

TABLE 43: Final Individual Quality Measures and Those Included in Measures Groups for the Physician Quality Reporting System to be Available for Satisfactory Reporting via Claims, Registry, or EHR Beginning in 2016 and Beyond

NQF/ PQRS	CMS E-Measure ID	National Quality Strategy Domain	Measure Title and Description ^y	Measure Steward
0059/ 001	122v4	Effective Clinical Care	<p>Diabetes: Hemoglobin A1c Poor Control: Percentage of patients 18-75 years of age with diabetes who had hemoglobin A1c > 9.0% during the measurement period.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69215).</p>	National Committee for Quality Assurance
N/A/002	163v4	Effective Clinical Care	<p>Diabetes: Low Density Lipoprotein (LDL-C) Control (<100 mg/dL): Percentage of patients 18–75 years of age with diabetes whose LDL-C was adequately controlled (< 100 mg/dL) during the measurement period.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 94 at 77 FR 69209).</p>	National Committee for Quality Assurance
0081/005	135v4	Effective Clinical Care	<p>Heart Failure (HF): Angiotensin-Converting Enzyme (ACE) Inhibitor or Angiotensin Receptor Blocker (ARB) Therapy for Left Ventricular Systolic Dysfunction (LVSD): Percentage of patients aged 18 years and older with a diagnosis of heart failure (HF) with a current or prior left ventricular ejection fraction (LVEF) < 40% who were prescribed ACE inhibitor or ARB therapy either within a 12 month period when seen in the outpatient setting OR at each hospital discharge.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69215).</p>	American Medical Association- Physician Consortium for Performance Improvement/ American College of Cardiology Foundation/ American Heart Association
0067/006	N/A	Effective Clinical Care	<p>Coronary Artery Disease (CAD): Antiplatelet Therapy: Percentage of patients aged 18 years and older with a diagnosis of coronary artery disease (CAD) seen within a 12 month period who were prescribed aspirin or clopidogrel.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69215).</p>	American College of Cardiology/Ameri can Heart Association/ American Medical Association- Physician Consortium for Performance Improvement
0070/007	145v4	Effective Clinical Care	<p>Coronary Artery Disease (CAD): Beta-Blocker Therapy – Prior Myocardial Infarction (MI) or Left Ventricular Systolic Dysfunction (LVEF < 40%): Percentage of patients aged 18 years and older with a diagnosis of coronary artery disease seen within a 12 month period who also have prior MI OR a current or prior LVEF < 40% who were prescribed beta-blocker therapy.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69216).</p>	American Medical Association- Physician Consortium for Performance Improvement/ American College of Cardiology Foundation/ American Heart Association

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0083/008	144v4	Effective Clinical Care	<p>Heart Failure (HF): Beta-Blocker Therapy for Left Ventricular Systolic Dysfunction (LVSD): Percentage of patients aged 18 years and older with a diagnosis of heart failure (HF) with a current or prior left ventricular ejection fraction (LVEF) < 40% who were prescribed beta-blocker therapy either within a 12 month period when seen in the outpatient setting OR at each hospital discharge.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69216).</p>	American Medical Association-Physician Consortium for Performance Improvement/ American College of Cardiology Foundation/ American Heart Association
0105/ 009	128v4	Effective Clinical Care	<p>Anti-Depressant Medication Management: Percentage of patients 18 years of age and older who were diagnosed with major depression and treated with antidepressant medication, and who remained on antidepressant medication treatment. Two rates are reported</p> <p>a. Percentage of patients who remained on an antidepressant medication for at least 84 days (12 weeks).</p> <p>b. Percentage of patients who remained on an antidepressant medication for at least 180 days (6 months).</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69216).</p>	National Committee for Quality Assurance
0086/012	143v4	Effective Clinical Care	<p>Primary Open-Angle Glaucoma (POAG): Optic Nerve Evaluation: Percentage of patients aged 18 years and older with a diagnosis of primary open-angle glaucoma (POAG) who have an optic nerve head evaluation during one or more office visits within 12 months.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69216).</p>	American Medical Association-Physician Consortium for Performance Improvement/ National Committee for Quality Assurance
0087/014	N/A	Effective Clinical Care	<p>Age-Related Macular Degeneration (AMD): Dilated Macular Examination: Percentage of patients aged 50 years and older with a diagnosis of age-related macular degeneration (AMD) who had a dilated macular examination performed which included documentation of the presence or absence of macular thickening or hemorrhage AND the level of macular degeneration severity during one or more office visits within 12 months.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69216).</p>	American Academy of Ophthalmology
0088/018	167v4	Effective Clinical Care	<p>Diabetic Retinopathy: Documentation of Presence or Absence of Macular Edema and Level of Severity of Retinopathy: Percentage of patients aged 18 years and older with a diagnosis of diabetic retinopathy who had a dilated macular or fundus exam performed which included documentation of the level of severity of retinopathy and the presence or absence of macular edema during one or more office visits within 12 months.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69216).</p>	American Medical Association-Physician Consortium for Performance Improvement/ National Committee for Quality Assurance
0089/019	142v4	Communication and Care Coordination	<p>Diabetic Retinopathy: Communication with the Physician Managing Ongoing Diabetes Care: Percentage of patients aged 18 years and older with a diagnosis of diabetic retinopathy who had a dilated macular or fundus exam performed with documented communication to the physician who manages the ongoing care of the patient with diabetes mellitus regarding the findings of the</p>	American Medical Association-Physician Consortium for

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			<p>macular or fundus exam at least once within 12 months.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69217).</p>	Performance Improvement/ National Committee for Quality Assurance
0268/021	N/A	Patient Safety	<p>Perioperative Care: Selection of Prophylactic Antibiotic – First OR Second Generation Cephalosporin: Percentage of surgical patients aged 18 years and older undergoing procedures with the indications for a first OR second generation cephalosporin prophylactic antibiotic, who had an order for a first OR second generation cephalosporin for antimicrobial prophylaxis.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69217).</p>	American Medical Association-Physician Consortium for Performance Improvement/ National Committee for Quality Assurance
0271/022	N/A	Patient Safety	<p>Perioperative Care: Discontinuation of Prophylactic Parenteral Antibiotics (Non-Cardiac Procedures): Percentage of non-cardiac surgical patients aged 18 years and older undergoing procedures with the indications for prophylactic parenteral antibiotics AND who received a prophylactic parenteral antibiotic, who have an order for discontinuation of prophylactic parenteral antibiotics within 24 hours of surgical end time.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69217).</p>	American Medical Association-Physician Consortium for Performance Improvement/ National Committee for Quality Assurance
0239/023	N/A	Patient Safety	<p>Perioperative Care: Venous Thromboembolism (VTE) Prophylaxis (When Indicated in ALL Patients): Percentage of surgical patients aged 18 years and older undergoing procedures for which VTE prophylaxis is indicated in all patients, who had an order for Low Molecular Weight Heparin (LMWH), Low-Dose Unfractionated Heparin (LDUH), adjusted-dose warfarin, fondaparinux or mechanical prophylaxis to be given within 24 hours prior to incision time or within 24 hours after surgery end time.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69218).</p>	American Medical Association-Physician Consortium for Performance Improvement/ National Committee for Quality Assurance
0045/024	N/A	Communication and Care Coordination	<p>Communication with the Physician or Other Clinician Managing On-going Care Post-Fracture for Men and Women Aged 50 Years and Older: Percentage of patients aged 50 years and older treated for a fracture with documentation of communication, between the physician treating the fracture and the physician or other clinician managing the patient’s on-going care, that a fracture occurred and that the patient was or should be considered for osteoporosis treatment or testing. This measure is reported by the physician who treats the fracture and who therefore is held accountable for the communication.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69218).</p>	National Committee for Quality Assurance/ American Medical Association-Physician Consortium for Performance Improvement
0325/032	N/A	Effective Clinical Care	<p>Stroke and Stroke Rehabilitation: Discharged on Antithrombotic Therapy: Percentage of patients aged 18 years and older with a diagnosis of ischemic stroke or transient ischemic attack (TIA) with documented permanent, persistent, or paroxysmal atrial fibrillation who were prescribed an antithrombotic at discharge.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69219).</p>	American Academy of Neurology

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0046/039	N/A	Effective Clinical Care	<p>Screening for Osteoporosis for Women Aged 65-85 Years of Age: Percentage of female patients aged 65-85 years of age who ever had a central dual-energy X-ray absorptiometry (DXA) to check for osteoporosis.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69219).</p>	National Committee for Quality Assurance / American Medical Association- Physician Consortium for Performance Improvement
N/A/041	N/A	Effective Clinical Care	<p>Osteoporosis: Pharmacologic Therapy for Men and Women Aged 50 Years and Older: Percentage of patients aged 50 years and older with a diagnosis of osteoporosis who were prescribed pharmacologic therapy within 12 months.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69220).</p>	National Committee for Quality Assurance / American Medical Association- Physician Consortium for Performance Improvement
0134/043	N/A	Effective Clinical Care	<p>Coronary Artery Bypass Graft (CABG): Use of Internal Mammary Artery (IMA) in Patients with Isolated CABG Surgery: Percentage of patients aged 18 years and older undergoing isolated CABG surgery who received an IMA graft.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69220).</p>	Society of Thoracic Surgeons
0236/044	N/A	Effective Clinical Care	<p>Coronary Artery Bypass Graft (CABG): Preoperative Beta-Blocker in Patients with Isolated CABG Surgery: Percentage of isolated Coronary Artery Bypass Graft (CABG) surgeries for patients aged 18 years and older who received a beta-blocker within 24 hours prior to surgical incision.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69220).</p>	Centers for Medicare & Medicaid Services/ Quality Insights of Pennsylvania
0097/046	N/A	Communicat ion and Care Coordination	<p>Medication Reconciliation Post-Discharge: The percentage of discharges from any inpatient facility (e.g. hospital, skilled nursing facility, or rehabilitation facility) for patients 18 years and older of age seen within 30 days following discharge in the office by the physician, prescribing practitioner, registered nurse, or clinical pharmacist providing on-going care for whom the discharge medication list was reconciled with the current medication list in the outpatient medical record.</p> <p>This measure is reported as three rates stratified by age group:</p> <ul style="list-style-type: none"> • Reporting Criteria 1: 18-64 years of age • Reporting Criteria 2: 65 years and older • Total Rate: All patients 18 years of age and older. <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69220).</p>	National Committee for Quality Assurance / American Medical Association- Physician Consortium for Performance Improvement
0326/047	N/A	Communicat ion and Care Coordination	<p>Care Plan: Percentage of patients aged 65 years and older who have an advance care plan or surrogate decision maker documented in the medical record or documentation in the medical record that an advance care plan was discussed but the patient did not wish or was not able to name a surrogate decision maker or provide an advance care plan.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS</p>	National Committee for Quality Assurance / American Medical Association-

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			Final Rule (see Table 95 at 77 FR 69221).	Physician Consortium for Performance Improvement
N/A/048	N/A	Effective Clinical Care	<p>Urinary Incontinence: Assessment of Presence or Absence of Urinary Incontinence in Women Aged 65 Years and Older: Percentage of female patients aged 65 years and older who were assessed for the presence or absence of urinary incontinence within 12 months.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69221).</p>	National Committee for Quality Assurance / American Medical Association-Physician Consortium for Performance Improvement
N/A/050	N/A	Person and Caregiver-Centered Experience and Outcomes	<p>Urinary Incontinence: Plan of Care for Urinary Incontinence in Women Aged 65 Years and Older: Percentage of female patients aged 65 years and older with a diagnosis of urinary incontinence with a documented plan of care for urinary incontinence at least once within 12 months.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69221).</p>	National Committee for Quality Assurance / American Medical Association-Physician Consortium for Performance Improvement
0091/051	N/A	Effective Clinical Care	<p>Chronic Obstructive Pulmonary Disease (COPD): Spirometry Evaluation: Percentage of patients aged 18 years and older with a diagnosis of COPD who had spirometry results documented.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69221).</p>	American Thoracic Society
0102/052	N/A	Effective Clinical Care	<p>Chronic Obstructive Pulmonary Disease (COPD): Inhaled Bronchodilator Therapy: Percentage of patients aged 18 years and older with a diagnosis of COPD and who have an FEV1 less than 60% predicted and have symptoms who were prescribed an inhaled bronchodilator.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69221).</p>	American Thoracic Society
0047/053	N/A	Effective Clinical Care	<p>Asthma: Pharmacologic Therapy for Persistent Asthma - Ambulatory Care Setting: Percentage of patients aged 5 years and older with a diagnosis of persistent asthma who were prescribed long-term control medication.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69222).</p>	American Academy of Allergy, Asthma, and Immunology/ American Medical Association-Physician Consortium for Performance Improvement/ National Committee for Quality Assurance
0090/054	N/A	Effective Clinical Care	<p>Emergency Medicine: 12-Lead Electrocardiogram (ECG) Performed for Non-Traumatic Chest Pain: Percentage of patients aged 40 years and older with an emergency department discharge diagnosis of non-traumatic chest pain who had a 12-lead electrocardiogram (ECG) performed.</p>	American Medical Association-Physician

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			This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69222).	Consortium for Performance Improvement/ National Committee for Quality Assurance
0069/065	154v4	Efficiency and Cost Reduction	<p>Appropriate Treatment for Children with Upper Respiratory Infection (URI): Percentage of children 3 months through 18 years of age who were diagnosed with upper respiratory infection (URI) and were not dispensed an antibiotic prescription on or three days after the episode.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69222).</p>	National Committee for Quality Assurance
0002/066	N/A	Efficiency and Cost Reduction	<p>Appropriate Testing for Children with Pharyngitis: Percentage of children 3-18 years of age who were diagnosed with pharyngitis, ordered an antibiotic and received a group A streptococcus (strep) test for the episode.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69223).</p>	National Committee for Quality Assurance
0377/067	N/A	Effective Clinical Care	<p>Hematology: Myelodysplastic Syndrome (MDS) and Acute Leukemia: Baseline Cytogenetic Testing Performed on Bone Marrow: Percentage of patients aged 18 years and older with a diagnosis of myelodysplastic syndrome (MDS) or an acute leukemia who had baseline cytogenetic testing performed on bone marrow.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69223).</p>	American Medical Association-Physician Consortium for Performance Improvement/ American Society of Hematology
0378/068	N/A	Effective Clinical Care	<p>Hematology: Myelodysplastic Syndrome (MDS): Documentation of Iron Stores in Patients Receiving Erythropoietin Therapy: Percentage of patients aged 18 years and older with a diagnosis of myelodysplastic syndrome (MDS) who are receiving erythropoietin therapy with documentation of iron stores within 60 days prior to initiating erythropoietin therapy.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69223).</p>	American Medical Association-Physician Consortium for Performance Improvement/ American Society of Hematology
0380/069	N/A	Effective Clinical Care	<p>Hematology: Multiple Myeloma: Treatment with Bisphosphonates: Percentage of patients aged 18 years and older with a diagnosis of multiple myeloma, not in remission, who were prescribed or received intravenous bisphosphonate therapy within the 12-month reporting period.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69223).</p>	American Medical Association-Physician Consortium for Performance Improvement/ American Society of Hematology
0379/070	N/A	Effective Clinical Care	<p>Hematology: Chronic Lymphocytic Leukemia (CLL): Baseline Flow Cytometry: Percentage of patients aged 18 years and older seen within a 12 month reporting period with a diagnosis of chronic lymphocytic leukemia (CLL) made at any time during or prior to the reporting period who had baseline flow cytometry studies performed and documented in the chart.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69223).</p>	American Medical Association-Physician Consortium for Performance Improvement/ American Society of Hematology

