

# NATIONAL QUALITY FORUM

## Care Coordination Project

### SAMPLE BALLOT

#### MEASURE-BY-MEASURE

**0097**

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\_\_\_\_\_  
\_\_\_\_\_

**Medication Reconciliation**

- I approve the measure currently specified
- I disapprove the measure currently specified
- I abstain from voting on this measure

**0171**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Acute care hospitalization (risk-adjusted)**

- I approve the measure currently specified
- I disapprove the measure currently specified
- I abstain from voting on this measure

**0173**

\_\_\_\_\_  
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\_\_\_\_\_

**Emergency Department Use without Hospitalization**

- I approve the measure currently specified
- I disapprove the measure currently specified
- I abstain from voting on this measure

**0326**

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\_\_\_\_\_  
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**Advance Care Plan**

- I approve the measure currently specified
- I disapprove the measure currently specified
- I abstain from voting on this measure

**1909**

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\_\_\_\_\_  
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**(0494) Medical Home System Survey (MHSS)**

- I approve the measure currently specified
- I disapprove the measure currently specified
- I abstain from voting on this measure

**0526**

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**Timely Initiation of Care**

- I approve the measure currently specified
- I disapprove the measure currently specified
- I abstain from voting on this measure

**0553**

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**Care for Older Adults – Medication Review**

- I approve the measure currently specified
- I disapprove the measure currently specified
- I abstain from voting on this measure

0554

**Medication Reconciliation Post-Discharge**

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\_\_\_\_\_  
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I approve the measure currently specified  
I disapprove the measure currently specified  
I abstain from voting on this measure

0646

**Reconciled Medication List Received by Discharged Patients (Discharges from an Inpatient Facility to Home/Self Care or Any Other Site of Care)**

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\_\_\_\_\_  
\_\_\_\_\_

I approve the measure currently specified  
I disapprove the measure currently specified  
I abstain from voting on this measure

0647

**Transition Record with Specified Elements Received by Discharged Patients (Discharges from an Inpatient Facility to Home/Self Care or Any Other Site of Care)**

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\_\_\_\_\_  
\_\_\_\_\_

I approve the measure currently specified  
I disapprove the measure currently specified  
I abstain from voting on this measure

0648

**Timely Transmission of Transition Record (Discharges from an Inpatient Facility to Home/Self Care or Any Other Site of Care)**

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\_\_\_\_\_  
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I approve the measure currently specified  
I disapprove the measure currently specified  
I abstain from voting on this measure

0649

**Transition Record with Specified Elements Received by Discharged Patients (Emergency Department Discharges to Ambulatory Care [Home/Self Care] or Home Health Care)**

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\_\_\_\_\_  
\_\_\_\_\_

I approve the measure currently specified  
I disapprove the measure currently specified  
I abstain from voting on this measure