

Infectious Disease Endorsement Maintenance 2012: NQF-Endorsed® Maintenance Standards

Updated on May 14, 2012

Measure Number	Title	Description	Measure Steward
0058	Avoidance of antibiotic treatment in adults with acute bronchitis	The percentage of adults 18–64 years of age with a diagnosis of acute bronchitis who were not dispensed an antibiotic prescription	National Committee for Quality Assurance (NCQA)
0069	Appropriate treatment for children with upper respiratory infection (URI)	Percentage of children who were given a diagnosis of URI and were not dispensed an antibiotic prescription on or three days after the episode date	National Committee for Quality Assurance (NCQA)
0298	Central line bundle compliance	Percentage of intensive care patients with central lines for whom all elements of the central line bundle are documented and in place. The central line bundle elements include: •Hand hygiene , •Maximal barrier precautions upon insertion •Chlorhexidine skin antisepsis •Optimal catheter site selection, with subclavian vein as the preferred site for non-tunneled catheters in patients 18 years and older •Daily review of line necessity with prompt removal of unnecessary lines	Institute for Healthcare Improvement
0302	Ventilator bundle	Percentage of intensive care unit patients on mechanical ventilation at time of survey for whom all four elements of the ventilator bundle are documented and in place. The ventilator bundle elements are: •Head of bed (HOB) elevation 30 degrees or greater (unless medically contraindicated); noted on 2 different shifts within a 24 hour period •Daily “sedation interruption” and daily assessment of readiness to extubate; process includes interrupting sedation until patient follow commands and patient is assessed for discontinuation of mechanical ventilation; Parameters of discontinuation include: resolution of reason for intubation; inspired oxygen content roughly 40%; assessment of patients ability to defend airway after extubation due to heavy sedation; minute ventilation less than equal to 15 liters/minute; and respiratory rate/tidal volume less than or equal to 105/min/L(RR/TV< 105) •SUD (peptic ulcer disease) prophylaxis •DVT (deep venous thrombosis) prophylaxis	Institute for Healthcare Improvement

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0393	Hepatitis C: Testing for chronic hepatitis C- Confirmation of hepatitis C viremia	Percentage of patients aged 18 years and older with a diagnosis of hepatitis C seen for an initial evaluation who had HCV RNA testing ordered or previously performed	American Medical Association – Physician Consortium for Performance Improvement (AMA-PCPI)
0394	Hepatitis C: Counseling regarding use of contraception prior to antiviral treatment	Percentage of female patients aged 18 to 44 years and all men aged 18 years and older with a diagnosis chronic hepatitis C who are receiving antiviral treatment who were counseled regarding contraception prior to the initiation of antiviral treatment	American Medical Association – Physician Consortium for Performance Improvement (AMA-PCPI)
0395	Hepatitis C RNA testing before initiating treatment *paired with 0396	Percentage of patients aged 18 years and older with a diagnosis of chronic hepatitis C who are receiving antiviral treatment for whom quantitative HCV RNA testing was performed within 6 months prior to initiation of antiviral treatment	American Medical Association – Physician Consortium for Performance Improvement (AMA-PCPI)
0396	HCV Genotype testing prior to treatment *paired with 0395	Percentage of patients aged 18 years and older with a diagnosis of chronic hepatitis C who are receiving antiviral treatment for whom HCV genotype testing was performed within 6 months prior to initiation of antiviral treatment	American Medical Association – Physician Consortium for Performance Improvement (AMA-PCPI)
0397	Hepatitis C: Prescribed antiviral therapy	Percentage of patients aged 18 years and older with a diagnosis of chronic hepatitis C who were prescribed peginterferon and ribavirin therapy within the 12 month reporting period	American Medical Association – Physician Consortium for Performance Improvement (AMA-PCPI)
0398	Hepatitis C: HCV RNA testing at week 12 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 HCV RNA testing was performed at 12 weeks from initiation of antiviral treatment	American Medical Association – Physician Consortium for Performance Improvement (AMA-PCPI)
0399	Hepatitis C: Hepatitis A vaccination *paired with 0400	Percentage of patients aged 18 years and older with a diagnosis of hepatitis C who have received hepatitis A vaccination, or who have documented immunity	American Medical Association – Physician Consortium for Performance Improvement (AMA-PCPI)
0400	Hepatitis C: Hepatitis B vaccination *paired with 0399	Percentage of patients aged 18 years and older with a diagnosis for hepatitis C who have received hepatitis B vaccination, or who have documented immunity	American Medical Association – Physician Consortium for Performance Improvement (AMA-PCPI)
0401	Hepatitis C: Counseling regarding risk of alcohol consumption	Percentage of patients aged 18 years and older with a diagnosis of hepatitis C who received counseling regarding the risk of alcohol consumption at least once within the 12 month reporting period	American Medical Association – Physician Consortium for Performance Improvement (AMA-PCPI)

