RESOURCE AND PATIENT MANAGEMENT SYSTEM

IHS Clinical Reporting System

(BGP)

IPC Measures Report
Performance Measure List and Definitions

Version 20.1
July 2020

Office of Information Technology (OIT)
Division of Information Technology

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1.0   CRS IPC Measures Report

The performance measure topics and their definitions that are included in the Clinical Reporting System (CRS) 2020 version 20.1 IPC Measures Report are shown in Section 2.0.

1.1   CRS Denominator Definitions

1.1.1   IPC User Population

- For all measures except as noted, patient age is calculated as of the beginning of the Report Period.

- All patients with name "DEMO, PATIENT" or who are included in the RPMS Demo/Test Patient Search Template (DPST), option located in the Patient Care Component [PCC] Management Reports, Other section, will be excluded automatically for all denominators.

- At least one visit to a medical clinic is required during the Report Period (see Table 1-1), and the visit must be either ambulatory (including day surgery or observation) or a hospitalization; the rest of the service categories are excluded.

Table 1-1: Medical clinics

Clinic Code	Clinic Description
01	General
06	Diabetic
10	GYN
12	Immunization
13	Internal Medicine
20	Pediatrics
02	Cardiac
03	Chest And TB
05	Dermatology
07	ENT
08	Family Planning
16	Obstetrics
19	Orthopedic
23	Surgical
24	Well Child

Clinic Code	Clinic Description
25	Other
26	High Risk
27	General Preventive
28	Family Practice
31	Hypertension
32	Postpartum
57	EPSDT
70	Women's Health
80	Urgent Care
89	Evening
37	Neurology
38	Rheumatology
49	Nephrology
50	Chronic Disease
69	Endocrinology
75	Urology
81	Men's Health Screening
85	Teen Clinic
88	Sports Medicine
B8	Gastroenterology - Hepatology
B9	Oncology - Hematology
C3	Colposcopy

- Must be alive on the last day of the Report Period.

- User defines population type: AI/AN patients only, non-AI/AN, or both.

User defines general population: single community, group of multiple communities (community taxonomy), user-defined list of patients (patient panel), or all patients regardless of community of residence.

2.0   Performance Measure Topics and Definitions

The following sections define the performance measure topics and their definitions that are included in the CRS 2020 version 20.1 IPC Measures Report.

2.1   Diabetes Group

2.1.1   Diabetes: Comprehensive Care

2.1.1.1   Owner and Contact

Improving Patient Care (IPC) Group

2.1.1.2   Denominators

IPC User Population patients diagnosed with diabetes prior to the Report Period, without a documented history of bilateral blindness or bilateral eye enucleation or a documented history of bilateral foot amputation or two separate unilateral foot amputations.

2.1.1.3   Numerators

1. Patients with comprehensive diabetes care (documented A1c *and* blood pressure assessed and nephropathy assessment and retinal exam *and* diabetic foot exam).

2. Patients with a hemoglobin A1c documented during the Report Period, regardless of result.

3. Patients with blood pressure documented during the Report Period.

4. Patients with nephropathy assessment, defined as an estimated GFR with result *and* a urine albumin-to-creatinine ratio (UACR) during the Report Period *or* with evidence of diagnosis and/or treatment of ESRD at any time before the end of the Report Period.

5. Patients receiving a qualified retinal evaluation during the Report Period.

6. Patients with diabetic foot exam during the Report Period.

2.1.1.4   Definitions

Diabetes

First POV ICD-9: 250.00 through 250.93 or ICD-10: E10.* through E13.* [SURVEILLANCE DIABETES] recorded in the V POV file prior to the Report Period.

Denominator Exclusions

Any of the following at any time prior to the end of the Report Period:

Bilateral Blindness

- Diagnosis (POV or Problem List entry where the status is not Deleted):
    - ICD-9: 369.01, 369.03, 369.04; ICD-10: H54.0* [BGP BILATERAL BLINDNESS DXS]
    - SNOMED data set PXRM BGP BILAT BLINDNESS (Problem List only)
    - SNOMED data set PXRM BGP BLINDNESS UNSPECIFIED with Laterality equal to Bilateral (Problem List only)
    - One code from (SNOMED data set PXRM BGP LEFT EYE BLIND (Problem List only) *or* SNOMED data set PXRM BGP BLINDNESS UNSPECIFIED with Laterality equal to Left [Problem List only]) *and* one code from (SNOMED data set PXRM BGP RIGHT EYE BLIND (Problem List only) *or* SNOMED data set PXRM BGP BLINDNESS UNSPECIFIED with Laterality equal to Right [Problem List only])

Bilateral Eye Enucleation

- CPT 65091, 65093, 65101, 65103, 65105, 65110, 65112, 65114 with modifier 50 or 09950 (50 and 09950 modifiers indicate bilateral)

- Two separate unilateral eye enucleations with visit dates at least 14 days apart with CPT 65091, 65093, 65101, 65103, 65105, 65110, 65112, 65114

- Left eye enucleation: Procedure ICD-10: 08B1*** *and* right eye enucleation: Procedure ICD-10: 08B0*** on either the same or different dates of service

Bilateral Foot Amputation

- CPT 27290.50 through 27295.50, 27590.50 through 27592.50, 27598.50, 27880.50 through 27882.50 (50 modifier indicates bilateral), G9224 [BGP CPT BILAT FOOT AMP]

- Procedure ICD-10: 0Y640ZZ [BGP BILAT FOOT AMP PROCEDURES]

- Diagnosis (Problem List entry where the status is not Deleted): SNOMED data set PXRM BGP ABSENCE OF FOOT BIL (Problem List only)

Two Separate Foot Amputations

Requires either of the following:

- Must have one code that indicates a right-foot amputation and one code that indicates a left-foot amputation

- Must have two separate occurrences on two different dates of service for one code that indicates a foot amputation on unknown side and one code that indicates either a right or left-foot amputation, or two codes that indicate a foot amputation on unknown side

Right-Foot Amputation

- Diagnosis (POV or Problem List entry where the status is not Deleted):
  - ICD-10: Z89.511, Z89.611, Z89.431, Z89.441 [BGP RIGHT FOOT AMP DXS]
  - SNOMED data set PXRM BGP ABSENCE OF FOOT RIGHT (Problem List only)
- Procedure ICD-10: 0Y620ZZ, 0Y670ZZ, 0Y6F0ZZ, 0Y6C***, 0Y6H***, 0Y6M0Z0 [BGP RIGHT FOOT AMP PROCS]

Left-Foot Amputation

- Diagnosis (POV or Problem List entry where the status is not Deleted):
  - ICD-10: Z89.512, Z89.612, Z89.432, Z89.442 [BGP LEFT FOOT AMP DXS]
  - SNOMED data set PXRM BGP ABSENCE OF FOOT LEFT (Problem List only)
- Procedure ICD-10: 0Y630ZZ, 0Y680ZZ, 0Y6G0ZZ, 0Y6D***, 0Y6J***, 0Y6N0Z0 [BGP LEFT FOOT AMP PROCS]

Foot Amputation on Unknown Side

- CPT 27290 through 27295, 27590 through 27598, 27880 through 27889 [BGP FOOT AMP CPTS]

- Procedure ICD-9: 84.10, 84.13 through 84.19 [BGP FOOT AMP PROCEDURES]
  - POV ICD-9: V49.73 through V49.77; ICD-10: Z89.439, Z89.449 [BGP UNILATERAL FOOT AMP DXS]

A1c

Searches for most recent A1c test with a result during the Report Period. If none found, CRS searches for the most recent A1c test without a result.

A1c defined as:

- Current Procedural Terminology (CPT) 83036, 83037, 3044F through 3046F, 3047F (old code), 3051F, 3052F [BGP HGBA1C CPTS]

- Logical Observations Identifiers, Names, Codes (LOINC) taxonomy: 17855-8, 17856-6, 41995-2, 4547-6, 4548-4, 4549-2, 71875-9 [BGP HGBA1C LOINC CODES]

- Site-populated taxonomy DM AUDIT HGB A1C TAX

BP Documented

- Measurement in PCC of BP

- CPT 0001F, CPT 2000F, G9273, G9274 [BGP BP MEASURED CPT]

- POV ICD-9: V81.1 [BGP HYPERTENSION SCREEN DXS]

- Systolic: CPT 3074F, 3075F, or 3077F [BGP SYSTOLIC BP CPTS] with Diastolic: CPT 3078F, 3079F, or 3080F [BGP DIASTOLIC BP CPTS]. The systolic and diastolic values do *not* have to be recorded on the same day.

Nephropathy Assessment

Defined as any of the following:

- Estimated GFR with result during the Report Period, defined as any of the following:

  – Site-populated taxonomy BGP GPRA ESTIMATED GFR TAX
  – LOINC taxonomy: 33914-3, 48642-3, 48643-1, 50044-7, 50384-7, 62238-1, 69405-9, 70969-1, 77147-7, 88293-6, 88294-4 [BGP ESTIMATED GFR LOINC]

- Urine Albumin-to-Creatinine Ratio (UACR) during the Report Period, defined as any of the following:

  – CPT 82043 WITH 82570
  – LOINC taxonomy: 14585-4, 14959-1, 30000-4, 32294-1, 77253-3, 89998-9, 9318-7 [BGP QUANT UACR LOINC]
  – Site-populated taxonomy BGP QUANT UACR TESTS

> **Note:** Check with the laboratory supervisor that the names added to the taxonomy reflect quantitative test values.

- End Stage Renal Disease diagnosis or treatment defined as any of the following ever:

  – CPT 36145 (old code), 36147, 36800, 36810, 36815, 36818, 36819, 36820, 36821, 36831 through 36833, 50300, 50320, 50340, 50360, 50365, 50370, 50380, 90951 through 90970 or old codes 90918 through 90925, 90935, 90937, 90939 (old code), 90940, 90945, 90947, 90989, 90993, 90997, 90999, 99512, 3066F, G0257, G0308 through G0327 (old codes), G0392 (old code), G0393 (old code), G9231, S2065, S9339 [BGP ESRD CPTS]

  – Diagnosis (POV or Problem List entry where the status is not Deleted):

- ICD-9: 585.6, V42.0, V45.1 (old code), V45.11, V45.12, V56.*; ICD-10: I12.0, I13.11, I13.2, N18.5, N18.6, N19., Z48.22, Z49.*, Z91.15, Z94.0, Z99.2 [BGP ESRD PMS DXS]

- SNOMED data set PXRM END STAGE RENAL DISEASE (Problem List only)

  – International Classification of Diseases (ICD) Procedure ICD-9: 38.95, 39.27, 39.42, 39.43, 39.53, 39.93 through 39.95, 54.98, 55.6*; ICD-10 5A1D70Z, 5A1D80Z, 5A1D90Z [BGP ESRD PROCS]

Qualified Retinal Evaluation

Either of the following:

- Diabetic retinal exam

- Other eye exam

The following methods are qualifying for this measure:

- Dilated retinal evaluation by an optometrist or ophthalmologist.

- Seven standard fields stereoscopic photos (Early Treatment Diabetic Retinopathy Study [ETDRS]) evaluated by an optometrist or ophthalmologist.

- Any photographic method formally validated[1] to 7 standard fields ETDRS.

Diabetic Retinal Exam

Any of the following during the Report Period:

- Exam code 03 Diabetic Eye Exam (dilated retinal examination or formally validated[2] ETDRS photographic equivalent).

- CPT 2021F Dilated macular exam, 2022F, 2023F and G2102 Dilated retinal eye exam, 2024F, 2025F and G2103 Seven standard field stereoscopic photos with interpretation by an ophthalmologist or optometrist, 2026F, 2033F and G2104 Eye imaging formally validated[3] to match the diagnosis from 7 standard field stereoscopic photos, S0620 Routine ophthalmological examination including refraction; new patient, S0621 Routine ophthalmological examination including refraction; established patient, S3000 Diabetic indicator; retinal eye exam, dilated, bilateral [BGP DM RETINAL EXAM CPTS].

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[1] Validation study properly powered and controlled against the ETDRS gold standard (American Telemedicine Association validation category 3).
[2] Ibid.

[3] Ibid.

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- Procedure ICD-9: 95.02 Comprehensive eye exam, 95.03 Extended ophthalmologic work-up [BGP EYE EXAM PROCS]

Other Eye Exam

Any of the following during the Report Period:

- Non-DNKA (did not keep appointment) visits to ophthalmology or optometry clinics with an optometrist or ophthalmologist, or visits to formally validated[4] teleophthalmology retinal evaluation clinics. Searches for the following codes in the following order:
  - CPT 67028, 67038 (old code), 67039, 67040, 92002, 92004, 92012, 92014, 92018, 92019 [BGP DM EYE EXAM CPTS]
  - Clinic code A2 (Diabetic Retinopathy)[5]
  - Clinic codes 17[6] or 18[7] with Provider code 08, 24, or 79 where the Service Category is not C (Chart Review) or T (Telecommunications)

Diabetic Foot Exam

Any of the following:

- Exam code 28 Diabetic Foot Exam, Complete

- Non-DNKA visit with a podiatrist (Provider codes 33, 84, 25)

- Non-DNKA visit to Podiatry Clinic or Diabetic Foot Clinic (Clinic codes 65 and B7)

- CPT 2028F, G9226 [BGP CPT FOOT EXAM]

2.1.1.5   Patient List

List of diabetic patients with documented tests, if any.

2.1.2   Diabetes: Glycemic Control (CMS122)

2.1.2.1   Owner and Contact

IPC Group

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[4] Validation study properly powered and controlled against the ETDRS gold standard (American Telemedicine Association validation category 3).

[5] Validated photographic (teleretinal) retinal surveillance (American Telemedicine Association validation category 3).

[6] Ophthalmology or Optometry clinic codes (17, 18) cannot be used for non-qualifying photographic DR examination methods[2] unless a dilated retinal examination by an ophthalmologist or optometrist is also accomplished during the same encounter.

[7] Ibid.

2.1.2.2   Denominators

1. Patients 18 through 75 years of age with diabetes and no hospice indicator.

2.1.2.3   Numerators

1. Poor control: A1c greater than (>) 9.

2.1.2.4   Definitions

Age

Patient must be 18 years of age or older and less than 75 years at the beginning of the Report Period.

Denominator Inclusions

To be included in the denominator, the patient must have each of the following:

1. Any of the following encounters performed during the Report Period:
    * Office visit: CPT 99201, 99202, 99203, 99204, 99205, 99212, 99213, 99214, 99215 [BGP IPC OFFICE VISIT CPTS]

    * Preventive Care Services - Established Office Visit, 18 and Up: CPT 99395, 99396, 99397 [BGP IPC PREVCARE EOV greater than or equal to (>=) 18 CPTS]

    * Preventive Care Services - Initial Office Visit, 18 and Up: CPT 99385, 99386, 99387 [BGP IPC PREVCARE IOV greater than or equal to (>=) 18 CPTS]

    * Home Healthcare Services:

        - CPT 99341, 99342, 99343, 99344, 99345, 99347, 99348, 99349, 99350 [BGP IPC HOMEHEALTH VISIT CPTS]
        - SNOMED data set PXRM BGP IPC HOME HEALTH

    * Annual Wellness Visit:

        - CPT G0438, G0439 [BGP IPC ANNUAL WELLNESS CPTS]
        - SNOMED 444971000124105, 456201000124103
2. Diabetes diagnosis during the Report Period (POV or Problem List entry where the status is not Inactive or Deleted):
    * ICD-9: 250.*, 357.2, 362.0*, 366.41, 648.0*; ICD-10: E10.10, E10.11, E10.21, E10.22, E10.29, E10.311, E10.319, E10.321, E10.3211, E10.3212, E10.3213, E10.3219, E10.329, E10.3291, E10.3292, E10.3293, E10.3299, E10.331, E10.3311, E10.3312, E10.3313, E10.3319, E10.339, E10.3391, E10.3392, E10.3393, E10.3399, E10.341, E10.3411, E10.3412, E10.3413, E10.3419,

E10.349, E10.3491, E10.3492, E10.3493, E10.3499, E10.351,
E10.3511, E10.3512, E10.3513, E10.3519, E10.3521, E10.3522,
E10.3523, E10.3529, E10.3531, E10.3532, E10.3533, E10.3539,
E10.3541, E10.3542, E10.3543, E10.3549, E10.3551, E10.3552,
E10.3553, E10.3559, E10.359, E10.3591, E10.3592, E10.3593,
E10.3599, E10.36, E10.37X1, E10.37X2, E10.37X3, E10.37X9,
E10.39, E10.40, E10.41, E10.42, E10.43, E10.44, E10.49, E10.51,
E10.52, E10.59, E10.610, E10.618, E10.620, E10.621, E10.622,
E10.628, E10.630, E10.638, E10.641, E10.649, E10.65, E10.69,
E10.8, E10.9, E11.00, E11.01, E11.10, E11.11, E11.21, E11.22,
E11.29, E11.311, E11.319, E11.321, E11.3211, E11.3212, E11.3213,
E11.3219, E11.329, E11.3291, E11.3292, E11.3293, E11.3299,
E11.331, E11.3311, E11.3312, E11.3313, E11.3319, E11.339,
E11.3391, E11.3392, E11.3393, E11.3399, E11.341, E11.3411,
E11.3412, E11.3413, E11.3419, E11.349, E11.3491, E11.3492,
E11.3493, E11.3499, E11.351, E11.3511, E11.3512, E11.3513,
E11.3519, E11.3521, E11.3522, E11.3523, E11.3529, E11.3531,
E11.3532, E11.3533, E11.3539, E11.3541, E11.3542, E11.3543,
E11.3549, E11.3551, E11.3552, E11.3553, E11.3559, E11.359,
E11.3591, E11.3592, E11.3593, E11.3599, E11.36, E11.37X1,
E11.37X2, E11.37X3, E11.37X9, E11.39, E11.40, E11.41, E11.42,
E11.43, E11.44, E11.49, E11.51, E11.52, E11.59, E11.610, E11.618,
E11.620, E11.621, E11.622, E11.628, E11.630, E11.638, E11.641,
E11.649, E11.65, E11.69, E11.8, E11.9, E13.00, E13.01, E13.10,
E13.11, E13.21, E13.22, E13.29, E13.311, E13.319, E13.321,
E13.3211, E13.3212, E13.3213, E13.3219, E13.329, E13.3291,
E13.3292, E13.3293, E13.3299, E13.331, E13.3311, E13.3312,
E13.3313, E13.3319, E13.339, E13.3391, E13.3392, E13.3393,
E13.3399, E13.341, E13.3411, E13.3412, E13.3413, E13.3419,
E13.349, E13.3491, E13.3492, E13.3493, E13.3499, E13.351,
E13.3511, E13.3512, E13.3513, E13.3519, E13.3521, E13.3522,
E13.3523, E13.3529, E13.3531, E13.3532, E13.3533, E13.3539,
E13.3541, E13.3542, E13.3543, E13.3549, E13.3551, E13.3552,
E13.3553, E13.3559, E13.359, E13.3591, E13.3592, E13.3593,
E13.3599, E13.36, E13.37X1, E13.37X2, E13.37X3, E13.37X9,
E13.39, E13.40, E13.41, E13.42, E13.43, E13.44, E13.49, E13.51,
E13.52, E13.59, E13.610, E13.618, E13.620, E13.621, E13.622,
E13.628, E13.630, E13.638, E13.641, E13.649, E13.65, E13.69,
E13.8, E13.9, O24.011, O24.012, O24.013, O24.019, O24.02, O24.03,
O24.111, O24.112, O24.113, O24.119, O24.12, O24.13, O24.311,
O24.312, O24.313, O24.319, O24.32, O24.33, O24.811, O24.812,
O24.813, O24.819, O24.82, O24.83 [BGP IPC DIABETES DXS]

- SNOMED data set PXRM BGP IPC DIABETES

Denominator Exclusions

Patients with any of the following are excluded from the denominator:

- Hospice indicator during the Report Period.

- Patients age 66 and older who have spent more than 90 days in long-term care during the report period.

- Patients age 66 and older who have both of the following:

  A. Any of the following during the report period:

  - Frailty device
  - Frailty diagnosis
  - Frailty encounter
  - Frailty symptom

  B. Any of the following in the past two years:

  - Two or more outpatient encounters with advanced illness diagnosis
  - Inpatient encounter with advanced illness diagnosis
  - Dementia medications

Hospice Indicator

Hospice is defined as any of the following:

- SNOMED data set PXRM BGP IPC INPT ENC (Inpatient encounter) with DISCHARGE SNOMED CT data set PXRM BGP IPC DISCHG HOSPICE (discharge to home or health care facility for hospice care).

- POV or Problem List entry where the status is not Inactive or Deleted: SNOMED data set PXRM BGP IPC HOSPICE (hospice care ambulatory).

