

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 (13):

QI 354: Anastomotic Leak Intervention- **High Priority, Outcome**

QI 357: Surgical Site Infection (SSI) - **High Priority, Outcome**

QI 356: Unplanned Hospital Readmission within 30 Days of Principal Procedure- **High Priority, Outcome**

QI 355: Unplanned Reoperation within the 30 Day Postoperative Period- **High Priority, Outcome**

QI 047: Care Plan-**High Priority**

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

QI 358: Patient-Centered Surgical Risk Assessment and Communication- **High Priority**

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 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 402: Tobacco Use and Help with Quitting Among Adolescents

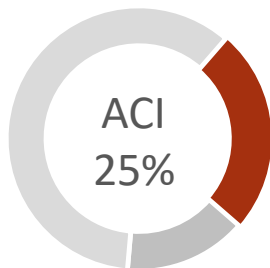
Additional Measures:

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 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 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 260: Rate of Carotid Endarterectomy (CEA) for Asymptomatic Patients, without Major Complications (Discharged to Home by Post-Operative Day #2) - **High Priority, Outcome**
- QI 262: Image Confirmation of Successful Excision of Image-Localized Breast Lesion - **High Priority**
- QI 263: Preoperative Diagnosis of Breast Cancer
- QI 264: Sentinel Lymph Node Biopsy for Invasive Breast Cancer
- 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 345: Rate of Postoperative Stroke or Death in Asymptomatic Patients Undergoing Carotid Artery Stenting (CAS) - **High Priority, Outcome**
- QI 346: Rate of Postoperative Stroke or Death in Asymptomatic Patients Undergoing Carotid Endarterectomy (CEA) - **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**



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

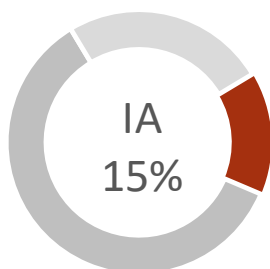
- *Security Risk Analysis
- *E-Prescribing
- *Provide Patient Access
- *Request/Accept Summary of Care
- *Send a Summary of Care

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 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**
- Implementation of use of specialist reports back to referring clinician or group to close referral loop - **Medium Weighted**
- Improved practices that disseminate appropriate self-management materials - **Medium Weighted**
- Practice improvements for bilateral exchange of patient information - **Medium Weighted**
- Use of patient safety tools - **Medium Weighted**
- Participation in the CMS Transforming Clinical Practice Initiative- **High Weighted**