

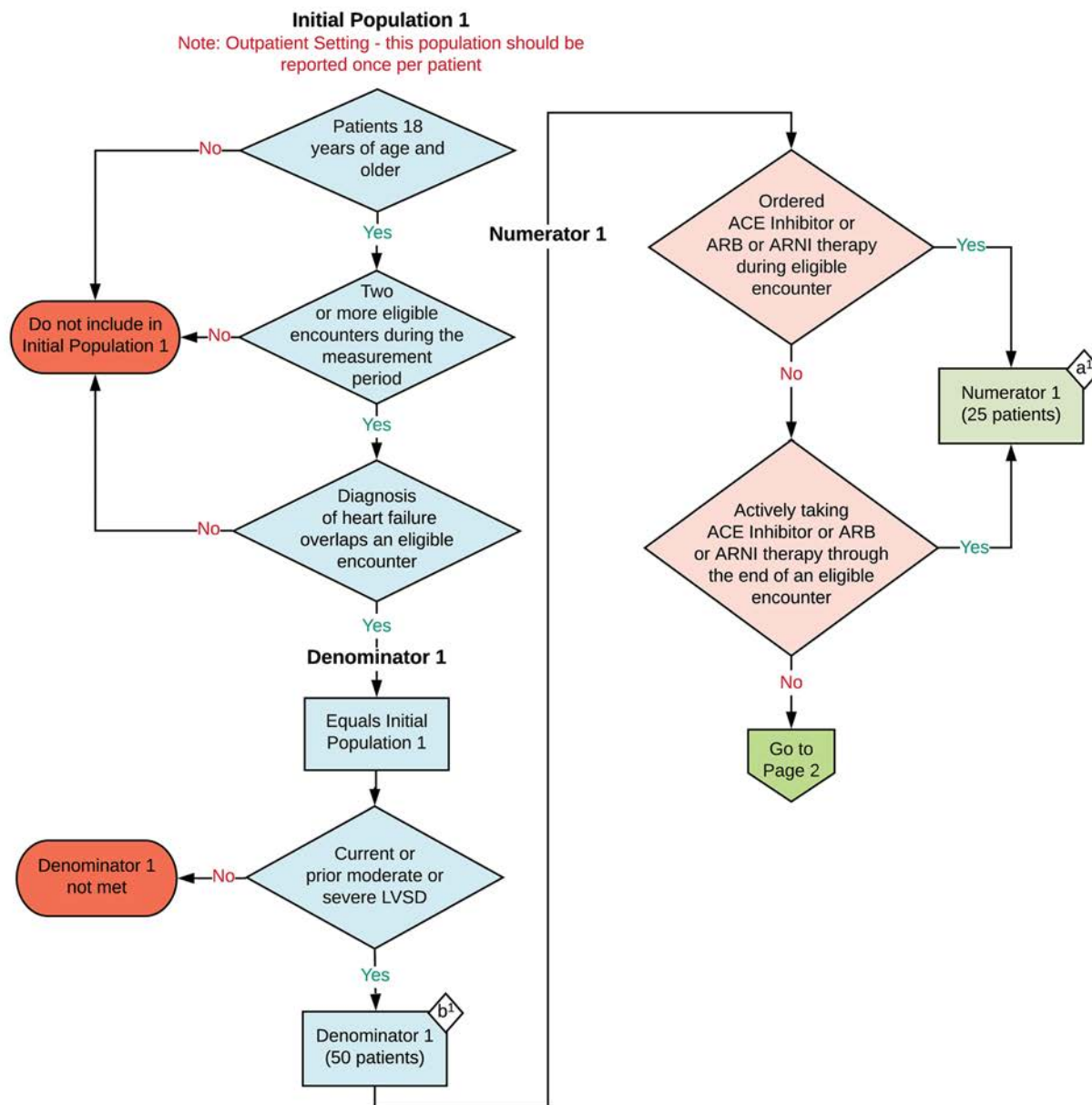
**2022 eCQM Flow**  
**eCQM Identifier: CMS135v10**  
**NQF Number: 0081e**

**NOTE:** This flow diagram represents an overview of population criteria requirements. **Refer to the eCQM specification for a complete list of data elements included in this measure and required for submission.**

**Heart Failure (HF): Angiotensin-Converting Enzyme (ACE) Inhibitor or Angiotensin Receptor Blocker (ARB) or Angiotensin Receptor-Nepriylsin Inhibitor (ARNI) Therapy for Left Ventricular Systolic Dysfunction (LVSD)**

