Massachusetts Statewide Quality Advisory Committee

Physician Group/Practice Measures Data Reported Measure/Tool Name NQF# CHIA Data Source(s) Count Set Notes by CHIA 1 Consumer assessment of healthcare providers and systems (CAHPS) - clinician & group survey CAHPS 5 MHQP Χ 2 Therapeutic monitoring: Annual monitoring for patients on persistent medications HEDIS 2371 MHQP Χ 3 Use of spirometry testing in the assessment and diagnosis of chronic obstructive pulmonary disease (COPD) HEDIS 577 4 Controlling high blood pressure HEDIS 18 MHQP NQF endorsement dropped 5 Comprehensive diabetes care HEDIS MHQP Χ (formerly #731) 6 Disease modifying anti-rheumatic drug therapy for rheumatoid arthritis HEDIS 54 7 Osteoporosis management in women who had a fracture HEDIS 53 8 Pharmacotherapy of chronic obstructive pulmonary disease (COPD) exacerbation HEDIS 2856 9 Medication management for people with asthma HEDIS 1799 10 Asthma medication ratio HEDIS 1800 MHQP X 11 Potentially harmful drug-disease interactions in the elderly HEDIS HEDIS X 12 Avoidance of antibiotic treatment in adults with acute bronchitis 58 MHQP 13 Use of imaging studies for low back pain HEDIS 52 MHQP Χ 14 Use of high-risk medications in the elderly HEDIS 22 HEDIS 15 Care for older adults - medication review 553 16 Persistence of beta-blocker treatment after a heart attack HEDIS 71 17 Medication reconciliation post-discharge HEDIS 554 18 Appropriate treatment for children with upper respiratory infection HEDIS 69 MHQP Χ

Count	Measure/Tool Name	Set	NQF#	CHIA Data Source(s)	Data Reported by CHIA	Notes
19	Well-child visits in the third, fourth, fifth and sixth years of life	HEDIS	1516	МНQР	х	
20	Appropriate testing of children with pharyngitis	HEDIS		МНQР	X	NQF endorsement dropped (formerly #2)
21	Follow-up care for children prescribed ADHD medication	HEDIS	108	МНQР	X	
22	Adolescent well-care visits	HEDIS		МНQР	X	
23	Childhood immunization status	HEDIS	38			
24	Immunizations for adolescents	HEDIS	1407			
25	Lead screening in children	HEDIS				
26	Weight assessment and counseling for nutrition and physical activity for children/adolescents	HEDIS	24			
27	Children and adolescents' access to primary care practitioners	HEDIS				
28	Frequency of ongoing prenatal care	HEDIS	1391			
29	Prenatal and postpartum care	HEDIS	1517			
30	Well-child visits in the first 15 months of life	HEDIS	1392	МНQР	X	
31	Breast cancer screening	HEDIS	2372	МНQР	X	
32	Colorectal cancer screening	HEDIS	34	МНQР	X	
33	Cervical cancer screening	HEDIS	32	МНQР	X	
34	Chlamydia screening in women	HEDIS	33	МНQР	X	
35	Adult BMI assessment	HEDIS				
36	Adults' access to preventive/ambulatory health services	HEDIS				
37	Initiation and engagement of alcohol and other drug dependence treatment	HEDIS	4			_

Count	Measure/Tool Name	Set	NQF#	CHIA Data Source(s)	Data Reported by CHIA	Notes
38	Antidepressant medication management	HEDIS	105	МНQР	X	
39	Follow-up after hospitalization for mental illness	HEDIS	576			
40	Adherence to antipsychotics for individuals with schizophrenia	HEDIS	1879			
41	Diabetes screening for people with schizophrenia or bipolar disorder who are using antipsychotic medications	HEDIS	1932			
42	Diabetes monitoring for people with diabetes and schizophrenia	HEDIS	1934			
43	Cardiovascular monitoring for people with cardiovascular disease and schizophrenia	HEDIS	1933			
44	Non-recommended cervical cancer screening in adolescent females	HEDIS				
45	Non-recommended PSA-based screening in older men	HEDIS				
46	Use of multiple concurrent antipsychotics in children and adolescents	HEDIS				
47	Metabolic monitoring for children and adolescents on antipsychotics	HEDIS	2800			
48	Use of first-line psychosocial care for children and adolescents on antipsychotics	HEDIS	2801			
49	Follow-up after emergency department visit for mental illness	HEDIS	2605			Added to SQMS 2017
50	Follow-up after emergency department visit for alcohol or other drug dependence	HEDIS	2605			Added to SQMS 2017
51	Depression remission or response for adolescents and adults	HEDIS				Added to SQMS 2017
52	Statin therapy for patients with cardiovascular conditions	HEDIS				Added to SQMS 2017
53	Statin therapy for patients with diabetes	HEDIS				Added to SQMS 2017
54	Asthma in younger adults admission rate (PQI 15)	PQI	283	CHIA Hospital Discharge Database	X	
55	Chronic obstructive pulmonary disease (COPD) or asthma in older adults admission rate (PQI 5)	PQI	275	CHIA Hospital Discharge Database	X	
56	Heart failure admission rate (PQI 8)	PQI	277	CHIA Hospital Discharge Database	X	

