

“PRIME Transition Metrics” Reporting Manual for QIP PY3.5 Reporting, Feb 2020

Measurement Period: 1/1/2020 – 12/31/2020

A comprehensive list of metrics is as follows:

PRIME ID#	Measure Steward (*Innovative Metric)	NQF#	Metric Title
1.1.1.a	Oregon CCO	N/A	Alcohol and Drug Misuse (SBIRT) <ul style="list-style-type: none"> ▪ Brief Screening only ▪ SBIRT
1.1.3.d	NCQA	0059	Comprehensive Diabetes Care: HbA1c Poor Control (>9.0%)
1.1.5.f	CMS	0418	Screening for Depression & follow-up
1.1.6.t	AMA-PCPI	0028	Preventative Care and Screening: Tobacco Use – Screening and Cessation Intervention
1.1.7	NCQA	N/A	Depression Remission or Response for Adolescents and Adults (DRR)
1.2.1.a	Oregon CCO	N/A	Alcohol and Drug Misuse (SBIRT) <ul style="list-style-type: none"> ▪ Brief Screening only ▪ SBIRT
1.2.2	AHRQ	0005	CG-CAHPS: Provider Rating
1.2.3.c	NCQA	0034	Colorectal Cancer Screening
1.2.4.d	NCQA	0059	Comprehensive Diabetes Care: HbA1c Poor Control (>9.0%)
1.2.5.b	NCQA	0018	Controlling Blood Pressure
1.2.7.i	NCQA	0068	Ischemic Vascular Disease (IVD): Use of Aspirin or Another Antithrombotic
1.2.8	AHRQ	N/A	Prevention Quality Overall Composite #90
1.2.9	*DHCS	N/A	Primary Care Redesign metrics stratified by REAL categories and SOGI
1.2.10	*DHCS	N/A	REAL and/or SO/GI disparity reduction
1.2.11	CMS	N/A	REAL data completeness
1.2.12.f	CMS	0418	Screening for Depression and follow-up
1.2.13	CMS	N/A	SO/GI data completeness
1.2.14.t	AMA-PCPI	0028	Preventative Care and Screening: Tobacco Use – Screening and Cessation Intervention
1.3.1	CMS	N/A	Closing the referral loop: receipt of specialist report (CMS504)

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PRIME ID#	Measure Steward (*Innovative Metric)	NQF#	Metric Title
1.3.2	DHCS	N/A	Plan All-Cause Readmissions (PCR-AD))
1.3.3	NCQA	0041	Influenza Immunization
1.3.5	*LACDHS, SFHN	N/A	Request for Specialty Care Expertise Turnaround Time
1.3.6	*LACDHS, UCD	N/A	Specialty Care Touches: Specialty expertise requests managed solely via non-in-person specialty encounters
1.3.7	AMA-PCPI	0028	Preventative Care and Screening: Tobacco Use – Screening and Cessation Intervention
1.4.1	*AHS	N/A	Abnormal Results Follow-up
1.4.2	NCQA	2371	Annual Monitoring for Patients on Persistent Medications
1.4.3	CMS	Variation on 0555	INR Monitoring for Individuals on Warfarin
1.5.1.b	NCQA	0018	Controlling Blood Pressure
1.5.2.i	NCQA	0068	Ischemic Vascular Disease (IVD): Use of Aspirin or Another Antithrombotic
1.5.3	CMS	N/A	PQRS # 317 Preventative Care and Screening: Screening for High Blood Pressure and Follow-Up Documented
1.5.4.t	AMA-PCPI	0028	Preventative Care and Screening: Tobacco Use – Screening and Cessation Intervention
1.6.1	*LACDHS, SFHN	N/A	BIRADS to Biopsy
1.6.2	NCQA	2372	Breast Cancer Screening
1.6.3	NCQA	0032	Cervical Cancer Screening
1.6.4.c	NCQA	0034	Colorectal Cancer Screening
1.6.5	*SFHN	N/A	Receipt of appropriate follow-up for abnormal CRC screening
1.7.1	CMS	0421	BMI Screening and Follow-up
1.7.2	DHCS	N/A	Partnership for a Healthier America's Hospital Health Food Initiative external food service verification
1.7.3	NCQA	0024	Weight Assessment & Counseling for Nutrition and Physical Activity for Children & Adolescents – BMI