Long-term Care

Long-term care is defined as any of the following:

- Care Services in Long-Term Residential Facility:

  - CPT 99324, 99325, 99326, 99327, 99328, 99334, 99335, 99336, 99337 [BGP IPC LT RES FACILITY CPTS]
  - SNOMED data set PXRM BGP IPC LONG TERM CARE

- Nursing Facility Visit:

  - CPT 99304, 99305, 99306, 99307, 99308, 99309, 99310
  - SNOMED 18170008, 207195004

Frailty device

Frailty device is defined as any of the following: HCPCS E0100, E0105, E0130, E0135, E0140, E0141, E0143, E0144, E0147, E0148, E0149, E0163, E0165, E0167, E0168, E0170, E0171, E0250, E0251, E0255, E0256, E0260, E0261, E0265, E0266, E0270, E0290, E0291, E0292, E0293, E0294, E0295, E0296, E0297, E0301, E0302, E0303, E0304, E0424, E0425, E0430, E0431, E0433, E0434, E0435, E0439, E0440, E0441, E0442, E0443, E0444, E0462, E0465, E0466, E0470, E0471, E0472, E0561, E0562, E1130, E1140, E1150, E1160, E1161, E1240, E1250, E1260, E1270, E1280, E1285, E1290, E1295, E1296, E1297, E1298

Frailty diagnosis

Frailty diagnosis is defined as Diagnosis (POV or active Problem List entry):

- ICD-10: L89.119, L89.139, L89.149, L89.159, L89.209, L89.309, L89.899, L89.90, M62.50, M62.81, M62.84, W01.0XXA, W01.0XXD, W01.0XXS, W01.10XA, W01.10XD, W01.10XS, W01.110A, W01.110D, W01.110S, W01.111A, W01.111D, W01.111S, W01.118A, W01.118D, W01.118S, W01.119A, W01.119D, W01.119S, W01.190A, W01.190D, W01.190S, W01.198A, W01.198D, W01.198S, W06.XXXA, W06.XXXD, W06.XXXS, W07.XXXA, W07.XXXD, W07.XXXS, W08.XXXA, W08.XXXD, W08.XXXS, W10.0XXA, W10.0XXD, W10.0XXS, W10.1XXA, W10.1XXD, W10.1XXS, W10.2XXA, W10.2XXD, W10.2XXS, W10.8XXA, W10.8XXD, W10.8XXS, W10.9XXA, W10.9XXD, W10.9XXS, W18.00XA, W18.00XD, W18.00XS, W18.02XA, W18.02XD, W18.02XS, W18.09XA, W18.09XD, W18.09XS, W18.11XA, W18.11XD, W18.11XS, W18.12XA, W18.12XD, W18.12XS, W18.2XXA, W18.2XXD, W18.2XXS, W18.30XA, W18.30XD, W18.30XS, W18.31XA, W18.31XD, W18.31XS, W18.39XA, W18.39XD, W18.39XS, W19.XXXA, W19.XXXD, W19.XXXS, Y92.199, Z59.3, Z73.6, Z74.01, Z74.09, Z74.1, Z74.2, Z74.3, Z74.8, Z74.9, Z91.81, Z99.11, Z99.3, Z99.81, Z99.89

- SNOMED data set PXRM BGP ECQM FRAILTY DX

Frailty encounter

Frailty encounter is defined as any of the following:

- CPT 99504, 99509, G0162, G0299, G0300, G0493, G0494, S0271, S0311, S9123, S9124, T1000, T1001, T1002, T1003, T1004, T1005, T1019, T1020, T1021, T1022, T1030, T1031

- SNOMED 413467001

Frailty symptom

Frailty symptom is defined as Diagnosis (POV or active Problem List entry):

- ICD-10: R26.0, R26.1, R26.2, R26.89, R26.9, R41.81, R53.1, R53.81, R53.83, R54, R62.7, R63.4, R63.6, R64 [BGP ECQM FRAILTY SYMPTOM DXS]

- SNOMED data set PXRM BGP ECQM FRAILTY SYMPTOM

Outpatient Encounter

Outpatient encounter is defined as any of the following:

- Outpatient:
  - CPT 99201, 99202, 99203, 99204, 99205, 99211, 99212, 99213, 99214, 99215, 99241, 99242, 99243, 99244, 99245, 99341, 99342, 99343, 99344, 99345, 99347, 99348, 99349, 99350, 99381, 99382, 99383, 99384, 99385, 99386, 99387, 99391, 99392, 99393, 99394, 99395, 99396, 99397, 99401, 99402, 99403, 99404, 99411, 99412, 99429, 99455, 99456, 99483, G0402, G0438, G0439, G0463, T1015

- Observation:
  - CPT 99217, 99218, 99219, 99220; 3) ED: CPT 99281, 99282, 99283, 99284, 99285
  - SNOMED 4525004

- Nonacute Inpatient:
  - CPT 99304, 99305, 99306, 99307, 99308, 99309, 99310, 99315, 99316, 99318, 99324, 99325, 99326, 99327, 99328, 99334, 99335, 99336, 99337
  - SNOMED data set PXRM BGP ECQM NONACUTE IP

Inpatient Encounter

Inpatient encounter is defined as any of the following:

- Service Category I or H

- CPT 99221, 99222, 99223, 99231, 99232, 99233, 99238, 99239, 99251, 99252, 99253, 99254, 99255, 99291

- SNOMED data set PXRM BGP ECQM ACUTE IP

Advanced Illness

Advanced illness is defined as Diagnosis (POV):

- ICD-10: A81.00, A81.01, A81.09, C25.0, C25.1, C25.2, C25.3, C25.4, C25.7, C25.8, C25.9, C71.9, C77.0, C77.1, C77.2, C77.3, C77.4, C77.5, C77.8, C77.9, C78.00, C78.1, C78.2, C78.39, C78.4, C78.5, C78.6, C78.7, C78.89, C79.00, C79.11, C79.19, C79.2, C79.31, C79.32, C79.49, C91.00, C91.02, C92.00, C92.02, C93.00, C93.02, C93.90, C93.92, C93.Z0, C93.Z2, C94.30, C94.32, F01.50, F01.51, F02.80, F02.81, F03.90, F03.91, F04, F10.27, F10.96, F10.97, G10, G12.21, G20, G30.0, G30.1, G30.8, G30.9, G31.01, G31.09, G31.83, I09.81, I11.0, I12.0, I13.0, I13.11, I13.2, I50.1, I50.20, I50.21, I50.22, I50.23, I50.30, I50.31, I50.32, I50.33, I50.40, I50.41, I50.42, I50.43, I50.810, I50.811, I50.812, I50.813, I50.814, I50.82, I50.83, I50.84, I50.89, I50.9, J43.0, J43.1, J43.2, J43.8, J43.9, J68.4, J84.10, J84.112, J84.17, J96.10, J96.11, J96.12, J96.20, J96.21, J96.22, J96.90, J96.91, J96.92, J98.2, J98.3, K70.10, K70.11, K70.2, K70.30, K70.31, K70.40, K70.41, K70.9, K74.0, K74.1, K74.2, K74.4, K74.5, K74.60, K74.69, N18.5, N18.6 [BGP ECQM ADV ILLNESS DXS]

- SNOMED data set PXRM BGP ECQM ADV ILLNESS

Dementia medications

Dementia medications are defined as Medication taxonomy BGP ECQM DEMENTIA MEDS. Medications must not have a comment of RETURNED TO STOCK.

Numerator

To be included in the numerator, the patient must meet any of the following criteria:

- Most recent HbA1c lab test during the Report Period with result greater than (>) 9.0.

- Most recent HbA1c lab test during the Report Period with no result.

- No HbA1c lab test during the Report Period.

A1c

HbA1c lab test is defined as:

- LOINC 17856-6, 4548-4, 4549-2 [BGP IPC HBA1C LOINC CODES]

- Site-populated taxonomy DM AUDIT HGB A1C TAX.

2.1.2.5 Patient List

List of diabetic patients with most recent A1c value, if any.

2.2   Dental Group

2.2.1   Dental Treatment

2.2.1.1   Owner and Contact

IPC Group

2.2.1.2   Denominators

IPC User Population patients with a dental exam during the Report Period.

2.2.1.3   Numerators

Patients with all treatment completed.

2.2.1.4   Definitions

Dental Exam

- RPMS Dental codes 0120, 0150, 0145
- ADA CDT codes D0120, D0150, D0145

All Treatment Completed

- RPMS Dental code 9990

2.2.1.5   Patient List

List of patients with all treatment completed, if any.

2.3   Immunization Group

2.3.1   Influenza (CMS147)

2.3.1.1   Owner and Contact

IPC Group

2.3.1.2   Denominators

1. Patients aged 6 months and older seen for a visit during the period 92 days prior to the Report Period through 89 days after the beginning of the Report Period with no contraindication for influenza vaccine.

2.3.1.3 Numerators

1. Patients who received an influenza immunization *or* who reported previous receipt of an influenza immunization.

2.3.1.4 Definitions

Age

Patient must be 6 months of age or older at the beginning of the Report Period.

Denominator Inclusions

To be included in the denominator, the patient must have each of the following:

1. Any of the following encounters performed during the Report Period:
   - Office visit:
     - CPT 99201, 99202, 99203, 99204, 99205, 99212, 99213, 99214, 99215 [BGP IPC OFFICE VISIT CPTS]
     - SNOMED data set PXRM BGP IPC OFFICE VISIT
   - Outpatient Consultation:
     - CPT 99241, 99242, 99243, 99244, 99245 [BGP IPC OUTPT CONSULT CPTS]
     - SNOMED data set PXRM BGP IPC OP CONSULT
   - Care Services in Long-Term Residential Facility:
     - CPT 99324, 99325, 99326, 99327, 99328, 99334, 99335, 99336, 99337 [BGP IPC LT RES FACILITY CPTS]
     - SNOMED data set PXRM BGP IPC LONG TERM CARE
   - Home Healthcare Services:
     - CPT 99341, 99342, 99343, 99344, 99345, 99347, 99348, 99349, 99350 [BGP IPC HOMEHEALTH VISIT CPTS]
     - SNOMED data set PXRM BGP IPC HOME HEALTH
   - Patient Provider Interaction: SNOMED data set PXRM BGP IPC PAT PROV INT
   - Preventive Care - Initial Office Visit, 0 to 17: CPT 99381, 99382, 99383, 99384 [BGP IPC PREVCARE IOV 0-17 CPTS]
   - Preventive Care Services - Initial Office Visit, 18 and Up: CPT 99385, 99386, 99387 [BGP IPC PREVCARE IOV greater than or equal to (≥) 18 CPTS]
   - Preventive Care Services - Individual Counseling: CPT 99401, 99402, 99403, 99404 [BGP IPC PREVCARE IND COUN CPTS]

- Preventive Care Services - Group Counseling: CPT 99411, 99412 [BGP IPC PREVCARE GRP COUN CPTS]

- Preventive Care Services - Other: CPT 99429 [BGP IPC PREVCARE OTHER CPTS]

- Discharge Services - Nursing Facility: CPT 99315, 99316 [BGP IPC DSCH SRV NURS FAC CPTS]

- Nursing Facility Visit:

  - CPT 99304, 99305, 99306, 99307, 99308, 99309, 99310 [BGP IPC NURS FAC VISIT CPTS]

  - SNOMED 18170008, 207195004

- Annual Wellness Visit:

  - CPT G0438, G0439 [BGP IPC ANNUAL WELLNESS CPTS]

  - SNOMED 444971000124105, 456201000124103

- Peritoneal Dialysis: CPT 90945, 90947, 90951, 90952, 90953, 90954, 90955, 90956, 90957, 90958, 90959, 90960, 90961, 90962, 90963, 90964, 90965, 90966, 90967, 90968, 90969, 90970 [BGP IPC PERI DIALYSIS CPTS]

- Hemodialysis: CPT 90951, 90952, 90953, 90954, 90955, 90956, 90957, 90958, 90959, 90960, 90961, 90962, 90963, 90964, 90965, 90966, 90967, 90968, 90969, 90970, 99512 [BGP IPC HEMO DIALYSIS CPTS]

- Preventive Care - Established Office Visit, 0 to 17: CPT 99391, 99392, 99393, 99394 [BGP IPC PREVCARE EOV 0-17 CPTS]

- Preventive Care Services - Established Office Visit, 18 and Up: CPT 99395, 99396, 99397 [BGP IPC PREVCARE EOV greater than or equal to (>=) 18 CPTS]

2. Any of the following during the period 92 days prior to the Report Period through 90 days after the beginning of the Report Period:
   - Influenza encounter:

     - CPT 99201, 99202, 99203, 99204, 99205, 99212, 99213, 99214, 99215, 99241, 99242, 99243, 99244, 99245, 99304, 99305, 99306, 99307, 99308, 99309, 99310, 99315, 99316, 99324, 99325, 99326, 99327, 99328, 99334, 99335, 99336, 99337, 99341, 99342, 99343, 99344, 99345, 99347, 99348, 99349, 99350, 99381, 99382, 99383, 99384, 99385, 99386, 99387, 99391, 99392, 99393, 99394, 99395, 99396, 99397, 99401, 99402, 99403, 99404, 99411, 99412, 99429, G0438, G0439 [BGP IPC FLU ENCOUNTER CPTS]

  – SNOMED data set PXRM BGP IPC FLU ENCOUNTER

- Peritoneal Dialysis: CPT 90945, 90947, 90951, 90952, 90953, 90954, 90955, 90956, 90957, 90958, 90959, 90960, 90961, 90962, 90963, 90964, 90965, 90966, 90967, 90968, 90969, 90970 [BGP IPC PERI DIALYSIS CPTS]

- Hemodialysis: CPT 90951, 90952, 90953, 90954, 90955, 90956, 90957, 90958, 90959, 90960, 90961, 90962, 90963, 90964, 90965, 90966, 90967, 90968, 90969, 90970, 99512 [BGP IPC HEMO DIALYSIS CPTS]

Denominator Exceptions

Patients with any of the following are excluded from the denominator only if they do not meet the numerator:

1. Any of the following during the period 153 days prior to the Report Period through 90 days after the beginning of the Report Period:
   - Influenza vaccination declined: SNOMED 315640000

   - Medical reason not done: SNOMED data set PXRM BGP IPC NO IZ MED for Influenza vaccine

   - Patient reason not done: SNOMED data set PXRM BGP IPC NO IZ PAT for Influenza vaccine

   - System reason not done: SNOMED data set PXRM BGP IPC NO IZ SYS for Influenza vaccine.

2. Any of the following during the first 90 days of the Report Period (Problem List entries where the status is not Inactive or Deleted):
   - Allergy to Eggs/Egg Substance:

     – Diagnosis (POV or active Problem List entry) ICD-9: 995.68, V15.03; ICD-10: T78.08XA, T78.08XD, T78.08XS, Z91.012 [BGP IPC EGG ALLERGY DXS]

     – SNOMED data set PXRM BGP IPC EGG ALLERGY

   - Allergy to Influenza Vaccine:

     – Diagnosis (active Problem List entry) SNOMED 294647003, 294648008, 294649000

     – Contraindication in the Immunization Package of "Anaphylaxis" or "Egg Allergy"

   - Intolerance to Influenza Vaccine:

- NMI refusal for CVX 135, 140, 141, 144, 150, 155, 158, 161, 166, 168, 171, 186, 88; CPT 90630, 90653, 90654, 90655, 90656, 90657, 90658, 90661, 90662, 90666, 90667, 90668, 90673, 90674, 90682, 90685, 90686, 90687, 90688, 90689, 90756, G0008, Q2034, Q2035, Q2036, Q2037, Q2038, Q2039
- Diagnosis (active Problem List entry) SNOMED 293112000, 293113005, 390796006, 420113004

Influenza Immunization

Any of the following during the period 153 days prior to the Report Period through 90 days after the beginning of the Report Period:

1. IZ administered:
   - CVX 135, 140, 141, 144, 150, 155, 158, 161, 166, 168, 171, 186, 88 [BGP IPC INFLUENZA CVX CODES]

   - CPT 90630, 90653, 90654, 90655, 90656, 90657, 90658, 90661, 90662, 90666, 90667, 90668, 90673, 90674, 90682, 90685, 90686, 90687, 90688, 90689, 90756, G0008, Q2034, Q2035, Q2036, Q2037, Q2038, Q2039 [BGP IPC INFLUENZA CPT CODES]

2. Previous receipt of IZ: SNOMED 185900003, 185901004, 185902006, 416928007

2.3.1.5   Patient List

List of patients with Influenza code, if any.

2.3.2   Adult Immunizations

2.3.2.1   Owner and Contact

IPC Group

2.3.2.2   Denominators

1. IPC User Population patients aged 19 years and older.

2.3.2.3   Numerators

1. Patients who have received all age-appropriate immunization combinations.

> **Note:** The only refusals included in this numerator are not medically indicated (NMI) refusals.

2.3.2.4   Definitions

Age-appropriate Immunization Combinations

- Ages 19–49: 1:1 combination (i.e., 1 Tdap/Td in the past 10 years, 1 Tdap ever)

- Ages 50–64: 1:1:1 combination (i.e., 1 Tdap/Td in the past 10 years, 1 Tdap ever, 1 dose of Zostavax in the past five years or 2 doses of Shingrix ever)

- Ages 65 and older: 1:1:1:1* combination (i.e., 1 Tdap/Td in the past 10 years, 1 Tdap ever, 1 dose of Zostavax in the past five years or 2 doses of Shingrix ever, 1 up-to-date Pneumococcal Polysaccharide vaccine [PPSV23])

Up-to-date Pneumococcal Polysaccharide vaccine (PPSV23) is defined as: Patients who received a dose of PPSV23 on or after age 65 years *or* a dose of PPSV23 in the past five years or a contraindication to PPSV23.

Tdap Immunization:

Any of the following documented during the applicable time frame:

- Immunization (CVX) code: 115 [BGP IPC TDAP CVX CODES]

- CPT 90715 [BGP CPT TDAP/TD]

Tdap Contraindication

Any of the following documented any time before the end of the Report Period:

- Immunization Package contraindication of "Anaphylaxis"

- PCC NMI Refusal

Td Immunization

Any of the following documented in the past 10 years:

- Immunization (CVX) code 9, 113, 138, 139, 196 [BGP IPC TD CVX CODES]

- POV ICD-9: V06.5 [BGP TD IZ DXS]

- CPT 90714, 90718 [BGP CPT TDAP/TD]

Td Contraindication

Any of the following documented any time before the end of the Report Period:

- Immunization Package contraindication of "Anaphylaxis"

- PCC NMI Refusal

Zostavax Vaccine

Any of the following documented in the past five years:

- Immunization (CVX) codes 121, 188

- CPT 90736 [BGP ZOSTER IZ CPTS]

Contraindication to Zostavax Vaccine

Any of the following documented at any time before the end of the Report Period:

- Contraindication in the Immunization Package of "Immune Deficiency" or "Anaphylaxis"

- PCC NMI Refusal

Shingrix Vaccine

Any of the following documented ever (the two doses must be at least two months apart):

- Immunization (CVX) codes 187

- CPT 90750 [BGP ZOSTER SHINGRIX CPTS]

Contraindication to Shingrix Vaccine

Any of the following documented at any time before the end of the Report Period:

- Contraindication in the Immunization Package of "Immune Deficiency" or "Anaphylaxis"

- PCC NMI Refusal

Pneumococcal Polysaccharide (PPSV23) Vaccine

Any of the following documented any time before the end of the Report Period:

- Immunization (CVX) codes 33, 109

- POV ICD-9: V03.82 [BGP PNEUMO IZ DXS]

- CPT 90732, G0009, G8115 (old code), G9279 [BGP PNEUMO IZ CPT DEV]

Pneumococcal Polysaccharide (PPSV23) Contraindication

Any of the following documented:

- Contraindication in the Immunization Package of "Anaphylaxis" any time before the end of the Report Period

- PCC NMI Refusal any time before the end of the Report Period

- Pneumococcal Conjugate (PCV13) in the past year

Pneumococcal Conjugate (PCV13)

Any of the following documented any time before the end of the Report Period:

- Immunization (CVX) codes 100, 133, 152

- CPT 90669, 90670 [BGP PNEUMO CONJUGATE CPTS]

2.3.2.5   Patient List

List of patients aged 19 years and older with IZ or contraindication, if any.

2.3.3   Childhood Immunizations (CMS117)

2.3.3.1   Owner and Contact

IPC Group

2.3.3.2   Denominators

1. Patients 2 years of age with no hospice indicator.

2.3.3.3   Numerators

1. Patients who have received the 4:3:1:3:3:1:4:1:2/3:2 combination (i.e., 4 DTaP, 3 Polio, 1 MMR, 3 HiB, 3 Hepatitis B, 1 Varicella, 4 Pneumococcal, 1 Hepatitis A, 2 or 3 Rotavirus, and 2 Influenza) by their second birthday, including contraindications and evidence of disease.

2.3.3.4   Definitions

Age

Patient must be 2 years of age at any point during the Report Period.