NQF/ PQRS	CMS E-Measure ID	National Quality Strategy Domain	Measure Title and Description ^y	Measure Steward
0387/071	140v4	Effective Clinical Care	<p>Breast Cancer: Hormonal Therapy for Stage IC -IIIC Estrogen Receptor/Progesterone Receptor (ER/PR) Positive Breast Cancer: Percentage of female patients aged 18 years and older with Stage IC through IIIC, ER or PR positive breast cancer who were prescribed tamoxifen or aromatase inhibitor (AI) during the 12-month reporting period.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69224).</p>	American Medical Association-Physician Consortium for Performance Improvement/ American Society of Clinical Oncology/ National Comprehensive Cancer Network
0385/072	141v5	Effective Clinical Care	<p>Colon Cancer: Chemotherapy for AJCC Stage III Colon Cancer Patients: Percentage of patients aged 18 through 80 years with AJCC Stage III colon cancer who are referred for adjuvant chemotherapy, prescribed adjuvant chemotherapy, or have previously received adjuvant chemotherapy within the 12-month reporting period.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69224).</p>	American Medical Association-Physician Consortium for Performance Improvement/ American Society of Clinical Oncology/ National Comprehensive Cancer Network
N/A/076	N/A	Patient Safety	<p>Prevention of Central Venous Catheter (CVC)-Related Bloodstream Infections: Percentage of patients, regardless of age, who undergo central venous catheter (CVC) insertion for whom CVC was inserted with all elements of maximal sterile barrier technique, hand hygiene, skin preparation and, if ultrasound is used, sterile ultrasound techniques followed.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69224).</p>	American Society of Anesthesiologists
0395/084	N/A	Effective Clinical Care	<p>Hepatitis C: Ribonucleic Acid (RNA) Testing Before Initiating Treatment: Percentage of patients aged 18 years and older with a diagnosis of chronic hepatitis C who started antiviral treatment within the 12 month reporting period for whom quantitative hepatitis C virus (HCV) ribonucleic acid (RNA) testing was performed within 12 months prior to initiation of antiviral treatment.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69225).</p>	American Medical Association-Physician Consortium for Performance Improvement/ American Gastroenterologic Association
0396/085	N/A	Effective Clinical Care	<p>Hepatitis C: Hepatitis C Virus (HCV) Genotype Testing Prior to Treatment: Percentage of patients aged 18 years and older with a diagnosis of chronic hepatitis C who started antiviral treatment within the 12 month reporting period for whom hepatitis C virus (HCV) genotype testing was performed within 12 months prior to initiation of antiviral treatment.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69225).</p>	American Medical Association-Physician Consortium for Performance Improvement/ American Gastroenterologic Association
0398/087	N/A	Effective Clinical Care	<p>Hepatitis C: Hepatitis C Virus (HCV) Ribonucleic Acid (RNA) Testing Between 4-12 Weeks After Initiation of Treatment: Percentage of patients aged 18 years and older with a diagnosis of chronic hepatitis C who are receiving antiviral treatment for whom quantitative hepatitis C virus (HCV) ribonucleic acid (RNA) testing was performed between 4-12 weeks after the initiation of antiviral treatment.</p>	American Medical Association-Physician Consortium for Performance

NQF/ PQRS	CMS E-Measure ID	National Quality Strategy Domain	Measure Title and Description ^y	Measure Steward
			This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69225).	Improvement/ American Gastroenterologic Association
0653/091	N/A	Effective Clinical Care	Acute Otitis Externa (AOE): Topical Therapy: Percentage of patients aged 2 years and older with a diagnosis of AOE who were prescribed topical preparations. This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69226).	American Academy of Otolaryngology- Head and Neck Surgery
0654/093	N/A	Efficiency and Cost Reduction	Acute Otitis Externa (AOE): Systemic Antimicrobial Therapy – Avoidance of Inappropriate Use: Percentage of patients aged 2 years and older with a diagnosis of AOE who were not prescribed systemic antimicrobial therapy. This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69226).	American Academy of Otolaryngology- Head and Neck Surgery
0391/099	N/A	Effective Clinical Care	Breast Cancer Resection Pathology Reporting: pT Category (Primary Tumor) and pN Category (Regional Lymph Nodes) with Histologic Grade: Percentage of breast cancer resection pathology reports that include the pT category (primary tumor), the pN category (regional lymph nodes), and the histologic grade. This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69226).	College of American Pathologists
0392/100	N/A	Effective Clinical Care	Colorectal Cancer Resection Pathology Reporting: pT Category (Primary Tumor) and pN Category (Regional Lymph Nodes) with Histologic Grade: Percentage of colon and rectum cancer resection pathology reports that include the pT category (primary tumor), the pN category (regional lymph nodes) and the histologic grade. This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69226).	College of American Pathologists
0389/102	129v5	Efficiency and Cost Reduction	Prostate Cancer: Avoidance of Overuse of Bone Scan for Staging Low Risk Prostate Cancer Patients: Percentage of patients, regardless of age, with a diagnosis of prostate cancer at low risk of recurrence receiving interstitial prostate brachytherapy, OR external beam radiotherapy to the prostate, OR radical prostatectomy, OR cryotherapy who did not have a bone scan performed at any time since diagnosis of prostate cancer. This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69226).	American Medical Association- Physician Consortium for Performance Improvement
0390/104	N/A	Effective Clinical Care	Prostate Cancer: Adjuvant Hormonal Therapy for High Risk or Very High Risk Prostate Cancer: Percentage of patients, regardless of age, with a diagnosis of prostate cancer at high or very high risk of recurrence receiving external beam radiotherapy to the prostate who were prescribed adjuvant hormonal therapy (GnRH [gonadotropin-releasing hormone] agonist or antagonist). This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69226)	American Medical Association- Physician Consortium for Performance Improvement/ American Urological Association Education and Research

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0104/ 107	161v4	Effective Clinical Care	<p>Adult Major Depressive Disorder (MDD): Suicide Risk Assessment: Percentage of patients aged 18 years and older with a diagnosis of major depressive disorder (MDD) with a suicide risk assessment completed during the visit in which a new diagnosis or recurrent episode was identified.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69227).</p>	American Medical Association- Physician Consortium for Performance Improvement
0054/108	N/A	Effective Clinical Care	<p>Rheumatoid Arthritis (RA): Disease Modifying Anti-Rheumatic Drug (DMARD) Therapy: Percentage of patients aged 18 years and older who were diagnosed with rheumatoid arthritis and were prescribed, dispensed, or administered at least one ambulatory prescription for a disease-modifying anti-rheumatic drug (DMARD).</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69227).</p>	National Committee for Quality Assurance
N/A/109	N/A	Person and Caregiver- Centered Experience and Outcomes	<p>Osteoarthritis (OA): Function and Pain Assessment: Percentage of patient visits for patients aged 21 years and older with a diagnosis of osteoarthritis (OA) with assessment for function and pain.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69227).</p>	American Academy of Orthopedic Surgeons
0041/110	147v5	Community/ Population Health	<p>Preventive Care and Screening: Influenza Immunization: Percentage of patients aged 6 months and older seen for a visit between October 1 and March 31 who received an influenza immunization OR who reported previous receipt of an influenza immunization.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69227).</p>	American Medical Association- Physician Consortium for Performance Improvement
0043/111	127v4	Community/ Population Health	<p>Pneumonia Vaccination Status for Older Adults: Percentage of patients 65 years of age and older who have ever received a pneumococcal vaccine.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69227).</p>	National Committee for Quality Assurance
2372/112	125v4	Effective Clinical Care	<p>Breast Cancer Screening: Percentage of women 50 through 74 years of age who had a mammogram to screen for breast cancer within 27 months.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69227).</p>	National Committee for Quality Assurance
0034/113	130v4	Effective Clinical Care	<p>Colorectal Cancer Screening: Percentage of patients 50 - 75 years of age who had appropriate screening for colorectal cancer.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69228).</p>	National Committee for Quality Assurance
0058/116	N/A	Efficiency and Cost Reduction	<p>Antibiotic Treatment for Adults with Acute Bronchitis: Avoidance of Inappropriate Use: Percentage of adults 18 through 64 years of age with a diagnosis of acute bronchitis who were not prescribed or dispensed an antibiotic prescription on or 3 days after the episode.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69228).</p>	National Committee for Quality Assurance

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0055/117	131v4	Effective Clinical Care	<p>Diabetes: Eye Exam: Percentage of patients 18 - 75 years of age with diabetes who had a retinal or dilated eye exam by an eye care professional during the measurement period or a negative retinal or dilated eye exam (no evidence of retinopathy) in the 12 months prior to the measurement period.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69228).</p>	National Committee for Quality Assurance
0066/118	N/A	Effective Clinical Care	<p>Coronary Artery Disease (CAD): Angiotensin-Converting Enzyme (ACE) Inhibitor or Angiotensin Receptor Blocker (ARB) Therapy -- Diabetes or Left Ventricular Systolic Dysfunction (LVEF < 40%): Percentage of patients aged 18 years and older with a diagnosis of coronary artery disease seen within a 12 month period who also have diabetes OR a current or prior Left Ventricular Ejection Fraction (LVEF) < 40% who were prescribed ACE inhibitor or ARB therapy.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69228).</p>	American College of Cardiology/American Heart Association/American Medical Association-Physician Consortium for Performance Improvement
0062/119	134v4	Effective Clinical Care	<p>Diabetes: Medical Attention for Nephropathy: The percentage of patients 18-75 years of age with diabetes who had a nephropathy screening test or evidence of nephropathy during the measurement period.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69228).</p>	National Committee for Quality Assurance
N/A/121	N/A	Effective Clinical Care	<p>Adult Kidney Disease: Laboratory Testing (Lipid Profile): Percentage of patients aged 18 years and older with a diagnosis of chronic kidney disease (CKD) (stage 3, 4, or 5, not receiving Renal Replacement Therapy [RRT]) who had a fasting lipid profile performed at least once within a 12-month period.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69228).</p>	Renal Physicians Association
N/A/122	N/A	Effective Clinical Care	<p>Adult Kidney Disease: Blood Pressure Management: Percentage of patient visits for those patients aged 18 years and older with a diagnosis of chronic kidney disease (CKD) (stage 3, 4, or 5, not receiving Renal Replacement Therapy [RRT]) with a blood pressure < 140/90 mmHg OR ≥ 140/90 mmHg with a documented plan of care.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69228).</p>	Renal Physicians Association
0417/126	N/A	Effective Clinical Care	<p>Diabetes Mellitus: Diabetic Foot and Ankle Care, Peripheral Neuropathy – Neurological Evaluation: Percentage of patients aged 18 years and older with a diagnosis of diabetes mellitus who had a neurological examination of their lower extremities within 12 months.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69229).</p>	American Podiatric Medical Association
0416/127	N/A	Effective Clinical Care	<p>Diabetes Mellitus: Diabetic Foot and Ankle Care, Ulcer Prevention – Evaluation of Footwear: Percentage of patients aged 18 years and older with a diagnosis of diabetes mellitus who were evaluated for proper footwear and sizing.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69229).</p>	American Podiatric Medical Association

NQF/ PQRS	CMS E-Measure ID	National Quality Strategy Domain	Measure Title and Description ^y	Measure Steward
0421/128	69v4	Community/ Population Health	<p>Preventive Care and Screening: Body Mass Index (BMI) Screening and Follow-Up Plan: Percentage of patients aged 18 years and older with a BMI documented during the current encounter or during the previous six months AND with a BMI outside of normal parameters, a follow-up plan is documented during the encounter or during the previous six months of the current encounter</p> <p>Normal Parameters: Age 65 years and older BMI ≥ 23 and < 30 kg/m²; Age 18 – 64 years BMI ≥ 18.5 and < 25 kg/m².</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69229).</p>	Centers for Medicare & Medicaid Services/ Mathematica/ Quality Insights of Pennsylvania
0419/130	68v5	Patient Safety	<p>Documentation of Current Medications in the Medical Record: Percentage of visits for patients aged 18 years and older for which the eligible professional attests to documenting a list of current medications using all immediate resources available on the date of the encounter. This list must include ALL known prescriptions, over-the-counters, herbals, and vitamin/mineral/dietary (nutritional) supplements AND must contain the medications' name, dosage, frequency and route of administration.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69229).</p>	Centers for Medicare & Medicaid Services/ Mathematica/ Quality Insights of Pennsylvania
0420/131	N/A	Communicat ion and Care Coordination	<p>Pain Assessment and Follow-Up: Percentage of visits for patients aged 18 years and older with documentation of a pain assessment using a standardized tool(s) on each visit AND documentation of a follow-up plan when pain is present.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69230).</p>	Centers for Medicare & Medicaid Services/ Quality Insights of Pennsylvania
0418/134	2v5	Community/ Population Health	<p>Preventive Care and Screening: Screening for Clinical Depression and Follow-Up Plan: Percentage of patients aged 12 years and older screened for clinical depression on the date of the encounter using an age appropriate standardized depression screening tool AND if positive, a follow-up plan is documented on the date of the positive screen.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69230).</p>	Centers for Medicare & Medicaid Services/ Mathematica/ Quality Insights of Pennsylvania
0650/137	N/A	Communicat ion and Care Coordination	<p>Melanoma: Continuity of Care – Recall System: Percentage of patients, regardless of age, with a current diagnosis of melanoma or a history of melanoma whose information was entered, at least once within a 12 month period, into a recall system that includes:</p> <ul style="list-style-type: none"> • A target date for the next complete physical skin exam, AND • A process to follow up with patients who either did not make an appointment within the specified timeframe or who missed a scheduled appointment. <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69230).</p>	American Academy of Dermatology/ American Medical Association-Physician Consortium for Performance Improvement
N/A/138	N/A	Communicat ion and Care Coordination	<p>Melanoma: Coordination of Care: Percentage of patient visits, regardless of age, with a new occurrence of melanoma who have a treatment plan documented in the chart that was communicated to the physician(s) providing continuing care within one month of diagnosis.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69230).</p>	American Academy of Dermatology/ American Medical Association-Physician Consortium for Performance Improvement

NQF/ PQRS	CMS E-Measure ID	National Quality Strategy Domain	Measure Title and Description ^y	Measure Steward
0566/140	N/A	Effective Clinical Care	<p>Age-Related Macular Degeneration (AMD): Counseling on Antioxidant Supplement: Percentage of patients aged 50 years and older with a diagnosis of age-related macular degeneration (AMD) or their caregiver(s) who were counseled within 12 months on the benefits and/or risks of the Age-Related Eye Disease Study (AREDS) formulation for preventing progression of AMD.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69230).</p>	American Academy of Ophthalmology
0563/141	N/A	Communication and Care Coordination	<p>Primary Open-Angle Glaucoma (POAG): Reduction of Intraocular Pressure (IOP) by 15% OR Documentation of a Plan of Care: Percentage of patients aged 18 years and older with a diagnosis of primary open-angle glaucoma (POAG) whose glaucoma treatment has not failed (the most recent IOP was reduced by at least 15% from the pre- intervention level) OR if the most recent IOP was not reduced by at least 15% from the pre- intervention level, a plan of care was documented within 12 months.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69231).</p>	American Academy of Ophthalmology
0384/143	157v4	Person and Caregiver-Centered Experience and Outcomes	<p>Oncology: Medical and Radiation – Pain Intensity Quantified: Percentage of patient visits, regardless of patient age, with a diagnosis of cancer currently receiving chemotherapy or radiation therapy in which pain intensity is quantified.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69231).</p>	American Medical Association-Physician Consortium for Performance Improvement
0383/144	N/A	Person and Caregiver-Centered Experience and Outcomes	<p>Oncology: Medical and Radiation – Plan of Care for Pain: Percentage of visits for patients, regardless of age, with a diagnosis of cancer currently receiving chemotherapy or radiation therapy who report having pain with a documented plan of care to address pain.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69231).</p>	American Society of Clinical Oncology
N/A/145	N/A	Patient Safety	<p>Radiology: Exposure Time Reported for Procedures Using Fluoroscopy: Final reports for procedures using fluoroscopy that document radiation exposure indices, or exposure time and number of fluorographic images (if radiation exposure indices are not available).</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69231).</p>	American College of Radiology/ American Medical Association-Physician Consortium for Performance Improvement
0508/146	N/A	Efficiency and Cost Reduction	<p>Radiology: Inappropriate Use of “Probably Benign” Assessment Category in Mammography Screening: Percentage of final reports for screening mammograms that are classified as “probably benign”.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69231).</p>	American College of Radiology/ American Medical Association-Physician Consortium for Performance Improvement
N/A/147	N/A	Communication and Care Coordination	<p>Nuclear Medicine: Correlation with Existing Imaging Studies for All Patients Undergoing Bone Scintigraphy: Percentage of final reports for all patients, regardless of age, undergoing bone scintigraphy that include physician documentation of correlation with existing relevant imaging studies (e.g., x-ray, MRI, CT, etc.) that were performed.</p>	American Medical Association-Physician Consortium for Performance

NQF/ PQRS	CMS E-Measure ID	National Quality Strategy Domain	Measure Title and Description ^y	Measure Steward
			This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69231).	Improvement/ Society of Nuclear Medicine and Molecular Imaging
0101/154	N/A	Patient Safety	Falls: Risk Assessment: Percentage of patients aged 65 years and older with a history of falls who had a risk assessment for falls completed within 12 months. This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69232).	National Committee for Quality Assurance/ American Medical Association- Physician Consortium for Performance Improvement
0101/155	N/A	Communicat ion and Care Coordination	Falls: Plan of Care: Percentage of patients aged 65 years and older with a history of falls who had a plan of care for falls documented within 12 months. This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69232).	National Committee for Quality Assurance/ American Medical Association- Physician Consortium for Performance Improvement
0382/156	N/A	Patient Safety	Oncology: Radiation Dose Limits to Normal Tissues: Percentage of patients, regardless of age, with a diagnosis of breast, rectal, pancreatic or lung cancer receiving 3D conformal radiation therapy who had documentation in medical record that radiation dose limits to normal tissues were established prior to the initiation of a course of 3D conformal radiation for a minimum of two tissues. This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69232).	American Society for Radiation Oncology
0405/160	52v4	Effective Clinical Care	HIV/AIDS: Pneumocystis Jiroveci Pneumonia (PCP) Prophylaxis: Percentage of patients aged 6 weeks and older with a diagnosis of HIV/AIDS who were prescribed Pneumocystis Jiroveci Pneumonia (PCP) prophylaxis. This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69233).	National Committee for Quality Assurance
0056/163	123v4	Effective Clinical Care	Diabetes: Foot Exam: Percentage of patients aged 18-75 years of age with diabetes who had a foot exam during the measurement period. This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69233).	National Committee for Quality Assurance
0129/164	N/A	Effective Clinical Care	Coronary Artery Bypass Graft (CABG): Prolonged Intubation: Percentage of patients aged 18 years and older undergoing isolated CABG surgery who require postoperative intubation > 24 hours. This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69233).	Society of Thoracic Surgeons
0130/165	N/A	Effective Clinical Care	Coronary Artery Bypass Graft (CABG): Deep Sternal Wound Infection Rate: Percentage of patients aged 18 years and older undergoing isolated CABG surgery who, within 30 days postoperatively, develop deep sternal wound infection involving muscle, bone, and/or mediastinum requiring operative intervention.	Society of Thoracic Surgeons

