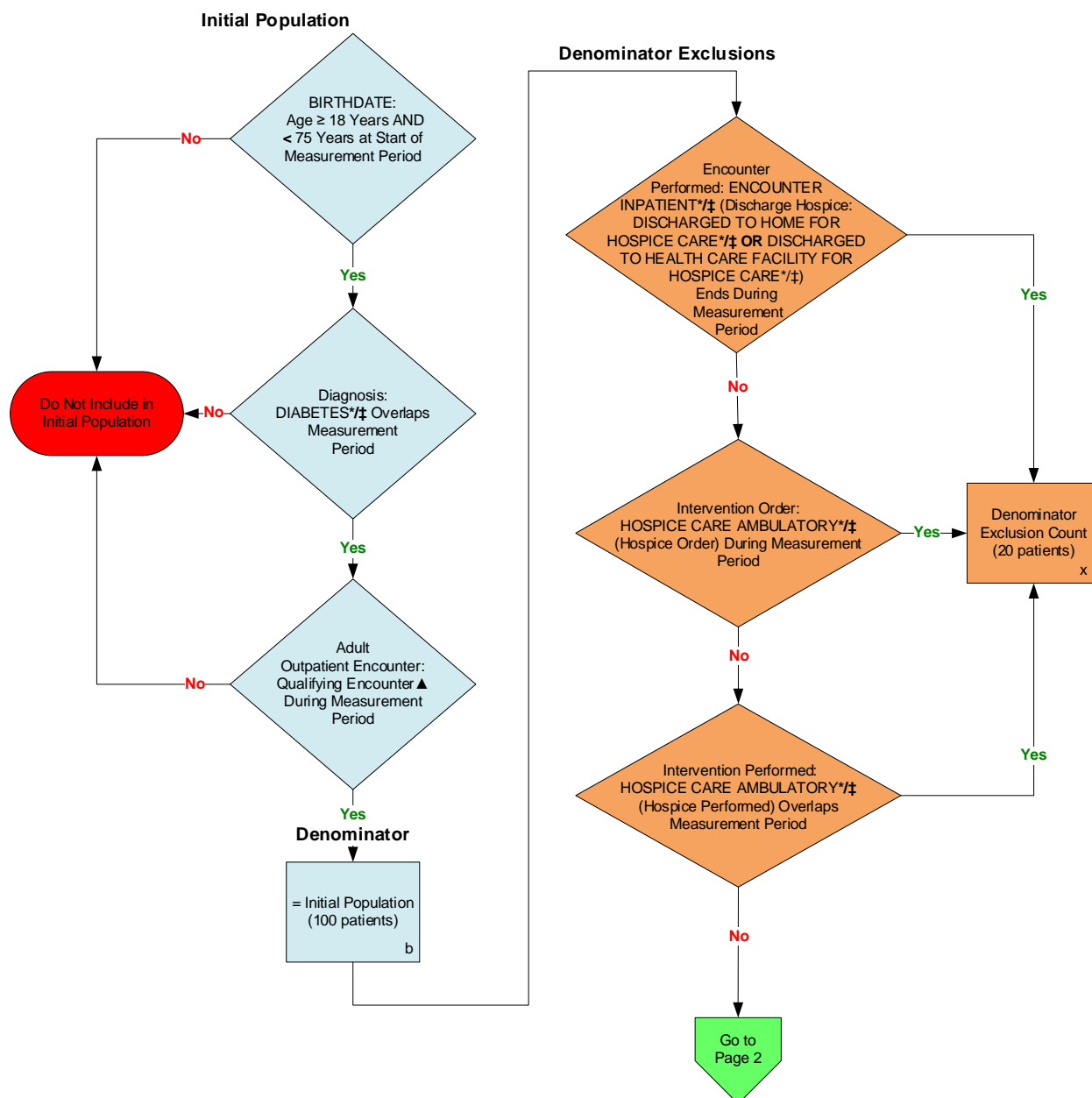


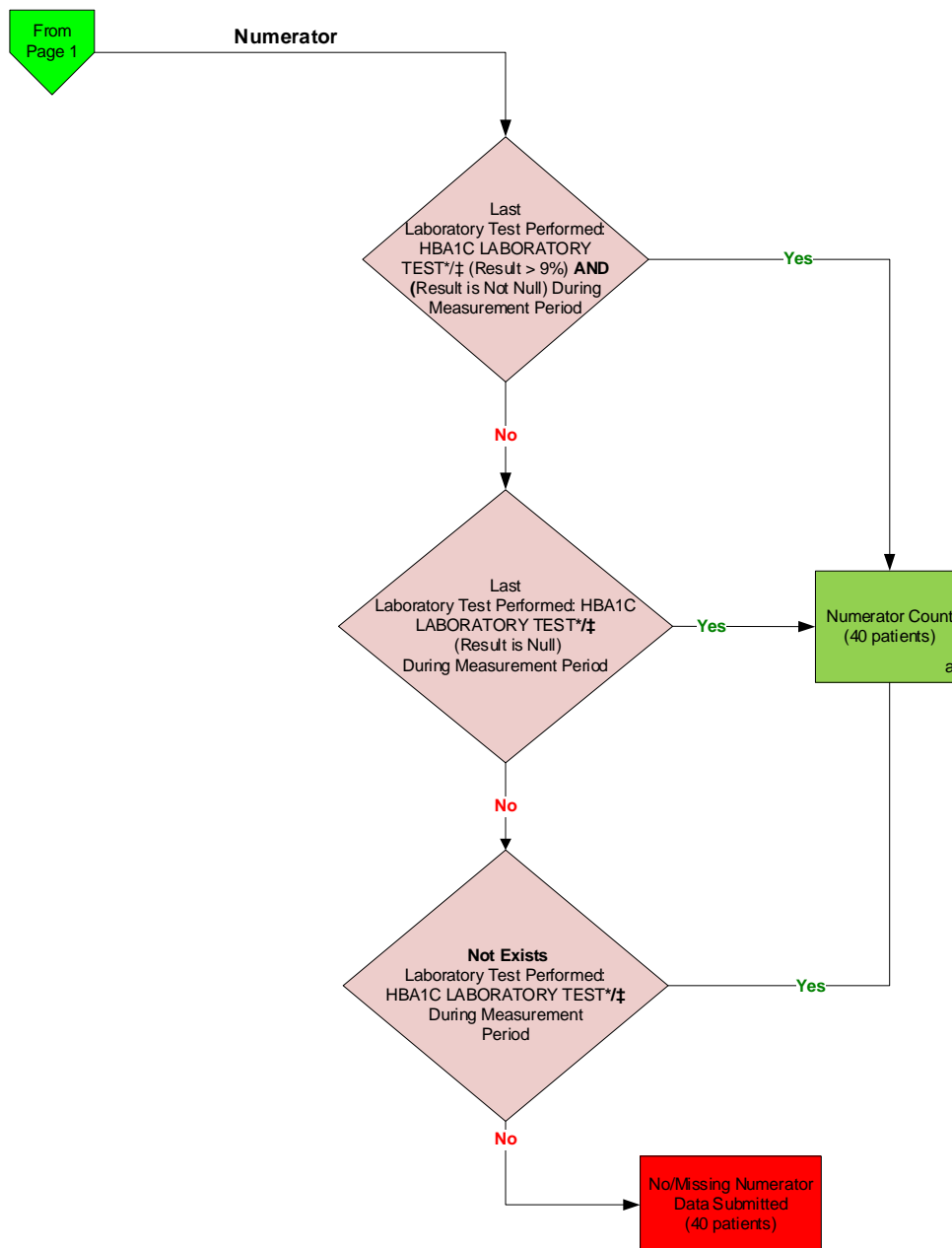
2019 eCQM Flow
Measure Identifier: CMS122v7
 NQF 0059: Diabetes: Hemoglobin A1c (HbA1c) Poor Control (> 9%)
DISCLAIMER: Please Refer to the eCQM for a Complete Listing of Required Data Elements



*‡Please refer to the specific section of the eCQM to identify the associated value sets for use in submitting this eCQM. Please refer to the specific section of the eCQM to identify the Definition associated with Population Criteria.

▲ For a listing of appropriate Encounters please refer to the Definition for the data element to view the associated value set names.

2019 eCQM Flow
Measure Identifier: CMS122v7
 NQF 0059: Diabetes: Hemoglobin A1c (HbA1c) Poor Control (> 9%)
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*†Please refer to the specific section of the eCQM to identify the associated value sets for use in submitting this eCQM. Please refer to the specific section of the eCQM to identify the Definition associated with Population Criteria.

SAMPLE CALCULATION:

Performance Rate =**

$$\frac{\text{Numerator (a=40 patients)}}{\text{Denominator (b=100 patients) – Denominator Exclusions (x=20 patients) – Denominator Exceptions (NA)}} = 50.00\%$$

** For performance, a lower rate indicates better performance.

2019 eCQM Flow
Measure Identifier: CMS122v7
NQF 0059: Diabetes: Hemoglobin A1c (HbA1c) Poor Control (> 9%)
DISCLAIMER: Please Refer to the eCQM for a Complete Listing of Required Data Elements