Denominator Inclusions

To be included in the denominator, the patient must have any of the following encounters performed during the Report Period:

- Office visit:
  - CPT 99201, 99202, 99203, 99204, 99205, 99212, 99213, 99214, 99215 [BGP IPC OFFICE VISIT CPTS]
  - SNOMED data set PXRM BGP IPC OFFICE VISIT
- Preventive Care Services - Established Office Visit, 0 to 17: CPT 99391, 99392, 99393, 99394 [BGP IPC PREVCARE EOV 0-17 CPTS]
- Preventive Care Services - Initial Office Visit, 0 to 17: CPT 99381, 99382, 99383, 99384 [BGP IPC PREVCARE IOV 0-17 CPTS]
- Home Healthcare Services:
  - CPT 99341, 99342, 99343, 99344, 99345, 99347, 99348, 99349, 99350 [BGP IPC HOMEHEALTH VISIT CPTS]
  - SNOMED data set PXRM BGP IPC HOME HEALTH

Denominator Exclusions

Patients with hospice indicator are excluded from the denominator. Hospice is defined as any of the following during the Report Period:

- SNOMED data set PXRM BGP IPC INPT ENC (Inpatient encounter) with DISCHARGE SNOMED CT data set PXRM BGP IPC DISCHG HOSPICE (discharge to home or health care facility for hospice care).

- POV or Problem List entry where the status is not Inactive or Deleted: SNOMED data set PXRM BGP IPC HOSPICE (hospice care ambulatory).

Numerator

To be included in the numerator, the patient must have each of the following:

1. DTaP – any of the following:
   - 4 DTaP vaccines one or more days apart between the ages of 42 days and 2 years (inclusive)

   - Contraindication to DTaP vaccine on or before patient is 2 years old

2. Polio (IPV) – any of the following:
   - 3 Polio (IPV) vaccines one or more days apart between the ages of 42 days and 2 years (inclusive)

   - Contraindication to Polio vaccine on or before patient is 2 years old

3. MMR – any of the following
   - One measles, mumps, rubella (MMR) vaccine on or before patient is 2 years old

   - Contraindication to MMR vaccine on or before patient is 2 years old

   - Evidence of disease of each measles, mumps, and rubella on or before patient is 2 years old

4. HiB – any of the following
   - 3 Haemophilus Influenzae Type B (HiB) vaccines (3-dose series) or 4 HiB vaccines (combination of 3- and/or 4-dose series) one or more days apart between the ages of 42 days and 2 years (inclusive)

   - Contraindication to HiB vaccine on or before patient is 2 years old

5. Hepatitis B – any of the following:
   - 3 Hepatitis B vaccines one or more days apart on or before patient is 2 years old

   - Contraindication to Hepatitis B vaccine on or before patient is 2 years old

   - Evidence of disease of Hepatitis B on or before patient is 2 years old

6. Varicella – any of the following:
   - One varicella zoster vaccine (VZV) on or before patient is 2 years old

   - Contraindication to VZV on or before patient is 2 years old

   - Evidence of disease of VZV on or before patient is 2 years old

7. Pneumococcal – any of the following:
   - 4 Pneumococcal conjugate vaccines one or more days apart between the ages of 42 days and 2 years (inclusive)

   - Contraindication to Pneumococcal conjugate vaccine on or before patient is 2 years old

8. Hepatitis A – any of the following:
   - One Hepatitis A on or before patient is 2 years old

   - Contraindication to Hepatitis A on or before patient is 2 years old

   - Evidence of disease of Hepatitis A on or before patient is 2 years old

9. Rotavirus – any of the following:
   - 2 Rotavirus vaccines (2-dose series) or 3 Rotavirus vaccines (either 3 3-dose series or 2 3-dose series and 1 2-dose series) one or more days apart between the ages of 42 days and 2 years (inclusive)

   - Contraindication to Rotavirus on or before patient is 2 years old

10. Influenza – any of the following:
    - 2 Influenza vaccines one or more days apart between the ages of 180 days and 2 years (inclusive)

    - Contraindication to Influenza vaccine on or before patient is 2 years old

Immunization Definitions

DTaP Vaccine

- Immunization (CVX) codes 106, 107, 110, 120, 20, 50 [BGP IPC DTAP CVX CODES]

- CPT 90698, 90700, 90723 [BGP IPC DTAP CPT CODES]

Contraindication to DTaP Vaccine

- Anaphylactic Reaction to DTaP (SNOMED 219084006, 293108006, 428281000124107, 428291000124105)

- Immunization Package contraindication of "Anaphylaxis"

- Encephalopathy due to Childhood Vaccination

Polio (IPV) Vaccine

- Immunization (CVX) codes 10, 110, 120, 89 [BGP IPC IPV CVX CODES]

- CPT 90698, 90713, 90723 [BGP IPC IPV CPT CODES]

Contraindication to Polio (IPV) Vaccine

- Anaphylactic Reaction to Inactivated Polio Vaccine (SNOMED 293117006), Streptomycin (SNOMED 292925004), Polymyxin (SNOMED 292992006), or Neomycin (SNOMED 292927007)

- Immunization Package contraindication of "Anaphylaxis" or "Neomycin Allergy"

Measles, Mumps, Rubella (MMR) Vaccine

- Immunization (CVX) codes 03, 94 [BGP IPC MMR CVX CODES]

- CPT 90707, 90710 [BGP IPC MMR CPT CODES]

Contraindication to MMR Vaccine

- Anaphylactic Reaction to Neomycin (SNOMED 292927007)

- Immunization Package contraindication of "Anaphylaxis," "Immune Deficiency," or "Neomycin Allergy"

- Disorders of the Immune System

- HIV

- Malignant Neoplasm of Lymphatic and Hematopoietic Tissue

Evidence of Disease of Measles

- Diagnosis (POV or Problem List entry where the status is not Deleted):
  - ICD-10: B05.0, B05.1, B05.2, B05.3, B05.4, B05.81, B05.89, B05.9 [BGP IPC MEASLES DXS]
  - SNOMED data set PXRM BGP IPC MEASLES EVID

- Measles antibody titer (LOINC 21500-4, 21501-2, 22501-1, 22502-9) with result greater than or equal to ($\geq$) 1.10

- Measles antibody test (LOINC 20479-2, 35275-7, 40648-8, 41132-2, 53536-9) with positive finding (SNOMED 441773004)

Evidence of Disease of Mumps

- Diagnosis (POV or Problem List entry where the status is not Deleted):
  - ICD-10: B26.0, B26.1, B26.2, B26.3, B26.81, B26.82, B26.83, B26.84, B26.85, B26.89, B26.9 [BGP IPC MUMPS DXS]
  - SNOMED data set PXRM BGP IPC MUMPS EVID

- Mumps antibody titer (LOINC 21401-5, 22416-2, 22417-0, 6477-4) with result greater than or equal to (≥) 1.10
- Mumps antibody test (LOINC 22415-4, 39011-2, 40737-9, 6476-6, 74422-7) with positive finding (SNOMED 441773004)

Evidence of Disease of Rubella

- Diagnosis (POV or Problem List entry where the status is not Deleted):
    - ICD-10 B06.00, B06.01, B06.02, B06.09, B06.81, B06.82, B06.89, B06.9 [BGP IPC RUBELLA DXS]
    - SNOMED data set PXRM BGP IPC RUBELLA EVID
- Rubella antibody titer (LOINC 41763-4, 46110-3) with result greater than or equal to (≥) 1.10
- Rubella antibody test (LOINC 25514-1, 39013-8, 40667-8, 40668-6, 63462-6, 74415-1) with positive finding (SNOMED 441773004)

Haemophilus Influenzae Type B (HiB) Vaccine 3-dose series

- Immunization (CVX) code 49
- CPT 90647

Haemophilus Influenzae Type B (HiB) Vaccine 4-dose series

- Immunization (CVX) codes 120, 148, 48, 50, 51 [BGP IPC HIB CVX CODES]
- CPT 90644, 90648, 90698, 90748 [BGP IPC HIB CPT CODES]

Contraindication to HiB Vaccine

- Anaphylactic Reaction to HiB (SNOMED 433621000124101)
- Immunization Package contraindication of "Anaphylaxis"

Hepatitis B Vaccine

- Immunization (CVX) codes 08, 110, 44, 45, 51 [BGP IPC HEPB CVX CODES]
- CPT 90723, 90740, 90744, 90747, 90748 [BGP IPC HEPB CPT CODES]

Contraindication to Hepatitis B Vaccine

- Anaphylactic Reaction to Hepatitis B vaccine (SNOMED 428321000124101) or Common Baker's Yeast (SNOMED 34015007, 419447004)
- Immunization Package contraindication of "Anaphylaxis"

Evidence of Disease of Hepatitis B

- Diagnosis (POV or Problem List entry where the status is not Deleted):
    - ICD-10: B16.0, B16.1, B16.2, B16.9, B17.0, B18.0, B18.1, B19.10, B19.11 [BGP IPC HEP B DXS]
    - SNOMED data set PXRM BGP IPC HEP B EVID
- Anti Hepatitis B Virus Surface Ab (LOINC 10900-9, 22322-2, 39535-0, 48070-7, 49177-9, 75409-3) with positive finding (SNOMED 441773004)

Varicella Zoster Vaccine (VZV) Vaccine

- Immunization (CVX) codes 21, 94 [BGP IPC VZV CVX CODES]
- CPT 90710, 90716 [BGP IPC VZV CPT CODES]

Contraindication to VZV Vaccine

- Anaphylactic Reaction to Neomycin (SNOMED 292927007)
- Immunization Package contraindication of "Anaphylaxis," "Immune Deficiency," or "Neomycin Allergy"
- Disorders of the Immune System
- HIV
- Malignant Neoplasm of Lymphatic and Hematopoietic Tissue

Evidence of Disease of VZV

- Diagnosis (POV or Problem List entry where the status is not Deleted):
    - ICD-10: B01.0, B01.11, B01.12, B01.2, B01.81, B01.89, B01.9, B02.0, B02.1, B02.21, B02.22, B02.23, B02.24, B02.29, B02.30, B02.31, B02.32, B02.33, B02.34, B02.39, B02.7, B02.8, B02.9 [BGP IPC VARICELLA DXS]
    - SNOMED data set PXRM BGP IPC VZV EVID
- Varicella Zoster antibody titer (LOINC 21595-4, 22601-9, 22602-7, 6569-8) with result greater than or equal to (≥) 1.10
- Varicella Zoster antibody test (LOINC 15410-4, 19162-7, 41512-5, 42537-1, 53534-4) with positive finding (SNOMED 441773004)

Pneumococcal Vaccine

- Immunization (CVX) codes 133 [BGP IPC PNEUMO CVX CODES]
- CPT 90670 [BGP IPC PNEUMO CPT CODES]

Contraindication to Pneumococcal Vaccine

- Anaphylactic Reaction to Pneumococcal conjugate (SNOMED 293116002)

- Immunization Package contraindication of "Anaphylaxis"

Hepatitis A Vaccine

- Immunization (CVX) codes 31, 83, 85 [BGP IPC HEPA CVX CODES]

- CPT 90633 [BGP IPC HEPA CPT CODES]

Contraindication to Hepatitis A Vaccine

- Anaphylactic Reaction to Hepatitis A (SNOMED 293126009)

- Immunization Package contraindication of "Anaphylaxis"

Evidence of Disease of Hepatitis A

- Diagnosis (POV or Problem List entry where the status is not Deleted):

    – ICD-10: B15.0, B15.9 [BGP IPC HEP A DXS]

    – SNOMED data set PXRM BGP IPC HEP A EVID

- Anti Hepatitis A IgG Antigen test (LOINC 32018-4, 40724-7, 51913-2) with positive finding (SNOMED 441773004)

Rotavirus Vaccine 2-Dose Series

- Immunization (CVX) codes 119 [BGP IPC ROTA 2 DOSE CVX CODES]

- CPT 90681 [BGP IPC ROTA 2 DOSE CPT CODES]

Rotavirus Vaccine 3-Dose Series

- Immunization (CVX) codes 116, 122 [BGP IPC ROTA 3 DOSE CVX CODES]

- CPT 90680 [BGP IPC ROTA 3 DOSE CPT CODES]

Contraindication to Rotavirus Vaccine

- Anaphylactic Reaction to Rotavirus Vaccine (SNOMED 428331000124103)

- Immunization Package contraindication of "Anaphylaxis," "Immune Deficiency"

- Severe Combined Immunodeficiency

- Intussusception

Influenza Vaccine

- Immunization (CVX) codes 135, 140, 141, 150, 153, 155, 158, 161, 88 [BGP IPC CHILD FLU CVX CODES]

- CPT 90655, 90657, 90661, 90662, 90673, 90685, 90686, 90687, 90688 [BGP IPC CHILD FLU CPT CODES]

Contraindication to Influenza Vaccine

- Anaphylactic Reaction to Influenza vaccine (SNOMED 420113004) or Neomycin (SNOMED 292927007)

- Immunization Package contraindication of "Anaphylaxis," "Immune Deficiency," or "Neomycin Allergy"

- Disorders of the Immune System

- HIV

- Malignant Neoplasm of Lymphatic and Hematopoietic Tissue

Encephalopathy Due to Childhood Vaccination

Diagnosis (POV or Problem List entry where the status is not Deleted):

- ICD-10: G04.32 [BGP IPC IZ ENCEPHALOPATHY DXS]

- SNOMED data set PXRM BGP IPC IZ ENCEPHAL

Disorders of the Immune System

Diagnosis (POV or Problem List entry where the status is not Deleted):

- ICD-10: D80.0, D80.1, D80.2, D80.3, D80.4, D80.5, D80.6, D80.7, D80.8, D80.9, D81.0, D81.1, D81.2, D81.4, D81.6, D81.7, D81.89, D81.9, D82.0, D82.1, D82.2, D82.3, D82.4, D82.8, D82.9, D83.0, D83.1, D83.2, D83.8, D83.9, D84.0, D84.1, D84.8, D84.9, D89.3, D89.810, D89.811, D89.812, D89.813, D89.82, D89.89, D89.9 [BGP IPC IMMUNE DISORDERS DXS]

- SNOMED data set PXRM BGP IPC IMMUNE DIS

HIV

Diagnosis (POV or Problem List entry where the status is not Deleted):

- ICD-9: 042, 079.53, V08; ICD-10: B20, B97.35, Z21 [BGP IPC HIV DXS]

- SNOMED data set PXRM BGP IPC HIV

Malignant Neoplasm of Lymphatic and Hematopoietic Tissue

Diagnosis (POV or Problem List entry where the status is not Deleted):

- ICD-10: C81.00, C81.01, C81.02, C81.03, C81.04, C81.05, C81.06, C81.07, C81.08, C81.09, C81.10, C81.11, C81.12, C81.13, C81.14, C81.15, C81.16, C81.17, C81.18, C81.19, C81.20, C81.21, C81.22, C81.23, C81.24, C81.25, C81.26, C81.27, C81.28, C81.29, C81.30, C81.31, C81.32, C81.33, C81.34, C81.35, C81.36, C81.37, C81.38, C81.39, C81.40, C81.41, C81.42, C81.43, C81.44, C81.45, C81.46, C81.47, C81.48, C81.49, C81.70, C81.71, C81.72, C81.73, C81.74, C81.75, C81.76, C81.77, C81.78, C81.79, C81.90, C81.91, C81.92, C81.93, C81.94, C81.95, C81.96, C81.97, C81.98, C81.99, C82.00, C82.01, C82.02, C82.03, C82.04, C82.05, C82.06, C82.07, C82.08, C82.09,

C82.10, C82.11, C82.12, C82.13, C82.14, C82.15, C82.16, C82.17, C82.18, C82.19, C82.20, C82.21, C82.22, C82.23, C82.24, C82.25, C82.26, C82.27, C82.28, C82.29, C82.30, C82.31, C82.32, C82.33, C82.34, C82.35, C82.36, C82.37, C82.38, C82.39, C82.40, C82.41, C82.42, C82.43, C82.44, C82.45, C82.46, C82.47, C82.48, C82.49, C82.50, C82.51, C82.52, C82.53, C82.54, C82.55, C82.56, C82.57, C82.58, C82.59, C82.60, C82.61, C82.62, C82.63, C82.64, C82.65, C82.66, C82.67, C82.68, C82.69, C82.80, C82.81, C82.82, C82.83, C82.84, C82.85, C82.86, C82.87, C82.88, C82.89, C82.90, C82.91, C82.92, C82.93, C82.94, C82.95, C82.96, C82.97, C82.98, C82.99, C83.00, C83.01, C83.02, C83.03, C83.04, C83.05, C83.06, C83.07, C83.08, C83.09, C83.10, C83.11, C83.12, C83.13, C83.14, C83.15, C83.16, C83.17, C83.18, C83.19, C83.30, C83.31, C83.32, C83.33, C83.34, C83.35, C83.36, C83.37, C83.38, C83.39, C83.50, C83.51, C83.52, C83.53, C83.54, C83.55, C83.56, C83.57, C83.58, C83.59, C83.70, C83.71, C83.72, C83.73, C83.74, C83.75, C83.76, C83.77, C83.78, C83.79, C83.80, C83.81, C83.82, C83.83, C83.84, C83.85, C83.86, C83.87, C83.88, C83.89, C83.90, C83.91, C83.92, C83.93, C83.94, C83.95, C83.96, C83.97, C83.98, C83.99, C84.00, C84.01, C84.02, C84.03, C84.04, C84.05, C84.06, C84.07, C84.08, C84.09, C84.10, C84.11, C84.12, C84.13, C84.14, C84.15, C84.16, C84.17, C84.18, C84.19, C84.40, C84.41, C84.42, C84.43, C84.44, C84.45, C84.46, C84.47, C84.48, C84.49, C84.60, C84.61, C84.62, C84.63, C84.64, C84.65, C84.66, C84.67, C84.68, C84.69, C84.70, C84.71, C84.72, C84.73, C84.74, C84.75, C84.76, C84.77, C84.78, C84.79, C84.90, C84.91, C84.92, C84.93, C84.94, C84.95, C84.96, C84.97, C84.98, C84.99, C84.A0, C84.A1, C84.A2, C84.A3, C84.A4, C84.A5, C84.A6, C84.A7, C84.A8, C84.A9, C84.Z0, C84.Z1, C84.Z2, C84.Z3, C84.Z4, C84.Z5, C84.Z6, C84.Z7, C84.Z8, C84.Z9, C85.10, C85.11, C85.12, C85.13, C85.14, C85.15, C85.16, C85.17, C85.18, C85.19, C85.20, C85.21, C85.22, C85.23, C85.24, C85.25, C85.26, C85.27, C85.28, C85.29, C85.80, C85.81, C85.82, C85.83, C85.84, C85.85, C85.86, C85.87, C85.88, C85.89, C85.90, C85.91, C85.92, C85.93, C85.94, C85.95, C85.96, C85.97, C85.98, C85.99, C86.0, C86.1, C86.2, C86.3, C86.4, C86.5, C86.6, C88.2, C88.3, C88.4, C88.8, C88.9, C90.00, C90.01, C90.02, C90.10, C90.11, C90.12, C90.20, C90.21, C90.22, C90.30, C90.31, C90.32, C91.00, C91.01, C91.02, C91.10, C91.11, C91.12, C91.30, C91.31, C91.32, C91.40, C91.41, C91.42, C91.50, C91.51, C91.52, C91.60, C91.61, C91.62, C91.90, C91.91, C91.92, C91.A0, C91.A1, C91.A2, C91.Z0, C91.Z1, C91.Z2, C92.00, C92.01, C92.02, C92.10, C92.11, C92.12, C92.20, C92.21, C92.22, C92.30, C92.31, C92.32, C92.40, C92.41, C92.42, C92.50, C92.51, C92.52, C92.60, C92.61, C92.62, C92.90, C92.91, C92.92, C92.A0, C92.A1, C92.A2, C92.Z0, C92.Z1, C92.Z2, C93.00, C93.01, C93.02, C93.10, C93.11, C93.12, C93.30, C93.31, C93.32, C93.90, C93.91, C93.92, C93.Z0, C93.Z1, C93.Z2, C94.00, C94.01, C94.02, C94.20, C94.21, C94.22, C94.30, C94.31, C94.32, C94.80, C94.81, C94.82, C95.00, C95.01, C95.02, C95.10, C95.11, C95.12, C95.90,

C95.91, C95.92, C96.0, C96.2, C96.20, C96.21, C96.22, C96.29, C96.4, C96.9, C96.A, C96.Z [BGP IPC LYMPHATIC CANCER DXS]

- SNOMED data set PXRM BGP IPC LYMPH CANCER

Severe Combined Immunodeficiency

Diagnosis (POV or Problem List entry where the status is not Deleted):

- ICD-10: D81.0, D81.1, D81.2, D81.9 [BGP IPC SCID DXS]

- SNOMED data set PXRM BGP IPC SCID

Intussusception

Diagnosis (POV or Problem List entry where the status is not Deleted):

- ICD-10: K56.1 [BGP IPC INTUSSUSCEPTION DXS]

- SNOMED data set PXRM BGP IPC INTUSSUS

2.3.3.5 Patient List

List of patients 2 years of age with IZ, if any. If a patient did not have all doses in a multiple-dose vaccine, the IZ will not be listed. For example, if a patient only had 2 DTaP, no IZ will be listed for DTaP.

2.3.4 Adolescent Immunizations

2.3.4.1 Owner and Contact

IPC Group

2.3.4.2 Denominators

IPC User Population patients aged 13 years with no contraindication for Tdap, HPV, or meningococcal.

2.3.4.3 Numerators

1. Patients who had one dose of meningococcal vaccine on or between the patient's 11th and 13th birthdays.

2. Patients who had one Tdap on or between the patient's 10th and 13th birthdays.

3. Patients who have completed the HPV vaccine series with different dates of service on or between the patient's 9th and 13th birthdays.

