

## Consensus Core Set: Cardiology

The Core Quality Measures Collaborative (CQMC) core measure sets (core sets) are intended for use in value-based payment (VBP) programs and may also be used to drive improvement in high-priority areas. The core sets can be used in their entirety to holistically assess quality or can serve as a starting point when selecting measures to meet specific goals. The CQMC core sets are developed and maintained using a multistakeholder, consensus-based process and established [measure selection principles](#). Measure specifications and details are linked in the *NQF Number* column, and additional considerations for use are included in the *Notes* section of the table below.

### Cardiology Measures

The CQMC core set measures focus on ambulatory care measures at the clinician-reporting level. The Cardiology core set contains 13 measures that have been tested for reliability and validity at the clinician (individual or group/practice) reporting level. The remaining core set measures address important topics related to cardiology, but they have not been tested at the clinician level of analysis. When using measures specified outside of the clinician level of analysis, core set users should ensure adequate measure denominator size based on their patient population.

NQF Number	Measure	Steward	Level of Analysis	Notes
-	<i>Acute Myocardial Infarction</i>	-	-	-
<a href="#">0505</a>	Hospital 30-Day All-Cause Risk-Standardized Readmission Rate (RSRR) Following Acute Myocardial Infarction (AMI) Hospitalization	Centers for Medicare & Medicaid Services (CMS)	Facility	Inpatient/Hospital
<a href="#">0230</a>	Hospital 30-Day, All-Cause, Risk Standardized Mortality Rate (RSMR) Following Acute Myocardial Infarction (AMI) Hospitalization for Patients 18 and Older	CMS	Facility	Inpatient/Hospital
<a href="#">2377</a>	Overall Defect-Free Care for AMI (Composite Measure)	American College of Cardiology (ACC)	Facility	Inpatient/Hospital

NQF Number	Measure	Steward	Level of Analysis	Notes
-	<i>Atrial Fibrillation</i>	-	-	-
<a href="#">1525</a>	Chronic Anticoagulation Therapy	American Heart Association (AHA)	Clinician	Outpatient No longer NQF-endorsed. Developer plans to maintain measure independently.
<a href="#">2474</a>	Cardiac Tamponade and/or Pericardiocentesis Following Atrial Fibrillation Ablation	ACC	Clinician, Facility	Outpatient, Inpatient/Hospital
-	<i>Heart Failure</i>	-	-	-
<a href="#">0229</a>	Hospital 30-Day, All-Cause, Risk Standardized Mortality Rate (RSMR) Following Heart Failure (HF) Hospitalization for Patients 18 and Older	CMS	Facility	Inpatient/Hospital
<a href="#">0081</a> / <a href="#">0081e</a>	Heart Failure (HF): Angiotensin Converting Enzyme (ACE) Inhibitor or Angiotensin Receptor Blocker (ARB) Therapy for Left Ventricular Systolic Dysfunction (LVSD)	ACC/AHA	Clinician	Outpatient, Inpatient/Hospital, Other eCQM available* Telehealth eligible for CMS programs in 2023
<a href="#">0083</a> / <a href="#">0083e</a>	Heart Failure (HF): Beta Blocker Therapy for Left Ventricular Systolic Dysfunction (LVSD)	ACC/AHA	Clinician	Outpatient, Inpatient/Hospital, Other eCQM available* Telehealth eligible for CMS programs in 2023
<a href="#">0330</a>	Hospital 30-Day, All-Cause, Risk Standardized Readmission Rate (RSRR) Following Heart Failure Hospitalization	CMS	Facility	Inpatient/Hospital
<a href="#">N/A</a>	Functional Status Assessments for Congestive Heart Failure (MIPS ID 377)	CMS	Clinician	Outpatient eCQM Telehealth eligible for CMS programs in 2023

NQF Number	Measure	Steward	Level of Analysis	Notes
-	<i>Hypertension</i>	-	-	-
<a href="#">0018</a>	Controlling High Blood Pressure	National Committee for Quality Assurance (NCQA)	Health Plan	Outpatient eCQM available* Telehealth eligible
-	<i>Implantable Cardiac Defibrillators</i>	-	-	-
<a href="#">0694</a>	Hospital Risk-Standardized Complication Rate Following Implantation of Implantable Cardioverter-Defibrillator (ICD)	ACC	Facility, Other	Outpatient, Inpatient/Hospital
-	<i>Ischemic Heart Disease/Coronary Artery Disease</i>	-	-	-
<a href="#">0066</a>	Chronic Stable Coronary Artery Disease: ACE Inhibitor or ARB Therapy—Diabetes or Left Ventricular Systolic Dysfunction (LVEF < 40%)	AHA	Clinician	Outpatient, Other
<a href="#">0067</a>	Coronary Artery Disease: Antiplatelet Therapy	AHA	Clinician	Outpatient, Other
<a href="#">0070</a> / <a href="#">0070e</a>	Coronary Artery Disease: Beta-Blocker Therapy—Prior Myocardial Infarction (MI) or Left Ventricular Systolic Dysfunction (LVEF < 40%)	ACC/AHA	Clinician	Outpatient, Other eCQM available* Telehealth eligible for CMS programs in 2023
<a href="#">2558</a>	Hospital 30-Day, All-Cause, Risk-Standardized Mortality Rate (RSMR) Following Coronary Artery Bypass Graft (CABG) Surgery	CMS	Facility	Inpatient/Hospital
<a href="#">0119</a>	Risk-Adjusted Operative Mortality for CABG	The Society of Thoracic Surgeons (STS)	Clinician, Facility	Inpatient/Hospital
<a href="#">2515</a>	Hospital 30-Day, All-Cause, Unplanned, Risk-Standardized Readmission Rate (RSRR) Following Coronary Artery Bypass Graft (CABG) Surgery	CMS	Facility	Inpatient/Hospital

