

owner/steward and contact information, and a link to existing electronic specifications.

TABLE 10: Clinical Quality Measures for Submission by Eligible Hospitals and CAHs for Payment Year 2011-2012⁵

| Measure Number Identifier | Measure Title, Description & Measure Steward | Electronic Measure Specifications Information |
|---|--|---|
| Emergency Department (ED)-1 NQF 0495 | <p>Title: Emergency Department Throughput – admitted patients Median time from ED arrival to ED departure for admitted patients</p> <p>Description: Median time from emergency department arrival to time of departure from the emergency room for patients admitted to the facility from the emergency department</p> <p>Measure Developer: CMS/Oklahoma Foundation for Medical Quality (OFMQ)</p> | http://www.cms.gov/QualityMeasures/03_ElectronicSpecifications.asp#TopOfPage |
| ED-2 NQF 0497 | <p>Title: Emergency Department Throughput – admitted patients Admission decision time to ED departure time for admitted patients</p> <p>Description: Median time from admit decision time to time of departure from the emergency department of emergency department patients admitted to inpatient status</p> <p>Measure Developer: CMS/OFMQ</p> | http://www.cms.gov/QualityMeasures/03_ElectronicSpecifications.asp#TopOfPage |
| Stroke-2 NQF 0435 | <p>Title: Ischemic stroke – Discharge on anti-thrombotics</p> <p>Description: Ischemic stroke patients prescribed antithrombotic therapy at hospital discharge</p> <p>Measure Developer: The Joint Commission</p> | http://www.cms.gov/QualityMeasures/03_ElectronicSpecifications.asp#TopOfPage |
| Stroke-3 NQF 0436 | <p>Title: Ischemic stroke – Anticoagulation for A-fib/flutter</p> <p>Description: Ischemic stroke patients with atrial fibrillation/flutter who are prescribed anticoagulation therapy at hospital discharge.</p> <p>Measure Developer: The Joint Commission</p> | http://www.cms.gov/QualityMeasures/03_ElectronicSpecifications.asp#TopOfPage |
| Stroke-4 NQF 0437 | <p>Title: Ischemic stroke – Thrombolytic therapy for patients arriving within 2 hours of symptom onset</p> <p>Description: Acute ischemic stroke patients who arrive at this hospital within 2 hours of time last known well and for whom IV t-PA was initiated at this hospital within 3 hours of time last known well.</p> <p>Measure Developer: The Joint Commission</p> | http://www.cms.gov/QualityMeasures/03_ElectronicSpecifications.asp#TopOfPage |

⁵ * In the event that new clinical quality measures are not adopted by 2013, the clinical quality measures in this Table would continue to apply.