4. Patients who are compliant for meningococcal, Tdap, and HPV during the specified timeframes.

2.3.4.4   Definitions

Age

Age of the patient is calculated at the end of the Report Period (patient must turn 13 years of age during the Report Period).

Timing of Doses

Because IZ data comes from multiple sources, any IZ codes documented on dates within 10 days of each other will be considered as the same immunization.

Dosage and Types of Immunizations

- 1 dose of Td

- 1 dose of Meningococcal

- 2 or 3 doses of HPV—in order to qualify for 2 doses, the doses must be separated by a minimum of 146 days

Denominator Exclusions

Patients with any of the following should be excluded from the denominator:

- Tdap contraindication: Immunization Package contraindication of "Anaphylaxis."

- Meningococcal contraindication: Immunization Package contraindication of "Anaphylaxis."

- HPV contraindication: Immunization Package contraindication of "Anaphylaxis."

> **Note:** Patients with contraindications should only be excluded if they did not also receive the immunizations for the contraindicated vaccines.

Immunization Definitions

Tdap

- Immunization (CVX) code 115 [BGP IPC TDAP CVX CODES]

- CPT 90715

Meningococcal

- Immunization (CVX) codes: 32, 108, 114, 136, 147, 148

- CPT 90644, 90733, 90734

HPV

- Immunization (CVX) codes 62, 118, 137, 165

- CPT 90649, 90650, 90651

2.3.4.5 Patient List

List of patients aged 13 years with IZ, if any.

2.4 Cancer Screen Group

2.4.1 Cervical Cancer Screening (CMS124)

2.4.1.1 Owner and Contact

IPC Group

2.4.1.2 Denominators

Female patients aged 23–64 years without documented history of hysterectomy and no hospice indicator.

2.4.1.3 Numerators

Patients with a cervical cytology (Pap Test) documented in the past three years, or if patient is 30–64 years of age, either a cervical cytology documented in the past three years or cervical cytology/human papillomavirus (HPV) co-testing documented in the past five years.

2.4.1.4 Definitions

Age

Patient must be 23 years of age or older and less than 64 years at the beginning of the Report Period.

Denominator Inclusions

To be included in the denominator, the patient must have any of the following encounters performed during the Report Period:

- Office visit:
  - CPT 99201, 99202, 99203, 99204, 99205, 99212, 99213, 99214, 99215 [BGP IPC OFFICE VISIT CPTS]
  - SNOMED data set PXRM BGP IPC OFFICE VISIT
- Preventive Care Services - Established Office Visit, 18 and Up: CPT 99395, 99396, 99397 [BGP IPC PREVCARE EOV greater than or equal to (≥) 18 CPTS]

- Preventive Care Services - Initial Office Visit, 18 and Up: CPT 99385, 99386, 99387 [BGP IPC PREVCARE IOV greater than or equal to (≥) 18 CPTS]

- Home Healthcare Services:

  – CPT 99341, 99342, 99343, 99344, 99345, 99347, 99348, 99349, 99350 [BGP IPC HOMEHEALTH VISIT CPTS]

  – SNOMED data set PXRM BGP IPC HOME HEALTH

Denominator Exclusions

Patients with any of the following are excluded from the denominator:

- Hospice indicator during the Report Period.

- Hysterectomy with no residual cervix or congenital absence of cervix any time prior to the end of the Report Period.

Hospice Indicator

- SNOMED data set PXRM BGP IPC INPT ENC (Inpatient encounter) with DISCHARGE SNOMED CT data set PXRM BGP IPC DISCHG HOSPICE (discharge to home or health care facility for hospice care).

- POV or Problem List entry where the status is not Inactive or Deleted: SNOMED data set PXRM BGP IPC HOSPICE (hospice care ambulatory).

Hysterectomy with no Residual Cervix

Defined as any of the following ever:

- CPT 51925, 56308, 57540, 57545, 57550, 57555, 57556, 58150, 58152, 58200, 58210, 58240, 58260, 58262, 58263, 58267, 58270, 58275, 58280, 58285, 58290, 58291, 58292, 58293, 58294, 58548, 58550, 58552, 58553, 58554, 58570, 58571, 58572, 58573, 58575, 58951, 58953, 58954, 58956, 59135 [BGP IPC HYSTERECTOMY CPTS]

- Diagnosis (POV or Problem List entry where the status is not Deleted) ICD-9: 618.5, 752.43, V88.01, V88.03; ICD-10: N99.3, Z12.72, Z90.710, Z90.712, Q51.5 [BGP HYSTERECTOMY DXS]

- Procedure ICD-9: 68.4-68.8; ICD-10: 0UT90ZZ, 0UT94ZL, 0UT94ZZ, 0UT97ZL, 0UT97ZZ, 0UT98ZL, 0UT98ZZ, 0UT9FZL, 0UT9FZZ, 0UTC*ZZ [BGP HYSTERECTOMY PROCEDURES]

- Women's Health procedure called Hysterectomy

Congenital Absence of Cervix

- SNOMED code 37687000

Cervical Cytology (Pap Test)

- LOINC 10524-7, 18500-9, 19762-4, 19764-0, 19765-7, 19766-5, 19774-9, 33717-0, 47527-7, 47528-5 [BGP IPC PAP LOINC CODES]

- Site-populated taxonomy BGP PAP SMEAR TAX

- Women's Health: Any procedure called PAP SMEAR

- CPT 88141 through 88155, 88164 through 88167, 88174 through 88175, G0123, G0124, G0141, G0143, G0144, G0145, G0147, G0148, P3000, P3001, Q0091 [BGP CPT PAP]

HPV Test

- LOINC 21440-3, 30167-1, 38372-9, 59263-4, 59264-2, 59420-0, 69002-4, 71431-1, 75406-9, 75694-0, 77379-6, 77399-4, 77400-0, 82354-2, 82456-5, 82675-0 [BGP IPC LOINC CODES]

- Site-populated taxonomy BGP HPV TAX

- CPT 87623 through 87625

- Women's Health: Any procedure called HPV Screen

- Women's Health: Any procedure called PAP SMEAR and where the HPV field equals Yes

2.4.1.5   Patient List

List of women aged 23–64 years with documented Pap test and HPV, if any.

2.4.2   Breast Cancer Screening (CMS125)

2.4.2.1   Owner and Contact

IPC Group

2.4.2.2   Denominators

Female patients aged 51–74 years without a documented history of bilateral mastectomy or two separate unilateral mastectomies and no hospice indicator.

2.4.2.3   Numerators

Patients who had a Mammogram documented in the past 27 months.

2.4.2.4   Definitions

Age

Patient must be 51 years of age or older and less than 74 years at the beginning of the Report Period.

Denominator Inclusions

To be included in the denominator, the patient must have any of the following encounters performed during the Report Period:

- Office visit:
  - CPT 99201, 99202, 99203, 99204, 99205, 99212, 99213, 99214, 99215 [BGP IPC OFFICE VISIT CPTS]
  - SNOMED data set PXRM BGP IPC OFFICE VISIT
- Preventive Care Services - Established Office Visit, 18 and Up: CPT 99395, 99396, 99397 [BGP IPC PREVCARE EOV greater than or equal to (≥) 18 CPTS]
- Preventive Care Services - Initial Office Visit, 18 and Up: CPT 99385, 99386, 99387 [BGP IPC PREVCARE IOV greater than or equal to (≥) 18 CPTS]
- Home Healthcare Services:
  - CPT 99341, 99342, 99343, 99344, 99345, 99347, 99348, 99349, 99350 [BGP IPC HOMEHEALTH VISIT CPTS]
  - SNOMED data set PXRM BGP IPC HOME HEALTH
- Annual Wellness Visit:
  - CPT G0438, G0439 [BGP IPC ANNUAL WELLNESS CPTS]
  - SNOMED 444971000124105, 456201000124103

Denominator Exclusions

Patients with any of the following are excluded from the denominator:

- Hospice indicator during the Report Period.
- Patients age 66 and older who have spent more than 90 days in long-term care during the report period.
- Patients age 66 and older who have both of the following:

A. Any of the following during the report period:

  - Frailty device
  - Frailty diagnosis
  - Frailty encounter
  - Frailty symptom

    B. Any of the following in the past two years:

- Two or more outpatient encounters with advanced illness diagnosis
- Inpatient encounter with advanced illness diagnosis
- Dementia medications

- Bilateral mastectomy any time prior to the end of the Report Period.

- Two unilateral mastectomies, defined as two unilateral mastectomy procedures or one right mastectomy and one left mastectomy.

Hospice Indicator

- SNOMED data set PXRM BGP IPC INPT ENC (Inpatient encounter) with DISCHARGE SNOMED CT data set PXRM BGP IPC DISCHG HOSPICE (discharge to home or health care facility for hospice care).

- POV or Problem List entry where the status is not Inactive or Deleted: SNOMED data set PXRM BGP IPC HOSPICE (hospice care ambulatory).

Long-term Care

Long-term care is defined as any of the following:

- Care Services in Long-Term Residential Facility:

  - CPT 99324, 99325, 99326, 99327, 99328, 99334, 99335, 99336, 99337 [BGP IPC LT RES FACILITY CPTS]
  - SNOMED data set PXRM BGP IPC LONG TERM CARE

- Nursing Facility Visit:

  - CPT 99304, 99305, 99306, 99307, 99308, 99309, 99310
  - SNOMED 18170008, 207195004

Frailty device

Frailty device is defined as any of the following: HCPCS E0100, E0105, E0130, E0135, E0140, E0141, E0143, E0144, E0147, E0148, E0149, E0163, E0165, E0167, E0168, E0170, E0171, E0250, E0251, E0255, E0256, E0260, E0261, E0265, E0266, E0270, E0290, E0291, E0292, E0293, E0294, E0295, E0296, E0297, E0301, E0302, E0303, E0304, E0424, E0425, E0430, E0431, E0433, E0434, E0435, E0439, E0440, E0441, E0442, E0443, E0444, E0462, E0465, E0466, E0470, E0471, E0472, E0561, E0562, E1130, E1140, E1150, E1160, E1161, E1240, E1250, E1260, E1270, E1280, E1285, E1290, E1295, E1296, E1297, E1298

Frailty diagnosis

Frailty diagnosis is defined as Diagnosis (POV or active Problem List entry):

- ICD-10: L89.119, L89.139, L89.149, L89.159, L89.209, L89.309, L89.899, L89.90, M62.50, M62.81, M62.84, W01.0XXA, W01.0XXD, W01.0XXS, W01.10XA, W01.10XD, W01.10XS, W01.110A, W01.110D, W01.110S, W01.111A, W01.111D, W01.111S, W01.118A, W01.118D, W01.118S, W01.119A, W01.119D, W01.119S, W01.190A, W01.190D, W01.190S, W01.198A, W01.198D, W01.198S, W06.XXXA, W06.XXXD, W06.XXXS, W07.XXXA, W07.XXXD, W07.XXXS, W08.XXXA, W08.XXXD, W08.XXXS, W10.0XXA, W10.0XXD, W10.0XXS, W10.1XXA, W10.1XXD, W10.1XXS, W10.2XXA, W10.2XXD, W10.2XXS, W10.8XXA, W10.8XXD, W10.8XXS, W10.9XXA, W10.9XXD, W10.9XXS, W18.00XA, W18.00XD, W18.00XS, W18.02XA, W18.02XD, W18.02XS, W18.09XA, W18.09XD, W18.09XS, W18.11XA, W18.11XD, W18.11XS, W18.12XA, W18.12XD, W18.12XS, W18.2XXA, W18.2XXD, W18.2XXS, W18.30XA, W18.30XD, W18.30XS, W18.31XA, W18.31XD, W18.31XS, W18.39XA, W18.39XD, W18.39XS, W19.XXXA, W19.XXXD, W19.XXXS, Y92.199, Z59.3, Z73.6, Z74.01, Z74.09, Z74.1, Z74.2, Z74.3, Z74.8, Z74.9, Z91.81, Z99.11, Z99.3, Z99.81, Z99.89 [BGP ECQM FRAILTY DXS, BGP ECQM FRAILTY CAUSE CODES]

- SNOMED data set PXRM BGP ECQM FRAILTY DX

Frailty encounter

Frailty encounter is defined as any of the following:

- CPT 99504, 99509, G0162, G0299, G0300, G0493, G0494, S0271, S0311, S9123, S9124, T1000, T1001, T1002, T1003, T1004, T1005, T1019, T1020, T1021, T1022, T1030, T1031

- SNOMED 413467001

Frailty symptom

Frailty symptom is defined as Diagnosis (POV or active Problem List entry):

- ICD-10: R26.0, R26.1, R26.2, R26.89, R26.9, R41.81, R53.1, R53.81, R53.83, R54, R62.7, R63.4, R63.6, R64 [BGP ECQM FRAILTY SYMPTOM DXS]

- SNOMED data set PXRM BGP ECQM FRAILTY SYMPTOM

Outpatient Encounter

Outpatient encounter is defined as any of the following:

- Outpatient:
  - CPT 99201, 99202, 99203, 99204, 99205, 99211, 99212, 99213, 99214, 99215, 99241, 99242, 99243, 99244, 99245, 99341, 99342, 99343, 99344, 99345, 99347, 99348, 99349, 99350, 99381, 99382, 99383, 99384, 99385, 99386, 99387, 99391, 99392, 99393, 99394, 99395, 99396, 99397, 99401, 99402, 99403, 99404, 99411, 99412, 99429, 99455, 99456, 99483, G0402, G0438, G0439, G0463, T1015

- Observation:
  - CPT 99217, 99218, 99219, 99220; 3) ED: CPT 99281, 99282, 99283, 99284, 99285
  - SNOMED 4525004

- Nonacute Inpatient:
  - CPT 99304, 99305, 99306, 99307, 99308, 99309, 99310, 99315, 99316, 99318, 99324, 99325, 99326, 99327, 99328, 99334, 99335, 99336, 99337
  - SNOMED data set PXRM BGP ECQM NONACUTE IP

Inpatient Encounter

Inpatient encounter is defined as any of the following:

- Service Category I or H

- CPT 99221, 99222, 99223, 99231, 99232, 99233, 99238, 99239, 99251, 99252, 99253, 99254, 99255, 99291

- SNOMED data set PXRM BGP ECQM ACUTE IP

Advanced Illness

Advanced illness is defined as Diagnosis (POV):

- ICD-10: A81.00, A81.01, A81.09, C25.0, C25.1, C25.2, C25.3, C25.4, C25.7, C25.8, C25.9, C71.9, C77.0, C77.1, C77.2, C77.3, C77.4, C77.5, C77.8, C77.9, C78.00, C78.1, C78.2, C78.39, C78.4, C78.5, C78.6, C78.7, C78.89, C79.00, C79.11, C79.19, C79.2, C79.31, C79.32, C79.49, C91.00, C91.02, C92.00, C92.02, C93.00, C93.02, C93.90, C93.92, C93.Z0, C93.Z2, C94.30, C94.32, F01.50, F01.51, F02.80, F02.81, F03.90, F03.91, F04, F10.27, F10.96, F10.97, G10, G12.21, G20, G30.0, G30.1, G30.8, G30.9, G31.01, G31.09, G31.83, I09.81, I11.0, I12.0, I13.0, I13.11, I13.2, I50.1, I50.20, I50.21, I50.22, I50.23, I50.30, I50.31, I50.32, I50.33, I50.40, I50.41, I50.42, I50.43, I50.810, I50.811, I50.812, I50.813, I50.814, I50.82, I50.83, I50.84, I50.89, I50.9, J43.0, J43.1, J43.2, J43.8, J43.9, J68.4, J84.10, J84.112, J84.17, J96.10, J96.11, J96.12, J96.20, J96.21, J96.22, J96.90, J96.91, J96.92, J98.2, J98.3, K70.10, K70.11, K70.2, K70.30, K70.31, K70.40, K70.41, K70.9, K74.0, K74.1, K74.2, K74.4, K74.5, K74.60, K74.69, N18.5, N18.6 [BGP ECQM ADV ILLNESS DXS]
- SNOMED data set PXRM BGP ECQM ADV ILLNESS

Dementia medications

Dementia medications are defined as Medication taxonomy BGP ECQM DEMENTIA MEDS. Medications must not have a comment of RETURNED TO STOCK.

Bilateral Mastectomy

- Diagnosis (POV or Problem List entry where the status is not Deleted):
  – ICD-10: Z90.13 [BGP IPC BILAT MASTECTOMY DXS]
  – SNOMED 136071000119101, 428529004
- Procedure ICD-9: 85.42, 85.44, 85.46, 85.48; ICD-10: 0HTV0ZZ [BGP ECQM BILAT MASTECTOMY PROC]

Unilateral Mastectomy

CPT 19180, 19200, 19220, 19240, 19303, 19304, 19305, 19306, 19307 [BGP IPC UNILAT MASTECTOMY CPTS]

Right Mastectomy

- Diagnosis (POV or Problem List entry where the status is not Deleted):
  – ICD-10: Z90.11 [BGP IPC RT MASTECTOMY DXS]
  – SNOMED 137681000119108, 429242008
- Procedure ICD-10: 0HTT0ZZ [BGP ECQM RT MASTECTOMY PROCS]

- Unilateral mastectomy with unspecified laterality (Diagnosis [POV or Problem List entry where the status is not Deleted]):

    – ICD-9: V45.71; ICD-10: Z90.10 [BGP IPC UNILAT MASTECTOMY DXS]

    – SNOMED data set PXRM BGP IPC UNI MAST DX with anatomical location site: right (SNOMED 24028007, 419465000)

Left Mastectomy

- Diagnosis (POV or Problem List entry where the status is not Deleted):

    – ICD-10: Z90.12 [BGP IPC LT MASTECTOMY DXS]

    – SNOMED 137671000119105, 429009003

- Procedure ICD-10: 0HTU0ZZ [BGP ECQM LT MASTECTOMY PROCS]

- Unilateral mastectomy with unspecified laterality (Diagnosis (POV or Problem List entry where the status is not Deleted):

    – ICD-9: V45.71; ICD-10: Z90.10 [BGP IPC UNILAT MASTECTOMY DXS]

    – SNOMED data set PXRM BGP IPC UNI MAST DX with anatomical location site: left (SNOMED 419161000, 7771000)

Mammogram

- Radiology or CPT 77052-77059, 77065-77067, G0202, G0204, G0206 [BGP IPC MAMMOGRAM CPTS]

- LOINC 24604-1, 24605-8, 24606-6, 24610-8, 26175-0, 26176-8, 26177-6, 26287-3, 26289-9, 26291-5, 26346-7, 26347-5, 26348-3, 26349-1, 26350-9, 26351-7, 36319-2, 36625-2, 36626-0, 36627-8, 36642-7, 36962-9, 37005-6, 37006-4, 37016-3, 37017-1, 37028-8, 37029-6, 37030-4, 37037-9, 37038-7, 37052-8, 37053-6, 37539-4, 37542-8, 37543-6, 37551-9, 37552-7, 37553-5, 37554-3, 37768-9, 37769-7, 37770-5, 37771-3, 37772-1, 37773-9, 37774-7, 37775-4, 38067-5, 38070-9, 38071-7, 38072-5, 38090-7, 38091-5, 38807-4, 38820-7, 38854-6, 38855-3, 39150-8, 39152-4, 39153-2, 39154-0, 42168-5, 42169-3, 42174-3, 42415-0, 42416-8, 46335-6, 46336-4, 46337-2, 46338-0, 46339-8, 46342-2, 46350-5, 46351-3, 46354-7, 46355-4, 46356-2, 46380-2, 48475-8, 48492-3, 69150-1, 69251-7, 69259-0, 72137-3, 72138-1, 72139-9, 72140-7, 72141-5, 72142-3, 86462-9, 86463-7 [BGP IPC MAMMOGRAM LOINC CODES]

2.4.2.5   Patient List

List of women aged 51–74 years with mammogram, if any.

2.4.3   Colorectal Cancer Screening (CMS130)

2.4.3.1   Owner: Contact

IPC Group

2.4.3.2   Denominators

Patients aged 50–75 years without a documented history of colorectal cancer or total colectomy and no hospice indicator.

2.4.3.3   Numerators

Patients who have had any Colorectal Cancer (CRC) screening, defined as any of the following:

- Fecal Occult Blood Test (FOBT) during the Report Period

- FIT-DNA in the past two years

- Flexible sigmoidoscopy or CT colonography in the past four years

- Colonoscopy in the past nine years

2.4.3.4   Definitions

Age

Patient must be 50 years of age or older and less than 75 years at the beginning of the Report Period.

