>	Percentage of adults 18-64 years of age with a diagnosis of acute bronchitis who were not dispensed an antibiotic prescription.	Qualifying patients <i>not</i> receiving a dispensed outpatient prescription for antibiotic medication on or within three days after the Index Episode Start Date (IESD) (see measure detail at NCQA).	Outpatient visit with any diagnosis of acute bronchitis during the Intake Period (see measure detail at NCQA).	None	NCQA
<u>Appropriate treatment for children with upper respiratory infection</u>	Percentage of children 3 months-18 years who were given a diagnosis of upper respiratory infection (URI) and were not dispensed an antibiotic prescription.	Qualifying patients <i>not</i> receiving a dispensed prescription for antibiotic medication on or three days after the Index Episode Start Date (IESD) (see measure detail at NCQA).	Outpatient or ED visit with only a diagnosis of URI during the Intake Period (see measure detail at NCQA).	None	NCQA
<i>Musculoskeletal Conditions:</i> <u>Use of imaging studies for low back pain</u>	Percentage of patients with a primary diagnosis of low back pain who did not have an imaging study (plain X-ray, MRI, CT scan) within 28 days of the diagnosis.	An imaging study (plain x-ray, MRI, CT scan) conducted on the Index Episode Start Date (IESD) or in the 28 days following the IESD (see measure detail at NCQA).	All patients aged 18-50 years as of December 31 of the measurement year with a new episode of low back pain.	Exclude 1) patients with any low back pain diagnosis during the 180 days (6 months prior to the IESD); 2) patients who have a diagnosis of cancer (look for evidence of cancer as far back as possible	NCQA

				in the patient's history); 3) exclude patients who have any diagnosis of recent trauma, IV drug use or neurological impairment.	
Medication Management: <u>Annual monitoring for patients on persistent medications</u>	Percentage of patients 18 years of age and older who received at least a 180-days supply of ambulatory medication therapy for a select therapeutic agent during the measurement year and at least one therapeutic monitoring event for the therapeutic agent in the measurement year.				
- <u>ACE & ARB</u>		Number of patients with at least one serum potassium <i>and</i> either a serum creatinine or a blood urea nitrogen therapeutic monitoring test in the measurement year.	Number of patients age 18 years and older who received at least a 180-days supply ACE inhibitors or ARBs, including any combination products during the measurement year.	Exclude patients from each eligible population rate who had an inpatient stay (acute or nonacute) in the measurement year.	NCQA
- <u>Digoxin</u>		Number of patients with at least one serum potassium <i>and</i> either a serum creatinine or a blood urea nitrogen therapeutic	Number of patients age 18 years and older who received at least a 180-days supply of any drug for digoxin, including any combination products	See exclusions under ACE & ARB.	NCQA

		monitoring test in the measurement year.	during the measurement year.		
- <u>Diuretics</u>		Number of patients with at least one serum potassium <i>and</i> either a serum creatinine or a blood urea nitrogen therapeutic monitoring test in the measurement year.	Number of patients age 18 years and older who received at least a 180-days supply of any diuretic drugs, including any combination products during the measurement year.	See exclusions under ACE & ARB.	NCQA
<i>Early Detection:</i> <u>Breast cancer screening</u>	Percentage of women 50-69 years of age who had a mammogram to screen for breast cancer.	One or more mammograms during the measurement year or the year prior to the measurement year.	Women 52-69 years as of December 31 of the measurement year.	Exclude women with bilateral mastectomy. Look as far back as possible.	NCQA
<u>Cervical cancer screening</u>	Percentage of women 21-64 years of age who received one or more Pap tests to screen for cervical cancer.	One or more Pap tests during the measurement year or the two years prior to the measurement year.	Women 24-64 years of age as of December 31 of the measurement year.	Women who had a hysterectomy and with no residual cervix. Look as far back as possible.	NCQA

Sources

1. NCQA: National Committee for Quality Assurance, <http://www.ncqa.org/tabid/59/Default.aspx>
Measures: <http://www.ncqa.org/LinkClick.aspx?fileticket=POLoMIAi3Mo%3d&tabid=59&mid=1604&forcedownload=true>
2. AMA-PCPI: American Medical Association, Physician Consortium for Performance Improvement, <http://www.ama-assn.org/ama/pub/physician-resources/clinical-practice-improvement/clinical-quality/physician-consortium-performance-improvement/pcpi-measures.shtml>
Measures: <http://www.ama-assn.org/ama1/pub/upload/mm/370/hfset-12-5.pdf>,
<http://www.ama-assn.org/ama1/pub/upload/mm/370/cadminisetjune06.pdf>