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2.1.1	Baby-Friendly USA	N/A	Baby Friendly Hospital designation**
2.1.2	JNC	0480	Exclusive Breast Milk Feeding (PC-05)
2.1.3	CMQCC	N/A	OB Hemorrhage: Massive Transfusion
2.1.5	JNC	0471	PC-02 Cesarean Birth
2.1.6	NCQA	1517	Prenatal and Postpartum Care
2.1.7	CMQCC	N/A	Severe Maternal Morbidity (SMM) per 100 women with obstetric hemorrhage**
2.1.8	TJC	N/A	Unexpected Newborn Complications**
2.1.9	CMQCC	N/A	OB Hemorrhage Safety Bundle
2.2.1	DHCS	N/A	Plan All-Cause Readmissions (PCR-AD)
2.2.2	AHRQ	0166	H-CAHPS: Care Transition Metrics
2.2.3	NCQA	0097	Medication Reconciliation - Post-Discharge
2.2.4	AMA-PCPI	0646	Reconciled Medication List Received by Discharged Patients
2.2.5	AMA-PCPI	0648	Timely Transmission of Transition Record
2.3.2	NCQA	0097	Medication Reconciliation – 30 Post-discharge
2.3.4	AMA-PCPI	0648	Timely Transmission of Transition Record
2.4.1	NCQA	N/A	Adolescent Well-Care Visit
2.4.2	NCQA	1448	Developmental Screening in the First Three Years of Life
2.4.3	CMS	Variation on 0419	Documentation of Current Medications in the Medical Record (0-18 yo)
2.4.4	CMS	0418	Screening for Depression and follow-up
2.4.5	AMA-PCPI	Variation on 0028	Preventative Care and Screening: Tobacco Use – Screening and Cessation Intervention(13 yo and older)
2.4.7	NCQA	1516	Well Child Visits - Third, Fourth, Fifth, and Sixth Years of life
2.4.8	*CCRM	N/A	Comprehensive Medical Evaluation Following Foster Youth Placement in Foster Care

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2.5.1	Oregon CCO	N/A	Alcohol and Drug Misuse (SBIRT) <ul style="list-style-type: none"> ▪ Brief Screening only ▪ SBIRT
2.5.2	NCQA	0018	Controlling Blood Pressure
2.5.3	AHRQ	N/A	Prevention Quality Overall Composite #90
2.5.4	CMS	0418	Screening for Depression and follow-up
2.5.5	AMA-PCPI	0028	Preventative Care and Screening: Tobacco Use – Screening and Cessation Intervention
2.6.1	Oregon CCO	N/A	Alcohol and Drug Misuse (SBIRT) <ul style="list-style-type: none"> ▪ Brief Screening only ▪ SBIRT
2.6.2	AHRQ	N/A	Assessment and management of chronic pain: patients diagnosed with chronic pain who are prescribed an opioid who have an opioid agreement form and an annual urine toxicology screen
2.6.3	*AHRQ/SFHN, AHS, UCSD	N/A	Patients with chronic pain on long term opioid therapy checked in PDMPs
2.6.4	CMS	0418	Screening for Depression and follow-up
2.6.5	*SFHN, AHS, UCSD	N/A	Treatment of Chronic Non-Malignant Pain with Multi-Modal Therapy
2.7.1	NCQA	0326	Advance Care Plan
2.7.2	*UCSF	N/A	Ambulatory Palliative Team Established
2.7.3	UNC Chapel Hill	1641	MWM#8 - Treatment Preferences (Inpatient)
2.7.4	*UCSF	N/A	MWM#8 - Treatment Preferences (Outpatient)
2.7.5	*UCSF	N/A	Palliative care service provided to patients with serious illness
2.7.6	ASCO	0216	Proportion admitted to hospice for less than 3 days
3.1.1	NCQA	0058	Avoidance of antibiotic treatment in adults with acute bronchitis
3.1.3	CDC	2720	National Healthcare Safety Network (NHSN) Antimicrobial Use Measure
3.1.4	CMS	N/A	Peri-operative Prophylactic Antibiotics Administered after Surgical Closure

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PRIME ID#	Measure Steward (*Innovative Metric)	NQF#	Metric Title
3.1.5	NHSN	N/A	Reduction in Hospital Acquired Clostridium Difficile Infections
3.2.2	ACEP	0667	Appropriate Emergency Department Utilization of CT for Pulmonary Embolism
3.2.3	NCQA	0052	Use of Imaging Studies for Low Back Pain
3.2.4	*LACDHS	Variation on 0052	Appropriate Use of Imaging Studies for Low Back Pain (red flags, no time limit)
3.3.1	*AHS	Variation on 2467	Adherence to Medications
3.3.3	AHS	N/A	High-cost Pharmaceutical Ordering Protocols
3.3.4	SCVHS	N/A	Documentation of Medication Reconciliation in the Medical Record for Patients on High Cost Pharmaceuticals
3.4.1	AABB/TJC	N/A	ePBM-01 Pre-op Anemia Screening, Selected Elective Surgical Patients
3.4.3	AABB/TJC	N/A	ePBM-03 Pre-op Type and Crossmatch, Type and Screen, Selected elective Surgical Patients
3.4.4	AABB/TJC	N/A	ePBM-04 Initial Transfusion Threshold

** Pay-for-reporting measures to balance other measures within the project and ensure safe quality improvement. These measures account for events that generally have low incident rates.