Massachusetts Statewide Quality Advisory Committee

Physician Group/Practice Measures

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Count	Measure/Tool Name	Set	NQF#	CHIA Data Source(s)	Data Reported by CHIA	Notes
1	Consumer assessment of healthcare providers and systems (CAHPS) - clinician & group survey	CAHPS	5		X	MHQP was CHIA data source for data prior to 2017
2	Child consumer assessment of healthcare providers and hospital systems (Child HCAHPS)	CAHPS	2548			Added to SQMS in 2018
3	Therapeutic monitoring: Annual monitoring for patients on persistent medications	HEDIS	2371		Х	MHQP was CHIA data source for data prior to 2017
4	Use of spirometry testing in the assessment and diagnosis of chronic obstructive pulmonary disease (COPD)	HEDIS	577			
5	Controlling high blood pressure	HEDIS	18**			MHQP was CHIA data source for data prior to 2017
6	Comprehensive diabetes care	HEDIS			Х	NQF endorsement dropped (formerly #731) MHQP was CHIA data source for data prior to 2017
7	Disease modifying anti-rheumatic drug therapy for rheumatoid arthritis	HEDIS	54			
8	Osteoporosis management in women who had a fracture	HEDIS	53			
9	Pharmacotherapy of chronic obstructive pulmonary disease (COPD) exacerbation	HEDIS	2856			
10	Medication management for people with asthma	HEDIS	1799			
11	Asthma medication ratio	HEDIS	1800		X	MHQP was CHIA data source for data prior to 2017
12	Potentially harmful drug-disease interactions in the elderly	HEDIS				
13	Avoidance of antibiotic treatment in adults with acute bronchitis	HEDIS	58		X	MHQP was CHIA data source for data prior to 2017
14	Use of imaging studies for low back pain	HEDIS	52		Х	MHQP was CHIA data source for data prior to 2017
15	Use of high-risk medications in the elderly	HEDIS	22			
16	Care for older adults - advance care planning, medication review, functional status assessment, & pain assessment	HEDIS	553			NQF endorsement refers only to medication review portion of this measure

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Count	Measure/Tool Name	Set	NQF#	CHIA Data Source(s)	Data Reported by CHIA	Notes
17	Persistence of beta-blocker treatment after a heart attack	HEDIS	71			
18	Medication reconciliation post-discharge	HEDIS	554			
19	Appropriate treatment for children with upper respiratory infection	HEDIS	69		X	MHQP was CHIA data source for data prior to 2017
20	Well-child visits in the third, fourth, fifth and sixth years of life	HEDIS	1516		X	MHQP was CHIA data source for data prior to 2017
21	Appropriate testing of children with pharyngitis	HEDIS			X	NQF endorsement dropped (formerly #2) MHQP was CHIA data source for data prior to 2017
22	Follow-up care for children prescribed ADHD medication	HEDIS	108		X	MHQP was CHIA data source for data prior to 2017
23	Adolescent well-care visits	HEDIS			X	MHQP was CHIA data source for data prior to 2017
24	Childhood immunization status	HEDIS	38			
25	Immunizations for adolescents	HEDIS	1407			
26	Lead screening in children	HEDIS				
27	Weight assessment and counseling for nutrition and physical activity for children/adolescents	HEDIS	24			
28	Children and adolescents' access to primary care practitioners	HEDIS				
29	Frequency of ongoing prenatal care	HEDIS	1391			
30	Prenatal and postpartum care	HEDIS	1517			
31	Well-child visits in the first 15 months of life	HEDIS	1392		Х	MHQP was CHIA data source for data prior to 2017
32	Breast cancer screening	HEDIS	2372		X	MHQP was CHIA data source for data prior to 2017
33	Colorectal cancer screening	HEDIS	34		Х	MHQP was CHIA data source for data prior to 2017