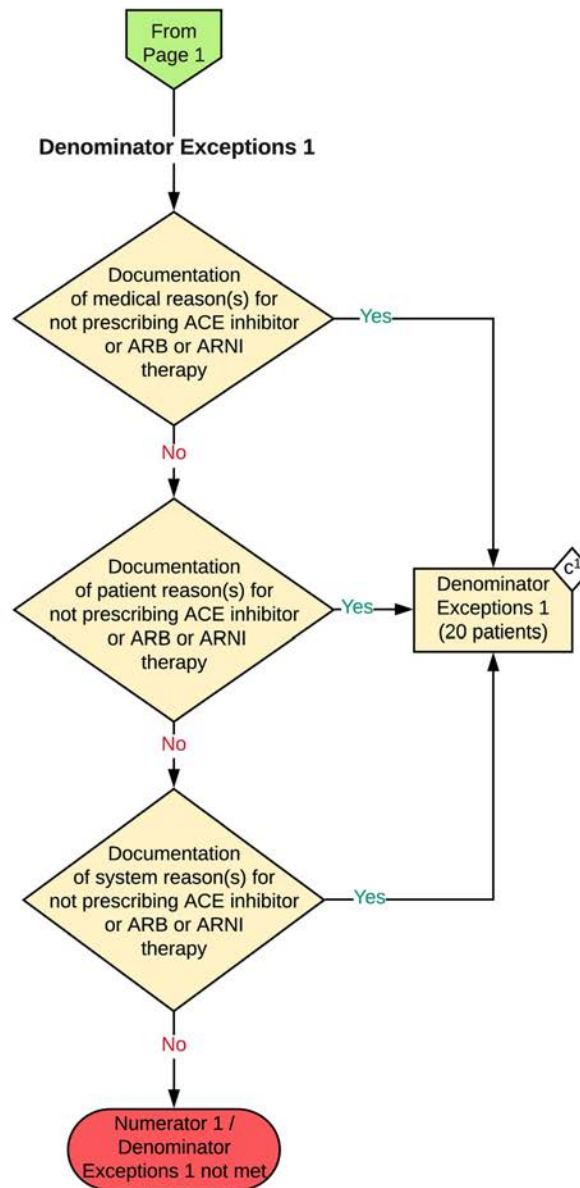
Percentage of patients aged 18 years and older with a diagnosis of heart failure (HF) with a current or prior left ventricular ejection fraction (LVEF) < 40% who were prescribed ACE inhibitor or ARB or ARNI therapy either within a 12-month period when seen in the outpatient setting OR at each hospital discharge