NQF/ PQRS	CMS E-Measure ID	National Quality Strategy Domain	Measure Title and Description ^y	Measure Steward
			This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69234).	
0131/166	N/A	Effective Clinical Care	<p>Coronary Artery Bypass Graft (CABG): Stroke: Percentage of patients aged 18 years and older undergoing isolated CABG surgery who have a postoperative stroke (i.e., any confirmed neurological deficit of abrupt onset caused by a disturbance in blood supply to the brain) that did not resolve within 24 hours.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69234).</p>	Society of Thoracic Surgeons
0114/167	N/A	Effective Clinical Care	<p>Coronary Artery Bypass Graft (CABG): Postoperative Renal Failure: Percentage of patients aged 18 years and older undergoing isolated CABG surgery (without pre-existing renal failure) who develop postoperative renal failure or require dialysis.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69234).</p>	Society of Thoracic Surgeons
0115/168	N/A	Effective Clinical Care	<p>Coronary Artery Bypass Graft (CABG): Surgical Re-Exploration: Percentage of patients aged 18 years and older undergoing isolated CABG surgery who require a return to the operating room (OR) during the current hospitalization for mediastinal bleeding with or without tamponade, graft occlusion, valve dysfunction, or other cardiac reason.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69234).</p>	Society of Thoracic Surgeons
N/A/176	N/A	Effective Clinical Care	<p>Rheumatoid Arthritis (RA): Tuberculosis Screening: Percentage of patients aged 18 years and older with a diagnosis of rheumatoid arthritis (RA) who have documentation of a tuberculosis (TB) screening performed and results interpreted within 6 months prior to receiving a first course of therapy using a biologic disease-modifying anti-rheumatic drug (DMARD).</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69235).</p>	American College of Rheumatology
N/A/177	N/A	Effective Clinical Care	<p>Rheumatoid Arthritis (RA): Periodic Assessment of Disease Activity: Percentage of patients aged 18 years and older with a diagnosis of rheumatoid arthritis (RA) who have an assessment and classification of disease activity within 12 months.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69235).</p>	American College of Rheumatology
N/A/178	N/A	Effective Clinical Care	<p>Rheumatoid Arthritis (RA): Functional Status Assessment: Percentage of patients aged 18 years and older with a diagnosis of rheumatoid arthritis (RA) for whom a functional status assessment was performed at least once within 12 months.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69235).</p>	American College of Rheumatology
N/A/179	N/A	Effective Clinical Care	<p>Rheumatoid Arthritis (RA): Assessment and Classification of Disease Prognosis: Percentage of patients aged 18 years and older with a diagnosis of rheumatoid arthritis (RA) who have an assessment and classification of disease prognosis at least once within 12 months.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS</p>	American College of Rheumatology

NQF/ PQRS	CMS E-Measure ID	National Quality Strategy Domain	Measure Title and Description ^y	Measure Steward
			Final Rule (see Table 95 at 77 FR 69235).	
N/A/180	N/A	Effective Clinical Care	<p>Rheumatoid Arthritis (RA): Glucocorticoid Management: Percentage of patients aged 18 years and older with a diagnosis of rheumatoid arthritis (RA) who have been assessed for glucocorticoid use and, for those on prolonged doses of prednisone \geq 10 mg daily (or equivalent) with improvement or no change in disease activity, documentation of glucocorticoid management plan within 12 months.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69236).</p>	American College of Rheumatology
N/A/181	N/A	Patient Safety	<p>Elder Maltreatment Screen and Follow-Up Plan: Percentage of patients aged 65 years and older with a documented elder maltreatment screen using an Elder Maltreatment Screening Tool on the date of encounter AND a documented follow-up plan on the date of the positive screen.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69236).</p>	Centers for Medicare & Medicaid Services/ Quality Insights of Pennsylvania
2624/182	N/A	Communicat ion and Care Coordination	<p>Functional Outcome Assessment: Percentage of visits for patients aged 18 years and older with documentation of a current functional outcome assessment using a standardized functional outcome assessment tool on the date of encounter AND documentation of a care plan based on identified functional outcome deficiencies on the date of the identified deficiencies.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69236).</p>	Centers for Medicare & Medicaid Services/ Quality Insights of Pennsylvania
0399/183	N/A	Community/ Population Health	<p>Hepatitis C: Hepatitis A Vaccination: Percentage of patients aged 18 years and older with a diagnosis of chronic hepatitis C who have received at least one injection of hepatitis A vaccine, or who have documented immunity to hepatitis A.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69236).</p>	American Medical Association-Physician Consortium for Performance Improvement/ American Gastroenterological Association
0659/185	N/A	Communicat ion and Care Coordination	<p>Colonoscopy Interval for Patients with a History of Adenomatous Polyps – Avoidance of Inappropriate Use: Percentage of patients aged 18 years and older receiving a surveillance colonoscopy, with a history of a prior adenomatous polyp(s) in previous colonoscopy findings, who had an interval of 3 or more years since their last colonoscopy.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69236).</p>	American Medical Association-Physician Consortium for Performance Improvement/ American Gastroenterological Association/ American Society for Gastrointestinal Endoscopy/ American College of Gastroenterology

NQF/ PQRS	CMS E-Measure ID	National Quality Strategy Domain	Measure Title and Description ^y	Measure Steward
N/A/187	N/A	Effective Clinical Care	<p>Stroke and Stroke Rehabilitation: Thrombolytic Therapy: Percentage of patients aged 18 years and older with a diagnosis of acute ischemic stroke who arrive at the hospital within two hours of time last known well and for whom IV t-PA was initiated within three hours of time last known well.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69237).</p>	American Heart Association/ American Society of Anesthesiologists/ The Joint Commission
0565/191	133v4	Effective Clinical Care	<p>Cataracts: 20/40 or Better Visual Acuity within 90 Days Following Cataract Surgery: Percentage of patients aged 18 years and older with a diagnosis of uncomplicated cataract who had cataract surgery and no significant ocular conditions impacting the visual outcome of surgery and had best-corrected visual acuity of 20/40 or better (distance or near) achieved within 90 days following the cataract surgery.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69237).</p>	American Medical Association-Physician Consortium for Performance Improvement/ National Committee for Quality Assurance
0564/192	132v4	Patient Safety	<p>Cataracts: Complications within 30 Days Following Cataract Surgery Requiring Additional Surgical Procedures: Percentage of patients aged 18 years and older with a diagnosis of uncomplicated cataract who had cataract surgery and had any of a specified list of surgical procedures in the 30 days following cataract surgery which would indicate the occurrence of any of the following major complications: retained nuclear fragments, endophthalmitis, dislocated or wrong power IOL, retinal detachment, or wound dehiscence.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69238).</p>	American Medical Association-Physician Consortium for Performance Improvement/ National Committee for Quality Assurance
0507/195	N/A	Effective Clinical Care	<p>Radiology: Stenosis Measurement in Carotid Imaging Reports: Percentage of final reports for carotid imaging studies (neck magnetic resonance angiography [MRA], neck computed tomography angiography [CTA], neck duplex ultrasound, carotid angiogram) performed that include direct or indirect reference to measurements of distal internal carotid diameter as the denominator for stenosis measurement.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69238).</p>	American College of Radiology/ American Medical Association-Physician Consortium for Performance Improvement
0068/204	164v4	Effective Clinical Care	<p>Ischemic Vascular Disease (IVD): Use of Aspirin or Another Antithrombotic: Percentage of patients 18 years of age and older who were discharged alive for acute myocardial infarction (AMI), coronary artery bypass graft (CABG) or percutaneous coronary interventions (PCI) in the 12 months prior to the measurement period, or who had an active diagnosis of ischemic vascular disease (IVD) during the measurement period and who had documentation of use of aspirin or another antithrombotic during the measurement period.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69239).</p>	National Committee for Quality Assurance
0409/205	N/A	Effective Clinical Care	<p>HIV/AIDS: Sexually Transmitted Disease Screening for Chlamydia, Gonorrhea, and Syphilis: Percentage of patients aged 13 years and older with a diagnosis of HIV/AIDS for whom chlamydia, gonorrhea and syphilis screenings were performed at least once since the diagnosis of HIV infection.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69239)</p>	National Committee for Quality Assurance/ American Medical Association-Physician Consortium for Performance Improvement

NQF/ PQRS	CMS E-Measure ID	National Quality Strategy Domain	Measure Title and Description ^y	Measure Steward
0422/217	N/A	Communication and Care Coordination	<p>Functional Deficit: Change in Risk-Adjusted Functional Status for Patients with Knee Impairments: Percentage of patients aged 18 or older that receive treatment for a functional deficit secondary to a diagnosis that affects the knee in which the change in their Risk-Adjusted Functional Status is measured.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69241).</p>	Focus on Therapeutic Outcomes, Inc.
0423/218	N/A	Communication and Care Coordination	<p>Functional Deficit: Change in Risk-Adjusted Functional Status for Patients with Hip Impairments: Percentage of patients aged 18 or older that receive treatment for a functional deficit secondary to a diagnosis that affects the hip in which the change in their Risk-Adjusted Functional Status is measured.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69241).</p>	Focus on Therapeutic Outcomes, Inc.
0424/219	N/A	Communication and Care Coordination	<p>Functional Deficit: Change in Risk-Adjusted Functional Status for Patients with Lower Leg, Foot or Ankle Impairments: Percentage of patients aged 18 or older that receive treatment for a functional deficit secondary to a diagnosis that affects the lower leg, foot or ankle in which the change in their Risk-Adjusted Functional Status is measured.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69241).</p>	Focus on Therapeutic Outcomes, Inc.
0425/220	N/A	Communication and Care Coordination	<p>Functional Deficit: Change in Risk-Adjusted Functional Status for Patients with Lumbar Spine Impairments: Percentage of patients aged 18 or older that receive treatment for a functional deficit secondary to a diagnosis that affects the lumbar spine in which the change in their Risk-Adjusted Functional Status is measured.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69241).</p>	Focus on Therapeutic Outcomes, Inc.
0426/221	N/A	Communication and Care Coordination	<p>Functional Deficit: Change in Risk-Adjusted Functional Status for Patients with Shoulder Impairments: Percentage of patients aged 18 or older that receive treatment for a functional deficit secondary to a diagnosis that affects the shoulder in which the change in their Risk-Adjusted Functional Status is measured.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69242).</p>	Focus on Therapeutic Outcomes, Inc.
0427/222	N/A	Communication and Care Coordination	<p>Functional Deficit: Change in Risk-Adjusted Functional Status for Patients with Elbow, Wrist or Hand Impairments: Percentage of patients aged 18 or older that receive treatment for a functional deficit secondary to a diagnosis that affects the elbow, wrist or hand in which the change in their Risk-Adjusted Functional Status is measured.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69242).</p>	Focus on Therapeutic Outcomes, Inc.
0428/223	N/A	Communication and Care Coordination	<p>Functional Deficit: Change in Risk-Adjusted Functional Status for Patients with Neck, Cranium, Mandible, Thoracic Spine, Ribs, or Other General Orthopedic Impairments: Percentage of patients aged 18 or older that receive treatment for a functional deficit secondary to a diagnosis that affects the neck, cranium, mandible, thoracic spine, ribs, or other general orthopedic impairment in which the change in their Risk-Adjusted Functional Status is measured.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69242).</p>	Focus on Therapeutic Outcomes, Inc.

NQF/ PQRS	CMS E-Measure ID	National Quality Strategy Domain	Measure Title and Description ^y	Measure Steward
0562/224	N/A	Efficiency and Cost Reduction	<p>Melanoma: Overutilization of Imaging Studies in Melanoma: Percentage of patients, regardless of age, with a current diagnosis of stage 0 through IIC melanoma or a history of melanoma of any stage, without signs or symptoms suggesting systemic spread, seen for an office visit during the one-year measurement period, for whom no diagnostic imaging studies were ordered.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69242).</p>	American Academy of Dermatology/ American Medical Association-Physician Consortium for Performance Improvement
0509/225	N/A	Communication and Care Coordination	<p>Radiology: Reminder System for Screening Mammograms: Percentage of patients undergoing a screening mammogram whose information is entered into a reminder system with a target due date for the next mammogram.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69242).</p>	American College of Radiology/ American Medical Association-Physician Consortium for Performance Improvement
0028/226	138v4	Community/ Population Health	<p>Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention: Percentage of patients aged 18 years and older who were screened for tobacco use one or more times within 24 months AND who received cessation counseling intervention if identified as a tobacco user.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69242).</p>	American Medical Association-Physician Consortium for Performance Improvement
0018/236	165v4	Effective Clinical Care	<p>Controlling High Blood Pressure: Percentage of patients 18-85 years of age who had a diagnosis of hypertension and whose blood pressure was adequately controlled (<140/90 mmHg) during the measurement period.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69243).</p>	National Committee for Quality Assurance
0022/238	156v4	Patient Safety	<p>Use of High-Risk Medications in the Elderly: Percentage of patients 66 years of age and older who were ordered high-risk medications. Two rates are reported.</p> <p>a. Percentage of patients who were ordered at least one high-risk medication.</p> <p>b. Percentage of patients who were ordered at least two different high-risk medications.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69244).</p>	National Committee for Quality Assurance
0024/239	155v4	Community/ Population Health	<p>Weight Assessment and Counseling for Nutrition and Physical Activity for Children and Adolescents: Percentage of patients 3-17 years of age who had an outpatient visit with a Primary Care Physician (PCP) or Obstetrician/Gynecologist (OB/GYN) and who had evidence of the following during the measurement period. Three rates are reported.</p> <ul style="list-style-type: none"> - Percentage of patients with height, weight, and body mass index (BMI) percentile documentation - Percentage of patients with counseling for nutrition - Percentage of patients with counseling for physical activity. <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69244).</p>	National Committee for Quality Assurance

NQF/ PQRS	CMS E-Measure ID	National Quality Strategy Domain	Measure Title and Description ^Y	Measure Steward
0038/240	117v4	Community/ Population Health	<p>Childhood Immunization Status: Percentage of children 2 years of age who had four diphtheria, tetanus and acellular pertussis (DTaP); three polio (IPV), one measles, mumps and rubella (MMR); three H influenza type B (HiB); three hepatitis B (Hep B); one chicken pox (VZV); four pneumococcal conjugate (PCV); one hepatitis A (Hep A); two or three rotavirus (RV); and two influenza (flu) vaccines by their second birthday.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69244).</p>	National Committee for Quality Assurance
N/A/241	182v5	Effective Clinical Care	<p>Ischemic Vascular Disease (IVD): Complete Lipid Profile and LDL-C Control (< 100 mg/dL): Percentage of patients 18 years of age and older who were discharged alive for acute myocardial infarction (AMI), coronary artery bypass graft (CABG) or percutaneous coronary interventions (PCI) in the 12 months prior to the measurement period, or who had an active diagnosis of ischemic vascular disease (IVD) during the measurement period, and who had each of the following during the measurement period: a complete lipid profile and LDL-C was adequately controlled (< 100 mg/dL).</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69244).</p>	National Committee for Quality Assurance
N/A/242	N/A	Effective Clinical Care	<p>Coronary Artery Disease (CAD): Symptom Management: Percentage of patients aged 18 years and older with a diagnosis of coronary artery disease (CAD) seen within a 12 month period with results of an evaluation of level of activity and an assessment of whether anginal symptoms are present or absent with appropriate management of anginal symptoms within a 12 month period.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69244).</p>	American College of Cardiology/Ameri can Heart Association/ American Medical Association- Physician Consortium for Performance Improvement
0643/243	N/A	Communicat ion and Care Coordination	<p>Cardiac Rehabilitation Patient Referral from an Outpatient Setting: Percentage of patients evaluated in an outpatient setting who within the previous 12 months have experienced an acute myocardial infarction (MI), coronary artery bypass graft (CABG) surgery, a percutaneous coronary intervention (PCI), cardiac valve surgery, or cardiac transplantation, or who have chronic stable angina (CSA) and have not already participated in an early outpatient cardiac rehabilitation/secondary prevention (CR) program for the qualifying event/diagnosis who were referred to a CR program.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69245).</p>	American College of Cardiology Foundation/ American Heart Association
1854/249	N/A	Effective Clinical Care	<p>Barrett's Esophagus: Percentage of esophageal biopsy reports that document the presence of Barrett's mucosa that also include a statement about dysplasia.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69246).</p>	College of American Pathologists
1853/250	N/A	Effective Clinical Care	<p>Radical Prostatectomy Pathology Reporting: Percentage of radical prostatectomy pathology reports that include the pT category, the pN category, the Gleason score and a statement about margin status.</p>	College of American Pathologists