| Measure Number Identifier | Measure Title, Description & Measure Steward | Electronic Measure Specifications Information |
|--|--|---|
| Stroke-5 NQF 0438 | <p>Title: Ischemic or hemorrhagic stroke – Antithrombotic therapy by day 2</p> <p>Description: Ischemic stroke patients administered antithrombotic therapy by the end of hospital day 2.</p> <p>Measure Developer: The Joint Commission</p> | http://www.cms.gov/QualityMeasures/03_ElectronicSpecifications.asp#TopOfPage |
| Stroke-6 NQF 0439 | <p>Title: Ischemic stroke – Discharge on statins</p> <p>Description: Ischemic stroke patients with LDL \geq 100 mg/dL, or LDL not measured, or, who were on a lipid-lowering medication prior to hospital arrival are prescribed statin medication at hospital discharge.</p> <p>Measure Developer: The Joint Commission</p> | http://www.cms.gov/QualityMeasures/03_ElectronicSpecifications.asp#TopOfPage |
| Stroke-8 NQF 0440 | <p>Title: Ischemic or hemorrhagic stroke – Stroke education</p> <p>Description: Ischemic or hemorrhagic stroke patients or their caregivers who were given educational materials during the hospital stay addressing all of the following: activation of emergency medical system, need for follow-up after discharge, medications prescribed at discharge, risk factors for stroke, and warning signs and symptoms of stroke.</p> <p>Measure Developer: The Joint Commission</p> | http://www.cms.gov/QualityMeasures/03_ElectronicSpecifications.asp#TopOfPage |
| Stroke-10 NQF 0441 | <p>Title: Ischemic or hemorrhagic stroke – Rehabilitation assessment</p> <p>Description: Ischemic or hemorrhagic stroke patients who were assessed for rehabilitation services.</p> <p>Measure Developer: The Joint Commission</p> | http://www.cms.gov/QualityMeasures/03_ElectronicSpecifications.asp#TopOfPage |
| Venous Thromboembolism (VTE)-1 NQF 0371 | <p>Title: VTE prophylaxis within 24 hours of arrival</p> <p>Description: This measure assesses the number of patients who received VTE prophylaxis or have documentation why no VTE prophylaxis was given the day of or the day after hospital admission or surgery end date for surgeries that start the day of or the day after hospital admission.</p> <p>Measure Developer: The Joint Commission</p> | http://www.cms.gov/QualityMeasures/03_ElectronicSpecifications.asp#TopOfPage |
| VTE-2 NQF 0372 | <p>Title: Intensive Care Unit VTE prophylaxis</p> <p>Description: This measure assesses the number of patients who received VTE prophylaxis or have documentation why no VTE prophylaxis was given the day of or the day after the initial admission (or transfer) to the Intensive Care Unit (ICU) or surgery end date for surgeries that start the day of or the day after ICU admission (or transfer).</p> <p>Measure Developer: The Joint Commission</p> | http://www.cms.gov/QualityMeasures/03_ElectronicSpecifications.asp#TopOfPage |

| Measure Number Identifier | Measure Title, Description & Measure Steward | Electronic Measure Specifications Information |
|---------------------------|--|---|
| VTE-3 NQF 0373 | <p>Title: Anticoagulation overlap therapy</p> <p>Description: This measure assesses the number of patients diagnosed with confirmed VTE who received an overlap of parenteral (intravenous [IV] or subcutaneous [subcu]) anticoagulation and warfarin therapy. For patients who received less than five days of overlap therapy, they must be discharged on both medications. Overlap therapy must be administered for at least five days with an international normalized ratio (INR) ≥ 2 prior to discontinuation of the parenteral anticoagulation therapy or the patient must be discharged on both medications.</p> <p>Measure Developer: The Joint Commission</p> | http://www.cms.gov/QualityMeasures/03_ElectronicSpecifications.asp#TopOfPage |
| VTE-4 NQF 0374 | <p>Title: Platelet monitoring on unfractionated heparin</p> <p>Description: This measure assesses the number of patients diagnosed with confirmed VTE who received intravenous (IV) UFH therapy dosages AND had their platelet counts monitored using defined parameters such as a nomogram or protocol.</p> <p>Measure Developer: The Joint Commission</p> | http://www.cms.gov/QualityMeasures/03_ElectronicSpecifications.asp#TopOfPage |
| VTE-5 NQF 0375 | <p>Title: VTE discharge instructions</p> <p>Description: This measure assesses the number of patients diagnosed with confirmed VTE that are discharged to home, to home with home health, home hospice or discharged/transferred to court/law enforcement on warfarin with written discharge instructions that address all four criteria: compliance issues, dietary advice, follow-up monitoring, and information about the potential for adverse drug reactions/interactions.</p> <p>Measure Developer: The Joint Commission</p> | http://www.cms.gov/QualityMeasures/03_ElectronicSpecifications.asp#TopOfPage |
| VTE-6 NQF 0376 | <p>Title: Incidence of potentially preventable VTE</p> <p>Description: This measure assesses the number of patients diagnosed with confirmed VTE during hospitalization (not present on arrival) who did not receive VTE prophylaxis between hospital admission and the day before the VTE diagnostic testing order date.</p> <p>Measure Developer: The Joint Commission</p> | http://www.cms.gov/QualityMeasures/03_ElectronicSpecifications.asp#TopOfPage |

We proposed that to satisfy the requirements of reporting on clinical quality measures under sections 1886(n)(3)(A)(iii) and 1903(t)(6)(C) of the Act for the 2011 - 2012 payment year, we would require eligible hospitals and CAHs to report on all EHR incentive clinical quality