

### Quality Reporting Requirements:

- Report **6 quality measures, or a specialty measure set** among 271 total quality measures
- Include at least **ONE** outcome measure (if N/A, choose at least one high priority measure)
- Numerator population must reflect **TOTAL PATIENT POPULATION**

### Specialty Measure Set (21):

QI 448: Appropriate Workup Prior to Endometrial Ablation – **High Priority**

QI 265: Biopsy Follow-Up – **High Priority**

QI 112: Breast Cancer Screening

QI 047: Care Plan – **High Priority**

QI 447: Chlamydia Screening Follow Up

QI 236: Controlling High Blood Pressure – **High Priority, Outcome**

QI 130: Documentation of Current Medications in the Medical Record – **High Priority**

QI 443: Non-Recommended Cervical Cancer Screening in Adolescent Females – **High Priority**

QI 418: Osteoporosis Management in Women Who Had a Fracture

QI 422: Performing Cystoscopy at the Time of Hysterectomy for Pelvic Organ Prolapse to Detect Lower Urinary Tract Injury – **High Priority**

QI 128: Preventive Care and Screening: Body Mass Index (BMI) Screening and Follow-Up Plan

QI 110: Preventive Care and Screening: Influenza Immunization

QI 317: Preventive Care and Screening: Screening for High Blood Pressure and Follow-Up Documented

QI 226: Preventive Care Screening: Tobacco Use: Screening and Cessation Intervention

QI 431: Preventive Care and Screening: Unhealthy Alcohol Use: Screening & Brief Counseling

QI 432: Proportion of Patients Sustaining a Bladder Injury at the Time of any Pelvic Organ Prolapse Repair – **High Priority**

QI 433: Proportion of Patients Sustaining a Bowel Injury at the time of any Pelvic Organ Prolapse Repair – **High Priority**

QI 434: Proportion of Patients Sustaining a Ureter Injury at the Time of any Pelvic Organ Prolapse Repair – **High Priority**

QI 402: Tobacco Use and Help with Quitting Among Adolescents

QI 048: Urinary Incontinence: Assessment of Presence of Absence of Urinary Incontinence in Women Aged 65 Years or Older

QI 050: Urinary Incontinence: Plan Care for Urinary Incontinence in Women Aged 65 Years and Older –  
**High Priority**

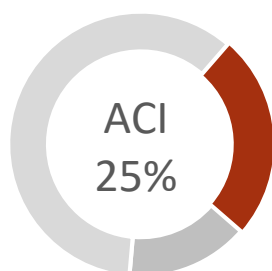
### Additional Measures:

QI 039: Screening for Osteoporosis for Women Aged 65-85 Years of Age

QI 111: Pneumococcal Vaccination Status for Older Adults

QI 134: Preventive Care and Screening: Screening for Clinical Depression and Follow-Up Plan

QI 204: Ischemic Vascular Disease (IVD): Use of Aspirin or Another Antiplatelet



### Advancing Care Information (ACI) Reporting Requirements:

- Report **ALL required measures** in the base score to earn any credit for ACI
- To **satisfy** base score requirements, clinicians must submit a numerator/denominator or Yes/No response for required measures
- Report on additional performance measure and/or bonus measures to increase your ACI score

#### \*BASE SCORE MEASURES

**\*To get credit for the Advancing Care Information category, you must submit information for all the required base measures**

#### CEHRT 2015 Base Measure Set

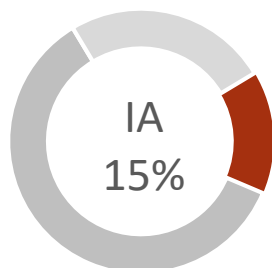
- \*Security Risk Analysis
- \*E-Prescribing
- \*Provide Patient Access
- \*Request/Accept Summary of Care
- \*Send a Summary of Care

#### CEHRT 2014 Base Measure Set

- \*Security Risk Analysis
- \*E-Prescribing
- \*Provide Patient Access
- \*Health Information Exchange

*Reporting Requirements: Based on your Certified EHR Technology edition (CEHRT)*

**PERFORMANCE AND BONUS MEASURES are available to increase your Advancing Care Information category score. Consult with your NJII MIPS Advisor for details.**



### Improvement Activities (IA) Reporting Requirements:

- Attest that you completed **up to 4 Improvement Activities** for a minimum of 90 days
- Choose one of the following combinations:
  - 2 High Weighted Activities
  - 1 High Weighted Activity and 2 Medium Weighted Activities
  - 4 Medium Weighted Activities

### Recommended Activities:

- Collection and use of patient experience and satisfaction data on access – **Medium Weighted**
- Annual registration in the prescription drug monitoring program – **Medium Weighted**
- Engagement of new Medicaid patients and follow-up – **High Weighted**
- Engage patients and families to guide improvement in the system of care – **Medium Weighted**
- Implementation of documentation improvements for practice/process improvements – **Medium Weighted**
- Implementation of improvements that contribute to more timely communication of test results – **Medium Weighted**
- Participation in the CMS Transforming Clinical Practice Initiative- **High Weighted**