**This eCQM is to be reported at two different frequencies, depending upon the clinical setting.**



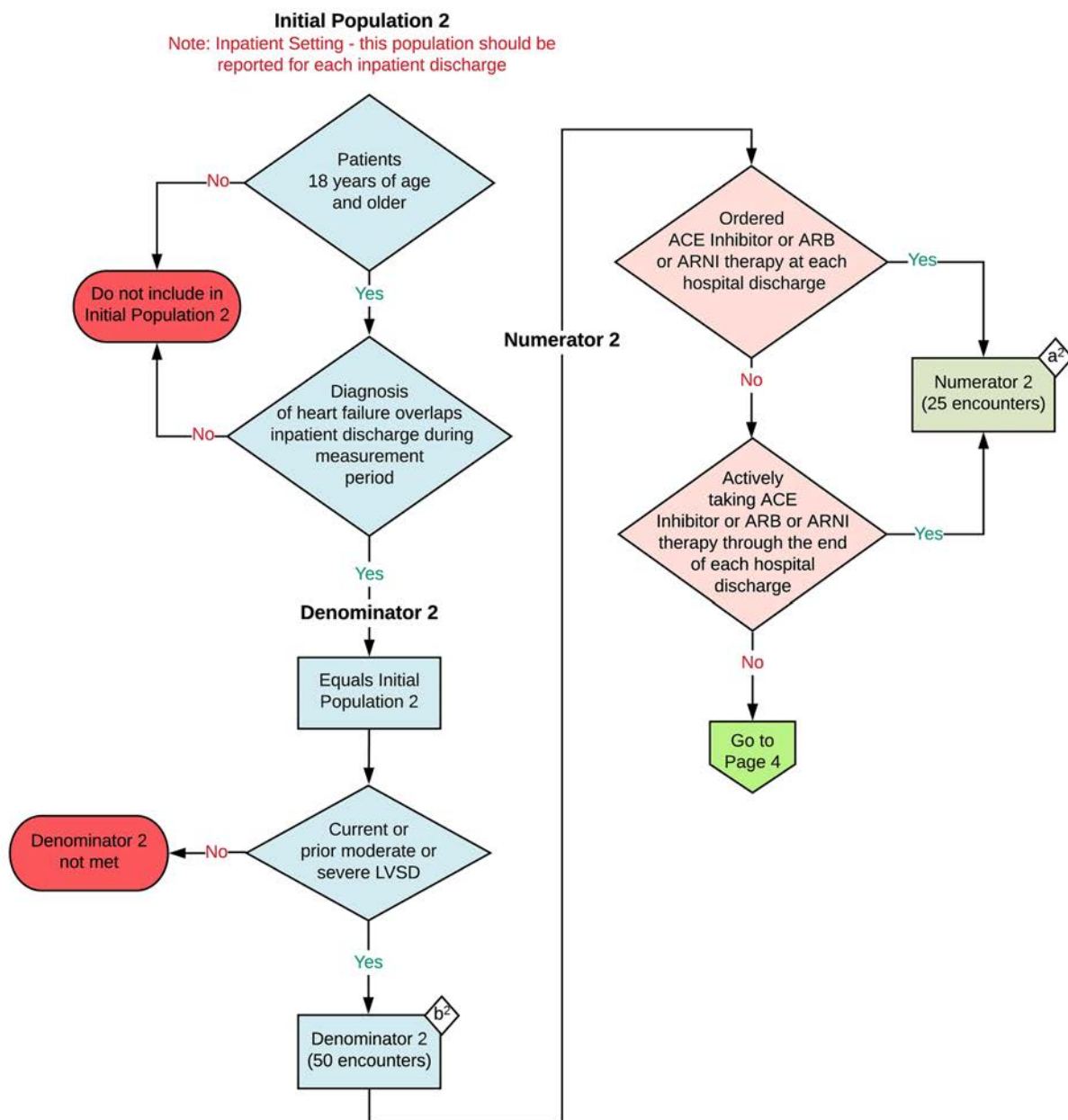
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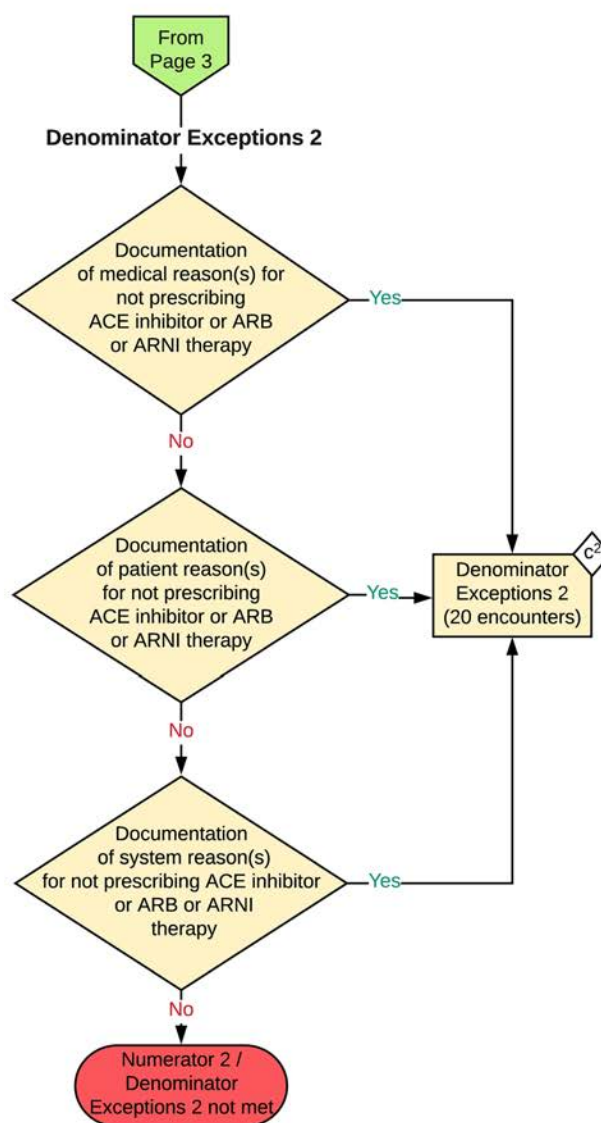
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#### Sample Calculation

**Performance Rate\* (Population 1 and 2) =**

Numerator ( $a^1 + a^2 = 50$  encounters)

Denominator ( $b^1 + b^2 = 100$  encounters) - Denominator Exceptions ( $c^1 + c^2 = 40$  encounters)

$$= \frac{50}{60} = 83\%$$

\*This eCQM is intended to have one performance rate. In order to show an accurate calculation for Population 1 and Population 2, patients and encounters were combined and shown as encounters within the calculation.