1. Start Initial Population
2. Check AGE:
 - a. If the AGE is greater than or equal to 18 years **AND** less than 75 years at start of measurement period equals Yes, proceed to check Diagnosis: DIABETES.
 - b. If the AGE is greater than or equal to 18 years **AND** less than 75 years at start of measurement period equals No, do not include in Initial Population. Stop Processing.
3. Check Diagnosis:
 - a. If the Diagnosis: DIABETES overlaps measurement period equals No, do not include in the Initial Population. Stop Processing.
 - b. If the Diagnosis: DIABETES overlaps measurement period equals Yes, proceed to check Adult Outpatient Encounter.
4. Check Adult Outpatient Encounter:
 - a. If the Adult Outpatient Encounter: Qualifying Encounter during measurement period equals Yes, include in the Initial Population and proceed to Denominator.
 - b. If the Adult Outpatient Encounter: Qualifying Encounter during measurement period equals No, do not include in the Initial Population. Stop Processing.
5. Start Denominator
 - a. Denominator equals the Initial Population. Denominator is represented by Letter b in the Sample Calculation listed at the end of this document. Letter b equals 100 patients in the Sample Calculation.
6. Start Denominator Exclusion
7. Check Encounter Performed:
 - a. If the Encounter Performed: ENCOUNTER INPATIENT (Discharge Hospice: DISCHARGED TO HOME FOR HOSPICE CARE OR DISCHARGED TO HEALTH CARE FACILITY FOR HOSPICE CARE) ends during measurement period equals Yes, include in the Denominator Exclusion Count. Denominator Exclusion is Letter x in the Sample Calculation listed at the end of this document. Letter x equals 20 patients in the Sample Calculation.
 - b. If the Encounter Performed: ENCOUNTER INPATIENT (Discharge Hospice: DISCHARGED TO HOME FOR HOSPICE CARE OR DISCHARGED TO HEALTH CARE FACILITY FOR HOSPICE CARE) ends during measurement period equals No, proceed to Intervention Order.
8. Check Intervention Order:

- a. If the Intervention Order: HOSPICE CARE AMBULATORY (Hospice Order) during measurement period equals Yes, include in the Denominator Exclusion Count. Denominator Exclusion Count is Letter x in the Sample Calculation listed at the end of this document. Letter x equals 20 patients in the Sample Calculation.
 - b. If the Intervention Order HOSPICE CARE AMBULATORY (Hospice Order) during measurement period equals No, proceed to Intervention Performed.
9. Check Intervention Performed:
 - a. If the Intervention Performed: HOSPICE CARE AMBULATORY (Hospice Performed) overlaps measurement period equals Yes, include in the Denominator Exclusion Count. Denominator Exclusion Count is Letter x in the Sample Calculation listed at the end of this document. Letter x equals 20 patients in the Sample Calculation.
 - b. If the Intervention Performed: HOSPICE CARE AMBULATORY (Hospice Performed) overlaps measurement period equals No, proceed to Start Numerator.
10. Start Numerator
11. Check Last Laboratory Test Performed:
 - a. If the Last Laboratory Test Performed: HBA1C LABORATORY TEST (Result greater than 9%) **AND** (Result is not Null) during measurement period equals Yes, include in Numerator Count. Numerator Count is represented by Letter a in the Sample Calculation listed at the end of this document. Letter a equals 40 patients in the Sample Calculation. Stop Processing.
 - b. If the Last Laboratory Test Performed: HBA1C LABORATORY TEST (Result greater than 9%) **AND** (Result is not Null) during the measurement period equals No, proceed to check Last Laboratory Test Performed.
12. Check Last Laboratory Test Performed:
 - a. If the Last Laboratory Test Performed: HBA1C LABORATORY TEST (Result is Null) during measurement period equals Yes, include in Numerator Count. Numerator Count is represented by Letter a in the Sample Calculation listed at the end of this document. Letter a equals 40 patients in the Sample Calculation. Stop Processing.
 - b. If the Last Laboratory Test Performed: HBA1C LABORATORY TEST (Result is Null) during measurement period equals No, proceed to check **Not Exists** Laboratory Test Performed.
13. Check **Not Exists** Laboratory Test Performed:
 - a. If the **Not Exists** Laboratory Test Performed: HBA1C LABORATORY TEST during measurement period equals Yes, include in Numerator Count. Numerator Count is represented by Letter a in the Sample Calculation listed at the end of this document. Letter a equals 40 patients in the Sample Calculation. Stop Processing.
 - b. If the **Not Exists** Laboratory Test Performed: HBA1C LABORATORY TEST during measurement period equals No, include in the No/Missing Numerator Data Submitted. Stop Processing.

SAMPLE CALCULATION:

Performance Rate =**

$$\frac{\text{Numerator (a=40 patients)}}{\text{Denominator (b=100 patients) – Denominator Exclusions (x=20 patients) – Denominator Exceptions (N/A)}} = 50.00\%$$

** For performance, a lower rate indicates better performance.