

Meaningful Use Stage 2 - Eligible Hospitals

CQ-IQ covers all CMS defined Meaningful Use Stage 2 clinical quality measures (objectives 170.314 (c)(1) and 170.314 (c)(2)) for Eligible Hospitals, that hospitals must report on to participate in Medicare and Medicaid EHR incentive programs.

Version Supported: Meaningful Use Stage 2 - Eligible Hospitals | All 29 measures

Updates in Stage 2: ~90% measures were upgraded from their previous versions, mostly with changes to calculation logic or valueset.

Reporting Period: Any 90 days within 1st Oct, 2013 - 30th Sept, 2014

Frequency of Submission: Once during the reporting period duration: 1st Jan, 2015 – 28th Feb, 2015

Markets Applicable: Hospitals, IDNs

| Source | Measure Title | Measure Description |
|----------------------------------|---|--|
| Care Coordination | | |
| NQF 0441 | Stroke-10 Ischemic or hemorrhagic stroke – Assessed for Rehabilitation | Ischemic / hemorrhagic stroke patients assessed for rehabilitation services. |
| NQF 0496 | ED-3 Median time from ED arrival to ED departure for discharged ED patients. | Median time from emergency department arrival to time of departure from the emergency room for patients discharged from the emergency department |
| Clinical Process / Effectiveness | | |
| NQF 0435 | Stroke-2 Ischemic stroke – Discharged on anti-thrombotic therapy | Ischemic stroke patients prescribed antithrombotic therapy at hospital discharge. |
| NQF 0436 | Stroke-3 Ischemic stroke – Anticoagulation Therapy for Atrial Fibrillation/Flutter | Ischemic stroke patients with atrial fibrillation/flutter who are prescribed anticoagulation therapy at hospital discharge. |
| NQF 0437 | Stroke-4 Ischemic stroke – Thrombolytic Therap | Acute ischemic stroke patients who arrive at this hospital within 2 hours (120 minutes) of time last known well and for whom IV t-PA was initiated at this hospital within 3 hours (180 minutes) of time last known well. |
| NQF 0438 | Stroke-5 Ischemic stroke – Antithrombotic therapy by end of hospital day two | Ischemic stroke patients administered antithrombotic therapy by the end of hospital day two. |
| NQF 0439 | Stroke-6 Ischemic stroke – Discharged on Statin Medication | Ischemic stroke patients with LDL greater than or equal to 100 mg/dL, or LDL not measured, or, who were on a lipid-lowering medication prior to hospital arrival are prescribed statin medication at hospital discharge. |
| NQF 0373 | VTE-3 VTE Patients with overlap of Anticoagulation Therapy | This measure assesses the number of patients diagnosed with confirmed VTE who received an overlap of parenteral (intravenous [IV] or subcutaneous [subcu]) anticoagulation and warfarin therapy. For patients who received less than five days of overlap therapy, they must be discharged on both medications. Overlap therapy must be administered for at least five days with an international normalized ratio (INR) = 2 prior to discontinuation of the parenteral anticoagulation therapy or the patient must be discharged on both medications. |
| NQF 0374 | VTE Patients Unfractionated Heparin (UFH) Dosages/Platelet Count Monitoring by Protocol (or Nomogram) Receiving UFH with Dosages/Platelet Count Monitored by Protocol (or Nomogram) | This measure assesses the number of patients diagnosed with confirmed VTE who received intravenous (IV) UFH therapy dosages AND had their platelet counts monitored using defined parameters such as a nomogram or protocol. |
| NQF 0142 | AMI-2-Aspirin Prescribed at Discharge for AMI | Percentage of acute myocardial infarction (AMI) patients without aspirin contraindications who are prescribed aspirin at hospital discharge. |
| NQF 0469 | Elective Delivery Prior 39 Weeks Gestation | Percentage of babies electively delivered prior to 39 weeks gestation |
| NQF 0164 | AMI-7a- Fibrinolytic Therapy received within 30 minutes of hospital arrival | Percentage of acute myocardial infarction (AMI) patients receiving fibrinolytic therapy during the hospital stay and having a time from hospital arrival to fibrinolysis of 30 minutes or less. |