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Count	Measure/Tool Name	Set	NQF#	CHIA Data Source(s)	Data Reported by CHIA	Notes
34	Cervical cancer screening	HEDIS	32		X	MHQP was CHIA data source for data prior to 2017
35	Chlamydia screening in women	HEDIS	33		X	MHQP was CHIA data source for data prior to 2017
36	Adult BMI assessment	HEDIS				
37	Adults' access to preventive/ambulatory health services	HEDIS				
38	Initiation and engagement of alcohol and other drug dependence treatment	HEDIS	4			
39	Antidepressant medication management	HEDIS	105		X	MHQP was CHIA data source for data prior to 2017
40	Follow-up after hospitalization for mental illness	HEDIS	576			
41	Adherence to antipsychotics for individuals with schizophrenia	HEDIS	1879			
42	Diabetes screening for people with schizophrenia or bipolar disorder who are using antipsychotic medications	HEDIS	1932			
43	Diabetes monitoring for people with diabetes and schizophrenia	HEDIS	1934			
44	Cardiovascular monitoring for people with cardiovascular disease and schizophrenia	HEDIS	1933			
45	Non-recommended cervical cancer screening in adolescent females	HEDIS				
46	Non-recommended PSA-based screening in older men	HEDIS				
47	Use of multiple concurrent antipsychotics in children and adolescents	HEDIS				
48	Metabolic monitoring for children and adolescents on antipsychotics	HEDIS	2800			
49	Use of first-line psychosocial care for children and adolescents on antipsychotics	HEDIS	2801			
50	Follow-up after emergency department visit for mental illness	HEDIS	2605			

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Follow-up after emergency department visit for alcohol or other drug dependence Depression remission or response for adolescents and adults Statin therapy for patients with cardiovascular conditions Statin therapy for patients with diabetes	HEDIS HEDIS	2605			
Statin therapy for patients with cardiovascular conditions	HEDIS				
Statin therapy for patients with diabetes	HEDIC				
	HEDIS				
Asthma in younger adults admission rate (PQI 15)	PQI	283	CHIA Hospital Discharge Database	X	
Chronic obstructive pulmonary disease (COPD) or asthma in older adults admission rate (PQI 5)	PQI	275	CHIA Hospital Discharge Database	X	
Heart failure admission rate (PQI 8)	PQI	277	CHIA Hospital Discharge Database	X	
Diabetes short-term complications admission rate (PQI 1)	PQI	272	CHIA Hospital Discharge Database	X	
Low birth weight rate (PQI 9)	PQI	278	CHIA Hospital Discharge Database	X	
Screening for clinical depression and follow-up plan		418			
Preventive care & screening: Tobacco use: Screening and cessation intervention	AMA-PCPI	28			
Preventive care & screening: Unhealthy alcohol use: Screening & brief counseling	AMA-PCPI	2152			
Asthma emergency department visits					NQF endorsement removed (formerly #1381)
Depression utilization of the PHQ-9 tool	MN Community Management	712			
Maternal depression screening					NQF endorsement removed (formerly #1401)
Depression screening by 18 years of age					NQF endorsement removed (formerly #1515)
	Chronic obstructive pulmonary disease (COPD) or asthma in older adults admission rate (PQI 5) Heart failure admission rate (PQI 8) Diabetes short-term complications admission rate (PQI 1) Low birth weight rate (PQI 9) Screening for clinical depression and follow-up plan Preventive care & screening: Tobacco use: Screening and cessation intervention Preventive care & screening: Unhealthy alcohol use: Screening & brief counseling Asthma emergency department visits Depression utilization of the PHQ-9 tool Maternal depression screening	Chronic obstructive pulmonary disease (COPD) or asthma in older adults admission rate (PQI 5) Heart failure admission rate (PQI 8) PQI Diabetes short-term complications admission rate (PQI 1) Low birth weight rate (PQI 9) PQI Screening for clinical depression and follow-up plan Preventive care & screening: Tobacco use: Screening and cessation intervention AMA-PCPI Preventive care & screening: Unhealthy alcohol use: Screening & brief counseling AMA-PCPI Asthma emergency department visits Depression utilization of the PHQ-9 tool MN Community Management Maternal depression screening	Chronic obstructive pulmonary disease (COPD) or asthma in older adults admission rate (PQI 5) Heart failure admission rate (PQI 8) PQI 277 Diabetes short-term complications admission rate (PQI 1) PQI 272 Low birth weight rate (PQI 9) PQI 278 Screening for clinical depression and follow-up plan 418 Preventive care & screening: Tobacco use: Screening and cessation intervention AMA-PCPI 28 Preventive care & screening: Unhealthy alcohol use: Screening & brief counseling AMA-PCPI 2152 Asthma emergency department visits Depression utilization of the PHQ-9 tool MN Community Management Maternal depression screening	Chronic obstructive pulmonary disease (COPD) or asthma in older adults admission rate (PQI 5) PQI 275 CHIA Hospital Discharge Database Heart failure admission rate (PQI 8) PQI 277 CHIA Hospital Discharge Database Diabetes short-term complications admission rate (PQI 1) PQI 272 CHIA Hospital Discharge Database Low birth weight rate (PQI 9) PQI 278 CHIA Hospital Discharge Database Screening for clinical depression and follow-up plan 418 Preventive care & screening: Tobacco use: Screening and cessation intervention AMA-PCPI 28 Preventive care & screening: Unhealthy alcohol use: Screening & brief counseling AMA-PCPI 2152 Asthma emergency department visits Depression utilization of the PHQ-9 tool MN Community Management MN Community Management 712	Chronic obstructive pulmonary disease (COPD) or asthma in older adults admission rate (PQI 5) PQI 275 CHIA Hospital Discharge Database X Heart failure admission rate (PQI 8) PQI 277 CHIA Hospital Discharge Database X Diabetes short-term complications admission rate (PQI 1) PQI 272 CHIA Hospital Discharge Database X Low birth weight rate (PQI 9) PQI 278 CHIA Hospital Discharge Database X Screening for clinical depression and follow-up plan 418 Preventive care & screening: Tobacco use: Screening and cessation intervention AMA-PCPI 28 Preventive care & screening: Unhealthy alcohol use: Screening & brief counseling AMA-PCPI 2152 Asthma emergency department visits Depression utilization of the PHQ-9 tool MN Community Management 712 Maternal depression screening

