

## **Vascular Surgery**



### **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 (14):**

- QI 047: Care Plan High Priority
- QI 236: Controlling High Blood Pressure High Priority
- QI 130: Documentation of Current Medications in the Medical Record High Priority
- QI 128: Preventive Care and Screening: Body Mass Index (BMI) Screening and Follow-Up Plan
- QI 317: Preventive Care and Screening: Screening for High Blood Pressure and Follow-Up Documented
- QI 226: Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention
- QI 344: Rate of Carotid Artery Stenting (CAS) for Asymptomatic Patients, Without Major Complications (Discharged to Home by Post-Operative Day #2) High Priority, Outcome
- QI 260: Rate of Carotid Endarterectomy (CEA) for Asymptomatic Patients, without Major Complications (Discharged to Home by Post-Operative Day #2) High Priority, Outcome
- QI 347: Rate of Endovascular Aneurysm Repair (EVAR) of Small or Moderate Non-Ruptured Infrarenal Abdominal Aortic Aneurysms (AAA) Who Die While in Hospital High Priority, Outcome
- QI 259: Rate of Endovascular Aneurysm Repair (EVAR) of Small or Moderate Non-Ruptured Infrarenal Abdominal Aortic Aneurysms (AAA) without Major Complications (Discharged to Home by Post-Operative Day #2) High Priority, Outcome
- QI 258: Rate of Open Repair of Small or Moderate Non-Ruptured Infrarenal Abdominal Aortic
  Aneurysms (AAA) without Major Complications (Discharged to Home by Post-Operative Day #7)
   High Priority, Outcome
- QI 345: Rate of Postoperative Stroke or Death in Asymptomatic Patients Undergoing Carotid Artery Stenting (CAS) High Priority, Outcome
- QI 357: Surgical Site Infection (SSI) High Priority, Outcome
- QI 402: Tobacco Use and Help with Quitting Among Adolescents



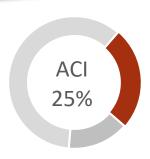
## **Vascular Surgery**

#### **Additional Measures:**

- QI 021: Perioperative Care: Selection of Prophylactic Antibiotic First OR Second Generation Cephalosporin- **High Priority**
- QI 023: Perioperative Care: Venous Thromboembolism (VTE) Prophylaxis (When Indicated in ALL Patients) High Priority
- QI 024: Communication with the Physician or Other Clinician Managing On-going Care Post-Fracture for Men and Women Aged 50 Years and Older High Priority
- QI 043: Coronary Artery Bypass Graft (CABG): Use of Internal Mammary Artery (IMA) in Patients with Isolated CABG Surgery
- QI 044: Coronary Artery Bypass Graft (CABG): Preoperative Beta-Blocker in Patients with Isolated CABG Surgery
- QI 164: Coronary Artery Bypass Graft (CABG): Prolonged Intubation High Priority, Outcome
- QI 257: Statin Therapy at Discharge after Lower Extremity Bypass (LEB)
- QI 329: Adult Kidney Disease: Catheter Use at Initiation of Hemodialysis- High Priority, Outcome
- QI 330: Adult Kidney Disease: Catheter Use for Greater Than or Equal to 90 Days- High Priority,
  Outcome
- QI 346: Rate of Postoperative Stroke or Death in Asymptomatic Patients Undergoing Carotid Endarterectomy (CEA) High Priority, Outcome
- QI 354: Anastomotic Leak Intervention- High Priority, Outcome
- QI 355: Unplanned Reoperation within the 30 Day Postoperative Period- High Priority, Outcome
- QI 356: Unplanned Hospital Readmission within 30 Days of Principal Procedure- High Priority, Outcome
- QI 357: Surgical Site Infection (SSI) High Priority, Outcome
- QI 358: Patient-Centered Surgical Risk Assessment and Communication- High Priority



## **Vascular Surgery**



### **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

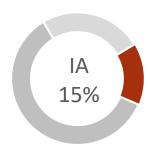
#### **CEHRT 2015 Base Measure Set**

- \*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
  - o 1 High Weighted Activity and 2 Medium Weighted Activities
  - 4 Medium Weighted Activities

#### **Recommended Activities:**

- Collection and follow-up on patient experience and satisfaction data on beneficiary engagement –
   High Weighted
- Implementation of improvements that contribute to more timely communication of test results –
   Medium Weighted
- Use of patient safety tools Medium Weighted
- Care coordination agreements that promote improvements in patient tracking across settings -Medium Weighted
- Collection and follow-up on patient experience and satisfaction data on beneficiary engagement -High Weighted
- Engagement of patients through implementation of improvements in patient portal Medium Weighted



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- Implementation of documentation improvements for practice/process improvements Medium Weighted
- Implementation of improvements that contribute to more timely communication of test results
- TCPI participation High Weighted
- Use evidence-based decision aids to support shared decision-making. Medium Weighted
- Use of certified EHR to capture patient reported outcomes Medium Weighted