THE NATIONAL QUALITY FORUM

National Voluntary Consensus Standards for Patient Outcomes Table of Measures Submitted-Phase 1 As of October 23, 2009

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Measure Number	Title	Measure Description	IP owner/ Measure Steward - ALL RIGHTS RESERVED	Condition/Cross- Cutting
OT1-001-09	30-Day Post-Hospital AMI Discharge All- Cause Readmission Measure	This measure estimates the percentage of Medicare beneficiaries age 65 years and older discharged from the hospital with the diagnosis of AMI who are readmitted to the hospital for any reason within 30 days of the hospital discharge with the exception of admissions that may be related to the staging of cardiac procedures.	Centers for Medicare and Medicaid Services (CMS)	Acute Myocardial Infarction
OT1-002-09	30-Day Post-Hospital AMI Discharge ED Measures	This measure estimates the percentage of Medicare beneficiaries age 65 years and older discharged from the hospital with the diagnosis of AMI who had an Emergency Department (ED) visit within 30 days of the hospital discharge and prior to any hospital readmission.	Centers for Medicare and Medicaid Services (CMS)	Acute Myocardial Infarction
OT1-003-09	30-Day Post-Hospital AMI Discharge Evaluation and Management Service Measure	This measure estimates the percentage of Medicare beneficiaries age 65 years and older discharged from the hospital with the diagnosis of AMI and receiving an evaluation and management (E&M) service within 30 days of hospital discharge and prior to a hospital readmission or ED visit.	Centers for Medicare and Medicaid Services (CMS)	Acute Myocardial Infarction

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OT1-004-09	30-Day Post-Hospital HF Discharge Evaluation and Management Service	This measure estimates the percentage of Medicare beneficiaries age 65 years and older discharged from the hospital with the diagnosis of Heart Failure receiving an evaluation and management service within 30 days of the hospital discharge and prior to a hospital readmission or ED visit.	Centers for Medicare and Medicaid Services (CMS)	Congestive Heart Failure
OT1-005-09	30-Day Post-Hospital HF Discharge All- Cause Readmission Measure	This measure estimates the percentage of Medicare beneficiaries 65 years of age and older readmitted to the hospital within 30- days of a hospital discharge with a principal discharge diagnosis of Heart Failure.	Centers for Medicare and Medicaid Services (CMS)	Congestive Heart Failure
OT1-006-09	30-Day Post-Hospital HF Discharge ED Visit Rate	This measure estimates the percentage of Medicare beneficiaries (age 65 years and older) discharged from the hospital with a diagnosis of Heart Failure (HF) and evidence of an Emergency Department (ED) visit within 30-days of discharge and prior to a readmission.	Centers for Medicare and Medicaid Services (CMS)	Congestive Heart Failure
OT1-007-09	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 Medicare Fee for Service (FFS) 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 that has been linked with CMS administrative claims data used to identify procedural complications.	Centers for Medicare and Medicaid Services (CMS)	Congestive Heart Failure

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OT1-008-09	Hospital 30-Day Risk-Standardized Readmission Rates Following Percutaneous Coronary Intervention (PCI)	This measure estimates hospital risk- standardized 30-day readmission rates following PCI in Medicare Fee for Service (FFS) patients at least 65 years of age. As PCI patients may be readmitted electively for staged revascularization procedures, we will exclude such elective readmissions from the measure. The measure uses clinical data available in the National Cardiovascular Disease Registry (NCDR) CathPCI Registry for risk adjustment that has been linked with the CMS administrative claims data used to identify readmissions.	Centers for Medicare and Medicaid Services (CMS)	Ischemic Heart Disease
OT1-009-09	Optimal Diabetes Care © MN Community Measurement	The percentage of adult diabetes patients who have optimally managed modifiable risk factors (A1c, LDL, blood pressure, tobacco non-use and diary aspirin usage) with the intent of preventing or reducing future complications associated with poorly managed diabetes. Patients ages 18-75 with a diagnosis of diabetes, who meet all the numerator targets of this composite measure: A1c < 8.0, LDL < 100, Blood Pressure < 130/80, Tobacco non-user and for patients age 41+ daily aspirin use unless contraindicated.	© MN Community Measurement	Diabetes Mellitus
OT1-010-09	Acute Myocardial Infarction (AMI) Mortality Rate	Number of deaths per 100 discharges with a principal diagnosis code of acute myocardial infarction.	Agency for Healthcare Research and Quality	Acute Myocardial Infarction

