



Table of Cardiovascular Measures Under Review: Phase III

Measure Number	Title	Description	Measure Steward
0067	Chronic Stable Coronary Artery Disease: Antiplatelet Therapy	Percentage of patients aged 18 years and older with a diagnosis of coronary artery disease seen within a 12 month period who were prescribed aspirin or clopidogrel	American College of Cardiology
0068	Ischemic Vascular Disease (IVD): Use of Aspirin or Another Antiplatelet	The percentage of patients 18 years of age and older who were discharged from an inpatient setting with an acute myocardial infarction (AMI), coronary artery bypass graft (CABG) or percutaneous coronary intervention (PCI) during the 12 months prior to the measurement year, or who had a diagnosis of ischemic vascular disease (IVD) during the measurement year and the year prior to the measurement year and who had documentation of routine use of aspirin or another antiplatelet during the measurement year	National Committee for Quality Assurance
0070	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 a prior MI or a current or prior LVEF <40% who were prescribed beta-blocker therapy	American Medical Association - Physician Consortium for Performance Improvement
0071	Persistence of Beta-Blocker Treatment After a Heart Attack	The percentage of patients 18 years of age and older during the measurement year who were hospitalized and discharged from July 1 of the year prior to the measurement year to June 30 of the measurement year with a diagnosis of acute myocardial infarction (AMI) and who received persistent beta-blocker treatment for six months after discharge	National Committee for Quality Assurance
0079	Heart Failure: Left Ventricular Ejection Fraction Assessment (Outpatient Setting)	Percentage of patients aged 18 years and older with a diagnosis of heart failure for whom the quantitative or qualitative results of a recent or prior (any time in the past) LVEF assessment is documented within a 12 month period	American College of Cardiology

Measure Number	Title	Description	Measure Steward
0081	Heart Failure (HF): Angiotensin-Converting Enzyme (ACE) Inhibitor or Angiotensin Receptor Blocker (ARB) Therapy for Left Ventricular Systolic Dysfunction (LVSD)	Patients who were prescribed ACE inhibitor or ARB therapy either within a 12 month period when seen in the outpatient setting or at hospital discharge	American Medical Association - Physician Consortium for Performance Improvement
0083	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 with a current or prior LVEF < 40% who were prescribed beta-blocker therapy either within a 12 month period when seen in the outpatient setting or at hospital discharge	American Medical Association - Physician Consortium for Performance Improvement
0229	Hospital 30-day, all-cause, risk-standardized mortality rate (RSMR) following heart failure (HF) hospitalization for patients 18 and older	The measure estimates a hospital-level 30-day risk-standardized mortality rate (RSMR). Mortality is defined as death for any cause within 30 days after the date of admission for the index admission, for patients 18 and older discharged from the hospital with a principal diagnosis of heart failure (HF). CMS annually reports the measure for patients who are 65 years or older and are either Medicare fee-for-service (FFS) beneficiaries and hospitalized in non-federal hospitals or patients hospitalized in Veterans Health Administration (VA) facilities	Centers for Medicare & Medicaid Services (CMS)
0230	Hospital 30-day, all-cause, risk-standardized mortality rate (RSMR) following acute myocardial infarction (AMI) hospitalization for patients 18 and older	The measure estimates a hospital-level 30-day risk-standardized mortality rate (RSMR). Mortality is defined as death for any cause within 30 days after the date of admission for the index admission, for patients 18 and older discharged from the hospital with a principal diagnosis of acute myocardial infarction (AMI). CMS annually reports the measure for patients who are 65 years or older and are either Medicare fee-for-service (FFS) beneficiaries and hospitalized in non-federal hospitals or are hospitalized in Veterans Health Administration (VA) facilities	Centers for Medicare & Medicaid Services (CMS)
0669	Cardiac Imaging for Preoperative Risk Assessment for Non-Cardiac, Low Risk Surgery	This measure calculates the percentage of stress echocardiography, single photon emission computed tomography myocardial perfusion imaging (SPECT MPI), or stress magnetic resonance (MR) imaging studies performed at each facility in the 30 days prior to an ambulatory non-cardiac, low-risk surgery performed at any location. The measure is calculated based on a one-year window of Medicare claims data. The measure has been publicly reported, annually, by the Centers for Medicare & Medicaid Services (CMS), since 2011, as a component of its Hospital Outpatient Quality Reporting (HOQR) Program	Centers for Medicare & Medicaid Services (CMS)
0694	Hospital Risk-Standardized Complication Rate following Implantation of Implantable Cardioverter-Defibrillator (ICD)	This measure provides hospital specific risk-standardized rates of procedural complications following the implantation of an ICD in patients at least 65 years of age. The measure uses clinical data available in the National Cardiovascular Data Registry (NCDR) ICD Registry for risk adjustment linked with administrative claims data using indirect patient identifiers to identify procedural complications.	American College of Cardiology