NQF/ PQRS	CMS E-Measure ID	National Quality Strategy Domain	Measure Title and Description ^Y	Measure Steward
			This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69246).	
1855/251	N/A	Effective Clinical Care	<p>Quantitative Immunohistochemical (IHC) Evaluation of Human Epidermal Growth Factor Receptor 2 Testing (HER2) for Breast Cancer Patients: This is a measure based on whether quantitative evaluation of Human Epidermal Growth Factor Receptor 2 Testing (HER2) by immunohistochemistry (IHC) uses the system recommended in the current ASCO/CAP Guidelines for Human Epidermal Growth Factor Receptor 2 Testing in breast cancer.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69246).</p>	College of American Pathologists
0651/254	N/A	Effective Clinical Care	<p>Ultrasound Determination of Pregnancy Location for Pregnant Patients with Abdominal Pain: Percentage of pregnant female patients aged 14 to 50 who present to the emergency department (ED) with a chief complaint of abdominal pain or vaginal bleeding who receive a trans-abdominal or trans-vaginal ultrasound to determine pregnancy location.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69246).</p>	American College of Emergency Physicians
N/A/255	N/A	Effective Clinical Care	<p>Rh Immunoglobulin (Rhogam) for Rh-Negative Pregnant Women at Risk of Fetal Blood Exposure: Percentage of Rh-negative pregnant women aged 14-50 years at risk of fetal blood exposure who receive Rh-Immunoglobulin (Rhogam) in the emergency department (ED).</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69247).</p>	American College of Emergency Physicians
1519/257	N/A	Effective Clinical Care	<p>Statin Therapy at Discharge after Lower Extremity Bypass (LEB): Percentage of patients aged 18 years and older undergoing infra-inguinal lower extremity bypass who are prescribed a statin medication at discharge.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69247).</p>	Society for Vascular Surgeons
N//A/258	N/A	Patient Safety	<p>Rate of Open Repair of Small or Moderate Non-Ruptured Abdominal Aortic Aneurysms (AAA) without Major Complications (Discharged to Home by Post-Operative Day #7): Percent of patients undergoing open repair of small or moderate sized non-ruptured abdominal aortic aneurysms who do not experience a major complication (discharge to home no later than post-operative day #7).</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69247).</p>	Society for Vascular Surgeons
N/A/259	N/A	Patient Safety	<p>Rate of Endovascular Aneurysm Repair (EVAR) of Small or Moderate Non-Ruptured Abdominal Aortic Aneurysms (AAA) without Major Complications (Discharged to Home by Post-Operative Day #2): Percent of patients undergoing endovascular repair of small or moderate non-ruptured abdominal aortic aneurysms (AAA) that do not experience a major complication (discharged to home no later than post-operative day #2).</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69247).</p>	Society for Vascular Surgeons

NQF/ PQRS	CMS E-Measure ID	National Quality Strategy Domain	Measure Title and Description ^y	Measure Steward
N/A/260	N/A	Patient Safety	<p>Rate of Carotid Endarterectomy (CEA) for Asymptomatic Patients, without Major Complications (Discharged to Home by Post-Operative Day #2): Percent of asymptomatic patients undergoing CEA who are discharged to home no later than post-operative day #2.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69247).</p>	Society for Vascular Surgeons
N/A/261	N/A	Communication and Care Coordination	<p>Referral for Otologic Evaluation for Patients with Acute or Chronic Dizziness: Percentage of patients aged birth and older referred to a physician (preferably a physician specially trained in disorders of the ear) for an otologic evaluation subsequent to an audiologic evaluation after presenting with acute or chronic dizziness.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69248).</p>	Audiology Quality Consortium
N/A/262	N/A	Patient Safety	<p>Image Confirmation of Successful Excision of Image-Localized Breast Lesion: Image confirmation of lesion(s) targeted for image guided excisional biopsy or image guided partial mastectomy in patients with nonpalpable, image-detected breast lesion(s). Lesions may include: microcalcifications, mammographic or sonographic mass or architectural distortion, focal suspicious abnormalities on magnetic resonance imaging (MRI) or other breast imaging amenable to localization such as positron emission tomography (PET) mammography, or a biopsy marker demarcating site of confirmed pathology as established by previous core biopsy.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69248).</p>	American Society of Breast Surgeons
N/A/263	N/A	Effective Clinical Care	<p>Preoperative Diagnosis of Breast Cancer: The percent of patients undergoing breast cancer operations who obtained the diagnosis of breast cancer preoperatively by a minimally invasive biopsy method.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69248).</p>	American Society of Breast Surgeons
N/A/264	N/A	Effective Clinical Care	<p>Sentinel Lymph Node Biopsy for Invasive Breast Cancer: The percentage of clinically node negative (clinical stage T1N0M0 or T2N0M0) breast cancer patients who undergo a sentinel lymph node (SLN) procedure.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69248).</p>	American Society of Breast Surgeons
N/A/265	N/A	Communication and Care Coordination	<p>Biopsy Follow-Up: Percentage of new patients whose biopsy results have been reviewed and communicated to the primary care/referring physician and patient by the performing physician.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69248).</p>	American Academy of Dermatology
1814/268	N/A	Effective Clinical Care	<p>Epilepsy: Counseling for Women of Childbearing Potential with Epilepsy: All female patients of childbearing potential (12 - 44 years old) diagnosed with epilepsy who were counseled or referred for counseling for how epilepsy and its treatment may affect contraception OR pregnancy at least once a year.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69249).</p>	American Academy of Neurology

NQF/ PQRS	CMS E-Measure ID	National Quality Strategy Domain	Measure Title and Description ^y	Measure Steward
N/A/270	N/A	Effective Clinical Care	<p>Inflammatory Bowel Disease (IBD): Preventive Care: Corticosteroid Sparing Therapy: Percentage of patients aged 18 years and older with a diagnosis of inflammatory bowel disease who have been managed by corticosteroids greater than or equal to 10 mg/day of prednisone equivalents for 60 or greater consecutive days or a single prescription equating to 600 mg prednisone or greater for all fills that have been prescribed corticosteroid sparing therapy within the last twelve months.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69249).</p>	American Gastroenterological Association
N/A/271	N/A	Effective Clinical Care	<p>Inflammatory Bowel Disease (IBD): Preventive Care: Corticosteroid Related Iatrogenic Injury – Bone Loss Assessment: Percentage of patients aged 18 years and older with an inflammatory bowel disease encounter who were prescribed prednisone equivalents greater than or equal to 10 mg/day for 60 or greater consecutive days or a single prescription equating to 600mg prednisone or greater for all fills and were documented for risk of bone loss once during the reporting year or the previous calendar year.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69249).</p>	American Gastroenterological Association
N/A/274	N/A	Effective Clinical Care	<p>Inflammatory Bowel Disease (IBD): Testing for Latent Tuberculosis (TB) Before Initiating Anti-TNF (Tumor Necrosis Factor) Therapy: Percentage of patients aged 18 years and older with a diagnosis of inflammatory bowel disease (IBD) for whom a tuberculosis (TB) screening was performed and results interpreted within six months prior to receiving a first course of anti-TNF (tumor necrosis factor) therapy.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69250).</p>	American Gastroenterological Association
N/A/275	N/A	Effective Clinical Care	<p>Inflammatory Bowel Disease (IBD): Assessment of Hepatitis B Virus (HBV) Status Before Initiating Anti-TNF (Tumor Necrosis Factor) Therapy: Percentage of patients aged 18 years and older with a diagnosis of inflammatory bowel disease (IBD) who had Hepatitis B Virus (HBV) status assessed and results interpreted within one year prior to receiving a first course of anti-TNF (tumor necrosis factor) therapy.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69250).</p>	American Gastroenterological Association
N/A/276	N/A	Effective Clinical Care	<p>Sleep Apnea: Assessment of Sleep Symptoms: Percentage of visits for patients aged 18 years and older with a diagnosis of obstructive sleep apnea that includes documentation of an assessment of sleep symptoms, including presence or absence of snoring and daytime sleepiness.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69250).</p>	American Academy of Sleep Medicine/ American Medical Association-Physician Consortium for Performance Improvement
N/A/277	N/A	Effective Clinical Care	<p>Sleep Apnea: Severity Assessment at Initial Diagnosis: Percentage of patients aged 18 years and older with a diagnosis of obstructive sleep apnea who had an apnea hypopnea index (AHI) or a respiratory disturbance index (RDI) measured at the time of initial diagnosis.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69250).</p>	American Academy of Sleep Medicine/ American Medical Association-Physician Consortium for Performance Improvement

NQF/ PQRS	CMS E-Measure ID	National Quality Strategy Domain	Measure Title and Description ^y	Measure Steward
N/A/278	N/A	Effective Clinical Care	<p>Sleep Apnea: Positive Airway Pressure Therapy Prescribed: Percentage of patients aged 18 years and older with a diagnosis of moderate or severe obstructive sleep apnea who were prescribed positive airway pressure therapy.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69250).</p>	American Academy of Sleep Medicine/ American Medical Association-Physician Consortium for Performance Improvement
N/A/279	N/A	Effective Clinical Care	<p>Sleep Apnea: Assessment of Adherence to Positive Airway Pressure Therapy: Percentage of visits for patients aged 18 years and older with a diagnosis of obstructive sleep apnea who were prescribed positive airway pressure therapy who had documentation that adherence to positive airway pressure therapy was objectively measured.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69251).</p>	American Academy of Sleep Medicine/ American Medical Association-Physician Consortium for Performance Improvement
N/A/280	N/A	Effective Clinical Care	<p>Dementia: Staging of Dementia: Percentage of patients, regardless of age, with a diagnosis of dementia whose severity of dementia was classified as mild, moderate or severe at least once within a 12 month period.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69251).</p>	American Academy of Neurology/ American Psychological Association
N/A/281	149v4	Effective Clinical Care	<p>Dementia: Cognitive Assessment: Percentage of patients, regardless of age, with a diagnosis of dementia for whom an assessment of cognition is performed and the results reviewed at least once within a 12 month period.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69251).</p>	American Medical Association-Physician Consortium for Performance Improvement
N/A/282	N/A	Effective Clinical Care	<p>Dementia: Functional Status Assessment: Percentage of patients, regardless of age, with a diagnosis of dementia for whom an assessment of functional status is performed and the results reviewed at least once within a 12 month period.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69251).</p>	American Academy of Neurology/ American Psychological Association
N/A/283	N/A	Effective Clinical Care	<p>Dementia: Neuropsychiatric Symptom Assessment: Percentage of patients, regardless of age, with a diagnosis of dementia and for whom an assessment of neuropsychiatric symptoms is performed and results reviewed at least once in a 12 month period.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69251).</p>	American Academy of Neurology/ American Psychological Association
N/A/284	N/A	Effective Clinical Care	<p>Dementia: Management of Neuropsychiatric Symptoms: Percentage of patients, regardless of age, with a diagnosis of dementia who have one or more neuropsychiatric symptoms who received or were recommended to receive an intervention for neuropsychiatric symptoms within a 12 month period.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69251).</p>	American Academy of Neurology/ American Psychological Association

NQF/ PQRS	CMS E-Measure ID	National Quality Strategy Domain	Measure Title and Description ^y	Measure Steward
N/A/286	N/A	Patient Safety	<p>Dementia: Counseling Regarding Safety Concerns: Percentage of patients, regardless of age, with a diagnosis of dementia or their caregiver(s) who were counseled or referred for counseling regarding safety concerns within a 12 month period.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69252).</p>	American Academy of Neurology/ American Psychological Association
N/A/287	N/A	Effective Clinical Care	<p>Dementia: Counseling Regarding Risks of Driving: Percentage of patients, regardless of age, with a diagnosis of dementia or their caregiver(s) who were counseled regarding the risks of driving and the alternatives to driving at least once within a 12 month period.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69252).</p>	American Academy of Neurology/ American Psychological Association
N/A/288	N/A	Communication and Care Coordination	<p>Dementia: Caregiver Education and Support: Percentage of patients, regardless of age, with a diagnosis of dementia whose caregiver(s) were provided with education on dementia disease management and health behavior changes AND referred to additional sources for support within a 12 month period.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69252).</p>	American Academy of Neurology/ American Psychological Association
N/A/289	N/A	Effective Clinical Care	<p>Parkinson's Disease: Annual Parkinson's Disease Diagnosis Review: All patients with a diagnosis of Parkinson's disease who had an annual assessment including a review of current medications (e.g., medications that can produce Parkinson-like signs or symptoms) and a review for the presence of atypical features (e.g., falls at presentation and early in the disease course, poor response to levodopa, symmetry at onset, rapid progression [to Hoehn and Yahr stage 3 in 3 years], lack of tremor or dysautonomia) at least annually.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69252).</p>	American Academy of Neurology
N/A/290	N/A	Effective Clinical Care	<p>Parkinson's Disease: Psychiatric Disorders or Disturbances Assessment: All patients with a diagnosis of Parkinson's disease who were assessed for psychiatric disorders or disturbances (e.g., psychosis, depression, anxiety disorder, apathy, or impulse control disorder) at least annually.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69252).</p>	American Academy of Neurology
N/A/291	N/A	Effective Clinical Care	<p>Parkinson's Disease: Cognitive Impairment or Dysfunction Assessment: All patients with a diagnosis of Parkinson's disease who were assessed for cognitive impairment or dysfunction at least annually.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69253).</p>	American Academy of Neurology
N/A/292	N/A	Effective Clinical Care	<p>Parkinson's Disease: Querying about Sleep Disturbances: All patients with a diagnosis of Parkinson's disease (or caregivers, as appropriate) who were queried about sleep disturbances at least annually.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69253).</p>	American Academy of Neurology

NQF/ PQRS	CMS E-Measure ID	National Quality Strategy Domain	Measure Title and Description ^y	Measure Steward
N/A/293	N/A	Communication and Care Coordination	<p>Parkinson’s Disease: Rehabilitative Therapy Options: All patients with a diagnosis of Parkinson’s disease (or caregiver(s), as appropriate) who had rehabilitative therapy options (e.g., physical, occupational, or speech therapy) discussed at least annually.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69253).</p>	American Academy of Neurology
N/A/294	N/A	Communication and Care Coordination	<p>Parkinson’s Disease: Parkinson’s Disease Medical and Surgical Treatment Options Reviewed: All patients with a diagnosis of Parkinson’s disease (or caregiver(s), as appropriate) who had the Parkinson’s disease treatment options (e.g., non-pharmacological treatment, pharmacological treatment, or surgical treatment) reviewed at least once annually.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69253).</p>	American Academy of Neurology
1536/303	N/A	Person and Caregiver-Centered Experience and Outcomes	<p>Cataracts: Improvement in Patient’s Visual Function within 90 Days Following Cataract Surgery: Percentage of patients aged 18 years and older in sample who had cataract surgery and had improvement in visual function achieved within 90 days following the cataract surgery, based on completing a pre-operative and post-operative visual function survey.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69254).</p>	American Academy of Ophthalmology
N/A/304	N/A	Person and Caregiver-Centered Experience and Outcomes	<p>Cataracts: Patient Satisfaction within 90 Days Following Cataract Surgery: Percentage of patients aged 18 years and older in sample who had cataract surgery and were satisfied with their care within 90 days following the cataract surgery, based on completion of the Consumer Assessment of Healthcare Providers and Systems Surgical Care Survey.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69254).</p>	American Academy of Ophthalmology
0004/305	137v4	Effective Clinical Care	<p>Initiation and Engagement of Alcohol and Other Drug Dependence Treatment: Percentage of patients 13 years of age and older with a new episode of alcohol and other drug (AOD) dependence who received the following. Two rates are reported.</p> <p>a. Percentage of patients who initiated treatment within 14 days of the diagnosis.</p> <p>b. Percentage of patients who initiated treatment and who had two or more additional services with an AOD diagnosis within 30 days of the initiation visit.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69254).</p>	National Committee for Quality Assurance
0032/309	124v4	Effective Clinical Care	<p>Cervical Cancer Screening: Percentage of women 21-64 years of age, who received one or more Pap tests to screen for cervical cancer.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69255).</p>	National Committee for Quality Assurance
0033/310	153v4	Community/Population Health	<p>Chlamydia Screening for Women: Percentage of women 16-24 years of age who were identified as sexually active and who had at least one test for chlamydia during the measurement period.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69255).</p>	National Committee for Quality Assurance