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0403	HIV/AIDS: Medical visit	Percentage of patients, regardless of age, with a diagnosis of HIV/AIDS with at least one medical visit in each 6 month period with a minimum of 60 days between each visit	National Committee for Quality Assurance (NCQA)
0404	HIV/AIDS: CD4+ cell count or CD4+ percentage	Percentage of patients, regardless of age, with a diagnosis of HIV/AIDS with a CD4+ cell count or CD4+ cell percentage performed at least once every 6 months	National Committee for Quality Assurance (NCQA)
0405	HIV/AIDS: Pneumocystis jiroveci pneumonia (PCP) prophylaxis	Percentage of patients aged 1 month or older who were prescribed Pneumocystis jiroveci pneumonia (PCP) prophylaxis	National Committee for Quality Assurance (NCQA)
0406	HIV/AIDS: Adolescent and adult patients with HIV/AIDS who are prescribed potent antiretroviral therapy	Percentage of patients with a diagnosis of HIV/AIDS with at least two visits during the measurement year, with at least 60 days between each visit: aged 13 years and older who have a history of a nadir CD4+ count below 350/mm ³ ; aged 13 years and older who have a history of an AIDS-defining illness, regardless of CD4+ count; or who are pregnant, regardless of CD4+ count or age, who were prescribed potent antiretroviral therapy	National Committee for Quality Assurance (NCQA)
0407	HIV/AIDS: HIV RNA control after six months of potent antiretroviral therapy	Percentage of patients aged 13 years and older with a diagnosis of HIV/AIDS who had at least two medical visits during the measurement year, with at least 60 days between each visit, who are receiving potent antiretroviral therapy^{***}, who have a viral load below limits of quantification* after at least 6 months of potent antiretroviral therapy^{***} OR whose viral load is not below limits of quantification* after at least 6 months of potent antiretroviral therapy and has documentation of a plan of care^{**} *Using laboratory cutoff level for reference laboratory used by that clinic or provider **A plan of care may include: altering the therapy regimen, reaffirming to the patient the importance of high adherence to the regimen, or reassessment of viral load at a specified future date *** Potent antiretroviral therapy is described as any antiretroviral therapy that has demonstrated optimal efficacy and results in durable suppression of HIV as shown by prior clinical trials	National Committee for Quality Assurance (NCQA)
0408	HIV/AIDS: Tuberculosis (TB) screening	Percentage of patients aged 3 months and older with a diagnosis of HIV/AIDS for whom there was documentation that a tuberculosis (TB) screening test was performed and results interpreted at least once since the diagnosis of	National Committee for Quality Assurance (NCQA)

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		HIV infection	
0409	HIV/AIDS: Sexually transmitted disease-Chlamydia and gonorrhea screenings	Percentage of patients aged 13 years and older with a diagnosis of HIV/AIDS for whom chlamydia and gonorrhea screenings were performed at least once since the diagnosis of HIV infection	National Committee for Quality Assurance (NCQA)
0410	HIV/AIDS: Sexually transmitted diseases-Syphilis screening	Percentage of patients aged 13 years and older with a diagnosis of HIV/AIDS for whom syphilis screening was performed during the measurement year	National Committee for Quality Assurance (NCQA)
0411	HIV/AIDS: Other infectious diseases-Hepatitis B screening	Percentage of patients for whom Hepatitis B screening was performed at least once since the diagnosis of HIV infection or for whom there is documented immunity	National Committee for Quality Assurance (NCQA)
0412	HIV/AIDS: Hepatitis B vaccination	Percentage of patients, regardless of age, with a diagnosis of HIV/AIDS who have received at least one hepatitis B vaccination, or who have documented immunity	National Committee for Quality Assurance (NCQA)
0413	HIV/AIDS: Screening for high risk sexual behaviors	Percentage of patients, aged 13 years and older, who were screened for high risk sexual behaviors at least once within 12 months	National Committee for Quality Assurance (NCQA)
0414	HIV/AIDS: Other infectious diseases-Hepatitis C	Percentage of patients aged 13 years and older with a diagnosis of HIV/AIDS for whom Hepatitis screening was performed at least once since the diagnosis of HIV infection, or for whom there is documented immunity	National Committee for Quality Assurance (NCQA)
0415	HIV/AIDS: Screening for injection drug use	Percentage of patients, aged 13 years and older, who were screened for injection drug use at least once within 12 months	National Committee for Quality Assurance (NCQA)
0500	Severe sepsis and septic shock: Management bundle	Initial steps in the management of the patient presenting with infection (severe sepsis or septic shock)	Henry Ford Hospital
0568	Appropriate follow-up for patients with HIV	To ensure that all members diagnosed with HIV receive at least annual testing for CD4 and at least biannual HIV RNA levels to monitor for disease activity	Health Benchmarks-IMS Health
0584	Hepatitis C: Viral load test	This measure identifies the percentage of patients with Hepatitis C (HCV) who began HCV antiviral therapy during the measurement year and had HCV Viral Load testing prior to initiation of antiviral therapy	Resolution Health, Inc.