Denominator Inclusions

To be included in the denominator, the patient must have any of the following encounters performed during the Report Period:

- Office visit:
    - CPT 99201, 99202, 99203, 99204, 99205, 99212, 99213, 99214, 99215 [BGP IPC OFFICE VISIT CPTS]
    - SNOMED data set PXRM BGP IPC OFFICE VISIT

- Preventive Care Services - Established Office Visit, 18 and Up: CPT 99395, 99396, 99397 [BGP IPC PREVCARE EOV greater than or equal to (≥) 18 CPTS]

- Preventive Care Services - Initial Office Visit, 18 and Up: CPT 99385, 99386, 99387 [BGP IPC PREVCARE IOV greater than or equal to (≥) 18 CPTS]

- Home Healthcare Services:

- CPT 99341, 99342, 99343, 99344, 99345, 99347, 99348, 99349, 99350 [BGP IPC HOMEHEALTH VISIT CPTS]
- SNOMED data set PXRM BGP IPC HOME HEALTH
- Annual Wellness Visit:
  - CPT G0438, G0439 [BGP IPC ANNUAL WELLNESS CPTS]
  - SNOMED 444971000124105, 456201000124103

Denominator Exclusions

Patients with any of the following are excluded from the denominator:

- Hospice indicator during the Report Period.

- Patients age 66 and older who have spent more than 90 days in long-term care during the report period.

- Patients age 66 and older who have both of the following:

  A. Any of the following during the report period:
  - Frailty device
  - Frailty diagnosis
  - Frailty encounter
  - Frailty symptom

  B. Any of the following in the past two years:
  - Two or more outpatient encounters with advanced illness diagnosis
  - Inpatient encounter with advanced illness diagnosis
  - Dementia medications

- Malignant neoplasm of colon or total colectomy any time prior to the end of the Report Period.

Hospice Indicator

- SNOMED data set PXRM BGP IPC INPT ENC (Inpatient encounter) with DISCHARGE SNOMED CT data set PXRM BGP IPC DISCHG HOSPICE (discharge to home or health care facility for hospice care).

- POV or Problem List entry where the status is not Inactive or Deleted: SNOMED data set PXRM BGP IPC HOSPICE (hospice care ambulatory).

Long-term Care

Long-term care is defined as any of the following:

- Care Services in Long-Term Residential Facility:
  - CPT 99324, 99325, 99326, 99327, 99328, 99334, 99335, 99336, 99337 [BGP IPC LT RES FACILITY CPTS]

–   SNOMED data set PXRM BGP IPC LONG TERM CARE

- Nursing Facility Visit:

    –   CPT 99304, 99305, 99306, 99307, 99308, 99309, 99310
    –   SNOMED 18170008, 207195004

Frailty device

Frailty device is defined as any of the following: HCPCS E0100, E0105, E0130, E0135, E0140, E0141, E0143, E0144, E0147, E0148, E0149, E0163, E0165, E0167, E0168, E0170, E0171, E0250, E0251, E0255, E0256, E0260, E0261, E0265, E0266, E0270, E0290, E0291, E0292, E0293, E0294, E0295, E0296, E0297, E0301, E0302, E0303, E0304, E0424, E0425, E0430, E0431, E0433, E0434, E0435, E0439, E0440, E0441, E0442, E0443, E0444, E0462, E0465, E0466, E0470, E0471, E0472, E0561, E0562, E1130, E1140, E1150, E1160, E1161, E1240, E1250, E1260, E1270, E1280, E1285, E1290, E1295, E1296, E1297, E1298

Frailty diagnosis

Frailty diagnosis is defined as Diagnosis (POV or active Problem List entry):

- ICD-10: L89.119, L89.139, L89.149, L89.159, L89.209, L89.309, L89.899, L89.90, M62.50, M62.81, M62.84, W01.0XXA, W01.0XXD, W01.0XXS, W01.10XA, W01.10XD, W01.10XS, W01.110A, W01.110D, W01.110S, W01.111A, W01.111D, W01.111S, W01.118A, W01.118D, W01.118S, W01.119A, W01.119D, W01.119S, W01.190A, W01.190D, W01.190S, W01.198A, W01.198D, W01.198S, W06.XXXA, W06.XXXD, W06.XXXS, W07.XXXA, W07.XXXD, W07.XXXS, W08.XXXA, W08.XXXD, W08.XXXS, W10.0XXA, W10.0XXD, W10.0XXS, W10.1XXA, W10.1XXD, W10.1XXS, W10.2XXA, W10.2XXD, W10.2XXS, W10.8XXA, W10.8XXD, W10.8XXS, W10.9XXA, W10.9XXD, W10.9XXS, W18.00XA, W18.00XD, W18.00XS, W18.02XA, W18.02XD, W18.02XS, W18.09XA, W18.09XD, W18.09XS, W18.11XA, W18.11XD, W18.11XS, W18.12XA, W18.12XD, W18.12XS, W18.2XXA, W18.2XXD, W18.2XXS, W18.30XA, W18.30XD, W18.30XS, W18.31XA, W18.31XD, W18.31XS, W18.39XA, W18.39XD, W18.39XS, W19.XXXA, W19.XXXD, W19.XXXS, Y92.199, Z59.3, Z73.6, Z74.01, Z74.09, Z74.1, Z74.2, Z74.3, Z74.8, Z74.9, Z91.81, Z99.11, Z99.3, Z99.81, Z99.89 [BGP ECQM FRAILTY DXS, BGP ECQM FRAILTY CAUSE CODES]

- SNOMED data set PXRM BGP ECQM FRAILTY DX

Frailty encounter

Frailty encounter is defined as any of the following:

- CPT 99504, 99509, G0162, G0299, G0300, G0493, G0494, S0271, S0311, S9123, S9124, T1000, T1001, T1002, T1003, T1004, T1005, T1019, T1020, T1021, T1022, T1030, T1031

- SNOMED 413467001

Frailty symptom

Frailty symptom is defined as Diagnosis (POV or active Problem List entry):

- ICD-10: R26.0, R26.1, R26.2, R26.89, R26.9, R41.81, R53.1, R53.81, R53.83, R54, R62.7, R63.4, R63.6, R64 [BGP ECQM FRAILTY SYMPTOM DXS]

- SNOMED data set PXRM BGP ECQM FRAILTY SYMPTOM

Outpatient Encounter

Outpatient encounter is defined as any of the following:

- Outpatient:
  - CPT 99201, 99202, 99203, 99204, 99205, 99211, 99212, 99213, 99214, 99215, 99241, 99242, 99243, 99244, 99245, 99341, 99342, 99343, 99344, 99345, 99347, 99348, 99349, 99350, 99381, 99382, 99383, 99384, 99385, 99386, 99387, 99391, 99392, 99393, 99394, 99395, 99396, 99397, 99401, 99402, 99403, 99404, 99411, 99412, 99429, 99455, 99456, 99483, G0402, G0438, G0439, G0463, T1015

- Observation:
  - CPT 99217, 99218, 99219, 99220; 3) ED: CPT 99281, 99282, 99283, 99284, 99285
  - SNOMED 4525004

- Nonacute Inpatient:
  - CPT 99304, 99305, 99306, 99307, 99308, 99309, 99310, 99315, 99316, 99318, 99324, 99325, 99326, 99327, 99328, 99334, 99335, 99336, 99337
  - SNOMED data set PXRM BGP ECQM NONACUTE IP

Inpatient Encounter

Inpatient encounter is defined as any of the following:

- Service Category I or H

- CPT 99221, 99222, 99223, 99231, 99232, 99233, 99238, 99239, 99251, 99252, 99253, 99254, 99255, 99291

- SNOMED data set PXRM BGP ECQM ACUTE IP

Advanced Illness

Advanced illness is defined as Diagnosis (POV):

- ICD-10: A81.00, A81.01, A81.09, C25.0, C25.1, C25.2, C25.3, C25.4, C25.7, C25.8, C25.9, C71.9, C77.0, C77.1, C77.2, C77.3, C77.4, C77.5, C77.8, C77.9, C78.00, C78.1, C78.2, C78.39, C78.4, C78.5, C78.6, C78.7, C78.89, C79.00, C79.11, C79.19, C79.2, C79.31, C79.32, C79.49, C91.00, C91.02, C92.00, C92.02, C93.00, C93.02, C93.90, C93.92, C93.Z0, C93.Z2, C94.30, C94.32, F01.50, F01.51, F02.80, F02.81, F03.90, F03.91, F04, F10.27, F10.96, F10.97, G10, G12.21, G20, G30.0, G30.1, G30.8, G30.9, G31.01, G31.09, G31.83, I09.81, I11.0, I12.0, I13.0, I13.11, I13.2, I50.1, I50.20, I50.21, I50.22, I50.23, I50.30, I50.31, I50.32, I50.33, I50.40, I50.41, I50.42, I50.43, I50.810, I50.811, I50.812, I50.813, I50.814, I50.82, I50.83, I50.84, I50.89, I50.9, J43.0, J43.1, J43.2, J43.8, J43.9, J68.4, J84.10, J84.112, J84.17, J96.10, J96.11, J96.12, J96.20, J96.21, J96.22, J96.90, J96.91, J96.92, J98.2, J98.3, K70.10, K70.11, K70.2, K70.30, K70.31, K70.40, K70.41, K70.9, K74.0, K74.1, K74.2, K74.4, K74.5, K74.60, K74.69, N18.5, N18.6 [BGP ECQM ADV ILLNESS DXS]
- SNOMED data set PXRM BGP ECQM ADV ILLNESS

Dementia medications

Dementia medications are defined as Medication taxonomy BGP ECQM DEMENTIA MEDS. Medications must not have a comment of RETURNED TO STOCK.

Malignant Neoplasm of Colon

Defined as any of the following ever:

- Diagnosis (POV or Problem List entry where the status is not Deleted):
    - ICD-9: 153.0, 153.1, 153.2, 153.3, 153.4, 153.5, 153.6, 153.7, 153.8, 153.9, 154.0, 154.1, 197.5; ICD-10: C18.0, C18.1, C18.2, C18.3, C18.4, C18.5, C18.6, C18.7, C18.8, C18.9, C19, C20, C21.2, C21.8, C78.5 [BGP IPC COLON CANCER DXS]
    - SNOMED data set PXRM BGP IPC COLON CANCER

Total Colectomy

Defined as any of the following ever:

- CPT 44150, 44151, 44152, 44153, 44155, 44156, 44157, 44158, 44210, 44211, 44212 [BGP IPC TOTAL COLECTOMY CPTS]
- Procedure ICD-9: 45.81, 45.82, 45.83; ICD-10: 0DTE0ZZ, 0DTE4ZZ, 0DTE7ZZ, 0DTE8ZZ [BGP ECQM TOTAL COLECTOMY PROCS]

Colorectal Cancer Screening

To be included in the numerator, the patient must meet any of the following criteria:

- Colonoscopy in the past nine years, 11 months, and 29 days.

- Fecal Occult Blood Test (FOBT) with result during the Report Period.

- Flexible Sigmoidoscopy in the past four years, 11 months, and 29 days.

- FIT DNA with result in the past two years, 11 months, and 29 days.

- CT Colonography in the past four years, 11 months, and 29 days.

- FOBT
    - LOINC 12503-9, 12504-7, 14563-1, 14564-9, 14565-6, 2335-8, 27396-1, 27401-9, 27925-7, 27926-5, 29771-3, 56490-6, 56491-4, 57905-2, 58453-2, 80372-6 [BGP IPC FOBT LOINC CODES]
    - Site-populated taxonomy BGP GPRA FOB TESTS

- FIT DNA
    - LOINC 77353-1, 77354-9 [BGP IPC FIT-DNA LOINC CODES]
    - Site-populated taxonomy BGP FIT-DNA TESTS

- Flexible Sigmoidoscopy
    - CPT 45330, 45331, 45332, 45333, 45334, 45335, 45337, 45338, 45339, 45340, 45341, 45342, 45345, 45346, 45347, 45349, 45350, G0104 [BGP IPC SIG CPT CODES]

- CT Colonography
    - LOINC 60515-4, 72531-7, 79069-1, 79071-7, 79101-2, 82688-3

- Colonoscopy
    - CPT 44388, 44389, 44390, 44391, 44392, 44393, 44394, 44397, 44401, 44402, 44403, 44404, 44405, 44406, 44407, 44408, 45355, 45378, 45379, 45380, 45381, 45382, 45383, 45384, 45385, 45386, 45387, 45388, 45389, 45390, 45391, 45392, 45393, 45398, G0105, G0121 [BGP IPC COLONOSCOPY CPTS]

2.4.3.5 Patient List

List of patients aged 50–75 years with CRC screening, if any.

2.5   Behavioral Health Group

2.5.1   Depression Screening

2.5.1.1   Owner and Contact

IPC Group

2.5.1.2   Denominators

IPC User Population patients aged 12 years and older.

2.5.1.3   Numerators

Patients screened for depression or diagnosed with a mood disorder at any time during the Report Period.

> **Note:** This numerator does *not* include refusals.

2.5.1.4   Definitions

Depression Screening

Any of the following:

- Exam code 36

- POV ICD-9: V79.0; ICD-10: Z13.3* [BGP DEPRESSION SCRN DXS]

- CPT 1220F, 3725F, G0444 [BGP DEPRESSION SCREEN CPTS]

- BHS Problem code 14.1 (screening for depression)

- Measurement in PCC or BH of PHQ2, PHQ9 or PHQT

Mood Disorders

At least one visit in PCC or BHS during the Report Period with POV for: Major Depressive Disorder, Dysthymic Disorder, Depressive Disorder NOS, Bipolar I or II Disorder, Cyclothymic Disorder, Bipolar Disorder NOS, Mood Disorder Due to a General Medical Condition, Substance-induced Mood Disorder, or Mood Disorder NOS. These POV codes are:

- ICD-9: 290.13, 290.21, 290.43, 291.89, 292.84, 293.83, 296.*, 298.0, 300.4, 301.12, 301.13, 309.0, 309.1, 309.28, 311; ICD-10: F01.51, F06.31 through F06.34, F1*.*4, F10.159, F10.180, F10.181, F10.188, F10.259, F10.280, F10.281, F10.288, F10.959, F10.980, F10.981, F10.988, F30.*, F31.0 through F31.71, F31.73 through F31.75, F31.77, F31.81 through F31.9, F32.* through F39, F43.21, F43.23 [BGP MOOD DISORDERS]

- BHS POV 14, 15

2.5.1.5   Patient List

List of patients aged 12 years and older with documented depression screening/diagnosed with mood disorder, if any.

2.5.2   Screening for Depression and Follow-Up Plan (CMS2)

2.5.2.1   Owner and Contact

IPC Group

2.5.2.2   Denominators

Patients aged 12 years and older with a depression screening encounter with no active diagnosis for depression or bipolar disorder.

2.5.2.3   Numerators

Patients screened for depression on the date of the encounter using an age-appropriate standardized depression screening tool *and* if positive, a follow-up plan is documented on the date of the positive screen.

2.5.2.4   Definitions

Age

Patient must be 12 years of age or older at the beginning of the Report Period.

Denominator Inclusions

To be included in the denominator, the patient must have a Depression Screening Encounter during the Report Period, defined as any of the following (visit data can be found in PCC or BHS):

- CPT 59400, 59510, 59610, 59618, 90791, 90792, 90832, 90834, 90837, 92625, 96105, 96110, 96112, 96116, 96125, 96136, 96138, 96150, 96151, 97165, 97166, 97167, 99078, 99201, 99202, 99203, 99204, 99205, 99212, 99213, 99214, 99215, 99304, 99305, 99306, 99307, 99308, 99309, 99310, 99315, 99316, 99318, 99324, 99325, 99326, 99327, 99328, 99334, 99335, 99336, 99337, 99339, 99340, 99384, 99385, 99386, 99387, 99394, 99395, 99396, 99397, 99401, 99402, 99403, 99404, 99483, 99484, 99492, 99493, G0101, G0402, G0438, G0439, G0444 [BGP IPC DEP SCRN ENC CPTS]

- SNOMED data set PXRM BGP IPC DEP SCRN ENC

Denominator Exclusions

Patients with any of the following are excluded from the denominator:

1. Depression or Bipolar diagnosis any time prior to the patient's first Depression Screening Encounter during the Report Period.

   - Depression diagnosis defined as: Diagnosis (POV or Problem List entry where the status is not Inactive or Deleted):

     – ICD-9: 290.13, 290.21, 290.43, 296.20, 296.21, 296.22, 296.23, 296.24, 296.25, 296.26, 296.30, 296.31, 296.32, 296.33, 296.34, 296.36, 296.82, 298.0, 300.4, 301.12, 309.0, 309.1, 309.28, 311; ICD-10: F01.51, F32.0, F32.1, F32.2, F32.3, F32.4, F32.5, F32.89, F32.9, F33.0, F33.1, F33.2, F33.3, F33.40, F33.41, F33.42, F33.8, F33.9, F34.1, F34.81, F34.89, F43.21, F43.23, F53.0, F53.1, O90.6, O99.340, O99.341, O99.342, O99.343, O99.345 [BGP IPC DEPRESSION DIAG DXS]

     – SNOMED data set PXRM BGP IPC DEPRESSION DX

   - Bipolar diagnosis defined as: Diagnosis (POV or Problem List entry where the status is not Inactive or Deleted):

     – ICD-9: 296.00, 296.01, 296.02, 296.03, 296.04, 296.05, 296.06, 296.40, 296.41, 296.42, 296.43, 296.44, 296.45, 296.46, 296.52, 296.60, 296.61, 296.62, 296.63, 296.64, 296.65, 296.66, 296.7, 296.80; ICD-10: F31.10, F31.11, F31.12, F31.13, F31.2, F31.30, F31.31, F31.32, F31.4, F31.5, F31.60, F31.61, F31.62, F31.63, F31.64, F31.70, F31.71, F31.72, F31.73, F31.74, F31.75, F31.76, F31.77, F31.78, F31.81, F31.89, F31.9 [BGP IPC BIPOLAR DIAG DXS]

     – SNOMED data set PXRM BGP IPC BIPOLAR DX

2. Any of the following on the same day as a Depression Screening Encounter during the Report Period, as long as the patient does not also have a documented Depression Screen anytime during the Report Period:

   - Medical reason not done: SNOMED data set PXRM BGP IPC NOT DONE MED for Depression Screen

   - Patient reason not done: SNOMED data set PXRM BGP IPC NOT DONE PAT for Depression Screen

   - Patient refusal of any of the following:

     – LOINC 73831-0, 73832-8

     – Exam Code 36

     – Measurement PHQ2, PHQ9 or PHQT

Numerator

To be included in the numerator, the patient must meet any of the following criteria:

- Most recent Depression Screen with result 14 days or less prior to the day of a Depression Screening Encounter during the Report Period where the result is negative.

- Most recent Depression Screen with a result 14 days or less prior to the day of a Depression Screening Encounter during the Report Period where the result is positive with a follow-up plan documented on the same day as the Depression Screening Encounter.

Depression Screening

Any of the following:

- LOINC 73831-0, 73832-8

- Exam Code 36

- Measurement in PCC or BH of PHQ2, PHQ9, or PHQT

Negative Result

Any of the following:

- SNOMED 428171000124102

- Exam Code 36 result = Normal/Negative

- Measurement in PCC or BH: PHQ2 less than (<) 3, PHQ9 less than (<) 10, or PHQT less than (<) 10

Positive Result

Any of the following:

- SNOMED 428181000124104

- Exam Code 36 result = Positive, Referral Needed

- Measurement in PCC or BH: PHQ2 greater than or equal to ($\geq$) 3, PHQ9 greater than or equal to ($\geq$) 10, or PHQT greater than or equal to ($\geq$) 10

Follow-up Plan

Any of the following:

- Diagnosis (Problem List entry where the status is not deleted) or Referral with SNOMED data set PXRM BGP IPC DEP INTER

- Patient education with SNOMED data sets PXRM BGP IPC DEP INTER, PXRM BGP IPC DEP INTER, or PXRM BGP IPC BIPOLAR DX with a topic that ends in "-FU"

- Medications defined with medication taxonomy BGP IPC DEPRESSION MEDS. Medications must not have a comment of RETURNED TO STOCK.

2.5.2.5   Patient List

List of patients 12 years and older with depression screen and follow-up plan, if any.

2.5.3   Depression Remission at Twelve Months (CMS159)

2.5.3.1   Owner and Contact

IPC Group

2.5.3.2   Denominators

Patients 12 years of age or older with major depression or dysthymia and no diagnosis of bipolar or personality disorder. Broken down by age groups: 12–17, 18 and older.

2.5.3.3   Numerators

Patients who reached remission in 12 months (plus or minus [+/-] 60 days).

2.5.3.4   Definitions

Age

Patient must be 18 years of age or older at the time of their Depression Index visit.

Depression Index Visit

The patient's Depression Index visit is the first visit where the patient is screened with a PHQ-9 or PHQ-9M tool that has result greater than (>) 9 seven days or less prior to the following encounter:

- Contact or Office visit (CPT 90791, 90792, 90832, 90834, 90837, 99201, 99202, 99203, 99204, 99205, 99211, 99212, 99213, 99214, 99215, 99441, 99442, 99443, 99444, G0402, G0438, G0439 [BGP IPC OFFICE VISIT CPTS]) during the period 14 months prior to the beginning of the Report Period to two months prior to the beginning of the Report Period, where the patient has a POV or active diagnosis on the Problem List for major depression including remission or dysthymia.