| Source | Measure Title | Measure Description |
|---------------------------------------|---|--|
| NQF 0163 | AMI-8a- Primary Percutaneous Coronary Intervention (PCI) | Percentage of acute myocardial infarction (AMI) patients receiving percutaneous coronary intervention (PCI) during the hospital stay with a time from hospital arrival to PCI of 90 minutes or less. |
| NQF 0639 | AMI-10 Statin Prescribed at Discharge | Percent of acute myocardial infarction (AMI) patients 18 years of age or older who are prescribed a statin medication at hospital discharge |
| NQF 0480 | Exclusive Breastfeeding at Hospital Discharge | Exclusive Breastfeeding (BF) for the first 6 months of neonatal life has long been the expressed goal of WHO, DHHS, APA, and ACOG. ACOG has recently reiterated its position (ACOG 2007). A recent Cochrane review substantiates the benefits (Kramer, 2002). Much evidence has now focused on the prenatal and intrapartum period as critical for the success of exclusive (or any) BF (Shealy, 2005; Taveras, 2004; Petrova, 2007; CDC-MMWR, 2007). Exclusive Breastfeeding rate during birth hospital stay has been calculated by the California Department of Public Health for the last several years using newborn genetic disease testing data. HP2010 and the CDC have also been active in promoting this measure. Holding prenatal and intrapartum providers accountable is an important way to incent greater efforts during the critical prenatal and immediate postpartum periods where BF attitudes are solidified. |
| NQF 1354 | Hearing screening prior to hospital discharge (EHDI-1a) | This measure assesses the proportion of births that have been screened for hearing loss before hospital discharge |
| Efficient Use of Healthcare Resources | | |
| NQF 0147 | PN-6- Initial Antibiotic Selection for Community-Acquired Pneumonia (CAP) in Immunocompetent Patients | Percentage of pneumonia patients 18 years of age or older selected for initial receipts of antibiotics for community-acquired pneumonia (CAP). |
| NQF 0528 | SCIP-INF-2-Prophylactic Antibiotic Selection for Surgical Patients | Surgical patients who received prophylactic antibiotics consistent with current guidelines (specific to each type of surgical procedure). |
| Patient and Family Engagement | | |
| NQF 0440 | Stroke-8 Ischemic or hemorrhagic stroke – Stroke education | Ischemic or hemorrhagic stroke patients or their caregivers who were given educational materials during the hospital stay addressing all of the following: activation of emergency medical system, need for follow-up after discharge, medications prescribed at discharge, risk factors for stroke, and warning signs and symptoms of stroke. |
| NQF 0338 | Home Management Plan of Care Document Given to Patient/Caregiver | Documentation exists that the Home Management Plan of Care (HMPC) as a separate document, specific to the patient, was given to the patient/caregiver, prior to or upon discharge. |
| NQF 0495 | Emergency Department (ED)-1 ED Throughput – Median time from ED arrival to ED departure for admitted ED patients | Median time from emergency department arrival to time of departure from the emergency room for patients admitted to the facility from the emergency department. |
| NQF 0497 | ED-2 Emergency Department Throughput – admitted patients – Admit decision time to ED departure time for admitted patients | Median time from admit decision time to time of departure from the emergency department for emergency department patients admitted to inpatient status. |
| NQF 0375 | VTE-5 VTE discharge instructions | This measure assesses the number of patients diagnosed with confirmed VTE that are discharged to home, to home with home health, or home hospice on warfarin with written discharge instructions that address all four criteria: compliance issues, dietary advice, follow-up monitoring, and information about the potential for adverse drug reactions/interactions. |

| Source | Measure Title | Measure Description |
|----------------|--|--|
| Patient Safety | | |
| NQF 0371 | Venous Thromboembolism (VTE)-1 VTE prophylaxis | This measure assesses the number of patients who received VTE prophylaxis or have documentation why no VTE prophylaxis was given the day of or the day after hospital admission or surgery end date for surgeries that start the day of or the day after hospital admission. |
| NQF 0372 | VTE-2 Intensive Care Unit (ICU) VTE prophylaxis | This measure assesses the number of patients who received VTE prophylaxis or have documentation why no VTE prophylaxis was given the day of or the day after the initial admission (or transfer) to the Intensive Care Unit (ICU) or surgery end date for surgeries that start the day of or the day after ICU admission (or transfer). |
| NQF 0376 | VTE-6 Incidence of potentially preventable VTE | This measure assesses the number of patients diagnosed with confirmed VTE during hospitalization (not present on arrival) who did not receive VTE prophylaxis between hospital admission and the day before the VTE diagnostic testing order date. |
| NQF 0527 | SCIP-INF-1 Prophylactic Antibiotic Received within 1 Hour Prior to Surgical Incision | Surgical patients with prophylactic antibiotics initiated within one hour prior to surgical incision. Patients who received Vancomycin or a Fluoroquinolone for prophylactic antibiotics should have the antibiotics initiated within 2 hours prior to surgical incision. Due to the longer infusion time required for Vancomycin or a Fluoroquinolone, it is acceptable to start these antibiotics within 2 hours prior to incision time. |
| NQF 0453 | SCIP-INF-9- Urinary catheter removed on Postoperative Day 1 (POD1) or Postoperative Day 2 (POD2) with day of surgery being day zero. | Surgical patients with urinary catheter removed on Postoperative Day 1 or Postoperative Day 2 with day of surgery being day zero. |
| NQF 0716 | Healthy Term Newborn | Percent of term singleton livebirths (excluding those with diagnoses originating in the fetal period) who DO NOT have significant complications during birth or the nursery care. |