Hospital Measures

2018 Standard Quality Measure SetMassachusetts Statewide Quality Advisory Committee

Count	Measure/Tool Name	Set	NQF#	CHIA Data Source(s)	Data Reported by CHIA	Notes
67	VTE Warfarin therapy discharge instructions (VTE-5)	VTE		CMS/Hospital Compare	Х	NQF endorsement removed (formerly #375)
68	Hospital acquired potentially-preventable VTE (VTE-6)	VTE		CMS/Hospital Compare	X	NQF endorsement removed (formerly #376)
69	Severe sepsis & septic shock: Management bundle (SEP-1)	SEP	500	CMS/Hospital Compare		
70	Influenza immunization (IMM 2)	IMM	1659	CMS/Hospital Compare	X	
71	Relievers for inpatient asthma (CAC 1)	CAC		CMS/Hospital Compare	X	NQF endorsement removed (formerly #143)
72	Systemic corticosteroids for inpatient asthma (CAC 2)	CAC		CMS/Hospital Compare	X	NQF endorsement removed (formerly #144)
73	Median time to transfer to another facility for acute coronary intervention (OP 3)	OP	290	CMS/Hospital Compare		Added to SQMS in 2018
74	Aspirin at arrival (OP 4)	OP		CMS/Hospital Compare		Added to SQMS in 2018 NQF endorsement removed (formerly #286)
75	Thorax CT - use of contrast material (OP 11)	OP	513	CMS/Hospital Compare		Added to SQMS in 2018
76	Cardiac imaging for perioperative risk assessment for non-cardiac, low risk surgery (OP 13)	OP	669	CMS/Hospital Compare		Added to SQMS in 2018
77	Hospital-wide all-cause unplanned readmission measure (HWR)	Yale/CMS	1789	CHIA Hospital Discharge Database	X	
78	Pediatric all-condition readmission measure		2393	CHIA Hospital Discharge Database		Added to SQMS in 2018
79	Timely transmission of transition record (CCM 3)	AMA-PCPI	648			
80	Hospital consumer assessment of healthcare providers and systems (HCAHPS)	CAHPS	166/228	CMS/Hospital Compare	X	
81	Computerized physician order entry standards			Leapfrog	X	
82	Pressure ulcer rate (PSI 3)	PSI		CHIA Hospital Discharge Database	Х	
83	latrogenic pneumothorax rate (PSI 6)	PSI	346	CHIA Hospital Discharge Database	X	