PHQ-9 or PHQ-9M Tool

- LOINC 44261-6, 89204-2

- Measurement in PCC or BH of PHQ9

Major Depression Including Remission

- POV ICD-10: F32.0, F32.1, F32.2, F32.3, F32.4, F32.5, F32.9, F33.0, F33.1, F33.2, F33.3, F33.40, F33.41, F33.42, F33.9 [BGP IPC MAJOR DEPRESSION DXS]

- SNOMED data set PXRM BGP IPC MAJOR DEP

Dysthymia

- POV ICD-10: F34.1 [BGP IPC DYSTHYMIA DXS]

- SNOMED data set PXRM BGP IPC DYSTHYMIA

Denominator Exclusions

Patients with any of the following are excluded from the denominator:

1. Palliative care prior to the time period of 12 months plus 60 days after the patient's Depression Index visit, defined as:
   - POV ICD-10: Z51.5 [BGP IPC PALLIATIVE CARE DXS]

   - SNOMED data set PXRM BGP IPC PALLIATIVE

2. Care Services in Long-Term Residential Facility during the Report Period, defined as:
   - CPT 99324, 99325, 99326, 99327, 99328, 99334, 99335, 99336, 99337 [BGP IPC LONG TERM CARE CPTS]

   - SNOMED data set PXRM BGP IPC LONG TERM CARE

3. Diagnosis of bipolar disorder, personality disorder, schizophrenia or psychotic disorder, or pervasive developmental disorder prior to the time period of 12 months plus 60 days after the patient's Depression Index visit.

Bipolar Disorder

Diagnosis (POV or Problem List entry where the status is not Inactive or Deleted):

- ICD-9: 296.00, 296.01, 296.02, 296.03, 296.04, 296.05, 296.06, 296.10, 296.11, 296.12, 296.13, 296.14, 296.15, 296.16, 296.40, 296.41, 296.42, 296.43, 296.44, 296.45, 296.46, 296.50, 296.51, 296.52, 296.53, 296.54, 296.55, 296.56, 296.60, 296.61, 296.62, 296.63, 296.64, 296.65, 296.66, 296.7, 296.80, 296.81, 296.82, 296.89; ICD-10: F30.10, F30.11, F30.12, F30.13, F30.2, F30.3, F30.4, F30.8, F30.9, F31.0, F31.10, F31.11, F31.12, F31.13, F31.2, F31.30, F31.31, F31.32, F31.4, F31.5, F31.60, F31.61, F31.62, F31.63, F31.64, F31.70, F31.71, F31.72, F31.73, F31.74, F31.75, F31.76, F31.77, F31.78, F31.81, F31.89, F31.9 [BGP IPC BIPOLAR DISORDER DXS]

- SNOMED data set PXRM BGP IPC BIPOLAR DIS

Personality Disorder

Diagnosis (POV or Problem List entry where the status is not Inactive or Deleted):

- ICD-9: 301.13, 301.50, 301.51, 301.83; ICD-10: F34.0, F60.3, F60.4, F68.10, F68.11, F68.12, F68.13 [BGP IPC PERSONALITY DIS DXS]

- SNOMED data set PXRM BGP IPC PERSONAL DIS

Schizophrenia or Psychotic Disorder

Diagnosis (POV or Problem List entry where the status is not Inactive or Deleted):

- ICD-9: 295.00, 295.01, 295.02, 295.03, 295.04, 295.05, 295.10, 295.11, 295.12, 295.13, 295.14, 295.15, 295.20, 295.21, 295.22, 295.23, 295.24, 295.25, 295.30, 295.31, 295.32, 295.33, 295.34, 295.35, 295.40, 295.41, 295.42, 295.43, 295.44, 295.45, 295.50, 295.51, 295.52, 295.53, 295.54, 295.55, 295.60, 295.61, 295.62, 295.63, 295.64, 295.65, 295.70, 295.71, 295.72, 295.73, 295.74, 295.75, 295.80, 295.81, 295.82, 295.83, 295.84, 295.85, 295.90, 295.91, 295.92, 295.93, 295.94, 295.95, 298.0, 298.1, 298.4, 298.8, 298.9; ICD-10: F20.0, F20.1, F20.2, F20.3, F20.5, F20.81, F20.89, F20.9, F21, F23, F25.0, F25.1, F25.8, F25.9, F28, F29 [BGP IPC SCHIZO PSYCHOTIC DXS]

- SNOMED data set PXRM BGP IPC SCHIZO DIS

Pervasive Developmental Disorder

Diagnosis (POV or Problem List entry where the status is not Inactive or Deleted):

- ICD-9: 299.00, 299.01, 299.10, 299.11, 299.80, 299.81, 299.90, 299.91; ICD-10: F84.0, F84.3, F84.8, F84.9 [BGP IPC PERVASIVE DEVELOP DXS]

- SNOMED data set PXRM BGP IPC PERVASIVE DEV

In Remission

PHQ-9 or PHQ-9M result less than (<) 5 during the time period of 12 months plus or minus (+/-) 60 days after the patient's Depression Index visit.

2.5.3.5 Patient List

List of patients aged 12 years and older with major depression or dysthymia, with remission, if any.

2.6   Cardiovascular Disease Related Group

2.6.1   Body Mass Index (BMI) Screening and Follow-Up Plan (CMS69)

2.6.1.1   Owner and Contact

IPC Group

2.6.1.2   Denominators

Patients aged 18 years and older with at least one eligible encounter during the Report Period and no diagnosis of pregnancy.

2.6.1.3   Numerators

Patients with a documented BMI during the encounter or during the previous 12 months, *and* when the BMI is outside of normal parameters, a follow-up plan is documented during the encounter or during the previous 12 months of the current encounter.

2.6.1.4   Definitions

Age

Patient must be 18 years of age or older at the time of their most recent BMI Encounter during the Report Period.

Denominator Inclusions

To be included in the denominator, the patient must have a BMI Encounter, defined as any of the following:

- CPT 90791, 90792, 90832, 90834, 90837, 96150, 96151, 96152, 97161, 97162, 97163, 97165, 97166, 97167, 97802, 97803, 99201, 99202, 99203, 99204, 99205, 99212, 99213, 99214, 99215, 99236, 99304, 99305, 99306, 99307, 99308, 99309, 99310, 99315, 99316, 99318, 99324, 99325, 99326, 99327, 99328, 99334, 99335, 99336, 99337, 99339, 99340, 99385, 99386, 99387, 99395, 99396, 99397, 99401, 99402, G0101, G0108, G0270, G0271, G0402, G0438, G0439, G0447, G0473 [BGP IPC BMI ENCOUNTER CPTS]

- ADA CDT D7111,D7140, D7210, D7220, D7230, D7240, D7241, D7250, D7251 [BGP IPC ADA BMI CPTS]

- SNOMED data set PXRM BGP IPC BMI ENC

Denominator Exclusions

Patients with any of the following are excluded from the denominator:

- Palliative care prior to or on the same date as the most recent BMI Encounter, defined as:
  - POV ICD-10: Z51.5 [BGP IPC PALLIATIVE CARE DXS]
  - SNOMED data set PXRM BGP IPC PALLIATIVE
- Patient refused on the same day as the most recent BMI Encounter during the Report Period, defined as:
  - SNOMED data set PXRM BGP IPC NOT DONE PAT for BMI
  - REF (refused), NMI (not medically indicated) and UAS (unable to screen) for height, weight, or BMI
- Pregnancy diagnosis during the Report Period.

Pregnancy

Diagnosis (POV or Problem List entry with Date of Onset or Date Added during the Report Period):

- ICD-10: A34, O00.00, O00.01, O00.101, O00.102, O00.109, O00.111, O00.112, O00.119, O00.201, O00.202, O00.209, O00.211, O00.212, O00.219, O00.80, O00.81, O00.90, O00.91, O01.9, O02.0, O02.1, O03.0, O03.1, O03.2, O03.30, O03.31, O03.32, O03.33, O03.34, O03.37, O03.39, O03.4, O03.5, O03.6, O03.7, O03.80, O03.81, O03.82, O03.83, O03.84, O03.85, O03.86, O03.87, O03.88, O03.89, O03.9, O04.5, O04.6, O04.7, O04.80, O04.81, O04.82, O04.83, O04.84, O04.85, O04.86, O04.87, O04.88, O04.89, O07.0, O07.1, O07.2, O07.30, O07.31, O07.32, O07.33, O07.34, O07.35, O07.36, O07.37, O07.38, O07.39, O07.4, O08.0, O08.1, O08.2, O08.3, O08.4, O08.5, O08.6, O08.7, O08.81, O08.82, O08.83, O08.89, O08.9, O09.00, O09.10, O09.11, O09.12, O09.13, O09.211, O09.291, O09.30, O09.40, O09.41, O09.42, O09.43, O09.511, O09.512, O09.513, O09.519, O09.521, O09.522, O09.523, O09.529, O09.611, O09.621, O09.819, O09.821, O09.822, O09.823, O09.829, O09.891, O09.892, O09.893, O09.899, O09.90, O09.91, O09.92, O09.93, O09.A0, O09.A1, O09.A2, O09.A3, O10.011, O10.012, O10.013, O10.019, O10.03, O10.111, O10.112, O10.113, O10.119, O10.12, O10.13, O10.211, O10.212, O10.213, O10.219, O10.22, O10.23, O10.311, O10.312, O10.313, O10.319, O10.32, O10.33, O10.411, O10.412, O10.413, O10.419, O10.42, O10.43, O10.911, O10.912, O10.913, O10.919, O10.92, O10.93, O11.1, O11.2, O11.3, O11.4, O11.5, O11.9, O12.00, O12.01, O12.02, O12.03, O12.04, O12.05, O12.10, O12.11, O12.12, O12.13, O12.20, O12.21, O12.22, O12.23, O12.24, O12.25, O13.1, O13.2, O13.3, O13.4, O13.5, O13.9, O14.00, O14.02, O14.03, O14.04, O14.05, O14.10, O14.12, O14.13, O14.14, O14.15, O14.20, O14.22, O14.23,

O14.24, O14.25, O14.90, O14.92, O14.93, O14.94, O14.95, O15.02, O15.03, O15.1, O15.2, O16.1, O16.2, O16.3, O16.4, O16.5, O16.9, O20.0, O20.8, O20.9, O21.0, O21.2, O21.8, O21.9, O22.00, O22.01, O22.02, O22.03, O22.10, O22.11, O22.12, O22.13, O22.20, O22.21, O22.22, O22.23, O22.30, O22.31, O22.32, O22.33, O22.40, O22.41, O22.42, O22.43, O22.50, O22.51, O22.52, O22.53, O22.90, O22.91, O22.92, O22.93, O23.00, O23.10, O23.20, O23.30, O23.40, O23.41, O23.42, O23.43, O23.519, O23.529, O23.599, O23.90, O23.91, O23.92, O23.93, O24.319, O24.32, O24.415, O24.419, O24.425, O24.429, O24.435, O24.439, O24.911, O24.912, O24.913, O24.92, O24.93, O25.10, O25.11, O25.12, O25.13, O25.2, O25.3, O26.00, O26.01, O26.02, O26.03, O26.11, O26.12, O26.13, O26.20, O26.21, O26.22, O26.23, O26.41, O26.42, O26.43, O26.50, O26.51, O26.52, O26.53, O26.611, O26.612, O26.613, O26.619, O26.62, O26.811, O26.812, O26.813, O26.819, O26.821, O26.822, O26.823, O26.829, O26.831, O26.832, O26.833, O26.839, O26.841, O26.842, O26.843, O26.849, O26.851, O26.852, O26.853, O26.859, O26.872, O26.873, O26.879, O26.891, O26.892, O26.893, O26.899, O26.90, O30.001, O30.002, O30.003, O30.009, O30.021, O30.022, O30.023, O30.029, O30.101, O30.102, O30.103, O30.109, O30.201, O30.202, O30.203, O30.209, O30.801, O30.802, O30.803, O30.809, O30.90, O30.91, O30.92, O30.93, O33.0, O33.1, O33.2, O33.7XX0, O33.7XX1, O33.7XX2, O33.7XX3, O33.7XX4, O33.7XX5, O33.7XX9, O33.8, O33.9, O34.00, O34.01, O34.02, O34.03, O34.10, O34.11, O34.12, O34.13, O34.211, O34.212, O34.219, O34.29, O34.30, O34.31, O34.32, O34.33, O34.40, O34.41, O34.42, O34.43, O34.511, O34.512, O34.513, O34.519, O34.521, O34.522, O34.523, O34.529, O34.531, O34.532, O34.533, O34.539, O34.591, O34.592, O34.593, O34.599, O34.60, O34.61, O34.62, O34.63, O34.70, O34.71, O34.72, O34.73, O34.80, O34.81, O34.82, O34.83, O34.90, O34.91, O34.92, O34.93, O35.7XX0, O35.7XX1, O35.7XX2, O35.7XX3, O35.7XX4, O35.7XX5, O35.7XX9, O35.8XX0, O35.8XX1, O35.8XX2, O35.8XX3, O35.8XX4, O35.8XX5, O35.8XX9, O36.0110, O36.0120, O36.0130, O36.0190, O36.0910, O36.0920, O36.0930, O36.0990, O36.1110, O36.1120, O36.1130, O36.1190, O36.1910, O36.1920, O36.1930, O36.1990, O36.5110, O36.5120, O36.5130, O36.5190, O36.5910, O36.5920, O36.5930, O36.5990, O36.8120, O36.8130, O36.8190, O36.8210, O36.8220, O36.8230, O36.8290, O36.8910, O36.8920, O36.8930, O36.8990, O41.1010, O41.1020, O41.1030, O41.1090, O41.1210, O41.1220, O41.1230, O41.1290, O41.1410, O41.1420, O41.1430, O41.1490, O42.00, O42.011, O42.012, O42.013, O42.02, O42.10, O42.111, O42.112, O42.113, O42.12, O43.011, O43.019, O43.101, O43.102, O43.103, O43.199, O43.211, O43.212, O43.213, O43.221, O43.222, O43.223, O43.231, O43.232, O43.233, O43.239, O43.811, O43.812, O43.813, O43.819, O43.91, O43.92, O43.93, O44.00, O44.01, O44.02, O44.03, O44.10, O44.11, O44.12, O44.13, O44.20, O44.21, O44.22, O44.23, O44.30, O44.31, O44.32, O44.33, O44.40,

O44.41, O44.42, O44.43, O44.50, O44.51, O44.52, O44.53, O45.001,
O45.002, O45.003, O45.011, O45.012, O45.013, O45.021, O45.022,
O45.023, O45.091, O45.092, O45.093, O45.91, O45.92, O45.93, O46.001,
O46.002, O46.003, O46.009, O46.011, O46.012, O46.013, O46.019,
O46.021, O46.022, O46.023, O46.029, O46.091, O46.092, O46.093,
O46.099, O46.90, O46.91, O46.92, O46.93, O47.00, O47.02, O47.03, O47.1,
O47.9, O48.0, O48.1, O60.00, O60.02, O60.03, O61.0, O61.1, O61.9, O62.0,
O62.1, O62.2, O62.3, O62.4, O62.9, O63.0, O63.1, O63.2, O63.9, O65.4,
O65.5, O65.9, O66.0, O66.1, O66.40, O66.5, O66.8, O66.9, O67.0, O67.8,
O67.9, O68, O70.0, O70.1, O70.20, O70.21, O70.22, O70.23, O70.3, O70.4,
O70.9, O71.00, O71.02, O71.03, O71.1, O71.2, O71.3, O71.4, O71.5, O71.6,
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O99.214, O99.215, O99.280, O99.281, O99.282, O99.283, O99.284,
O99.285, O99.320, O99.321, O99.322, O99.323, O99.324, O99.325,
O99.330, O99.331, O99.332, O99.333, O99.334, O99.335, O99.340,
O99.341, O99.342, O99.343, O99.344, O99.345, O99.350, O99.351,
O99.352, O99.353, O99.354, O99.355, O99.411, O99.412, O99.413,
O99.419, O99.42, O99.43, O99.810, O99.814, O99.815, O99.834, O99.835,
O99.840, O99.841, O99.842, O99.843, O99.844, O99.845, O99.89, Z33.1,
Z33.2, Z33.3, Z34.00, Z34.01, Z34.02, Z34.03, Z34.80, Z34.81, Z34.82,
Z34.83, Z34.90, Z34.91, Z34.92, Z34.93, Z36.0, Z36.1, Z36.2, Z36.3, Z36.4,

Z36.5, Z36.81, Z36.82, Z36.84, Z36.85, Z36.86, Z36.87, Z36.88, Z36.89, Z36.8A, Z36.9 [BGP IPC PREGNANCY CMS69 DXS]

- SNOMED data set PXRM BGP IPC PREGNANCY BMI

Denominator Exceptions

Patients with any of the following are excluded from the denominator only if they do not meet the numerator:

- Medical or other reason not done, within 12 months and 29 days prior to the most recent BMI Encounter during the Report Period:
    - SNOMED data set PXRM BGP IPC NOT DONE MED for BMI, Above Normal Follow-up or Below Normal Follow-up
    - NMI (not medically indicated) and UAS (unable to screen) for Above Normal Follow-up or Below Normal Follow-up

Numerator

To be included in the numerator, the patient must meet any of the following criteria:

- Most recent BMI with result within 12 months and 29 days prior to or during the most recent BMI Encounter during the Report Period where the result is greater than or equal to (≥) 18.5 kg/m2 and less than (<) 25 kg/m2.

- Most recent BMI with result within 12 months and 29 days prior to or during the most recent BMI Encounter during the Report Period where the result is greater than or equal to (≥) 25 kg/m2 with Above Normal Follow-up within 12 months and 29 days prior to or during the most recent BMI Encounter during the Report Period.

- Most recent BMI with result within 12 months and 29 days prior to or during the most recent BMI Encounter during the Report Period where the result is less than (<) 18.5 kg/m2 with Below Normal Follow-up within 12 months and 29 days prior to or during the most recent BMI Encounter during the Report Period.

BMI

- LOINC 39156-5

- CRS calculates BMI at the time the report is run, using NHANES II. Height and weight must be recorded within 12 months and 29 days of the most recent BMI encounter, not required to be on the same day.

Above Normal Follow-up

- CPT 43644, 43645, 43659, 43770, 43771, 43772, 43773, 43774, 43842, 43843, 43845, 43846, 43847, 43848, 43886, 43888, 97802, 97803, 97804, 98960, 99078, 99401, 99402, G0270, G0271, G0447, G0473, S9449, S9451, S9452, S9470 [BGP IPC ABOVE NORMAL FU CPTS]

- POV ICD-10: Z71.3, Z71.82 [BGP IPC ABOVE NORMAL FU DXS]

- SNOMED data set PXRM BGP IPC ABOVE NORM

- Medications defined with medication taxonomy BGP IPC ABOVE NORMAL MEDS (medications must not have a comment of RETURNED TO STOCK)

- SNOMED data set PXRM BGP IPC WT ASMT REFER with reason: Overweight (SNOMED data set PXRM BGP IPC OVERWEIGHT)

- Patient Education: Codes ending in "-EX" (Exercise), "-LA" (lifestyle adaptation), "-N" (Nutrition) or "-MNT," or containing "OBS-" (obesity), or containing Z71.3; 6) Provider Codes: Primary or Secondary codes 07, 29; 7) Clinic Codes: 67 (dietary) or 36 (WIC)

Below Normal Follow-up

- CPT 97802, 97803, 97804, 98960, 99078, 99401, 99402, S9449, S9452, S9470 [BGP IPC BELOW NORMAL FU CPTS]

- POV ICD-10: Z71.3 [BGP IPC BELOW NORMAL FU DXS]

- SNOMED data set PXRM BGP IPC BELOW NORM

- Medications defined with medication taxonomy BGP IPC BELOW NORMAL MEDS (medications must not have a comment of RETURNED TO STOCK)

- SNOMED data set PXRM BGP IPC WT ASMT REFER with reason: Underweight (SNOMED data set PXRM BGP IPC UNDERWEIGHT)

- Patient Education: Codes ending "-EX" (Exercise), "-LA" (lifestyle adaptation), "-N" (Nutrition) or "-MNT," or containing Z71.3

2.6.1.5 Patient List

List of patients with current BMI and follow-up plan, if any.

2.6.2   Weight Assessment and Counseling for Nutrition and Physical Activity (CMS155)

2.6.2.1   Owner and Contact

IPC Group

2.6.2.2   Denominators

Patients 3 through 17 years of age who had an outpatient visit with a Primary Care Physician (PCP) or Obstetrician/Gynecologist (OB/GYN) during the Report Period with no diagnosis of pregnancy or hospice indicator.

2.6.2.3   Numerators

1. Patients with a height, weight, and body mass index (BMI) percentile documented during the Report Period.

2. Patients with counseling for nutrition during the Report Period.

3. Patients with counseling for physical activity during the Report Period.

2.6.2.4   Definitions

Age

Patient must be 3 years of age or older and younger than 17 years at the beginning of the Report Period.