**eCQM Identifier: CMS135v10****NQF Number: 0081e****eCQM Title: Heart Failure (HF): Angiotensin-Converting Enzyme (ACE) Inhibitor or Angiotensin Receptor Blocker (ARB) or Angiotensin Receptor-Neprilysin Inhibitor (ARNI) Therapy for Left Ventricular Systolic Dysfunction (LVSD)**

**NOTE:** This flow diagram represents an overview of population criteria requirements. Refer to the eCQM specification for a complete list of data elements included in this measure and required for submission.

**Description:** Percentage of patients aged 18 years and older with a diagnosis of heart failure (HF) with a current or prior left ventricular ejection fraction (LVEF) < 40% who were prescribed ACE inhibitor or ARB or ARNI therapy either within a 12-month period when seen in the outpatient setting OR at each hospital discharge.

**This eCQM is to be reported at two different frequencies, depending upon the clinical setting.**

### **eCQM Flow Narrative**

#### **Outpatient setting:**

#### **Initial Population 1**

Start by identifying the Initial Population 1, which includes patients 18 years of age and older with two or more eligible encounters during the measurement period and a diagnosis of heart failure that overlaps a qualifying outpatient encounter. Note that this population should be reported once per patient.

#### **Denominator 1**

The Denominator 1 criteria further constrain the Initial Population 1 to patients with current or prior moderate or severe LVSD. In the sample calculation provided at the end of the eCQM flow, Denominator 1 is equal to 50 patients.

#### **Numerator 1**

The Numerator 1 criteria identify a subset of the Denominator 1 population by including patients who were ordered ACE inhibitor or ARB or ARNI therapy during an eligible outpatient encounter or patients who were actively taking ACE inhibitor or ARB or ARNI therapy through the end of an eligible outpatient encounter. In the sample calculation provided at the end of the eCQM flow, Numerator 1 is equal to 25 patients.

#### **Denominator Exceptions 1**

The Denominator Exceptions 1 criteria identify patients from Denominator 1 that did not meet the Numerator 1 population criteria due to documentation of medical reason(s), patient reason(s), or system reasons(s) for not prescribing ACE inhibitor or ARB or ARNI therapy. In the sample calculation provided at the end of the eCQM flow, the Denominator Exceptions 1 are equal to 20 patients.

**Inpatient setting:****Initial Population 2**

Start by identifying the Initial Population 2, which includes patients 18 years of age and older with a diagnosis of heart failure that overlaps an inpatient discharge during the measurement period. Note that this population should be reported for each inpatient discharge.

**Denominator 2**

The Denominator 2 criteria further constrain the Initial Population 2 to patients with current or prior moderate or severe LVSD. In the sample calculation provided at the end of the eCQM flow, Denominator 2 is equal to 50 encounters.

**Numerator 2**

The Numerator 2 criteria identify a subset of the Denominator 2 population by including patients who were ordered ACE inhibitor or ARB or ARNI therapy at each hospital discharge or patients who were actively taking ACE inhibitor or ARB or ARNI therapy through the end of each hospital discharge. In the sample calculation provided at the end of the eCQM flow, Numerator 2 is equal to 25 encounters.

**Denominator Exceptions 2**

The Denominator Exceptions 2 criteria identify patients from the Denominator 2 that did not meet the Numerator 2 population criteria due to documentation of medical reason(s), patient reason(s), or system reasons(s) for not prescribing ACE inhibitor or ARB or ARNI therapy. In the sample calculation provided at the end of the eCQM flow, the Denominator Exceptions 2 are equal to 20 encounters.

**Sample Calculation**

A sample calculation is provided to help determine how the measure performance rate is derived. This eCQM is intended to have one performance rate. In order to show an accurate calculation for Population 1 and Population 2, patients and encounters were combined and shown as encounters within the calculation. The measure performance rate is calculated by summing Numerator 1 and Numerator 2 (total equals 50 encounters) then dividing by the difference between the sum of Denominator 1 and Denominator 2 (total equals 100 encounters) and the sum of Denominator Exceptions 1 and Denominator Exceptions 2 (total equals 40 encounters), which is equal to a score of 83 percent.