NQF Number	Measure	Steward	Level of Analysis	Notes
<a href="#">2514</a>	Risk-Adjusted Coronary Artery Bypass Graft (CABG) Readmission Rate (30 Days)	STS	Facility	Inpatient/Hospital
<a href="#">N/A</a>	Ischemic Vascular Disease (IVD) All or None Outcome Measure (Optimal Control) (MIPS ID 441)	Wisconsin Collaborative for Healthcare Quality (WCHQ)	Clinician	Outpatient Telehealth eligible
-	<i>Percutaneous Coronary Intervention (including Angioplasty and Stents)</i>	-	-	-
<a href="#">0535</a>	30-Day All-Cause Risk Standardized Mortality Rate Following Percutaneous Coronary Intervention (PCI) for Patients Without ST Segment Elevation Myocardial Infarction (STEMI) and Without Cardiogenic Shock	ACC	Facility, Other	Inpatient/Hospital
<a href="#">0536</a>	30-Day All-Cause Risk-Standardized Mortality Rate Following Percutaneous Coronary Intervention (PCI) for Patients With ST Segment Elevation Myocardial Infarction (STEMI) or Cardiogenic Shock	ACC	Facility, Other	Inpatient/Hospital
<a href="#">3613e</a>	Appropriate Treatment for ST-Segment Elevation Myocardial Infarction (STEMI) Patients in the Emergency Department (ED)	CMS	Facility	Outpatient Services eCQM
<a href="#">0964</a>	Therapy With Aspirin, P2Y12 Inhibitor, and Statin at Discharge Following PCI in Eligible Patients	ACC	Facility	Inpatient/Hospital
<a href="#">2459</a>	In-hospital Risk-Adjusted Rate of Bleeding Events for Patients Undergoing PCI	ACC	Facility	Inpatient/Hospital
-	<i>Pediatric Heart Surgery</i>	-	-	-
<a href="#">0733</a>	Operative Mortality Stratified by the Five STS-EACTS Mortality Categories	STS	Clinician	Inpatient/Hospital

NQF Number	Measure	Steward	Level of Analysis	Notes
-	<i>Prevention</i>	-	-	-
<a href="#">0028 / 0028e</a>	Preventive Care & Screening: Tobacco Use: Screening & Cessation Intervention†	NCQA	Clinician	Outpatient, Other eCQM available* Telehealth eligible for CMS programs in 2023
<a href="#">N/A</a>	Statin Therapy for the Prevention and Treatment of Cardiovascular Disease (MIPS ID 438)	CMS	Clinician	Outpatient eCQM available* Telehealth eligible for CMS programs in 2023
-	<i>Transcatheter Aortic Valve Replacement</i>	-	-	-
<a href="#">3610</a>	30-Day Risk-Standardized Morbidity and Mortality Composite Following Transcatheter Aortic Valve Replacement (TAVR)	ACC	Facility	Inpatient/Hospital

\*Separate benchmarks should be used based on the reporting method.

† This measure is a cross-cutting measure that may be highly relevant across multiple core sets.

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## Gap Areas for Future Consideration and Measure Development

- Long-term cardiovascular care
- Patient transitions between facilities, specifically cardiac rehabilitation
- Patient-reported outcomes (PROs) and patient-reported outcome performance measures (PRO-PMs)
- Measures of disparities and social determinants of health

## Core Set Updates for 2022

*Updated notes related to telehealth eligibility for all measures*

NQF measures #0081/#0081e, #0083/#0083e, #0070/#0070e, #0028/#0028e, *Functional Status Assessments for Congestive Heart Failure*, and *Statin Therapy for the Prevention and Treatment of Cardiovascular Disease* remain telehealth eligible for CMS programs in 2023; the notes on these measures have been updated to reflect this continued eligibility.

*Added notes related to care setting for all measures*

The Workgroup recommended the addition of notes on care setting (inpatient versus outpatient) for all measures to help improve usability of the core set for end users, given the breadth of topics and size of the Cardiology core set.

*Added measure #3613e Appropriate Treatment for ST-Segment Elevation Myocardial Infarction (STEMI) Patients in the Emergency Department (ED)*

This electronic clinical quality measure (eCQM) calculates the proportion of ST-Segment Elevation Myocardial Infarction (STEMI) patients who received timely treatment (e.g., fibrinolysis, percutaneous coronary intervention [PCI], or transfer), limiting heart damage.

*Added measure #3610 30-Day Risk-Standardized Morbidity and Mortality Composite Following Transcatheter Aortic Valve Replacement (TAVR)*

This composite measure assesses risk-standardized site differences for five outcomes—death, stroke, major or life-threatening bleeding, acute kidney injury, and moderate or severe paravalvular aortic regurgitation—after transcatheter aortic valve replacement (TAVR). This measure is an important inclusion as TAVR becomes more common.

*Updated note related to #1525 Atrial Fibrillation and Atrial Flutter: Chronic Anticoagulation Therapy*

This measure is no longer endorsed by NQF because the developer was unable to submit the measure for maintenance due to a lack of testing data. The developer plans to maintain the measure independently and may resubmit this measure for endorsement in the future.

Additional details about the discussion and measures not selected for inclusion are available on the CQMC website's [CQMC Workgroup Meeting Summaries](#) page.