Denominator Inclusions

To be included in the denominator, the patient must have one of the following Outpatient Visit encounters during the Report Period:

- Office visit:
  - CPT 99201, 99202, 99203, 99204, 99205, 99212, 99213, 99214, 99215 [BGP IPC OFFICE VISIT CPTS]
  - SNOMED data set PXRM BGP IPC OFFICE VISIT

- Preventive Care Services - Established Office Visit, 0 to 17: CPT 99391, 99392, 99393, 99394 [BGP IPC PREVCARE EOV 0-17 CPTS]

- Preventive Care Services - Initial Office Visit, 0 to 17: CPT 99381, 99382, 99383, 99384 [BGP IPC PREVCARE IOV 0-17 CPTS]

- Home Healthcare Services:
  - CPT 99341, 99342, 99343, 99344, 99345, 99347, 99348, 99349, 99350 [BGP IPC HOMEHEALTH VISIT CPTS]

– SNOMED data set PXRM BGP IPC HOME HEALTH

- Preventive Care Services - Individual Counseling: CPT 99401, 99402, 99403, 99404 [BGP IPC PREVCARE IND COUN CPTS]

- Preventive Care Services - Group Counseling: CPT 99411, 99412 [BGP IPC PREVCARE GRP COUN CPTS]

Denominator Exclusions

Patients with any of the following are excluded from the denominator:

- Hospice indicator during the Report Period.

- Pregnancy diagnosis during the Report Period.

Hospice Indicator

- SNOMED data set PXRM BGP IPC INPT ENC (Inpatient encounter) with DISCHARGE SNOMED CT data set PXRM BGP IPC DISCHG HOSPICE (discharge to home or health care facility for hospice care).

- POV or Problem List entry where the status is not Inactive or Deleted: SNOMED data set PXRM BGP IPC HOSPICE (hospice care ambulatory).

Pregnancy

Diagnosis (POV or Problem List entry with Date of Onset or Date Added during the Report Period):

- ICD-10: O00.101, O00.102, O00.109, O00.111, O00.112, O00.119, O00.201, O00.202, O00.209, O00.211, O00.212, O00.219, O00.80, O00.81, O00.90, O00.91, O09.00, O09.01, O09.02, O09.03, O09.10, O09.11, O09.12, O09.13, O09.211, O09.212, O09.213, O09.219, O09.291, O09.292, O09.293, O09.299, O09.30, O09.31, O09.32, O09.33, O09.40, O09.41, O09.42, O09.43, O09.511, O09.512, O09.513, O09.519, O09.521, O09.522, O09.523, O09.529, O09.611, O09.612, O09.613, O09.619, O09.621, O09.622, O09.623, O09.629, O09.70, O09.71, O09.72, O09.73, O09.811, O09.812, O09.813, O09.819, O09.821, O09.822, O09.823, O09.829, O09.891, O09.892, O09.893, O09.899, O09.90, O09.91, O09.92, O09.93, O09.A0, O09.A1, O09.A2, O09.A3, O10.011, O10.012, O10.013, O10.019, O10.111, O10.112, O10.113, O10.119, O10.211, O10.212, O10.213, O10.219, O10.311, O10.312, O10.313, O10.319, O10.411, O10.412, O10.413, O10.419, O10.911, O10.912, O10.913, O10.919, O11.1, O11.2, O11.3, O11.9, O12.00, O12.01, O12.02, O12.03, O12.10, O12.11, O12.12, O12.13, O12.20, O12.21, O12.22, O12.23, O13.1, O13.2, O13.3, O13.9, O14.00, O14.02, O14.03, O14.10, O14.12, O14.13, O14.20, O14.22, O14.23, O14.90, O14.92, O14.93, O15.00, O15.02, O15.03, O16.1, O16.2, O16.3, O16.9, O20.0, O20.8, O20.9, O21.0, O21.1, O21.2, O21.8, O21.9, O22.00, O22.01, O22.02, O22.03, O22.10, O22.11, O22.12, O22.13, O22.20, O22.21, O22.22, O22.23, O22.30,

O22.31, O22.32, O22.33, O22.40, O22.41, O22.42, O22.43, O22.50, O22.51, O22.52, O22.53, O22.8X1, O22.8X2, O22.8X3, O22.8X9, O22.90, O22.91, O22.92, O22.93, O23.00, O23.01, O23.02, O23.03, O23.10, O23.11, O23.12, O23.13, O23.20, O23.21, O23.22, O23.23, O23.30, O23.31, O23.32, O23.33, O23.40, O23.41, O23.42, O23.43, O23.511, O23.512, O23.513, O23.519, O23.521, O23.522, O23.523, O23.529, O23.591, O23.592, O23.593, O23.599, O23.90, O23.91, O23.92, O23.93, O24.011, O24.012, O24.013, O24.019, O24.111, O24.112, O24.113, O24.119, O24.311, O24.312, O24.313, O24.319, O24.410, O24.414, O24.415, O24.419, O24.811, O24.812, O24.813, O24.819, O24.911, O24.912, O24.913, O24.919, O25.10, O25.11, O25.12, O25.13, O26.00, O26.01, O26.02, O26.03, O26.10, O26.11, O26.12, O26.13, O26.20, O26.21, O26.22, O26.23, O26.30, O26.31, O26.32, O26.33, O26.40, O26.41, O26.42, O26.43, O26.50, O26.51, O26.52, O26.53, O26.611, O26.612, O26.613, O26.619, O26.711, O26.712, O26.713, O26.719, O26.811, O26.812, O26.813, O26.819, O26.821, O26.822, O26.823, O26.829, O26.831, O26.832, O26.833, O26.839, O26.841, O26.842, O26.843, O26.849, O26.851, O26.852, O26.853, O26.859, O26.86, O26.872, O26.873, O26.879, O26.891, O26.892, O26.893, O26.899, O26.90, O26.91, O26.92, O26.93, O28.0, O28.1, O28.2, O28.3, O28.4, O28.5, O28.8, O28.9, O29.011, O29.012, O29.013, O29.019, O29.021, O29.022, O29.023, O29.029, O29.091, O29.092, O29.093, O29.099, O29.111, O29.112, O29.113, O29.119, O29.121, O29.122, O29.123, O29.129, O29.191, O29.192, O29.193, O29.199, O29.211, O29.212, O29.213, O29.219, O29.291, O29.292, O29.293, O29.299, O29.3X1, O29.3X2, O29.3X3, O29.3X9, O29.40, O29.41, O29.42, O29.43, O29.5X1, O29.5X2, O29.5X3, O29.5X9, O29.60, O29.61, O29.62, O29.63, O29.8X1, O29.8X2, O29.8X3, O29.8X9, O29.90, O29.91, O29.92, O29.93, O30.001, O30.002, O30.003, O30.009, O30.011, O30.012, O30.013, O30.019, O30.021, O30.022, O30.023, O30.029, O30.031, O30.032, O30.033, O30.039, O30.041, O30.042, O30.043, O30.049, O30.091, O30.092, O30.093, O30.099, O30.101, O30.102, O30.103, O30.109, O30.111, O30.112, O30.113, O30.119, O30.121, O30.122, O30.123, O30.129, O30.191, O30.192, O30.193, O30.199, O30.201, O30.202, O30.203, O30.209, O30.211, O30.212, O30.213, O30.219, O30.221, O30.222, O30.223, O30.229, O30.291, O30.292, O30.293, O30.299, O30.801, O30.802, O30.803, O30.809, O30.811, O30.812, O30.813, O30.819, O30.821, O30.822, O30.823, O30.829, O30.891, O30.892, O30.893, O30.899, O30.90, O30.91, O30.92, O30.93, O31.00X0, O31.00X1, O31.00X2, O31.00X3, O31.00X4, O31.00X5, O31.00X9, O31.01X0, O31.01X1, O31.01X2, O31.01X3, O31.01X4, O31.01X5, O31.01X9, O31.02X0, O31.02X1, O31.02X2, O31.02X3, O31.02X4, O31.02X5, O31.02X9, O31.03X0, O31.03X1, O31.03X2, O31.03X3, O31.03X4, O31.03X5, O31.03X9, O31.10X0, O31.10X1, O31.10X2, O31.10X3, O31.10X4, O31.10X5, O31.10X9,

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O45.003, O45.009, O45.011, O45.012, O45.013, O45.019, O45.021,
O45.022, O45.023, O45.029, O45.091, O45.092, O45.093, O45.099,
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O46.093, O46.099, O46.8X1, O46.8X2, O46.8X3, O46.8X9, O46.90, O46.91,
O46.92, O46.93, O47.00, O47.02, O47.03, O47.1, O47.9, O48.0, O48.1,
O60.00, O60.02, O60.03, O71.00, O71.02, O71.03, O88.011, O88.012,
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O88.811, O88.812, O88.813, O88.819, O90.3, O91.011, O91.012, O91.013,
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O98.913, O98.919, O99.011, O99.012, O99.013, O99.019, O99.111,
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O99.280, O99.281, O99.282, O99.283, O99.310, O99.311, O99.312,
O99.313, O99.320, O99.321, O99.322, O99.323, O99.330, O99.331,

O99.332, O99.333, O99.340, O99.341, O99.342, O99.343, O99.350,
O99.351, O99.352, O99.353, O99.411, O99.412, O99.413, O99.419,
O99.511, O99.512, O99.513, O99.519, O99.611, O99.612, O99.613,
O99.619, O99.711, O99.712, O99.713, O99.719, O99.810, O99.820,
O99.830, O99.840, O99.841, O99.842, O99.843, O99.89, O9A.111, O9A.112,
O9A.113, O9A.119, O9A.211, O9A.212, O9A.213, O9A.219, O9A.311,
O9A.312, O9A.313, O9A.319, O9A.411, O9A.412, O9A.413, O9A.419,
O9A.511, O9A.512, O9A.513, O9A.519, Z33.1, Z33.3, Z34.00, Z34.01,
Z34.02, Z34.03, Z34.80, Z34.81, Z34.82, Z34.83, Z34.90, Z34.91, Z34.92,
Z34.93 [BGP IPC PREGNANCY DXS]

- SNOMED data set PXRM BGP IPC PREGNANCY

Height

Any of the following during the Report Period:

- LOINC 3137-7, 8302-2, 8306-3, 8307-1, 8308-9

- Measurement value

Weight

Any of the following during the Report Period:

- LOINC 18833-4, 29463-7, 3141-9, 3142-7, 8341-0, 8349-3, 8350-1, 8351-9

- Measurement value

BMI Percentile

Any of the following during the Report Period:

- LOINC 59574-4, 59575-1, 59576-9

- Measurement value (BMIP)

Counseling for Nutrition

Any of the following at an Outpatient Visit encounter during Report Period:

- CPT 97802, 97803, 97804 [BGP IPC NUTR COUN CPTS]

- SNOMED data set PXRM BGP IPC NUTRITION

- Patient Education: Codes ending "-N" (Nutrition) or "-MNT" (or old code
  "-DT" [Diet]) or containing 97802-97804

Counseling for Physical Activity

- Any of the following at an Outpatient Visit encounter during Report Period:
  SNOMED data set PXRM BGP IPC PHYS ACT.

- Patient Education: Codes ending "-EX" (Exercise) or containing Z71.89

2.6.2.5 Patient List

List of patients aged 3–17 years with assessments, if any.

2.6.3 Controlling High Blood Pressure (CMS165)

2.6.3.1 Owner and Contact

IPC Group

2.6.3.2 Denominators

Patients 18 through 85 years of age diagnosed with hypertension and no documented history of ESRD/kidney disease or current diagnosis of pregnancy or hospice indicator.

2.6.3.3 Numerators

Patients with blood pressure less than (<) 140/90, i.e., the systolic value is less than (<) 140 *and* the diastolic value is less than (<) 90.

2.6.3.4 Definitions

Age

Patient must be 18 years of age or older and less than 85 years at the beginning of the Report Period.

Denominator Inclusions

To be included in the denominator, the patient must have each of the following:

1. Any of the following encounters performed during the Report Period:
   - Office visit:
     - CPT 99201, 99202, 99203, 99204, 99205, 99212, 99213, 99214, 99215 [BGP IPC OFFICE VISIT CPTS]
     - SNOMED data set PXRM BGP IPC OFFICE VISIT
   - Preventive Care Services - Established Office Visit, 18 and Up: CPT 99395, 99396, 99397 [BGP IPC PREVCARE EOV greater than or equal to (≥) 18 CPTS]
   - Preventive Care Services - Initial Office Visit, 18 and Up: CPT 99385, 99386, 99387 [BGP IPC PREVCARE IOV greater than or equal to (≥) 18 CPTS]
   - Home Healthcare Services:

  - – CPT 99341, 99342, 99343, 99344, 99345, 99347, 99348, 99349, 99350 [BGP IPC HOMEHEALTH VISIT CPTS]
  - – SNOMED data set PXRM BGP IPC HOME HEALTH
- Annual Wellness Visit:
  - – CPT G0438, G0439 [BGP IPC ANNUAL WELLNESS CPTS]
  - – SNOMED 444971000124105, 456201000124103

2. Essential hypertension diagnosis ever through the first six months of the Report Period (POV or Problem List entry where the status is not Inactive or Deleted):
   - ICD-9: 401.0, 401.1, 401.9; ICD-10: I10 [BGP IPC ESSENTIAL HTN DXS]
   - SNOMED data set PXRM BGP IPC HTN

Denominator Exclusions

Patients with any of the following are excluded from the denominator:

- Hospice indicator during the Report Period.

- Patients age 66 and older who have spent more than 90 days in long-term care during the report period.

- Patients age 66 through 80 who have both of the following:

  A. Any of the following during the report period:

  - – Frailty device
  - – Frailty diagnosis
  - – Frailty encounter
  - – Frailty symptom

  B. Any of the following in the past two years:

  - – Two or more outpatient encounters with advanced illness diagnosis
  - – Inpatient encounter with advanced illness diagnosis
  - – Dementia medications

- Patients age 81 and older who have any of the following during the report period:

  - – Frailty device
  - – Frailty diagnosis
  - – Frailty encounter
  - – Frailty symptom

- Pregnancy diagnosis during the Report Period.

- End Stage Renal Disease (ESRD) or Chronic Kidney Disease, Stage 5 during the Report Period.

- Vascular Access for Dialysis, ESRD Monthly Outpatient Services, Kidney Transplant, or Dialysis Services any time prior to the end of the Report Period.

Hospice Indicator

- SNOMED data set PXRM BGP IPC INPT ENC (Inpatient encounter) with DISCHARGE SNOMED CT data set PXRM BGP IPC DISCHG HOSPICE (discharge to home or health care facility for hospice care).

- POV or Problem List entry where the status is not Inactive or Deleted: SNOMED data set PXRM BGP IPC HOSPICE (hospice care ambulatory).

Long-term Care

Long-term care is defined as any of the following:

- Care Services in Long-Term Residential Facility:

  - CPT 99324, 99325, 99326, 99327, 99328, 99334, 99335, 99336, 99337 [BGP IPC LT RES FACILITY CPTS]
  - SNOMED data set PXRM BGP IPC LONG TERM CARE

- Nursing Facility Visit:

  - CPT 99304, 99305, 99306, 99307, 99308, 99309, 99310
  - SNOMED 18170008, 207195004

Frailty device

Frailty device is defined as any of the following: HCPCS E0100, E0105, E0130, E0135, E0140, E0141, E0143, E0144, E0147, E0148, E0149, E0163, E0165, E0167, E0168, E0170, E0171, E0250, E0251, E0255, E0256, E0260, E0261, E0265, E0266, E0270, E0290, E0291, E0292, E0293, E0294, E0295, E0296, E0297, E0301, E0302, E0303, E0304, E0424, E0425, E0430, E0431, E0433, E0434, E0435, E0439, E0440, E0441, E0442, E0443, E0444, E0462, E0465, E0466, E0470, E0471, E0472, E0561, E0562, E1130, E1140, E1150, E1160, E1161, E1240, E1250, E1260, E1270, E1280, E1285, E1290, E1295, E1296, E1297, E1298

Frailty diagnosis

Frailty diagnosis is defined as Diagnosis (POV or active Problem List entry):

- ICD-10: L89.119, L89.139, L89.149, L89.159, L89.209, L89.309, L89.899, L89.90, M62.50, M62.81, M62.84, W01.0XXA, W01.0XXD, W01.0XXS, W01.10XA, W01.10XD, W01.10XS, W01.110A, W01.110D, W01.110S, W01.111A, W01.111D, W01.111S, W01.118A, W01.118D, W01.118S, W01.119A, W01.119D, W01.119S, W01.190A, W01.190D, W01.190S, W01.198A, W01.198D, W01.198S, W06.XXXA, W06.XXXD, W06.XXXS, W07.XXXA, W07.XXXD, W07.XXXS, W08.XXXA, W08.XXXD, W08.XXXS, W10.0XXA, W10.0XXD, W10.0XXS, W10.1XXA, W10.1XXD, W10.1XXS, W10.2XXA, W10.2XXD, W10.2XXS, W10.8XXA, W10.8XXD, W10.8XXS, W10.9XXA, W10.9XXD, W10.9XXS, W18.00XA, W18.00XD, W18.00XS, W18.02XA, W18.02XD, W18.02XS, W18.09XA, W18.09XD, W18.09XS, W18.11XA, W18.11XD, W18.11XS, W18.12XA, W18.12XD, W18.12XS, W18.2XXA, W18.2XXD, W18.2XXS, W18.30XA, W18.30XD, W18.30XS, W18.31XA, W18.31XD, W18.31XS, W18.39XA, W18.39XD, W18.39XS, W19.XXXA, W19.XXXD, W19.XXXS, Y92.199, Z59.3, Z73.6, Z74.01, Z74.09, Z74.1, Z74.2, Z74.3, Z74.8, Z74.9, Z91.81, Z99.11, Z99.3, Z99.81, Z99.89 [BGP ECQM FRAILTY DXS, BGP ECQM FRAILTY CAUSE CODES]

- SNOMED data set PXRM BGP ECQM FRAILTY DX

Frailty encounter

Frailty encounter is defined as any of the following:

- CPT 99504, 99509, G0162, G0299, G0300, G0493, G0494, S0271, S0311, S9123, S9124, T1000, T1001, T1002, T1003, T1004, T1005, T1019, T1020, T1021, T1022, T1030, T1031

- SNOMED 413467001

Frailty symptom

Frailty symptom is defined as Diagnosis (POV or active Problem List entry):

- ICD-10: R26.0, R26.1, R26.2, R26.89, R26.9, R41.81, R53.1, R53.81, R53.83, R54, R62.7, R63.4, R63.6, R64 [BGP ECQM FRAILTY SYMPTOM DXS]

- SNOMED data set PXRM BGP ECQM FRAILTY SYMPTOM

Outpatient Encounter

Outpatient encounter is defined as any of the following:

- Outpatient:
  - CPT 99201, 99202, 99203, 99204, 99205, 99211, 99212, 99213, 99214, 99215, 99241, 99242, 99243, 99244, 99245, 99341, 99342, 99343, 99344, 99345, 99347, 99348, 99349, 99350, 99381, 99382, 99383, 99384, 99385, 99386, 99387, 99391, 99392, 99393, 99394, 99395, 99396, 99397, 99401, 99402, 99403, 99404, 99411, 99412, 99429, 99455, 99456, 99483, G0402, G0438, G0439, G0463, T1015

- Observation:
  - CPT 99217, 99218, 99219, 99220; 3) ED: CPT 99281, 99282, 99283, 99284, 99285
  - SNOMED 4525004

- Nonacute Inpatient:
  - CPT 99304, 99305, 99306, 99307, 99308, 99309, 99310, 99315, 99316, 99318, 99324, 99325, 99326, 99327, 99328, 99334, 99335, 99336, 99337
  - SNOMED data set PXRM BGP ECQM NONACUTE IP

Inpatient Encounter

Inpatient encounter is defined as any of the following:

- Service Category I or H

- CPT 99221, 99222, 99223, 99231, 99232, 99233, 99238, 99239, 99251, 99252, 99253, 99254, 99255, 99291

- SNOMED data set PXRM BGP ECQM ACUTE IP

Advanced Illness

Advanced illness is defined as Diagnosis (POV):

- ICD-10: A81.00, A81.01, A81.09, C25.0, C25.1, C25.2, C25.3, C25.4, C25.7, C25.8, C25.9, C71.9, C77.0, C77.1, C77.2, C77.3, C77.4, C77.5, C77.8, C77.9, C78.00, C78.1, C78.2, C78.39, C78.4, C78.5, C78.6, C78.7, C78.89, C79.00, C79.11, C79.19, C79.2, C79.31, C79.32, C79.49, C91.00, C91.02, C92.00, C92.02, C93.00, C93.02, C93.90, C93.92, C93.Z0, C93.Z2, C94.30, C94.32, F01.50, F01.51, F02.80, F02.81, F03.90, F03.91, F04, F10.27, F10.96, F10.97, G10, G12.21, G20, G30.0, G30.1, G30.8, G30.9, G31.01, G31.09, G31.83, I09.81, I11.0, I12.0, I13.0, I13.11, I13.2, I50.1, I50.20, I50.21, I50.22, I50.23, I50.30, I50.31, I50.32, I50.33, I50.40, I50.41, I50.42, I50.43, I50.810, I50.811, I50.812, I50.813, I50.814, I50.82, I50.83, I50.84, I50.89, I50.9, J43.0, J43.1, J43.2, J43.8, J43.9, J68.4, J84.10, J84.112, J84.17, J96.10, J96.11, J96.12, J96.20, J96.21, J96.22, J96.90, J96.91, J96.92, J98.2, J98.3, K70.10, K70.11, K70.2, K70.30, K70.31, K70.40, K70.41, K70.9, K74.0, K74.1, K74.2, K74.4, K74.5, K74.60, K74.69, N18.5, N18.6 [BGP ECQM ADV ILLNESS DXS]

- SNOMED data set PXRM BGP ECQM ADV ILLNESS

Dementia medications

Dementia medications are defined as Medication taxonomy BGP ECQM DEMENTIA MEDS. Medications must not have a comment of RETURNED TO STOCK.