NQF/ PQRS	CMS E-Measure ID	National Quality Strategy Domain	Measure Title and Description ^y	Measure Steward
0036/311	126v4	Effective Clinical Care	<p>Use of Appropriate Medications for Asthma: Percentage of patients 5-64 years of age who were identified as having persistent asthma and were appropriately prescribed medication during the measurement period.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69255).</p>	National Committee for Quality Assurance
0052/312	166v5	Efficiency and Cost Reduction	<p>Use of Imaging Studies for Low Back Pain: Percentage of patients 18-50 years of age with a diagnosis of low back pain who did not have an imaging study (plain X-ray, MRI, CT scan) within 28 days of the diagnosis.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69256).</p>	National Committee for Quality Assurance
N/A/316	61v5 & 64v5	Effective Clinical Care	<p>Preventive Care and Screening: Cholesterol – Fasting Low Density Lipoprotein (LDL-C) Test Performed AND Risk-Stratified Fasting LDL-C: Percentage of patients aged 20 through 79 years whose risk factors* have been assessed and a fasting LDL test has been performed AND percentage of patients aged 20 through 79 years who had a fasting LDL-C test performed and whose risk-stratified fasting LDL-C is at or below the recommended LDL-C goal.</p> <p>*There are three criteria for this measure based on the patient’s risk category.</p> <ol style="list-style-type: none"> 1. Highest Level of Risk: Coronary Heart Disease (CHD) or CHD Risk Equivalent OR 10-Year Framingham Risk >20% 2. Moderate Level of Risk: Multiple (2+) Risk Factors OR 10-Year Framingham Risk 10-20% 3. Lowest Level of Risk: 0 or 1 Risk Factor OR 10-Year Framingham Risk <10%. <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69256).</p>	Centers for Medicare & Medicaid Services/ Quality Insights of Pennsylvania
N/A/317	22v4	Community/ Population Health	<p>Preventive Care and Screening: Screening for High Blood Pressure and Follow-Up Documented: Percentage of patients aged 18 years and older seen during the reporting period who were screened for high blood pressure AND a recommended follow-up plan is documented based on the current blood pressure (BP) reading as indicated.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69256).</p>	Centers for Medicare & Medicaid Services/ Mathematica/ Quality Insights of Pennsylvania
0101/318	139v4	Patient Safety	<p>Falls: Screening for Fall Risk: Percentage of patients 65 years of age and older who were screened for future fall risk at least once during the measurement period.</p> <p>This measure was finalized for inclusion in 2013 PQRS in the CY 2012 PFS Final Rule (see Table 95 at 77 FR 69256).</p>	National Committee for Quality Assurance
0658/320	N/A	Communicat ion and Care Coordination	<p>Appropriate Follow-Up Interval for Normal Colonoscopy in Average Risk Patients: Percentage of patients aged 50 to 75 years of age receiving a screening colonoscopy without biopsy or polypectomy who had a recommended follow-up interval of at least 10 years for repeat colonoscopy documented in their colonoscopy report.</p> <p>This measure was finalized for inclusion in 2014 PQRS in the CY 2013 PFS Final Rule (see Table 52 at 78 FR 74631).</p>	American Medical Association- Physician Consortium for Performance Improvement/ American Gastroenterologic Association/ American Society for Gastrointestinal Endoscopy/ American College of

NQF/ PQRS	CMS E-Measure ID	National Quality Strategy Domain	Measure Title and Description ^Y	Measure Steward
				Gastroenterology
0005 & 0006/321	N/A	Person and Caregiver- Centered Experience and Outcomes	<p>CAHPS for PQRS Clinician/Group Survey:</p> <ul style="list-style-type: none"> • Getting timely care, appointments, and information; • How well providers Communicate; • Patient’s Rating of Provider; • Access to Specialists; • Health Promotion & Education; • Shared Decision Making; • Health Status/Functional Status; • Courteous and Helpful Office Staff; • Care Coordination; • Between Visit Communication; • Helping Your to Take Medication as Directed; and • Stewardship of Patient Resources. <p>This measure was finalized for inclusion in 2014 PQRS in the CY 2013 PFS Final Rule (see Table 52 at 78 FR 74632).</p>	Agency for Healthcare Research & Quality
N/A/322	N/A	Efficiency and Cost Reduction	<p>Cardiac Stress Imaging Not Meeting Appropriate Use Criteria: Preoperative Evaluation in Low-Risk Surgery Patients: Percentage of stress single-photon emission computed tomography (SPECT) myocardial perfusion imaging (MPI), stress echocardiogram (ECHO), cardiac computed tomography angiography (CCTA), or cardiac magnetic resonance (CMR) performed in low risk surgery patients 18 years or older for preoperative evaluation during the 12-month reporting period.</p> <p>This measure was finalized for inclusion in 2014 PQRS in the CY 2013 PFS Final Rule (see Table 52 at 78 FR 74633).</p>	American College of Cardiology
N/A/323	N/A	Efficiency and Cost Reduction	<p>Cardiac Stress Imaging Not Meeting Appropriate Use Criteria: Routine Testing After Percutaneous Coronary Intervention (PCI): Percentage of all stress single-photon emission computed tomography (SPECT) myocardial perfusion imaging (MPI), stress echocardiogram (ECHO), cardiac computed tomography angiography (CCTA), and cardiovascular magnetic resonance (CMR) performed in patients aged 18 years and older routinely after percutaneous coronary intervention (PCI), with reference to timing of test after PCI and symptom status.</p> <p>This measure was finalized for inclusion in 2014 PQRS in the CY 2013 PFS Final Rule (see Table 52 at 78 FR 74633).</p>	American College of Cardiology
N/A/324	N/A	Efficiency and Cost Reduction	<p>Cardiac Stress Imaging Not Meeting Appropriate Use Criteria: Testing in Asymptomatic, Low-Risk Patients: Percentage of all stress single-photon emission computed tomography (SPECT) myocardial perfusion imaging (MPI), stress echocardiogram (ECHO), cardiac computed tomography angiography (CCTA), and cardiovascular magnetic resonance (CMR) performed in asymptomatic, low coronary heart disease (CHD) risk patients 18 years and older for initial detection and risk assessment.</p> <p>This measure was finalized for inclusion in 2014 PQRS in the CY 2013 PFS Final Rule (see Table 52 at 78 FR 74634).</p>	American College of Cardiology
N/A/325	N/A	Communicat ion and Care Coordination	<p>Adult Major Depressive Disorder (MDD): Coordination of Care of Patients with Specific Comorbid Conditions: Percentage of medical records of patients aged 18 years and older with a diagnosis of major depressive disorder (MDD) and a specific diagnosed comorbid condition (diabetes, coronary artery disease, ischemic stroke, intracranial hemorrhage, chronic kidney disease [stages 4 or 5], End Stage Renal Disease [ESRD] or congestive heart failure) being treated by</p>	American Psychiatric Association/Amer ican Medical Association- Physician

NQF/ PQRS	CMS E-Measure ID	National Quality Strategy Domain	Measure Title and Description ^y	Measure Steward
			<p>another clinician with communication to the clinician treating the comorbid condition.</p> <p>This measure was finalized for inclusion in 2014 PQRS in the CY 2013 PFS Final Rule (see Table 52 at 78 FR 74635).</p>	Consortium for Performance Improvement
1525/326	N/A	Effective Clinical Care	<p>Atrial Fibrillation and Atrial Flutter: Chronic Anticoagulation Therapy: Percentage of patients aged 18 years and older with a diagnosis of nonvalvular atrial fibrillation (AF) or atrial flutter whose assessment of the specified thromboembolic risk factors indicate one or more high-risk factors or more than one moderate risk factor, as determined by CHADS2 risk stratification, who are prescribed warfarin OR another oral anticoagulant drug that is FDA approved for the prevention of thromboembolism.</p> <p>This measure was finalized for inclusion in 2014 PQRS in the CY 2013 PFS Final Rule (see Table 52 at 78 FR 74635).</p>	American College of Cardiology/American Heart Association/American Medical Association-Physician Consortium for Performance Improvement
N/A/327	N/A	Effective Clinical Care	<p>Pediatric Kidney Disease: Adequacy of Volume Management: Percentage of calendar months within a 12-month period during which patients aged 17 years and younger with a diagnosis of End Stage Renal Disease (ESRD) undergoing maintenance hemodialysis in an outpatient dialysis facility have an assessment of the adequacy of volume management from a nephrologist.</p> <p>This measure was finalized for inclusion in 2014 PQRS in the CY 2013 PFS Final Rule (see Table 52 at 78 FR 74636).</p>	Renal Physicians Association
1667/328	N/A	Effective Clinical Care	<p>Pediatric Kidney Disease: ESRD Patients Receiving Dialysis: Hemoglobin Level < 10 g/dL: Percentage of calendar months within a 12-month period during which patients aged 17 years and younger with a diagnosis of End Stage Renal Disease (ESRD) receiving hemodialysis or peritoneal dialysis have a hemoglobin level < 10 g/dL.</p> <p>This measure was finalized for inclusion in 2014 PQRS in the CY 2013 PFS Final Rule (see Table 52 at 78 FR 74637).</p>	Renal Physicians Association
N/A/329	N/A	Effective Clinical Care	<p>Adult Kidney Disease: Catheter Use at Initiation of Hemodialysis: Percentage of patients aged 18 years and older with a diagnosis of End Stage Renal Disease (ESRD) who initiate maintenance hemodialysis during the measurement period, whose mode of vascular access is a catheter at the time maintenance hemodialysis is initiated.</p> <p>This measure was finalized for inclusion in 2014 PQRS in the CY 2013 PFS Final Rule (see Table 52 at 78 FR 74637).</p>	Renal Physicians Association
N/A/330	N/A	Patient Safety	<p>Adult Kidney Disease: Catheter Use for Greater Than or Equal to 90 Days: Percentage of patients aged 18 years and older with a diagnosis of End Stage Renal Disease (ESRD) receiving maintenance hemodialysis for greater than or equal to 90 days whose mode of vascular access is a catheter.</p> <p>This measure was finalized for inclusion in 2014 PQRS in the CY 2013 PFS Final Rule (see Table 52 at 78 FR 74638).</p>	Renal Physicians Association
N/A/331	N/A	Efficiency and Cost Reduction	<p>Adult Sinusitis: Antibiotic Prescribed for Acute Sinusitis (Overuse): Percentage of patients, aged 18 years and older, with a diagnosis of acute sinusitis who were prescribed an antibiotic within 10 days after onset of symptoms.</p> <p>This measure was finalized for inclusion in 2014 PQRS in the CY 2013 PFS Final Rule (see Table 52 at 78 FR 74639).</p>	American Academy of Otolaryngology-Head and Neck Surgery

NQF/ PQRS	CMS E-Measure ID	National Quality Strategy Domain	Measure Title and Description ^y	Measure Steward
N/A/332	N/A	Efficiency and Cost Reduction	<p>Adult Sinusitis: Appropriate Choice of Antibiotic: Amoxicillin With or Without Clavulanate Prescribed for Patients with Acute Bacterial Sinusitis (Appropriate Use): Percentage of patients aged 18 years and older with a diagnosis of acute bacterial sinusitis that were prescribed amoxicillin, with or without clavulanate, as a first line antibiotic at the time of diagnosis.</p> <p>This measure was finalized for inclusion in 2014 PQRS in the CY 2013 PFS Final Rule (see Table 52 at 78 FR 74641).</p>	American Academy of Otolaryngology-Head and Neck Surgery
N/A/333	N/A	Efficiency and Cost Reduction	<p>Adult Sinusitis: Computerized Tomography (CT) for Acute Sinusitis (Overuse): Percentage of patients aged 18 years and older with a diagnosis of acute sinusitis who had a computerized tomography (CT) scan of the paranasal sinuses ordered at the time of diagnosis or received within 28 days after date of diagnosis.</p> <p>This measure was finalized for inclusion in 2014 PQRS in the CY 2013 PFS Final Rule (see Table 52 at 78 FR 74642).</p>	American Academy of Otolaryngology-Head and Neck Surgery
N/A/334	N/A	Efficiency and Cost Reduction	<p>Adult Sinusitis: More than One Computerized Tomography (CT) Scan Within 90 Days for Chronic Sinusitis (Overuse): Percentage of patients aged 18 years and older with a diagnosis of chronic sinusitis who had more than one CT scan of the paranasal sinuses ordered or received within 90 days after the date of diagnosis.</p> <p>This measure was finalized for inclusion in 2014 PQRS in the CY 2013 PFS Final Rule (see Table 52 at 78 FR 74644).</p>	American Academy of Otolaryngology-Head and Neck Surgery
N/A/335	N/A	Patient Safety	<p>Maternity Care: Elective Delivery or Early Induction Without Medical Indication at ≥ 37 and < 39 Weeks: Percentage of patients, regardless of age, who gave birth during a 12-month period who delivered a live singleton at ≥ 37 and < 39 weeks of gestation completed who had elective deliveries or early inductions without medical indication.</p> <p>This measure was finalized for inclusion in 2014 PQRS in the CY 2013 PFS Final Rule (see Table 52 at 78 FR 74646).</p>	American Medical Association-Physician Consortium for Performance Improvement
N/A/336	N/A	Communicat ion and Care Coordination	<p>Maternity Care: Post-Partum Follow-Up and Care Coordination: Percentage of patients, regardless of age, who gave birth during a 12-month period who were seen for post-partum care within 8 weeks of giving birth who received a breast feeding evaluation and education, post-partum depression screening, post-partum glucose screening for gestational diabetes patients, and family and contraceptive planning.</p> <p>This measure was finalized for inclusion in 2014 PQRS in the CY 2013 PFS Final Rule (see Table 52 at 78 FR 74647).</p>	American Medical Association-Physician Consortium for Performance Improvement
N/A/337	N/A	Effective Clinical Care	<p>Tuberculosis Prevention for Psoriasis, Psoriatic Arthritis and Rheumatoid Arthritis Patients on a Biological Immune Response Modifier: Percentage of patients whose providers are ensuring active tuberculosis prevention either through yearly negative standard tuberculosis screening tests or are reviewing the patient's history to determine if they have had appropriate management for a recent or prior positive test.</p> <p>This measure was finalized for inclusion in 2014 PQRS in the CY 2013 PFS Final Rule (see Table 52 at 78 FR 74648).</p>	American Academy of Dermatology

NQF/ PQRS	CMS E-Measure ID	National Quality Strategy Domain	Measure Title and Description ^y	Measure Steward
2082/338	N/A	Effective Clinical Care	<p>HIV Viral Load Suppression: The percentage of patients, regardless of age, with a diagnosis of HIV with a HIV viral load less than 200 copies/mL at last HIV viral load test during the measurement year.</p> <p>This measure was finalized for inclusion in 2014 PQRS in the CY 2013 PFS Final Rule (see Table 52 at 78 FR 74650).</p>	Health Resources and Services Administration
2083/339	N/A	Effective Clinical Care	<p>Prescription of HIV Antiretroviral Therapy: Percentage of patients, regardless of age, with a diagnosis of HIV prescribed antiretroviral therapy for the treatment of HIV infection during the measurement year.</p> <p>This measure was finalized for inclusion in 2014 PQRS in the CY 2013 PFS Final Rule (see Table 52 at 78 FR 74650).</p>	Health Resources and Services Administration
2079/340	N/A	Efficiency and Cost Reduction	<p>HIV Medical Visit Frequency: Percentage of patients, regardless of age with a diagnosis of HIV who had at least one medical visit in each 6 month period of the 24 month measurement period, with a minimum of 60 days between medical visits.</p> <p>This measure was finalized for inclusion in 2014 PQRS in the CY 2013 PFS Final Rule (see Table 52 at 78 FR 74650).</p>	Health Resources and Services Administration
N/A/342	N/A	Person and Caregiver- Centered Experience and Outcomes	<p>Pain Brought Under Control Within 48 Hours: Patients aged 18 and older who report being uncomfortable because of pain at the initial assessment (after admission to palliative care services) who report pain was brought to a comfortable level within 48 hours.</p> <p>This measure was finalized for inclusion in 2014 PQRS in the CY 2013 PFS Final Rule (see Table 52 at 78 FR 74651).</p>	National Hospice and Palliative Care Organization
N/A/343	N/A	Effective Clinical Care	<p>Screening Colonoscopy Adenoma Detection Rate Measure: The percentage of patients age 50 years or older with at least one conventional adenoma or colorectal cancer detected during screening colonoscopy.</p> <p>This measure was finalized for inclusion in 2014 PQRS in the CY 2013 PFS Final Rule (see Table 52 at 78 FR 74652).</p>	American College of Gastroenterology/ American Gastroenterologic al Association/ American Society for Gastrointestinal Endoscopy
N/A/344	N/A	Effective Clinical Care	<p>Rate of Carotid Artery Stenting (CAS) for Asymptomatic Patients, Without Major Complications (Discharged to Home by Post-Operative Day #2): Percent of asymptomatic patients undergoing CAS who are discharged to home no later than post-operative day #2.</p> <p>This measure was finalized for inclusion in 2014 PQRS in the CY 2013 PFS Final Rule (see Table 52 at 78 FR 74653).</p>	Society for Vascular Surgeons
1543/345	N/A	Effective Clinical Care	<p>Rate of Postoperative Stroke or Death in Asymptomatic Patients Undergoing Carotid Artery Stenting (CAS): Percent of asymptomatic patients undergoing CAS who experience stroke or death following surgery while in the hospital.</p> <p>This measure was finalized for inclusion in 2014 PQRS in the CY 2013 PFS Final Rule (see Table 52 at 78 FR 74654).</p>	Society for Vascular Surgeons
1540/346	N/A	Effective Clinical Care	<p>Rate of Postoperative Stroke or Death in Asymptomatic Patients Undergoing Carotid Endarterectomy (CEA): Percent of asymptomatic patients undergoing CEA who experience stroke or death following surgery while in the hospital.</p> <p>This measure was finalized for inclusion in 2014 PQRS in the CY 2013 PFS Final Rule (see Table 52 at 78 FR 74656).</p>	Society for Vascular Surgeons