Count	Measure/Tool Name	Set	NQF#	CHIA Data Source(s)	Data Reported by CHIA	Notes	
57	Diabetes short-term complications admission rate (PQI 1)	PQI	272	CHIA Hospital Discharge Database	Х		
58	Low birth weight rate (PQI 9)	PQI	278	CHIA Hospital Discharge Database	X		
59	Screening for clinical depression and follow-up plan		418				
60	Preventive care & screening: Tobacco use: Screening and cessation intervention	AMA-PCPI	28				
61	Preventive care & screening: Unhealthy alcohol use: Screening & brief counseling	AMA-PCPI	2152				
62	Asthma emergency department visits					NQF endorsement removed (formerly #1381)	
63	Depression utilization of the PHQ-9 tool	MN Community Management	712				
64	Maternal depression screening					NQF endorsement removed (formerly #1401)	
65	Depression screening by 18 years of age					NQF endorsement removed (formerly #1515)	
	Hospital Measures						
66	VTE prophylaxis (STK-1)	STK	434	CMS/Hospital Compare	Х		
67	Thrombolytic therapy (STK-4)	STK	437	CMS/Hospital Compare			
68	Discharged on statin (STK-6)	STK	439	CMS/Hospital Compare	X		
69	Stroke education (STK-8)	STK		CMS/Hospital Compare	Х		
70	VTE prophylaxis (VTE-1)	VTE	371	CMS/Hospital Compare	Х		
71	ICU VTE prophylaxis (VTE-2)	VTE	372	CMS/Hospital Compare	Х		
72	VTE patients w/anticoagulation (VTE-3)	VTE	373	CMS/Hospital Compare	Х		
73	VTE Warfarin therapy discharge instructions (VTE-5)	VTE		CMS/Hospital Compare	Х	NQF endorsement removed (formerly #375)	
74	Hospital acquired potentially-preventable VTE (VTE-6)	VTE		CMS/Hospital Compare	Х	NQF endorsement removed (formerly #376)	

Count	Measure/Tool Name	Set	NQF#	CHIA Data Source(s)	Data Reported by CHIA	Notes
75	Severe sepsis & septic shock: Management bundle (SEP-1)	SEP	500	CMS/Hospital Compare		
76	Influenza immunization (IMM 2)	IMM	1659	CMS/Hospital Compare	X	
77	Relievers for inpatient asthma (CAC 1)	CAC		CMS/Hospital Compare	X	NQF endorsement removed (formerly #143)
78	Systemic corticosteroids for inpatient asthma (CAC 2)	CAC		CMS/Hospital Compare	Х	NQF endorsement removed (formerly #144)
79	Hospital-wide all-cause unplanned readmission measure (HWR)	Yale/CMS	1789	CHIA Hospital Discharge Database	Х	
80	Timely transmission of transition record (CCM 3)	AMA-PCPI	648			
81	Fibrinolytic therapy received within 30 minutes of hospital arrival (AMI 7a)	AMI		CMS/Hospital Compare	Х	NQF endorsement removed (formerly #164)
82	Hospital consumer assessment of healthcare providers and systems (HCAHPS)	CAHPS	166/228	CMS/Hospital Compare	X	
83	Computerized physician order entry standards			Leapfrog	X	
84	Pressure ulcer rate (PSI 3)	PSI		CHIA Hospital Discharge Database	X	
85	latrogenic pneumothorax rate (PSI 6)	PSI	346	CHIA Hospital Discharge Database	X	
86	Central venous catheter-related blood stream infection rate (PSI 7)	PSI		CHIA Hospital Discharge Database	X	
87	Post-operative respiratory failure rate (PSI 11)	PSI	533	CHIA Hospital Discharge Database	X	
88	Perioperative pulmonary embolism or deep vein thrombosis (PE/DVT) rate (PSI 12)	PSI	450	CHIA Hospital Discharge Database	X	
89	Unrecognized abdominopelvic accidental puncture or laceration rate (PSI 15)	PSI	345	CHIA Hospital Discharge Database	X	
90	Post-operative hip fracture rate (PSI 8)	PSI		CHIA Hospital Discharge Database	Х	
91	Birth trauma rate: Injury to neonates (PSI 17)	PSI		CHIA Hospital Discharge Database	Х	
92	Obstetric trauma: Vaginal delivery with instrument (PSI 18)	PSI		CHIA Hospital Discharge Database	Х	
93	Obstetric trauma: Vaginal delivery without instrument (PSI 19)	PSI		CHIA Hospital Discharge Database	Х	