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OT1-011-09	Postoperatice Stroke or Death in Asymptomatic Patients Undergoing Carotid Endarterectomy © Society for Vascular Surgery	Percentage of patients without carotid territory neurologic or retinal symptoms within the 12 months immediately preceding carotid endarterectomy (CEA) who experience stroke or death following surgery while in the hospital. This measure is proposed for both hospitals and individual surgeons.	© Society for Vascular Surgery	Stroke/TIAs
OT1-012-09	Coronary Artery Bypass Graft (CABG) Procedure and Postoperative Stroke during the Hospitalization or within 7 Days of Discharge © Ingenix	This measure identifies patients 20 years and older with a coronary artery bypass graft (CABG) procedure who had a postoperative stroke (CVA) during the hospitalization or within seven days of discharge.	© Ingenix	Ischemic Heart Disease

Measure Number	Title	Measure Description	IP owner/ Measure Steward - ALL RIGHTS RESERVED	Condition/Cross- Cutting
OT1-013-09	The STS CABG Composite Score © The Society of Thoracic Surgeons	This multidimensional performance measure is comprised of four domains consisting of 11 individual NQF-endorsed cardiac surgery metrics: (1) Operative Caruse of the internal mammary artery; (2) Perioperative Medical Care (use of preoperative beta blockade; discharge beta blockade, antiplatelet agents, and lipid-lowering agentsan "all-or-none" measure); (3) Risk-adjusted Operative Mortality; and (4) Risk-Adjusted Postoperative Morbidity (occurrence of postoperative stroke, renal failure, prolonged ventilation, re-exploration, or deep sternal wound infectionan "any-or-none" measure). All measures are based on audited clinical data collected in a prospective registry and are risk-adjusted (with the exception of internal mammary artery use and the four perioperative medications). Based on their percentage scores, a 1 (below average), 2 (average), 3 (above average) star rating is provided for each STS database participant for each performance domain and overall. Furthermore, the composite score is also deconstructed into its components to facilitate performance improvement activities by providers. This scoring methodology has now been implemented for over two years and has become for many stakeholders the preferred method of evaluating cardiac surgery performance. STS plans to make this report publicly available in the near future.	© The Society of Thoracic Surgeons	Ischemic Heart Disease
OT1-014-09	Risk Adjusted Surgical Site Infection Outcome Measure © American College of Surgeons	This hospital based, risk adjusted, case mix adjusted surgical site infection measure of adults 18 years of age and over.	© American College of Surgeons	Cross-Cutting

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OT1-015-09	Risk Adjusted Case Mix Adjusted Elderly Surgery Outcomes Measure © American College of Surgeons	This is a hospital based, risk adjusted, case mix adjusted elderly surgery composite (multiple) outcomes measure of adults 65 years of age and older.	© American College of Surgeons	Cross-Cutting
OT1-016-09	30-Day Post-Hospital AMI Discharge Care Transition Composite Measure	This measure scores a hospital on the incidence among its patients during the month following discharge from an inpatient stay having a primary diagnosis of AMI of three types of events: readmissions, ED visits and evaluation and management (E&M) services. These events are relatively common, measurable using readily available administrative data, and associated with effective coordination of care after discharge. The input for this score is the result of measures for each of these three events that are being submitted concurrently under the Patient Outcomes Measures project's call for measures. Each of those measures is a percentile ranking of a risk-adjusted, standardized rate. This composite measure is an average of these three component measures.	Centers for Medicare and Medicaid Services (CMS)	AMI
OT1-017-09	30-Day Post-Hospital HF Discharge Care Transition Composite Measure	This measure scores a hospital on the incidence among its patients during the month following discharge from an inpatient stay having a primary diagnosis of heart failure of three types of events: readmissions, ED visits and evaluation and management (E&M) services.	Centers for Medicare and Medicaid Services (CMS)	Congestive Heart Failure

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