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Count	Measure/Tool Name	Set	NQF#	CHIA Data Source(s)	Data Reported by CHIA	Notes
84	Central venous catheter-related blood stream infection rate (PSI 7)	PSI		CHIA Hospital Discharge Database	X	
85	Post-operative respiratory failure rate (PSI 11)	PSI	533	CHIA Hospital Discharge Database	X	
86	Perioperative pulmonary embolism or deep vein thrombosis (PE/DVT) rate (PSI 12)	PSI	450	CHIA Hospital Discharge Database	X	
87	Unrecognized abdominopelvic accidental puncture or laceration rate (PSI 15)	PSI	345	CHIA Hospital Discharge Database	X	
88	Post-operative hip fracture rate (PSI 8)	PSI		CHIA Hospital Discharge Database	X	
89	Birth trauma rate: Injury to neonates (PSI 17)	PSI		CHIA Hospital Discharge Database	X	
90	Obstetric trauma: Vaginal delivery with instrument (PSI 18)	PSI		CHIA Hospital Discharge Database	X	
91	Obstetric trauma: Vaginal delivery without instrument (PSI 19)	PSI		CHIA Hospital Discharge Database	X	
92	Acute stroke mortality rate (IQI 17)	IQI	467	CHIA Hospital Discharge Database		Added to SQMS in 2018
93	Hours of physical constraint (HBIPS 2)	HBIPS	640	CMS/Hospital Compare		Added to SQMS in 2018
94	Hours of seclusion use (HBIPS 3)	HBIPS	641	CMS/Hospital Compare		Added to SQMS in 2018
95	Patients discharged on multiple antipsychotic medications with appropriate justification (HBIPS 5)	HBIPS	560	CMS/Hospital Compare		
96	Post-discharge continuing care plan transmitted to next level of care provider upon discharge (HBIPS 7)	HBIPS		CMS Hospital Compare	X	NQF endorsement removed (formerly #558)
97	Post-discharge continuing care plan created (HBIPS 6)	HBIPS		CMS Hospital Compare	X	NQF endorsement removed (formerly #557)
98	Elective deliveries (PC-01)	PC	469	Leapfrog	X	
99	Cesarean section (PC-02)	PC	471	Leapfrog	X	
100	Antenatal steroids (for high risk newborn deliveries) (PC-03)	PC	476	Leapfrog	X	

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Count	Measure/Tool Name	Set	NQF#	CHIA Data Source(s)	Data Reported by CHIA	Notes
101	Health care-associated bloodstream infections in newborns (PC-04)	PC	1731			
102	Exclusive breast milk feeding (PC-05)	PC	480			
103	Newborn bilirubin screening			Leapfrog	X	
104	DVT prophylaxis in women undergoing cesarean section		473	Leapfrog	X	
105	Incidence of episiotomy		470	Leapfrog	X	
106	Aortic valve replacement			Leapfrog	X	
107	Survival predictor for pancreatic resection surgery			Leapfrog	X	NQF endorsement removed (formerly #738)
108	Patient safety composite (PSI 90)	PSI	531	CHIA Hospital Discharge Database	X	
109	Pneumonia 30-day mortality rate (risk-adjusted)		468	CMS/Hospital Compare	X	
110	Heart failure 30-day mortality rate for patients 18 and older (risk-adjusted)		229	CMS/Hospital Compare	X	
111	AMI 30-day mortality rate (risk-adjusted)		230	CMS/Hospital Compare	X	
112	National Healthcare Safety Network (NHSN) hospital-onset methicillin resistant staphylococcus bacteremia aureus (MRSA)		1716	CMS/Hospital Compare	X	
113	National Healthcare Safety Network (NHSN) central-line associated bloodstream infection		139	CMS/Hospital Compare	X	
114	National Healthcare Safety Network (NHSN) hospital-onset <i>C. difficile</i>		1717	CMS/Hospital Compare	X	
115	National Healthcare Safety Network (NHSN) catheter-associated urinary tract infections		138	CMS/Hospital Compare	X	
116	American College of Surgeons – Centers for Disease Control and Prevention (ACS-CDC) harmonized prodcedure specific surgical site (SSI) outcome measure	CDC	753	CMS/Hospital Compare	X	
117	Influenza vaccination coverage among healthcare personnel	CDC	431	CMS/Hospital Compare		Added to SQMS in 2018