Pregnancy

Diagnosis (POV or Problem List entry with Date of Onset or Date Added during the Report Period):

- ICD-10: O00.101, O00.102, O00.109, O00.111, O00.112, O00.119, O00.201, O00.202, O00.209, O00.211, O00.212, O00.219, O00.80, O00.81, O00.90, O00.91, O09.00, O09.01, O09.02, O09.03, O09.10, O09.11, O09.12, O09.13, O09.211, O09.212, O09.213, O09.219, O09.291, O09.292, O09.293, O09.299, O09.30, O09.31, O09.32, O09.33, O09.40, O09.41, O09.42, O09.43, O09.511, O09.512, O09.513, O09.519, O09.521, O09.522, O09.523, O09.529, O09.611, O09.612, O09.613, O09.619, O09.621, O09.622, O09.623, O09.629, O09.70, O09.71, O09.72, O09.73, O09.811, O09.812, O09.813, O09.819, O09.821, O09.822, O09.823, O09.829, O09.891, O09.892, O09.893, O09.899, O09.90, O09.91, O09.92, O09.93, O09.A0, O09.A1, O09.A2, O09.A3, O10.011, O10.012, O10.013, O10.019, O10.111, O10.112, O10.113, O10.119, O10.211, O10.212, O10.213, O10.219, O10.311, O10.312, O10.313, O10.319, O10.411, O10.412, O10.413, O10.419, O10.911, O10.912, O10.913, O10.919, O11.1, O11.2, O11.3, O11.9, O12.00, O12.01, O12.02, O12.03, O12.10, O12.11, O12.12, O12.13, O12.20,

O12.21, O12.22, O12.23, O13.1, O13.2, O13.3, O13.9, O14.00, O14.02,
O14.03, O14.10, O14.12, O14.13, O14.20, O14.22, O14.23, O14.90, O14.92,
O14.93, O15.00, O15.02, O15.03, O16.1, O16.2, O16.3, O16.9, O20.0, O20.8,
O20.9, O21.0, O21.1, O21.2, O21.8, O21.9, O22.00, O22.01, O22.02, O22.03,
O22.10, O22.11, O22.12, O22.13, O22.20, O22.21, O22.22, O22.23, O22.30,
O22.31, O22.32, O22.33, O22.40, O22.41, O22.42, O22.43, O22.50, O22.51,
O22.52, O22.53, O22.8X1, O22.8X2, O22.8X3, O22.8X9, O22.90, O22.91,
O22.92, O22.93, O23.00, O23.01, O23.02, O23.03, O23.10, O23.11, O23.12,
O23.13, O23.20, O23.21, O23.22, O23.23, O23.30, O23.31, O23.32, O23.33,
O23.40, O23.41, O23.42, O23.43, O23.511, O23.512, O23.513, O23.519,
O23.521, O23.522, O23.523, O23.529, O23.591, O23.592, O23.593,
O23.599, O23.90, O23.91, O23.92, O23.93, O24.011, O24.012, O24.013,
O24.019, O24.111, O24.112, O24.113, O24.119, O24.311, O24.312,
O24.313, O24.319, O24.410, O24.414, O24.415, O24.419, O24.811,
O24.812, O24.813, O24.819, O24.911, O24.912, O24.913, O24.919, O25.10,
O25.11, O25.12, O25.13, O26.00, O26.01, O26.02, O26.03, O26.10, O26.11,
O26.12, O26.13, O26.20, O26.21, O26.22, O26.23, O26.30, O26.31, O26.32,
O26.33, O26.40, O26.41, O26.42, O26.43, O26.50, O26.51, O26.52, O26.53,
O26.611, O26.612, O26.613, O26.619, O26.711, O26.712, O26.713,
O26.719, O26.811, O26.812, O26.813, O26.819, O26.821, O26.822,
O26.823, O26.829, O26.831, O26.832, O26.833, O26.839, O26.841,
O26.842, O26.843, O26.849, O26.851, O26.852, O26.853, O26.859, O26.86,
O26.872, O26.873, O26.879, O26.891, O26.892, O26.893, O26.899, O26.90,
O26.91, O26.92, O26.93, O28.0, O28.1, O28.2, O28.3, O28.4, O28.5, O28.8,
O28.9, O29.011, O29.012, O29.013, O29.019, O29.021, O29.022, O29.023,
O29.029, O29.091, O29.092, O29.093, O29.099, O29.111, O29.112,
O29.113, O29.119, O29.121, O29.122, O29.123, O29.129, O29.191,
O29.192, O29.193, O29.199, O29.211, O29.212, O29.213, O29.219,
O29.291, O29.292, O29.293, O29.299, O29.3X1, O29.3X2, O29.3X3,
O29.3X9, O29.40, O29.41, O29.42, O29.43, O29.5X1, O29.5X2, O29.5X3,
O29.5X9, O29.60, O29.61, O29.62, O29.63, O29.8X1, O29.8X2, O29.8X3,
O29.8X9, O29.90, O29.91, O29.92, O29.93, O30.001, O30.002, O30.003,
O30.009, O30.011, O30.012, O30.013, O30.019, O30.021, O30.022,
O30.023, O30.029, O30.031, O30.032, O30.033, O30.039, O30.041,
O30.042, O30.043, O30.049, O30.091, O30.092, O30.093, O30.099,
O30.101, O30.102, O30.103, O30.109, O30.111, O30.112, O30.113,
O30.119, O30.121, O30.122, O30.123, O30.129, O30.191, O30.192,
O30.193, O30.199, O30.201, O30.202, O30.203, O30.209, O30.211,
O30.212, O30.213, O30.219, O30.221, O30.222, O30.223, O30.229,
O30.291, O30.292, O30.293, O30.299, O30.801, O30.802, O30.803,
O30.809, O30.811, O30.812, O30.813, O30.819, O30.821, O30.822,
O30.823, O30.829, O30.891, O30.892, O30.893, O30.899, O30.90, O30.91,
O30.92, O30.93, O31.00X0, O31.00X1, O31.00X2, O31.00X3, O31.00X4,

O31.00X5, O31.00X9, O31.01X0, O31.01X1, O31.01X2, O31.01X3,
O31.01X4, O31.01X5, O31.01X9, O31.02X0, O31.02X1, O31.02X2,
O31.02X3, O31.02X4, O31.02X5, O31.02X9, O31.03X0, O31.03X1,
O31.03X2, O31.03X3, O31.03X4, O31.03X5, O31.03X9, O31.10X0,
O31.10X1, O31.10X2, O31.10X3, O31.10X4, O31.10X5, O31.10X9,
O31.11X0, O31.11X1, O31.11X2, O31.11X3, O31.11X4, O31.11X5,
O31.11X9, O31.12X0, O31.12X1, O31.12X2, O31.12X3, O31.12X4,
O31.12X5, O31.12X9, O31.13X0, O31.13X1, O31.13X2, O31.13X3,
O31.13X4, O31.13X5, O31.13X9, O31.20X0, O31.20X1, O31.20X2,
O31.20X3, O31.20X4, O31.20X5, O31.20X9, O31.21X0, O31.21X1,
O31.21X2, O31.21X3, O31.21X4, O31.21X5, O31.21X9, O31.22X0,
O31.22X1, O31.22X2, O31.22X3, O31.22X4, O31.22X5, O31.22X9,
O31.23X0, O31.23X1, O31.23X2, O31.23X3, O31.23X4, O31.23X5,
O31.23X9, O31.30X0, O31.30X1, O31.30X2, O31.30X3, O31.30X4,
O31.30X5, O31.30X9, O31.31X0, O31.31X1, O31.31X2, O31.31X3,
O31.31X4, O31.31X5, O31.31X9, O31.32X0, O31.32X1, O31.32X2,
O31.32X3, O31.32X4, O31.32X5, O31.32X9, O31.33X0, O31.33X1,
O31.33X2, O31.33X3, O31.33X4, O31.33X5, O31.33X9, O31.8X10,
O31.8X11, O31.8X12, O31.8X13, O31.8X14, O31.8X15, O31.8X19,
O31.8X20, O31.8X21, O31.8X22, O31.8X23, O31.8X24, O31.8X25,
O31.8X29, O31.8X30, O31.8X31, O31.8X32, O31.8X33, O31.8X34,
O31.8X35, O31.8X39, O31.8X90, O31.8X91, O31.8X92, O31.8X93,
O31.8X94, O31.8X95, O31.8X99, O32.0XX0, O32.0XX1, O32.0XX2,
O32.0XX3, O32.0XX4, O32.0XX5, O32.0XX9, O32.1XX0, O32.1XX1,
O32.1XX2, O32.1XX3, O32.1XX4, O32.1XX5, O32.1XX9, O32.2XX0,
O32.2XX1, O32.2XX2, O32.2XX3, O32.2XX4, O32.2XX5, O32.2XX9,
O32.3XX0, O32.3XX1, O32.3XX2, O32.3XX3, O32.3XX4, O32.3XX5,
O32.3XX9, O32.4XX0, O32.4XX1, O32.4XX2, O32.4XX3, O32.4XX4,
O32.4XX5, O32.4XX9, O32.6XX0, O32.6XX1, O32.6XX2, O32.6XX3,
O32.6XX4, O32.6XX5, O32.6XX9, O32.8XX0, O32.8XX1, O32.8XX2,
O32.8XX3, O32.8XX4, O32.8XX5, O32.8XX9, O32.9XX0, O32.9XX1,
O32.9XX2, O32.9XX3, O32.9XX4, O32.9XX5, O32.9XX9, O33.0, O33.1,
O33.2, O33.3XX0, O33.3XX1, O33.3XX2, O33.3XX3, O33.3XX4,
O33.3XX5, O33.3XX9, O33.4XX0, O33.4XX1, O33.4XX2, O33.4XX3,
O33.4XX4, O33.4XX5, O33.4XX9, O33.5XX0, O33.5XX1, O33.5XX2,
O33.5XX3, O33.5XX4, O33.5XX5, O33.5XX9, O33.6XX0, O33.6XX1,
O33.6XX2, O33.6XX3, O33.6XX4, O33.6XX5, O33.6XX9, O33.7XX0,
O33.7XX1, O33.7XX2, O33.7XX3, O33.7XX4, O33.7XX5, O33.7XX9,
O33.8, O33.9, O34.00, O34.01, O34.02, O34.03, O34.10, O34.11, O34.12,
O34.13, O34.211, O34.212, O34.219, O34.29, O34.30, O34.31, O34.32,
O34.33, O34.40, O34.41, O34.42, O34.43, O34.511, O34.512, O34.513,
O34.519, O34.521, O34.522, O34.523, O34.529, O34.531, O34.532,
O34.533, O34.539, O34.591, O34.592, O34.593, O34.599, O34.60, O34.61,

O34.62, O34.63, O34.70, O34.71, O34.72, O34.73, O34.80, O34.81, O34.82,
O34.83, O34.90, O34.91, O34.92, O34.93, O35.0XX0, O35.0XX1,
O35.0XX2, O35.0XX3, O35.0XX4, O35.0XX5, O35.0XX9, O35.1XX0,
O35.1XX1, O35.1XX2, O35.1XX3, O35.1XX4, O35.1XX5, O35.1XX9,
O35.2XX0, O35.2XX1, O35.2XX2, O35.2XX3, O35.2XX4, O35.2XX5,
O35.2XX9, O35.3XX0, O35.3XX1, O35.3XX2, O35.3XX3, O35.3XX4,
O35.3XX5, O35.3XX9, O35.4XX0, O35.4XX1, O35.4XX2, O35.4XX3,
O35.4XX4, O35.4XX5, O35.4XX9, O35.5XX0, O35.5XX1, O35.5XX2,
O35.5XX3, O35.5XX4, O35.5XX5, O35.5XX9, O35.6XX0, O35.6XX1,
O35.6XX2, O35.6XX3, O35.6XX4, O35.6XX5, O35.6XX9, O35.7XX0,
O35.7XX1, O35.7XX2, O35.7XX3, O35.7XX4, O35.7XX5, O35.7XX9,
O35.8XX0, O35.8XX1, O35.8XX2, O35.8XX3, O35.8XX4, O35.8XX5,
O35.8XX9, O35.9XX0, O35.9XX1, O35.9XX2, O35.9XX3, O35.9XX4,
O35.9XX5, O35.9XX9, O36.0110, O36.0111, O36.0112, O36.0113,
O36.0114, O36.0115, O36.0119, O36.0120, O36.0121, O36.0122, O36.0123,
O36.0124, O36.0125, O36.0129, O36.0130, O36.0131, O36.0132, O36.0133,
O36.0134, O36.0135, O36.0139, O36.0190, O36.0191, O36.0192, O36.0193,
O36.0194, O36.0195, O36.0199, O36.0910, O36.0911, O36.0912, O36.0913,
O36.0914, O36.0915, O36.0919, O36.0920, O36.0921, O36.0922, O36.0923,
O36.0924, O36.0925, O36.0929, O36.0930, O36.0931, O36.0932, O36.0933,
O36.0934, O36.0935, O36.0939, O36.0990, O36.0991, O36.0992, O36.0993,
O36.0994, O36.0995, O36.0999, O36.1110, O36.1111, O36.1112, O36.1113,
O36.1114, O36.1115, O36.1119, O36.1120, O36.1121, O36.1122, O36.1123,
O36.1124, O36.1125, O36.1129, O36.1130, O36.1131, O36.1132, O36.1133,
O36.1134, O36.1135, O36.1139, O36.1190, O36.1191, O36.1192, O36.1193,
O36.1194, O36.1195, O36.1199, O36.1910, O36.1911, O36.1912, O36.1913,
O36.1914, O36.1915, O36.1919, O36.1920, O36.1921, O36.1922, O36.1923,
O36.1924, O36.1925, O36.1929, O36.1930, O36.1931, O36.1932, O36.1933,
O36.1934, O36.1935, O36.1939, O36.1990, O36.1991, O36.1992, O36.1993,
O36.1994, O36.1995, O36.1999, O36.20X0, O36.20X1, O36.20X2,
O36.20X3, O36.20X4, O36.20X5, O36.20X9, O36.21X0, O36.21X1,
O36.21X2, O36.21X3, O36.21X4, O36.21X5, O36.21X9, O36.22X0,
O36.22X1, O36.22X2, O36.22X3, O36.22X4, O36.22X5, O36.22X9,
O36.23X0, O36.23X1, O36.23X2, O36.23X3, O36.23X4, O36.23X5,
O36.23X9, O36.4XX0, O36.4XX1, O36.4XX2, O36.4XX3, O36.4XX4,
O36.4XX5, O36.4XX9, O36.5110, O36.5111, O36.5112, O36.5113,
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- SNOMED data set PXRM BGP IPC PREGNANCY

End Stage Renal Disease (ESRD)

Diagnosis (POV or Problem List entry where the status is not Inactive or Deleted):

- ICD-9: 585.6; ICD-10: N18.6 [BGP IPC ESRD DXS]

- SNOMED 236434000, 236435004, 236436003, 46177005

Chronic Kidney Disease, Stage 5

Diagnosis (POV or Problem List entry where the status is not Inactive or Deleted):

- ICD-9: 585.5; ICD-10: N18.5 [BGP IPC CKD STG 5 DXS]

- SNOMED 433146000

Vascular Access for Dialysis

CPT 36147, 36148, 36800, 36810, 36815, 36818, 36819, 36820, 36821, 36831, 36832, 36833 [BGP IPC VASCULAR ACC DIAL CPTS]

ESRD Monthly Outpatient Services

CPT 90951, 90952, 90953, 90954, 90955, 90956, 90957, 90958, 90959, 90960, 90961, 90962, 90963, 90964, 90965, 90966, 90967, 90968, 90969, 90970, 90989, 90993, 90997, 90999, 99512 [BGP IPC ESRD OPT SRV CPTS]

Kidney Transplant

- Diagnosis (POV or Problem List entry where the status is not Inactive or Deleted):

- ICD-9: V42.0; ICD-10: Z94.0 [BGP IPC KIDNEY TRANSPLANT DXS]
- SNOMED 161665007

- Procedure ICD-10: 0TY00Z0, 0TY00Z1, 0TY00Z2, 0TY10Z0, 0TY10Z1, 0TY10Z2 [BGP ECQM KIDNEY TRANSPLANT PRC]

- CPT 50300, 50320, 50340, 50360, 50365, 50370, 50380, S2065 [BGP IPC KIDNEY TRANSPLANT CPTS]

Dialysis Services

CPT 1019320, 90920, 90921, 90924, 90925, 90935, 90937, 90940, 90945, 90947, 90957, 90958, 90959, G0257 [BGP IPC DIALYSIS SRV CPTS]

Numerator

To be included in the numerator, the patient must have a blood pressure reading with a diastolic result less than (<) 90 and a systolic result less than (<) 140 on their most recent visit with documented blood pressure during the Report Period. Blood pressure readings during inpatient encounters and ED visits (defined above) will not be included. If there are multiple blood pressure readings on the same day, the lowest systolic and the lowest diastolic reading will be used.

Diastolic Blood Pressure

- LOINC 8462-4

- Measurement value

Systolic Blood Pressure

- LOINC 8480-6

- Measurement value

2.6.3.5   Patient List

List of patients with hypertension and BP value, if any.

2.7   Other Clinical Measures Group

2.7.1   Medication Therapy for Persons with Asthma

2.7.1.1   Owner and Contact

IPC Group

2.7.1.2   Denominators

IPC User Population patients aged 5 years and older with persistent asthma during the Report Period.

2.7.1.3   Numerators

Patients who were prescribed long-term control medication during the Report Period.

2.7.1.4   Definitions

Persistent Asthma

Any of the following:

- Problem List entry where the status is not Inactive or Deleted for ICD-9: 493.*; ICD-10: J45.* [BGP ASTHMA DXS] with Severity of 2, 3, or 4 at any time before the end of the Report Period

- Problem List entry where the status is not Inactive or Deleted for SNOMED data set PXRM ASTHMA PERSISTENT at any time before the end of the Report Period

- Most recent visit-related asthma entry (i.e., V Asthma) with Severity of 2, 3, or 4 documented any time before the end of the Report Period.

Denominator Exclusions

Patients with any of the following during the Report Period are excluded from the denominator:

- Refusal for medication in BGP PQA CONTROLLER MEDS

- Patient allergy to one of the following medications: beclomethasone, budesonide, budesonide-formoterol, ciclesonide, flunisolide, fluticasone, fluticasone-salmeterol, fluticasone-vilanterol, formoterol, mometasone, mometasone-formoterol, montelukast, salmeterol, Long acting theophylline, zafirlukast, zileuton.

Long-Term Control Medications

Long-term control medications defined with medication taxonomy BGP PQA CONTROLLER MEDS. (Medications are: beclomethasone, budesonide, budesonide-formoterol, ciclesonide, flunisolide, fluticasone, fluticasone-salmeterol, fluticasone-vilanterol, formoterol, mometasone, mometasone-formoterol, montelukast, salmeterol, Long acting theophylline, zafirlukast, zileuton). Medications must not have a comment of RETURNED TO STOCK.

2.7.1.5   Patient List

List of patients with asthma and long-term control medication, if any.

Acronym List

Acronym	Term Meaning
ADA	American Dental Association
AI/AN	American Indian/Alaska Native
BH	Behavioral Health
BHS	Behavioral Health System
BMI	Body Mass Index
BP	Blood Pressure
CPT	Current Procedural Terminology
CRC	Colorectal Cancer
CRS	Clinical Reporting System
CVX	Vaccine Code
DM	Diabetes Mellitus
DNKA	Did Not Keep Appointment
DPST	Demo/Test Patient Search Template
DTaP	Diphtheria Tetanus Acellular Pertussis
ESRD	End Stage Renal Disease
ETDRS	Early Treatment Diabetic Retinopathy Study
FIT	Fecal Immunochemical Test
FOBT	Fecal Occult Blood Test
GFR	Glomerular Filtration Rate
GPRA	Government Performance and Results Act of 1993
HiB	Haemophilus Influenzae Type B
HIV	Human Immunodeficiency Virus
HPV	Human Papillomavirus
ICD	International Classification of Diseases
IHS	Indian Health Service
IPC	Improving Patient Care
IPV	Inactivated Polio Vaccine
LOINC	Logical Observations Identifiers, Names, Codes
MMR	Measles, Mumps and Rubella (vaccine)
NHANES	National Health and Nutrition Examination Survey
NMI	Not Medically Indicated
PCC	Patient Care Component
POV	Purpose of Visit
RPMS	Resource and Patient Management System

Acronym	Term Meaning
SNOMED	Systematized Nomenclature of Medicine
TD	Tetanus, Diphtheria
TDaP	Tetanus, Diphtheria and Acellular Pertussis
UACR	Urine Albumin-to-Creatinine Ratio

Contact Information

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