

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**

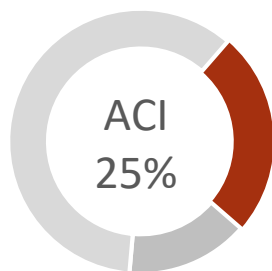
Specialty Measure Set (0):

No Specialty Measure Set for this specialty.

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 039: Screening for Osteoporosis for Women Aged 65-85 Years of Age
- QI 047: Care Plan- **High Priority**
- QI 048: Urinary Incontinence: Assessment of Presence or Absence of Urinary Incontinence in Women Aged 65 Years and Older
- QI 110: Preventative Care and Screening: Influenza Immunization
- QI 111: Pneumococcal Vaccination Status for Older Adults
- QI 112: Breast Cancer Screening
- QI 113: Colorectal Cancer Screening
- QI 128: Preventive Care and Screening: Body Mass Index (BMI) Screening and Follow-Up Plan
- QI 130: Documentation of Current Medications in the Medical Record - **High Priority**
- QI 134: Preventive Care and Screening: Screening for Child Depression and Follow-Up Plan
- QI 185: Colonoscopy Interval for Patients with a History of Adenomatous Polyps - Avoidance of Inappropriate Use- **High Priority**
- QI 226: Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention
- QI 317: Preventive Care and Screening: Screening for High Blood Pressure and Follow-Up Documented
- QI 320: Appropriate Follow-Up Interval for Normal Colonoscopy in Average Risk Patients- **High Priority**

- QI 342: Pain Brought Under Control within 48 Hours- **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**
- QI 425: Photodocumentation of Cecal Intubation



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

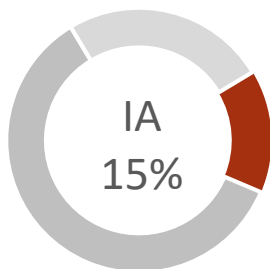
- *Security Risk Analysis
- *E-Prescribing
- *Provide Patient Access
- *Request/Accept Summary of Care
- *Send a Summary of Care

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**