Count	Measure/Tool Name	Set	NQF #	CHIA Data Source(s)	Data Reported by CHIA	Notes
94	Patients discharged on multiple antipsychotic medications with appropriate justification (HBIPS 5)	HBIPS	560	CMS/Hospital Compare		Added to SQMS 2017
95	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)
96	Post-discharge continuing care plan created (HBIPS 6)	HBIPS		CMS Hospital Compare	X	NQF endorsement removed (formerly #557)
97	Elective deliveries (PC-01)	PC	469	Leapfrog	X	
98	Cesarean section (PC-02)	PC	471	Leapfrog	X	
99	Antenatal steroids (for high risk newborn deliveries) (PC-03)	PC	476	Leapfrog	X	
100	Health care-associated bloodstream infections in newborns (PC-04)	PC	1731			
101	Exclusive breast milk feeding (PC-05)	PC	480			
102	Newborn bilirubin screening			Leapfrog	X	
103	DVT prophylaxis in women undergoing cesarean section		473	Leapfrog	X	
104	Incidence of episiotomy		470	Leapfrog	X	
105	Aortic valve replacement			Leapfrog	X	
106	Survival predictor for pancreatic resection surgery			Leapfrog	X	NQF endorsement removed (formerly #738)
107	Patient safety composite (PSI 90)	PSI	531	CHIA Hospital Discharge Database	X	
108	Pneumonia 30-day mortality rate (risk-adjusted)		468	CMS/Hospital Compare	X	
109	Heart failure 30-day mortality rate for patients 18 and older (risk-adjusted)		229	CMS/Hospital Compare	X	
110	AMI 30-day mortality rate (risk-adjusted)		230	CMS/Hospital Compare	X	
111	National Healthcare Safety Network (NHSN) hospital-onset methicillin resistant staphylococcus bacteremia aureus (MRSA)		1716	CMS/Hospital Compare	X	
112	National Healthcare Safety Network (NHSN) central-line associated bloodstream infection		139	CMS/Hospital Compare	X	

Massachusetts Statewide Quality Advisory Committee

Count	Measure/Tool Name	Set	NQF#	CHIA Data Source(s)	Data Reported by CHIA	Notes
113	National Healthcare Safety Network (NHSN) hospital-onset <i>C. difficile</i>		1717	CMS/Hospital Compare	X	
114	National Healthcare Safety Network (NHSN) catheter-associated urinary tract infections		138	CMS/Hospital Compare	X	
115	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	
116	30-day all-cause risk-standardized readmission rate following AMI hospitalization		505	CMS/Hospital Compare	X	
117	30-day all-cause risk-standardized readmission rate following heart failure (HF) hospitalization		330	CMS/Hospital Compare	X	
118	30-day all-cause risk-standardized readmission rate following pneumonia hospitalization		506	CMS/Hospital Compare	X	
119	30-day all-cause risk-standardized readmission rate following acute ischemic stroke hospitalization			CMS/Hospital Compare	X	
120	30-day all-cause risk-standardized readmission rate following CABG surgery		2515	CMS/Hospital Compare	X	
121	30-Day all-cause risk-standardized readmission rate following COPD hospitalization		1891	CMS/Hospital Compare	X	
122	30-day all-cause risk-standardized readmission rate (RSRR) following elective primary THA and/or TKA		1551	CMS/Hospital Compare	Х	

Post-Acute Measures

Count	Measure/Tool Name	Set	NQF#	CHIA Data Source(s)	Data Already Reported by CHIA	Notes
123	Acute care hospitalization (risk-adjusted)	OASIS	171	CMS/Home Health Compare	X	
124	Emergency department use without hospitalization (risk-adjusted)	OASIS	173	CMS/Home Health Compare	X	
125	Timely initiation of care	OASIS	526	CMS/ Home Health Compare	X	
126	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	
127	Percent of high risk residents with pressure ulcers (long stay) (risk-adjusted)	CMS- Minimum Data Set (MDS)	679	CMS/Nursing Home Compare	X	
128	Percent of residents who self-report moderate to severe pain (short-stay)	CMS- Minimum Data Set (MDS)	676	CMS/Nursing Home Compare	X	
129	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	

Massachusetts Statewide Quality Advisory Committee

Count	Measure/Tool Name	Set	NQF#	CHIA Data Source(s)	Data Reported by CHIA	Notes
130	Proportion admitted to hospice for less than 3 days		216			
131	advance care plan	AMA- PCPI/NCQA	326			
132	Palliative and end of life care: Dyspnea screening & management					
133	Hospice and palliative care – pain screening*	HIS	1634			
134	Hospice and palliative care – pain assessment*	HIS	1637			
135	Hospice and palliative care – Dyspnea screening*	HIS	1639			
136	Hospice and palliative care – Dyspnea treatment*	HIS	1638			
137	Hospice and palliative care – beliefs/values addressed*	HIS	1647			
138	Hospice and palliative care – treatment preferences*	HIS	1641			

 $[\]ensuremath{^{*}}\text{May}$ apply to care delivered in acute and non-acute settings

Measure Sets

HEDIS Healthcare Effectiveness Data and Information Set

PQI Prevention 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