Measure Number	Title	Description	Measure Steward
0704	Proportion of Patients Hospitalized with AMI that have a Potentially Avoidable Complication (during the Index Stay or in the 30-day Post-Discharge Period)	Percent of adult population aged 18 + years who are admitted to a hospital with acute myocardial infarction (AMI), are followed for one-month after discharge, and have one or more potentially avoidable complications (PACs)	Health Care Incentives Improvement Institute Inc. (HCI3)
0730	Acute Myocardial Infarction (AMI) Mortality Rate	In-hospital deaths per 1,000 hospital discharges with acute myocardial infarction (AMI) as a principal diagnosis for patients ages 18 years and older.	Agency for Healthcare Research and Quality
0965	Discharge Medications (ACE/ARB and beta blockers) in Eligible ICD Implant Patients	Proportion of patients undergoing ICD implant who received prescriptions for all medications (ACE/ARB and beta blockers) for which they are eligible for at discharge	American College of Cardiology
2396	Carotid artery stenting: Evaluation of Vital Status and NIH Stroke Scale at Follow Up	Proportion of patients with carotid artery stenting procedures who had follow up performed for evaluation of Vital Status and neurological assessment with an NIH Stroke Scale (by an examiner who is certified by the American Stroke Association) between 21 and 60 days after the procedure	American College of Cardiology
2712	Statin Use in Persons with Diabetes	The percentage of patients ages 40 – 75 years who were dispensed a medication for diabetes that receive a statin medication	Pharmacy Quality Alliance (PQA, Inc.)
2740	Proportion of Patients with coronary artery disease (CAD) that have a Potentially Avoidable Complication (during the episode time window)	Percent of adult population aged 18 + years who triggered an episode of coronary artery disease (CAD), are followed for at least one-year, and have one or more potentially avoidable complications (PACs)	Health Care Incentives Improvement Institute Inc. (HCI3)
2747	Proportion of Patients with Heart Failure (HF) that have a Potentially Avoidable Complication (during the episode time window)	Percent of adult population aged 18 + years who triggered an episode of heart failure (HF), are followed for at least one-year, and have one or more potentially avoidable complications (PACs)	Health Care Incentives Improvement Institute Inc. (HCI3)

Measure Number	Title	Description	Measure Steward
2748	Proportion of Patients with Hypertension (HTN) that have a Potentially Avoidable Complication (during the episode time window)	Percent of adult population aged 18 + years who triggered an episode of hypertension (HTN), are followed for at least one-year, and have one or more potentially avoidable complications (PACs)	Health Care Incentives Improvement Institute Inc. (HCI3)
2749	Proportion of Patients with Arrhythmias (ARR) that have a Potentially Avoidable Complication (during the episode time window)	Percent of adult population aged 18 + years who triggered an episode of arrhythmias (ARR), are followed for at least one-year, and have one or more potentially avoidable complications (PACs)	Health Care Incentives Improvement Institute Inc. (HCI3)
2751	Proportion of Patients undergoing an Angioplasty Procedure (Percutaneous Coronary Intervention - PCI) that have a Potentially Avoidable Complication (during the episode time window)	Percent of adult population aged 18 + years who had a percutaneous coronary intervention (PCI) procedure, are followed for at least 90-days, and have one or more potentially avoidable complications (PACs)	Health Care Incentives Improvement Institute Inc. (HCI3)
2752	Proportion of Patients undergoing Pacemaker / Defibrillator Implantation (PCMDFR) that have a Potentially Avoidable Complication (during the episode time window)	Percent of adult population aged 18 + years who had a pacemaker/defibrillator implantation (PCMDFR), are followed for at least 30-days, and have one or more potentially avoidable complications (PACs)	Health Care Incentives Improvement Institute Inc. (HCI3)
2763	Ischemic Vascular Disease Care: All or None Outcome Measure- Optimal Control	<p>The percentage of patients age 18 through 75 with one of the following conditions:</p> <ol style="list-style-type: none"> <li>1) Two diagnoses related visits with Coronary Artery Disease (CAD) or a CAD risk equivalent condition, or</li> <li>2) Acute Coronary Event consisting of an acute myocardial infarction (AMI), coronary artery bypass graft (CABG), or percutaneous coronary intervention (PCI) from a hospital visit, who had each of the following during the one year measurement year: <ul style="list-style-type: none"> <li>• Documentation in the medical record of daily Aspirin or daily other antiplatelet medication usage, unless contraindicated.</li> <li>• Most recent Blood pressure controlled to a level of less than 140/90 mm Hg</li> <li>• Most recent Tobacco Status is Tobacco-Free</li> <li>• Documentation in the medical record of Statin Use</li> <li>• All or None Outcome Measure (Optimal Control) composite of BP &lt;140/90, Tobacco Non-User, Daily Aspirin or Other Antiplatelet and Statin Use</li> </ul> </li> </ol>	Wisconsin Collaborative for Healthcare Quality

Measure Number	Title	Description	Measure Steward
2764	Fixed-dose Combination of Hydralazine and Isosorbide Dinitrate Therapy for Self-identified Black or African American Patients with Heart Failure and LVEF <40% on ACEI or ARB and Beta-blocker Therapy	Percentage of patients aged 18 years and older with a diagnosis of heart failure (HF) and a current or prior ejection fraction (EF) <40% who are self-identified Black or African Americans and receiving ACEI or ARB and Beta-blocker therapy who were prescribed a fixed-dose combination of hydralazine and isosorbide dinitrate seen for an office visit in the measurement period in the outpatient setting or at each hospital discharge	National Minority Quality Forum