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Count	Measure/Tool Name	Set	NQF#	CHIA Data Source(s)	Data Reported by CHIA	Notes
118	30-day all-cause risk-standardized readmission rate following AMI hospitalization		505	CMS/Hospital Compare	X	
119	30-day all-cause risk-standardized readmission rate following heart failure (HF) hospitalization		330	CMS/Hospital Compare	X	
120	30-day all-cause risk-standardized readmission rate following pneumonia hospitalization		506	CMS/Hospital Compare	X	
121	30-day all-cause risk-standardized readmission rate following acute ischemic stroke hospitalization			CMS/Hospital Compare	X	
122	30-day all-cause risk-standardized readmission rate following CABG surgery		2515	CMS/Hospital Compare	X	
123	30-Day all-cause risk-standardized readmission rate following COPD hospitalization		1891	CMS/Hospital Compare	X	
124	30-day all-cause risk-standardized readmission rate (RSRR) following elective primary THA and/or TKA		1551	CMS/Hospital Compare	X	

Post-Acute Measures

Count	Measure/Tool Name	Set	NQF#	CHIA Data Source(s)	Data Already Reported by CHIA	Notes
125	Acute care hospitalization (risk-adjusted)	OASIS	171	CMS/Home Health Compare	X	
126	Emergency department use without hospitalization (risk-adjusted)	OASIS	173	CMS/Home Health Compare	X	
127	Timely initiation of care	OASIS	526	CMS/ Home Health Compare	X	
128	Percent of residents with pressure ulcers that are new or worsened (short-stay) (risk-adjusted)	CMS- Minimum Data Set (MDS)	678	CMS/Nursing Home Compare	X	
129	Percent of high risk residents with pressure ulcers (long stay) (risk-adjusted)	CMS- Minimum Data Set (MDS)	679	CMS/Nursing Home Compare	X	
130	Percent of residents who self-report moderate to severe pain (short-stay)	CMS- Minimum Data Set (MDS)	676	CMS/Nursing Home Compare	X	
131	Percent of residents who self-report moderate to severe pain (long-stay) (risk-adjusted)	CMS- Minimum Data Set (MDS)	677	CMS/Nursing Home Compare	X	
132	Proportion admitted to hospice for less than 3 days		216			

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Count	Measure/Tool Name	Set	NQF#	CHIA Data Source(s)	Data Reported by CHIA	Notes
133	advance care plan	AMA- PCPI/NCQA	326			
134	Palliative and end of life care: Dyspnea screening & management					
135	Hospice and palliative care – pain screening*	HIS	1634	CMS/ Hospice Compare		
136	Hospice and palliative care – pain assessment*	HIS	1637	CMS/ Hospice Compare		
137	Hospice and palliative care – Dyspnea screening*	HIS	1639	CMS/ Hospice Compare		
138	Hospice and palliative care – Dyspnea treatment*	HIS	1638	CMS/ Hospice Compare		
139	Hospice and palliative care – beliefs/values addressed*	HIS	1647	CMS/ Hospice Compare		
140	Hospice and palliative care – treatment preferences*	HIS	1641	CMS/ Hospice Compare		

Measure Sets

HEDIS Healthcare Effectiveness Data and Information Set

PQI Prevention Quality Indicators
IQI Inpatient Quality Indicators

HF Heart Failure

PSI Patient Safety Indicators
CAC Children's Asthma Care
AMI Acute Myocardial Infarction
SCIP Surgical Care Improvement Project

CAHPS The Consumer Assessment of Healthcare Providers and Systems

OASIS Outcome and Assessment Information Set

 $AMA\text{-}PCPI \quad AMA's \ Physician \ Consortium \ for \ Performance \ Improvement$

HBIPS Hospital-based Inpatient Psychiatric Services

HIS Hospice Item Set PC Perinatal Care

^{*}May apply to care delivered in acute and non-acute settings

^{**}SQMS measure refers to current HEDIS specs, which are under review for NQF 18 but do not currently align