NQF/ PQRS	CMS E-Measure ID	National Quality Strategy Domain	Measure Title and Description ^y	Measure Steward
1534/347	N/A	Patient Safety	<p>Rate of Endovascular Aneurysm Repair (EVAR) of Small or Moderate Non-Ruptured Abdominal Aortic Aneurysms (AAA) Who Die While in Hospital: Percent of patients undergoing endovascular repair of small or moderate abdominal aortic aneurysms (AAA) who die while in the hospital.</p> <p>This measure was finalized for inclusion in 2014 PQRS in the CY 2013 PFS Final Rule (see Table 52 at 78 FR 74657).</p>	Society for Vascular Surgeons
N/A/348	N/A	Patient Safety	<p>HRS-3: Implantable Cardioverter-Defibrillator (ICD) Complications Rate: Patients with physician-specific risk-standardized rates of procedural complications following the first time implantation of an ICD.</p> <p>This measure was finalized for inclusion in 2014 PQRS in the CY 2013 PFS Final Rule (see Table 52 at 78 FR 74658).</p>	The Heart Rhythm Society
N/A/350	N/A	Communication and Care Coordination	<p>Total Knee Replacement: Shared Decision-Making: Trial of Conservative (Non-surgical) Therapy: Percentage of patients regardless of age or gender undergoing a total knee replacement with documented shared decision-making with discussion of conservative (non-surgical) therapy (e.g. Nonsteroidal anti-inflammatory drugs (NSAIDs), analgesics, weight loss, exercise, injections) prior to the procedure.</p> <p>This measure was finalized for inclusion in 2014 PQRS in the CY 2013 PFS Final Rule (see Table 52 at 78 FR 74661).</p>	American Association of Hip and Knee Surgeons
N/A/351	N/A	Patient Safety	<p>Total Knee Replacement: Venous Thromboembolic and Cardiovascular Risk Evaluation: Percentage of patients regardless of age or gender undergoing a total knee replacement who are evaluated for the presence or absence of venous thromboembolic and cardiovascular risk factors within 30 days prior to the procedure (e.g. history of Deep Vein Thrombosis (DVT), Pulmonary Embolism (PE), Myocardial Infarction (MI), Arrhythmia and Stroke).</p> <p>This measure was finalized for inclusion in 2014 PQRS in the CY 2013 PFS Final Rule (see Table 52 at 78 FR 74661).</p>	American Association of Hip and Knee Surgeons
N/A/352	N/A	Patient Safety	<p>Total Knee Replacement: Preoperative Antibiotic Infusion with Proximal Tourniquet: Percentage of patients regardless of age or gender undergoing a total knee replacement who had the prophylactic antibiotic completely infused prior to the inflation of the proximal tourniquet.</p> <p>This measure was finalized for inclusion in 2014 PQRS in the CY 2013 PFS Final Rule (see Table 52 at 78 FR 74662).</p>	American Association of Hip and Knee Surgeons
N/A/353	N/A	Patient Safety	<p>Total Knee Replacement: Identification of Implanted Prosthesis in Operative Report: Percentage of patients regardless of age or gender undergoing a total knee replacement whose operative report identifies the prosthetic implant specifications including the prosthetic implant manufacturer, the brand name of the prosthetic implant and the size of each prosthetic implant.</p> <p>This measure was finalized for inclusion in 2014 PQRS in the CY 2013 PFS Final Rule (see Table 52 at 78 FR 74662).</p>	American Association of Hip and Knee Surgeons
N/A/354	N/A	Patient Safety	<p>Anastomotic Leak Intervention: Percentage of patients aged 18 years and older who required an anastomotic leak intervention following gastric bypass or colectomy surgery.</p>	American College of Surgeons

NQF/ PQRS	CMS E-Measure ID	National Quality Strategy Domain	Measure Title and Description ^y	Measure Steward
			This measure was finalized for inclusion in 2014 PQRS in the CY 2013 PFS Final Rule (see Table 52 at 78 FR 74663).	
N/A/355	N/A	Patient Safety	<p>Unplanned Reoperation within the 30 Day Postoperative Period: Percentage of patients aged 18 years and older who had any unplanned reoperation within the 30 day postoperative period.</p> <p>This measure was finalized for inclusion in 2014 PQRS in the CY 2013 PFS Final Rule (see Table 52 at 78 FR 74663).</p>	American College of Surgeons
N/A/356	N/A	Effective Clinical Care	<p>Unplanned Hospital Readmission within 30 Days of Principal Procedure: Percentage of patients aged 18 years and older who had an unplanned hospital readmission within 30 days of principal procedure.</p> <p>This measure was finalized for inclusion in 2014 PQRS in the CY 2013 PFS Final Rule (see Table 52 at 78 FR 74663).</p>	American College of Surgeons
N/A/357	N/A	Effective Clinical Care	<p>Surgical Site Infection (SSI): Percentage of patients aged 18 years and older who had a surgical site infection (SSI).</p> <p>This measure was finalized for inclusion in 2014 PQRS in the CY 2013 PFS Final Rule (see Table 52 at 78 FR 74664).</p>	American College of Surgeons
N/A/358	N/A	Person and Caregiver-Centered Experience and Outcomes	<p>Patient-Centered Surgical Risk Assessment and Communication: Percentage of patients who underwent a non-emergency surgery who had their personalized risks of postoperative complications assessed by their surgical team prior to surgery using a clinical data-based, patient-specific risk calculator and who received personal discussion of those risks with the surgeon.</p> <p>This measure was finalized for inclusion in 2014 PQRS in the CY 2013 PFS Final Rule (see Table 52 at 78 FR 74664).</p>	American College of Surgeons
N/A/359	N/A	Communication and Care Coordination	<p>Optimizing Patient Exposure to Ionizing Radiation: Utilization of a Standardized Nomenclature for Computed Tomography (CT) Imaging Description: Percentage of computed tomography (CT) imaging reports for all patients, regardless of age, with the imaging study named according to a standardized nomenclature and the standardized nomenclature is used in institution's computer systems.</p> <p>This measure was finalized for inclusion in 2014 PQRS in the CY 2013 PFS Final Rule (see Table 52 at 78 FR 74665).</p>	American College of Radiology
N/A/360	N/A	Patient Safety	<p>Optimizing Patient Exposure to Ionizing Radiation: Count of Potential High Dose Radiation Imaging Studies: Computed Tomography (CT) and Cardiac Nuclear Medicine Studies: Percentage of computed tomography (CT) and cardiac nuclear medicine (myocardial perfusion studies) imaging reports for all patients, regardless of age, that document a count of known previous CT (any type of CT) and cardiac nuclear medicine (myocardial perfusion) studies that the patient has received in the 12-month period prior to the current study.</p> <p>This measure was finalized for inclusion in 2014 PQRS in the CY 2013 PFS Final Rule (see Table 52 at 78 FR 74666).</p>	American College of Radiology
N/A/361	N/A	Patient Safety	<p>Optimizing Patient Exposure to Ionizing Radiation: Reporting to a Radiation Dose Index Registry: Percentage of total computed tomography (CT) studies performed for all patients, regardless of age, that are reported to a radiation dose index registry AND that include at a minimum selected data elements.</p> <p>This measure was finalized for inclusion in 2014 PQRS in the CY 2013 PFS</p>	American College of Radiology

NQF/ PQRS	CMS E-Measure ID	National Quality Strategy Domain	Measure Title and Description ^Y	Measure Steward
			Final Rule (see Table 52 at 78 FR 74666).	
N/A/362	N/A	Communication and Care Coordination	<p>Optimizing Patient Exposure to Ionizing Radiation: Computed Tomography (CT) Images Available for Patient Follow-up and Comparison Purposes: Percentage of final reports for computed tomography (CT) studies performed for all patients, regardless of age, which document that Digital Imaging and Communications in Medicine (DICOM) format image data are available to non-affiliated external healthcare facilities or entities on a secure, media free, reciprocally searchable basis with patient authorization for at least a 12-month period after the study.</p> <p>This measure was finalized for inclusion in 2014 PQRS in the CY 2013 PFS Final Rule (see Table 52 at 78 FR 74667).</p>	American College of Radiology
N/A/363	N/A	Communication and Care Coordination	<p>Optimizing Patient Exposure to Ionizing Radiation: Search for Prior Computed Tomography (CT) Studies Through a Secure, Authorized, Media-Free, Shared Archive: Percentage of final reports of computed tomography (CT) studies performed for all patients, regardless of age, which document that a search for Digital Imaging and Communications in Medicine (DICOM) format images was conducted for prior patient CT imaging studies completed at non-affiliated external healthcare facilities or entities within the past 12-months and are available through a secure, authorized, media free, shared archive prior to an imaging study being performed.</p> <p>This measure was finalized for inclusion in 2014 PQRS in the CY 2013 PFS Final Rule (see Table 52 at 78 FR 74668).</p>	American College of Radiology
N/A/364	N/A	Communication and Care Coordination	<p>Optimizing Patient Exposure to Ionizing Radiation: Appropriateness: Follow-up CT Imaging for Incidentally Detected Pulmonary Nodules According to Recommended Guidelines: Percentage of final reports for computed tomography (CT) imaging studies of the thorax for patients aged 18 years and older with documented follow-up recommendations for incidentally detected pulmonary nodules (e.g., follow-up CT imaging studies needed or that no follow-up is needed) based at a minimum on nodule size AND patient risk factors.</p> <p>This measure was finalized for inclusion in 2014 PQRS in the CY 2013 PFS Final Rule (see Table 52 at 78 FR 74668).</p>	American College of Radiology
N/A/365	148v4	Effective Clinical Care	<p>Hemoglobin A1c Test for Pediatric Patients: Percentage of patients 5-17 years of age with diabetes with a HbA1c test during the measurement period.</p> <p>This measure was finalized for inclusion in 2014 PQRS in the CY 2013 PFS Final Rule (see Table 52 at 78 FR 74669).</p>	National Committee for Quality Assurance
0108/366	136v5	Effective Clinical Care	<p>ADHD: Follow-Up Care for Children Prescribed Attention-Deficit/Hyperactivity Disorder (ADHD) Medication: Percentage of children 6-12 years of age and newly dispensed a medication for attention-deficit/hyperactivity disorder (ADHD) who had appropriate follow-up care. Two rates are reported.</p> <p>a. Percentage of children who had one follow-up visit with a practitioner with prescribing authority during the 30-Day Initiation Phase.</p> <p>b. Percentage of children who remained on ADHD medication for at least 210 days and who, in addition to the visit in the Initiation Phase, had at least two additional follow-up visits with a practitioner within 270 days (9 months) after the Initiation Phase ended.</p> <p>This measure was finalized for inclusion in 2014 PQRS in the CY 2013 PFS</p>	National Committee for Quality Assurance

NQF/ PQRS	CMS E-Measure ID	National Quality Strategy Domain	Measure Title and Description ^y	Measure Steward
			Final Rule (see Table 52 at 78 FR 74669).	
N/A/367	169v4	Effective Clinical Care	<p>Bipolar Disorder and Major Depression: Appraisal for Alcohol or Chemical Substance Use: Percentage of patients with depression or bipolar disorder with evidence of an initial assessment that includes an appraisal for alcohol or chemical substance use.</p> <p>This measure was finalized for inclusion in 2014 PQRS in the CY 2013 PFS Final Rule (see Table 52 at 78 FR 74670).</p>	Center for Quality Assessment and Improvement in Mental Health
N/A/368	62v4	Effective Clinical Care	<p>HIV/AIDS: Medical Visit: Percentage of patients, regardless of age, with a diagnosis of HIV/AIDS with at least two medical visits during the measurement year with a minimum of 90 days between each visit.</p> <p>This measure was finalized for inclusion in 2014 PQRS in the CY 2013 PFS Final Rule (see Table 52 at 78 FR 74671).</p>	National Committee for Quality Assurance
N/A/369	158v4	Effective Clinical Care	<p>Pregnant Women that had HBsAg Testing: This measure identifies pregnant women who had a HBsAg (hepatitis B) test during their pregnancy.</p> <p>This measure was finalized for inclusion in 2014 PQRS in the CY 2013 PFS Final Rule (see Table 52 at 78 FR 74671).</p>	OptumInsight
0710/370	159v4	Effective Clinical Care	<p>Depression Remission at Twelve Months: Adult patients age 18 and older with major depression or dysthymia and an initial PHQ-9 score > 9 who demonstrate remission at twelve months defined as PHQ-9 score less than 5. This measure applies to both patients with newly diagnosed and existing depression whose current PHQ-9 score indicates a need for treatment.</p> <p>This measure was finalized for inclusion in 2014 PQRS in the CY 2013 PFS Final Rule (see Table 52 at 78 FR 74671).</p>	Minnesota Community Measurement
0712/371	160v4	Effective Clinical Care	<p>Depression Utilization of the PHQ-9 Tool: Adult patients age 18 and older with the diagnosis of major depression or dysthymia who have a PHQ-9 tool administered at least once during a 4 month period in which there was a qualifying visit.</p> <p>This measure was finalized for inclusion in 2014 PQRS in the CY 2013 PFS Final Rule (see Table 52 at 78 FR 74673).</p>	Minnesota Community Measurement
N/A/372	82v3	Community/ Population Health	<p>Maternal Depression Screening: The percentage of children who turned 6 months of age during the measurement year, who had a face-to-face visit between the clinician and the child during child's first 6 months, and who had a maternal depression screening for the mother at least once between 0 and 6 months of life.</p> <p>This measure was finalized for inclusion in 2014 PQRS in the CY 2013 PFS Final Rule (see Table 52 at 78 FR 74674).</p>	National Committee for Quality Assurance
N/A/373	65v5	Effective Clinical Care	<p>Hypertension: Improvement in Blood Pressure: Percentage of patients aged 18-85 years of age with a diagnosis of hypertension whose blood pressure improved during the measurement period.</p> <p>This measure was finalized for inclusion in 2014 PQRS in the CY 2013 PFS Final Rule (see Table 52 at 78 FR 74675).</p>	Centers for Medicare & Medicaid Services/National Committee for Quality Assurance

NQF/ PQRS	CMS E-Measure ID	National Quality Strategy Domain	Measure Title and Description ^y	Measure Steward
N/A/374	50v4	Communication and Care Coordination	<p>Closing the Referral Loop: Receipt of Specialist Report: Percentage of patients with referrals, regardless of age, for which the referring provider receives a report from the provider to whom the patient was referred.</p> <p>This measure was finalized for inclusion in 2014 PQRS in the CY 2013 PFS Final Rule (see Table 52 at 78 FR 74677).</p>	Centers for Medicare & Medicaid Services/Mathematica
N/A/375	66v4	Person and Caregiver-Centered Experience and Outcomes	<p>Functional Status Assessment for Knee Replacement: Percentage of patients aged 18 years and older with primary total knee arthroplasty (TKA) who completed baseline and follow-up (patient-reported) functional status assessments.</p> <p>This measure was finalized for inclusion in 2014 PQRS in the CY 2013 PFS Final Rule (see Table 52 at 78 FR 74677).</p>	Centers for Medicare & Medicaid Services/National Committee for Quality Assurance
N/A/376	56v4	Person and Caregiver-Centered Experience and Outcomes	<p>Functional Status Assessment for Hip Replacement: Percentage of patients aged 18 years and older with primary total hip arthroplasty (THA) who completed baseline and follow-up (patient-reported) functional status assessments.</p> <p>This measure was finalized for inclusion in 2014 PQRS in the CY 2013 PFS Final Rule (see Table 52 at 78 FR 74677).</p>	Centers for Medicare & Medicaid Services/National Committee for Quality Assurance
N/A/377	90v4	Person and Caregiver-Centered Experience and Outcomes	<p>Functional Status Assessment for Complex Chronic Conditions: Percentage of patients aged 65 years and older with heart failure who completed initial and follow-up patient-reported functional status assessments.</p> <p>This measure was finalized for inclusion in 2014 PQRS in the CY 2013 PFS Final Rule (see Table 52 at 78 FR 74678).</p>	Centers for Medicare & Medicaid Services/Mathematica
N/A/378	75v4	Community/Population Health	<p>Children Who Have Dental Decay or Cavities: Percentage of children, age 0-20 years, who have had tooth decay or cavities during the measurement period.</p> <p>This measure was finalized for inclusion in 2014 PQRS in the CY 2013 PFS Final Rule (see Table 52 at 78 FR 74678).</p>	Centers for Medicare & Medicaid Services/Mathematica
N/A/379	74v5	Effective Clinical Care	<p>Primary Caries Prevention Intervention as Offered by Primary Care Providers, including Dentists: Percentage of children, age 0-20 years, who received a fluoride varnish application during the measurement period.</p> <p>This measure was finalized for inclusion in 2014 PQRS in the CY 2013 PFS Final Rule (see Table 52 at 78 FR 74679).</p>	Centers for Medicare & Medicaid Services/National Committee for Quality Assurance
N/A/380	179v4	Patient Safety	<p>ADE Prevention and Monitoring: Warfarin Time in Therapeutic Range: Average percentage of time in which patients aged 18 and older with atrial fibrillation who are on chronic warfarin therapy have International Normalized Ratio (INR) test results within the therapeutic range (i.e., TTR) during the measurement period.</p> <p>This measure was finalized for inclusion in 2014 PQRS in the CY 2013 PFS Final Rule (see Table 52 at 78 FR 74679).</p>	Centers for Medicare & Medicaid Services/National Committee for Quality Assurance
N/A/381	77v4	Effective Clinical Care	<p>HIV/AIDS: RNA Control for Patients with HIV: Percentage of patients aged 13 years and older with a diagnosis of HIV/AIDS, with at least two visits during the measurement year, with at least 90 days between each visit, whose most recent HIV RNA level is <200 copies/mL.</p> <p>This measure was finalized for inclusion in 2014 PQRS in the CY 2013 PFS Final Rule (see Table 52 at 78 FR 74681).</p>	Centers for Medicare & Medicaid Services/National Committee for Quality Assurance
1365/382	177v4	Patient Safety	<p>Child and Adolescent Major Depressive Disorder (MDD): Suicide Risk Assessment: Percentage of patient visits for those patients aged 6 through 17 years with a diagnosis of major depressive disorder with an assessment for suicide risk.</p> <p>This measure was finalized for inclusion in 2014 PQRS in the CY 2013 PFS</p>	American Medical Association-Physician Consortium for Performance

NQF/ PQRS	CMS E-Measure ID	National Quality Strategy Domain	Measure Title and Description ^Y	Measure Steward
			Final Rule (see Table 52 at 78 FR 74681).	Improvement
1879/383	N/A	Patient Safety	<p>Adherence to Antipsychotic Medications for Individuals with Schizophrenia: Percentage of individuals at least 18 years of age as of the beginning of the measurement period with schizophrenia or schizoaffective disorder who had at least two prescriptions filled for any antipsychotic medication and who had a Proportion of Days Covered (PDC) of at least 0.8 for antipsychotic medications during the measurement period (12 consecutive months).</p> <p>This measure was finalized for inclusion in 2015 PQRS in the CY 2014 PFS Final Rule (see Table 53 at 79 FR 67808).</p>	Health Services Advisory Group/ Centers for Medicare & Medicaid Services
N/A/384	N/A	Effective Clinical Care	<p>Adult Primary Rhegmatogenous Retinal Detachment Surgery: No Return to the Operating Room Within 90 Days of Surgery: Patients aged 18 years and older who had surgery for primary rhegmatogenous retinal detachment who did not require a return to the operating room within 90 days of surgery.</p> <p>This measure was finalized for inclusion in 2015 PQRS in the CY 2014 PFS Final Rule (see Table 53 at 79 FR 67808).</p>	American Academy of Ophthalmology
N/A/385	N/A	Effective Clinical Care	<p>Adult Primary Rhegmatogenous Retinal Detachment Surgery: Visual Acuity Improvement Within 90 Days of Surgery: Patients aged 18 years and older who had surgery for primary rhegmatogenous retinal detachment and achieved an improvement in their visual acuity, from their preoperative level, within 90 days of surgery in the operative eye.</p> <p>This measure was finalized for inclusion in 2015 PQRS in the CY 2014 PFS Final Rule (see Table 53 at 79 FR 67808).</p>	American Academy of Ophthalmology
N/A/386	N/A	Person and Caregiver-Centered Experience and Outcomes	<p>Amyotrophic Lateral Sclerosis (ALS) Patient Care Preferences: Percentage of patients diagnosed with Amyotrophic Lateral Sclerosis (ALS) who were offered assistance in planning for end of life issues (e.g. advance directives, invasive ventilation, hospice) at least once annually.</p> <p>This measure was finalized for inclusion in 2015 PQRS in the CY 2014 PFS Final Rule (see Table 53 at 79 FR 67809).</p>	American Academy of Neurology
N/A/387	N/A	Effective Clinical Care	<p>Annual Hepatitis C Virus (HCV) Screening for Patients who are Active Injection Drug Users: Percentage of patients regardless of age who are active injection drug users who received screening for HCV infection within the 12 month reporting period.</p> <p>This measure was finalized for inclusion in 2015 PQRS in the CY 2014 PFS Final Rule (see Table 53 at 79 FR 67809).</p>	American Medical Association-Physician Consortium for Performance Improvement
N/A/388	N/A	Patient Safety	<p>Cataract Surgery with Intra-Operative Complications (Unplanned Rupture of Posterior Capsule Requiring Unplanned Vitrectomy): Percentage of patients aged 18 years and older who had cataract surgery performed and had an unplanned rupture of the posterior capsule requiring vitrectomy.</p> <p>This measure was finalized for inclusion in 2015 PQRS in the CY 2014 PFS Final Rule (see Table 53 at 79 FR 67809).</p>	American Academy of Ophthalmology/American College of Healthcare Sciences
N/A/389	N/A	Effective Clinical Care	<p>Cataract Surgery: Difference Between Planned and Final Refraction: Percentage of patients aged 18 years and older who had cataract surgery performed and who achieved a final refraction within +/- 1.0 diopters of their planned (target) refraction.</p> <p>This measure was finalized for inclusion in 2015 PQRS in the CY 2014 PFS Final Rule (see Table 53 at 79 FR 67810).</p>	American Academy of Ophthalmology/American College of Healthcare Sciences

NQF/ PQRS	CMS E-Measure ID	National Quality Strategy Domain	Measure Title and Description ^Y	Measure Steward
N/A/390	N/A	Person and Caregiver-Centered Experience and Outcomes	<p>Hepatitis C: Discussion and Shared Decision Making Surrounding Treatment Options: Percentage of patients aged 18 years and older with a diagnosis of hepatitis C with whom a physician or other qualified healthcare professional reviewed the range of treatment options appropriate to their genotype and demonstrated a shared decision making approach with the patient. To meet the measure, there must be documentation in the patient record of a discussion between the physician or other qualified healthcare professional and the patient that includes all of the following: treatment choices appropriate to genotype, risks and benefits, evidence of effectiveness, and patient preferences toward treatment.</p> <p>This measure was finalized for inclusion in 2015 PQRS in the CY 2014 PFS Final Rule (see Table 53 at 79 FR 67810).</p>	American Medical Association-Physician Consortium for Performance Improvement/American Gastroenterological Association
0576/391	N/A	Communication and Care Coordination	<p>Follow-Up After Hospitalization for Mental Illness (FUH): The percentage of discharges for patients 6 years of age and older who were hospitalized for treatment of selected mental illness diagnoses and who had an outpatient visit, an intensive outpatient encounter or partial hospitalization with a mental health practitioner. Two rates are reported:</p> <ul style="list-style-type: none"> - The percentage of discharges for which the patient received follow-up within 30 days of discharge - The percentage of discharges for which the patient received follow-up within 7 days of discharge. <p>This measure was finalized for inclusion in 2015 PQRS in the CY 2014 PFS Final Rule (see Table 53 at 79 FR 67811).</p>	National Committee for Quality Assurance
2474/392	N/A	Patient Safety	<p>HRS-12: Cardiac Tamponade and/or Pericardiocentesis Following Atrial Fibrillation Ablation: Rate of cardiac tamponade and/or pericardiocentesis following atrial fibrillation ablation</p> <p>This measure is reported as four rates stratified by age and gender:</p> <ul style="list-style-type: none"> • Reporting Age Criteria 1: Females less than 65 years of age • Reporting Age Criteria 2: Males less than 65 years of age • Reporting Age Criteria 3: Females 65 years of age and older • Reporting Age Criteria 4: Males 65 years of age and older <p>This measure was finalized for inclusion in 2015 PQRS in the CY 2014 PFS Final Rule (see Table 53 at 79 FR 67812).</p>	The Heart Rhythm Society
N/A/393	N/A	Patient Safety	<p>HRS-9: Infection within 180 Days of Cardiac Implantable Electronic Device (CIED) Implantation, Replacement, or Revision: Infection rate following CIED device implantation, replacement, or revision.</p> <p>This measure was finalized for inclusion in 2015 PQRS in the CY 2014 PFS Final Rule (see Table 53 at 79 FR 67812).</p>	The Heart Rhythm Society
1407/394	N/A	Community/Population Health	<p>Immunizations for Adolescents: The percentage of adolescents 13 years of age who had the recommended immunizations by their 13th birthday.</p> <p>This measure was finalized for inclusion in 2015 PQRS in the CY 2014 PFS Final Rule (see Table 53 at 79 FR 67812).</p>	National Committee for Quality Assurance
N/A/395	N/A	Communication and Care Coordination	<p>Lung Cancer Reporting (Biopsy/Cytology Specimens): Pathology reports based on biopsy and/or cytology specimens with a diagnosis of primary nonsmall cell lung cancer classified into specific histologic type or classified as NSCLC-NOS with an explanation included in the pathology report.</p> <p>This measure was finalized for inclusion in 2015 PQRS in the CY 2014 PFS Final Rule (see Table 53 at 79 FR 67812).</p>	College of American Pathologists
N/A/396	N/A	Communication and Care Coordination	<p>Lung Cancer Reporting (Resection Specimens): Pathology reports based on resection specimens with a diagnosis of primary lung carcinoma that include the pT category, pN category and for non-small cell lung cancer, histologic type.</p> <p>This measure was finalized for inclusion in 2015 PQRS in the CY 2014 PFS Final Rule (see Table 53 at 79 FR 67812).</p>	College of American Pathologists

NQF/ PQRS	CMS E-Measure ID	National Quality Strategy Domain	Measure Title and Description [†]	Measure Steward
N/A/397	N/A	Communication and Care Coordination	<p>Melanoma Reporting: Pathology reports for primary malignant cutaneous melanoma that include the pT category and a statement on thickness and ulceration and for pT1, mitotic rate.</p> <p>This measure was finalized for inclusion in 2015 PQRS in the CY 2014 PFS Final Rule (see Table 53 at 79 FR 67813).</p>	College of American Pathologists
N/A/398	N/A	Effective Clinical Care	<p>Optimal Asthma Control: Patients ages 5-50 (pediatrics ages 5-17) whose asthma is well-controlled as demonstrated by one of three age appropriate patient reported outcome tools.</p> <p>This measure was finalized for inclusion in 2015 PQRS in the CY 2014 PFS Final Rule (see Table 53 at 79 FR 67813).</p>	Minnesota Community Measurement
2452/399	N/A	Effective Clinical Care	<p>Post-Procedural Optimal Medical Therapy Composite (Percutaneous Coronary Intervention): Percentage of patients aged 18 years and older for whom PCI is performed who are prescribed optimal medical therapy at discharge.</p> <p>This measure was finalized for inclusion in 2015 PQRS in the CY 2014 PFS Final Rule (see Table 53 at 79 FR 67813).</p>	American College of Cardiology/American Heart Association/American Medical Association-Physician Consortium for Performance Improvement
N/A/400	N/A	Effective Clinical Care	<p>One-Time Screening for Hepatitis C Virus (HCV) for Patients at Risk: Percentage of patients aged 18 years and older with one or more of the following: a history of injection drug use, receipt of a blood transfusion prior to 1992, receiving maintenance hemodialysis OR birthdate in the years 1945-1965 who received a one-time screening for HCV infection.</p> <p>This measure was finalized for inclusion in 2015 PQRS in the CY 2014 PFS Final Rule (see Table 53 at 79 FR 67814).</p>	American Medical Association-Physician Consortium for Performance Improvement
N/A/401	N/A	Effective Clinical Care	<p>Hepatitis C: Screening for Hepatocellular Carcinoma (HCC) in Patients with Cirrhosis: Percentage of patients aged 18 years and older with a diagnosis of chronic hepatitis C cirrhosis who underwent imaging with either ultrasound, contrast enhanced CT or MRI for hepatocellular carcinoma (HCC) at least once within the 12 month reporting period.</p> <p>This measure was finalized for inclusion in 2015 PQRS in the CY 2014 PFS Final Rule (see Table 53 at 79 FR 67814).</p>	American Medical Association-Physician Consortium for Performance Improvement/American Gastroenterological Association
N/A/402	N/A	Community/Population Health	<p>Tobacco Use and Help with Quitting Among Adolescents: The percentage of adolescents 12 to 20 years of age with a primary care visit during the measurement year for whom tobacco use status was documented and received help with quitting if identified as a tobacco user.</p> <p>This measure was finalized for inclusion in 2015 PQRS in the CY 2014 PFS Final Rule (see Table 53 at 79 FR 67815).</p>	National Committee for Quality Assurance/National Collaborative for Innovation in Quality Measurement
N/A/403 ‡	N/A	Person and Caregiver-Centered Experience and Outcomes	<p>Adult Kidney Disease: Referral to Hospice: Percentage of patients aged 18 years and older with a diagnosis of end-stage renal disease (ESRD) who withdraw from hemodialysis or peritoneal dialysis who are referred to hospice care.</p> <p>This measure was finalized for inclusion in 2016 PQRS in the CY 2015 PFS Final Rule.</p>	Renal Physicians Association/American Medical Association-Physician Consortium for Performance Improvement

NQF/ PQRS	CMS E-Measure ID	National Quality Strategy Domain	Measure Title and Description ^y	Measure Steward
N/A/439 ‡	N/A	Efficiency and Cost Reduction	<p>Age Appropriate Screening Colonoscopy: The percentage of patients greater than 85 years of age who received a screening colonoscopy from January 1 to December 31.</p> <p>This measure was finalized for inclusion in 2016 PQRS in the CY 2015 PFS Final Rule.</p>	American Gastroenterological Association/ American Society for Gastrointestinal Endoscopy/ American College of Gastroenterology
N/A/404 ‡	N/A	Effective Clinical Care	<p>Anesthesiology Smoking Abstinence: The percentage of current smokers who abstain from cigarettes prior to anesthesia on the day of elective surgery or procedure.</p> <p>This measure was finalized for inclusion in 2016 PQRS in the CY 2015 PFS Final Rule.</p>	American Society of Anesthesiologists
N/A/421 ‡	N/A	Effective Clinical Care	<p>Appropriate Assessment of Retrievable Inferior Vena Cava Filters for Removal: Percentage of patients in whom a retrievable IVC filter is placed who, within 3 months post-placement, have a documented assessment for the appropriateness of continued filtration, device removal or the inability to contact the patient with at least two attempts.</p> <p>This measure was finalized for inclusion in 2016 PQRS in the CY 2015 PFS Final Rule.</p>	Society of Interventional Radiology
N/A/405 ‡	N/A	Effective Clinical Care	<p>Appropriate Follow-up Imaging for Incidental Abdominal Lesions: Percentage of final reports for abdominal imaging studies for asymptomatic patients aged 18 years and older with one or more of the following noted incidentally with follow-up imaging recommended:</p> <ul style="list-style-type: none"> •Liver lesion ≤ 0.5 cm •Cystic kidney lesion < 1.0 cm •Adrenal lesion ≤ 1.0 cm <p>This measure was finalized for inclusion in 2016 PQRS in the CY 2015 PFS Final Rule.</p>	American College of Radiology
N/A/406 ‡	N/A	Effective Clinical Care	<p>Appropriate Follow-up Imaging for Incidental Thyroid Nodules in Patients: Percentage of final reports for computed tomography (CT) or magnetic resonance imaging (MRI) studies of the chest or neck or ultrasound of the neck for patients aged 18 years and older with no known thyroid disease with a thyroid nodule < 1.0 cm noted incidentally with follow-up imaging recommended.</p> <p>This measure was finalized for inclusion in 2016 PQRS in the CY 2015 PFS Final Rule.</p>	American College of Radiology
N/A/407 ‡	N/A	Effective Clinical Care	<p>Appropriate Treatment of MSSA Bacteremia: Percentage of patients with sepsis due to MSSA bacteremia who received beta-lactam antibiotic (e.g. nafcillin, oxacillin or cefazolin) as definitive therapy.</p> <p>This measure was finalized for inclusion in 2016 PQRS in the CY 2015 PFS Final Rule.</p>	Infectious Disease Society of America
N/A/408 ‡	N/A	Effective Clinical Care	<p>Opioid Therapy Follow-up Evaluation: All patients 18 and older prescribed opiates for longer than six weeks duration who had a follow-up evaluation conducted at least every three months during Opioid Therapy documented in the medical record.</p> <p>This measure was finalized for inclusion in 2016 PQRS in the CY 2015 PFS Final Rule.</p>	American Academy of Neurology

NQF/ PQRS	CMS E-Measure ID	National Quality Strategy Domain	Measure Title and Description ^Y	Measure Steward
N/A/409 ‡	N/A	Effective Clinical Care	<p>Clinical Outcome Post Endovascular Stroke Treatment: Percentage of patients with a mRs score of 0 to 2 at 90 days following endovascular stroke intervention.</p> <p>This measure was finalized for inclusion in 2016 PQRS in the CY 2015 PFS Final Rule.</p>	Society of Interventional Radiology
0711/411 ‡	N/A	Communication and Care Coordination	<p>Depression Remission at Six Months: Adult patients age 18 years and older with major depression or dysthymia and an initial PHQ-9 score > 9 who demonstrate remission at six months defined as a PHQ-9 score less than 5. This measure applies to both patients with newly diagnosed and existing depression whose current PHQ-9 score indicates a need for treatment.</p> <p>This measure was finalized for inclusion in 2016 PQRS in the CY 2015 PFS Final Rule.</p>	Minnesota Community Measurement
N/A/412 ‡	N/A	Effective Clinical Care	<p>Documentation of Signed Opioid Treatment Agreement: All patients 18 and older prescribed opiates for longer than six weeks duration who signed an opioid treatment agreement at least once during Opioid Therapy documented in the medical record.</p> <p>This measure was finalized for inclusion in 2016 PQRS in the CY 2015 PFS Final Rule.</p>	American Academy of Neurology
N/A/413 ‡	N/A	Effective Clinical Care	<p>Door to Puncture Time for Endovascular Stroke Treatment: Percentage of patients undergoing endovascular stroke treatment who have a door to puncture time of less than two hours.</p> <p>This measure was finalized for inclusion in 2016 PQRS in the CY 2015 PFS Final Rule.</p>	Society of Interventional Radiology
N/A/415 ‡	N/A	Efficiency and Cost Reduction	<p>Emergency Medicine: Emergency Department Utilization of CT for Minor Blunt Head Trauma for Patients Aged 18 Years and Older: Percentage of emergency department visits for patients aged 18 years and older who presented within 24 hours of a minor blunt head trauma with a Glasgow Coma Scale (GCS) score of 15 and who had a head CT for trauma ordered by an emergency care provider who have an indication for a head CT.</p> <p>This measure was finalized for inclusion in 2016 PQRS in the CY 2015 PFS Final Rule.</p>	American College of Emergency Physicians
N/A/416 ‡	N/A	Efficiency and Cost Reduction	<p>Emergency Medicine: Emergency Department Utilization of CT for Minor Blunt Head Trauma for Patients Aged 2 through 17 Years: Percentage of emergency department visits for patients aged 2 through 17 years who presented within 24 hours of a minor blunt head trauma with a Glasgow Coma Scale (GCS) score of 15 and who had a head CT for trauma ordered by an emergency care provider who are classified as low risk according to the Pediatric Emergency Care Applied Research Network prediction rules for traumatic brain injury.</p> <p>This measure was finalized for inclusion in 2016 PQRS in the CY 2015 PFS Final Rule.</p>	American College of Emergency Physicians
N/A/414 ‡	N/A	Effective Clinical Care	<p>Evaluation or Interview for Risk of Opioid Misuse: All patients 18 and older prescribed opiates for longer than six weeks duration evaluated for risk of opioid misuse using a brief validated instrument (e.g. Opioid Risk Tool, SOAAP-R) or patient interview documented at least once during Opioid Therapy in the medical record.</p> <p>This measure was finalized for inclusion in 2016 PQRS in the CY 2015 PFS Final Rule.</p>	American Academy of Neurology
0053/418 ‡	N/A	Effective Clinical Care	<p>Osteoporosis Management in Women Who Had a Fracture: The percentage of women age 50-85 who suffered a fracture and who either had a bone mineral density test or received a prescription for a drug to treat osteoporosis.</p> <p>This measure was finalized for inclusion in 2016 PQRS in the CY 2015 PFS Final Rule.</p>	National Committee for Quality Assurance/ American Medical

NQF/ PQRS	CMS E-Measure ID	National Quality Strategy Domain	Measure Title and Description ^Y	Measure Steward
				Association-Physician Consortium for Performance Improvement
N/A/419 ‡	N/A	Efficiency and Cost Reduction	<p>Overuse Of Neuroimaging For Patients With Primary Headache And A Normal Neurological Examination: Percentage of patients with a diagnosis of primary headache disorder whom advanced brain imaging was not ordered.</p> <p>This measure was finalized for inclusion in 2016 PQRS in the CY 2015 PFS Final Rule.</p>	American Academy of Neurology
N/A/428 ‡	N/A	Effective Clinical Care	<p>Pelvic Organ Prolapse: Preoperative Assessment of Occult Stress Urinary Incontinence: Percentage of patients undergoing appropriate preoperative evaluation for the indication of stress urinary incontinence per ACOG/AUGS/AUA guidelines.</p> <p>This measure was finalized for inclusion in 2016 PQRS in the CY 2015 PFS Final Rule.</p>	American Urogynecologic Society
N/A/429 ‡	N/A	Patient Safety	<p>Pelvic Organ Prolapse: Preoperative Screening for Uterine Malignancy: Percentage of patients who are screened for uterine malignancy prior to surgery for pelvic organ prolapse.</p> <p>This measure was finalized for inclusion in 2016 PQRS in the CY 2015 PFS Final Rule.</p>	American Urogynecologic Society
2063/422 ‡	N/A	Patient Safety	<p>Performing Cystoscopy at the Time of Hysterectomy for Pelvic Organ Prolapse to Detect Lower Urinary Tract Injury: Percentage of patients who undergo cystoscopy to evaluate for lower urinary tract injury at the time of hysterectomy for pelvic organ prolapse.</p> <p>This measure was finalized for inclusion in 2016 PQRS in the CY 2015 PFS Final Rule.</p>	American Urogynecologic Society
0465/423 ‡	N/A	Effective Clinical Care	<p>Perioperative Anti-platelet Therapy for Patients undergoing Carotid Endarterectomy: Percentage of patients undergoing carotid endarterectomy (CEA) who are taking an anti-platelet agent (aspirin or clopidogrel or equivalent such as aggrenox/tiglacor, etc.) within 48 hours prior to surgery and are prescribed this medication at hospital discharge following surgery.</p> <p>This measure was finalized for inclusion in 2016 PQRS in the CY 2015 PFS Final Rule.</p>	Society for Vascular Surgeons
2671/424 ‡	N/A	Patient Safety	<p>Perioperative Temperature Management: Percentage of patients, regardless of age, who undergo surgical or therapeutic procedures under general or neuraxial anesthesia of 60 minutes duration or longer for whom at least one body temperature greater than or equal to 35.5 degrees Celsius (or 95.9 degrees Fahrenheit) was recorded within the 30 minutes immediately before or the 15 minutes immediately after anesthesia end time.</p> <p>This measure was finalized for inclusion in 2016 PQRS in the CY 2015 PFS Final Rule.</p>	American Society of Anesthesiologists
N/A/425 ‡	N/A	Effective Clinical Care	<p>Photodocumentation of Cecal Intubation: The rate of screening and surveillance colonoscopies for which photodocumentation of landmarks of cecal intubation is performed to establish a complete examination.</p> <p>This measure was finalized for inclusion in 2016 PQRS in the CY 2015 PFS Final Rule.</p>	American College of Gastroenterology/ American Gastroenterologic Association/ American Society for Gastrointestinal Endoscopy

NQF/ PQRS	CMS E-Measure ID	National Quality Strategy Domain	Measure Title and Description ^Y	Measure Steward
N/A/426 ‡	N/A	Communication and Care Coordination	<p>Post-Anesthetic Transfer of Care Measure: Procedure Room to a Post Anesthesia Care Unit (PACU): Percentage of patients, regardless of age, who are under the care of an anesthesia practitioner and are admitted to a PACU in which a post-anesthetic formal transfer of care protocol or checklist which includes the key transfer of care elements is utilized.</p> <p>This measure was finalized for inclusion in 2016 PQRS in the CY 2015 PFS Final Rule.</p>	American Society of Anesthesiologists
N/A/427 ‡	N/A	Communication and Care Coordination	<p>Post-Anesthetic Transfer of Care: Use of Checklist or Protocol for Direct Transfer of Care from Procedure Room to Intensive Care Unit (ICU): Percentage of patients, regardless of age, who undergo a procedure under anesthesia and are admitted to an Intensive Care Unit (ICU) directly from the anesthetizing location, who have a documented use of a checklist or protocol for the transfer of care from the responsible anesthesia practitioner to the responsible ICU team or team member.</p> <p>This measure was finalized for inclusion in 2016 PQRS in the CY 2015 PFS Final Rule.</p>	American Society of Anesthesiologists
N/A/430 ‡	N/A	Patient Safety	<p>Prevention of Post-Operative Nausea and Vomiting (PONV) – Combination Therapy: Percentage of patients, aged 18 years and older, who undergo a procedure under an inhalational general anesthetic, AND who have three or more risk factors for post-operative nausea and vomiting (PONV), who receive combination therapy consisting of at least two prophylactic pharmacologic antiemetic agents of different classes preoperatively or intraoperatively.</p> <p>This measure was finalized for inclusion in 2016 PQRS in the CY 2015 PFS Final Rule.</p>	American Society of Anesthesiologists
2152/431 ‡	N/A	Community/ Population Health	<p>Preventive Care and Screening: Unhealthy Alcohol Use: Screening & Brief Counseling: Percentage of patients aged 18 years and older who were screened at least once within the last 24 months for unhealthy alcohol use using a systematic screening method AND who received brief counseling if identified as an unhealthy alcohol user.</p> <p>This measure was finalized for inclusion in 2016 PQRS in the CY 2015 PFS Final Rule.</p>	American Medical Association-Physician Consortium for Performance Improvement
N/A/432 ‡	N/A	Patient Safety	<p>Proportion of Patients Sustaining a Bladder Injury at the Time of any Pelvic Organ Prolapse Repair: Percentage of patients undergoing any surgery to repair pelvic organ prolapse who sustains an injury to the bladder recognized either during or within 1 month after surgery.</p> <p>This measure was finalized for inclusion in 2016 PQRS in the CY 2015 PFS Final Rule.</p>	American Urogynecologic Society
N/A/433 ‡	N/A	Patient Safety	<p>Proportion of Patients Sustaining a Major Viscus Injury at the Time of any Pelvic Organ Prolapse Repair: Percentage of patients undergoing surgical repair of pelvic organ prolapse that is complicated by perforation of a major viscus at the time of index surgery that is recognized intraoperative or within 1 month after surgery.</p> <p>This measure was finalized for inclusion in 2016 PQRS in the CY 2015 PFS Final Rule.</p>	American Urogynecologic Society
N/A/434 ‡	N/A	Patient Safety	<p>Proportion of Patients Sustaining A Ureter Injury at the Time of any Pelvic Organ Prolapse Repair: Percentage of patients undergoing a pelvic organ prolapse repair who sustain an injury to the ureter recognized either during or within 1 month after surgery.</p> <p>This measure was finalized for inclusion in 2016 PQRS in the CY 2015 PFS Final Rule.</p>	American Urogynecologic Society

NQF/ PQRS	CMS E-Measure ID	National Quality Strategy Domain	Measure Title and Description ^y	Measure Steward
N/A/410 ‡	N/A	Person and Caregiver-Centered Experience and Outcomes	<p>Psoriasis: Clinical Response to Oral Systemic or Biologic Medications: Percentage of psoriasis patients receiving oral systemic or biologic therapy who meet minimal physician- or patient-reported disease activity levels. It is implied that establishment and maintenance of an established minimum level of disease control as measured by physician- and/or patient-reported outcomes will increase patient satisfaction with and adherence to treatment.</p> <p>This measure was finalized for inclusion in 2016 PQRS in the CY 2015 PFS Final Rule.</p>	American Academy of Dermatology
N/A/435 ‡	N/A	Effective Clinical Care	<p>Quality Of Life Assessment For Patients With Primary Headache Disorders: Percentage of patients with a diagnosis of primary headache disorder whose health related quality of life (HRQoL) was assessed with a tool(s) during at least two visits during the 12 month measurement period AND whose health related quality of life score stayed the same or improved.</p> <p>This measure was finalized for inclusion in 2016 PQRS in the CY 2015 PFS Final Rule.</p>	American Academy of Neurology
N/A/436 ‡	N/A	Effective Clinical Care	<p>Radiation Consideration for Adult CT: Utilization of Dose Lowering Techniques: Percentage of final reports for patients aged 18 years and older undergoing CT with documentation that one or more of the following dose reduction techniques were used:</p> <ul style="list-style-type: none"> • Automated exposure control • Adjustment of the mA and/or kV according to patient size • Use of iterative reconstruction technique <p>This measure was finalized for inclusion in 2016 PQRS in the CY 2015 PFS Final Rule.</p>	American College of Radiology/ American Medical Association-Physician Consortium for Performance Improvement/ National Committee for Quality Assurance
1523/417 ‡	N/A	Patient Safety	<p>Rate of Open Repair of Abdominal Aortic Aneurysms (AAA) Where Patients Are Discharged Alive: Percentage of patients undergoing open repair of abdominal aortic aneurysms (AAA) who are discharged alive.</p> <p>This measure was finalized for inclusion in 2016 PQRS in the CY 2015 PFS Final Rule.</p>	Society for Vascular Surgeons
N/A/437 ‡	N/A	Patient Safety	<p>Rate of Surgical Conversion from Lower Extremity Endovascular Revascularization Procedure: Inpatients assigned to endovascular treatment for obstructive arterial disease, the percent of patients who undergo unplanned major amputation or surgical bypass within 48 hours of the index procedure.</p> <p>This measure was finalized for inclusion in 2016 PQRS in the CY 2015 PFS Final Rule.</p>	Society of Interventional Radiology
N/A/438 ‡	N/A	Effective Clinical Care	<p>Statin Therapy for the Prevention and Treatment of Cardiovascular Disease: Percentage of the following patients—all considered at high risk of cardiovascular events—who were prescribed or were on statin therapy during the measurement period:</p> <ul style="list-style-type: none"> • Adults aged ≥ 21 years who were previously diagnosed with or currently have an active diagnosis of clinical atherosclerotic cardiovascular disease (ASCVD); OR • Adults aged ≥ 21 years with a fasting or direct low-density lipoprotein cholesterol (LDL-C) level ≥ 190 mg/dL; OR • Adults aged 40-75 years with a diagnosis of diabetes with a fasting or direct LDL-C level of 70-189 mg/dL <p>This measure was finalized for inclusion in 2016 PQRS in the CY 2015 PFS Final Rule.</p>	Centers for Medicare & Medicaid Services/ Mathematica/Quality Insights of Pennsylvania

NQF/ PQRS	CMS E-Measure ID	National Quality Strategy Domain	Measure Title and Description [¥]	Measure Steward
N/A/420 ‡	N/A	Effective Clinical Care	<p>Varicose Vein Treatment with Saphenous Ablation: Outcome Survey: Percentage of patients treated for varicose veins (CEAP C2-S) who are treated with saphenous ablation (with or without adjunctive tributary treatment) that report an improvement on a disease specific patient reported outcome survey instrument after treatment.</p> <p>This measure was finalized for inclusion in 2016 PQRS in the CY 2015 PFS Final Rule.</p>	Society of Interventional Radiology

‡ This measure is new to the Physician Quality Reporting System and has been adopted for reporting beginning in CY 2016.

¥ Measure details including titles, descriptions and measure owner information may vary during a particular program year. This is due to the timing of measure specification preparation and the measure versions used by the various reporting options/methods. Please refer to the measure specifications that apply for each of the reporting options/methods for specific measure details. This column also contains summary of public comments and CMS’s responses, if applicable.