

MSHP 2021 Clinical Integration Program Quality Performance Metrics Internal & Family Medicine Tip Sheet	
Breast Cancer Screening*	
Denominator: Patients 50 to 74 years of age at the beginning of the measurement period AND patient encounter during the performance period.	Numerator: Women with one or more mammograms during the 27 months prior to the end of the measurement period.
Colorectal Cancer Screening*	
Denominator: Patients 50 to 75 years of age on date of encounter AND Patient encounter during the performance period.	Numerator: Patients with one or more screenings for colorectal cancer. <ul style="list-style-type: none"> - Fecal occult blood test (FOBT) during the measurement period. - Flexible sigmoidoscopy during the measurement period or the 4 years prior. - Colonoscopy during the measurement period or the 9 years prior. - Computed tomography (CT) colonography during the measurement period or the 4 years prior. - Fecal immunochemical DNA test (FIT-DNA) during the measurement period or the 2 years prior to the measurement period.
Percent of Panel with PCP visit (telehealth or in person by 8/31/2021)	
Denominator: Adult patients attributed to a provider in a value-based contract.	Numerator: 1 telehealth or in-person visit completed by August 31, 2021. Preventive Medicine Services: <i>Medicare AWV</i> <ul style="list-style-type: none"> - IPPE - G402 - Initial AWV - G0438 - Subsequent AWV - G0439 <i>New Patients</i> <ul style="list-style-type: none"> - Age 18 – 39 - 99385 - Age 40 – 64 - 99386 - Complete Physical Exams or Well Checks for 65 and older - 99387 <i>Established Patients</i> <ul style="list-style-type: none"> - Age 18 – 39 years - 99395 - Age 40 - 64 years - 99396 - 65 years and older - 99397

	E&M Visits: <i>New Patient</i> <ul style="list-style-type: none">- Level 2 – 99202- Level 3 – 99203- Level 4 – 99204- Level 5 – 99205 <i>Established Patient</i> <ul style="list-style-type: none">- Level 1 – 99211- Level 2 – 99212- Level 3 – 99213- Level 4 – 99214- Level 5 – 99215
Diabetes: Hemoglobin A1c (HbA1c) Test*	
Denominator: Patients 18 through 75 years of age on date of encounter <u>AND</u> Diagnosis for diabetes <u>AND</u> patient encounter during performance period	Numerator: Patients with HbA1c test completed in 2021.
Diabetes: Eye Exam*	
Denominator: Patients 18 to 75 years of age on date of encounter <u>AND</u> Diagnosis for diabetes (ICD-10-CM) <u>AND</u> patient encounter during the performance period	Numerator: Diabetics with an eye screening for diabetic retinal disease who had one of the following: <ul style="list-style-type: none">- Dilated retinal eye exam with interpretation by an ophthalmologist or optometrist documented and reviewed (G2102)- Seven standard field stereoscopic photos with interpretation by an ophthalmologist or optometrist documented and reviewed (G2103)- Eye imaging validated to match diagnosis from seven standard field stereoscopic photos results documented and reviewed (G2104)- Low risk for retinopathy (no evidence of retinopathy in the prior year)* (CPT II code 3072F)
Diabetes: Medical Attention for Nephropathy*	
Denominator: Patients aged 18 years to 75 years on date of encounter <u>AND</u> Diagnosis for diabetes (ICD-10) <u>AND</u> patient encounter during the performance period	Numerator: Patients with a screening for nephropathy or evidence of nephropathy during the measurement period: <ul style="list-style-type: none">- A urine test for albumin or protein. At a minimum, documentation must include a note indicating the date when a urine test was performed, and the result or finding. Any of the following meet the criteria: <ul style="list-style-type: none">- 24-hour urine for albumin or protein

	<ul style="list-style-type: none"> - Timed urine for albumin or protein - Spot urine (e.g., urine dipstick or test strip) for albumin or protein - Urine for albumin/creatinine ratio - 24-hour urine for total protein - Random urine for protein/creatinine ratio - Documentation of treatment for nephropathy (e.g., patient receiving dialysis, patient being treated for ESRD, CRF, ARF, or renal insufficiency, any visit to a nephrologist) (3066F) - Documentation that a prescription for an ACE inhibitor/ARB was filled during the measurement year
Medication Adherence for Diabetes Medications	
Denominator: Number of patients with at least two fills of diabetes medication(s) on unique dates of service during the measurement period.	Numerator: Number of patients with a proportion of days covered (PDC) at 80 percent or higher across the classes of diabetes medications during the measurement period.
<u>Measure description:</u> <ul style="list-style-type: none"> - Percent of plan members with a prescription for diabetes medication who fill their prescription often enough to cover 80% or more of the time they are supposed to be taking the medication. - Diabetes medication means a biguanide drug, a sulfonylurea drug, a thiazolidinedione drug, a DPP-IV inhibitor, an incretin mimetic drug, a meglitinide drug, or an SGLT2 inhibitor. Patients who take insulin are not included. 	
Medication Adherence for Cholesterol (Statins)	
Denominator: Number of patients with at least two statin cholesterol medication fills on unique dates of service during the measurement period.	Numerator: Number of patients with a proportion of days covered (PDC) at 80 percent or higher for statin cholesterol medication(s) during the measurement period.
<u>Measure description:</u> <ul style="list-style-type: none"> - Patients with a prescription for a cholesterol medication (a statin drug) who fill their prescription often enough to cover 80% or more of the time they are supposed to be taking the medication. - Statins include: atorvastatin (+/- amlodipine, ezetimibe), fluvastatin, lovastatin (+/- niacin), pitavastatin, pravastatin, rosuvastatin, simvastatin (+/-ezetimibe, niacin, sitagliptin) 	
Medication Adherence for Hypertension (RAS antagonists)	
Denominator: Number of patients with at least two blood pressure medications fills on unique dates of service during the measurement period.	Numerator: Number of patients with a proportion of days covered (PDC) at 80 percent or higher for RAS antagonist medications during the measurement period.

Percent of Medicare Advantage members with a prescription for a blood pressure medication who fill their prescription often enough to cover 80% or more of the time they are supposed to be taking the medication.

Blood pressure medication means an ACE (angiotensin converting enzyme) inhibitor, an ARB (angiotensin receptor blocker), or a direct renin inhibitor drug.

ARBs:	ACE Inhibitors:	Direct Renin Inhibitor
azilsartan (+/- chlorthalidone) candesartan (+/- hydrochlorothiazide) eprosartan (+/- hydrochlorothiazide) irbesartan (+/- hydrochlorothiazide) losartan (+/- hydrochlorothiazide) olmesartan (+/- amlodipine, hydrochlorothiazide) telmisartan (+/- amlodipine, hydrochlorothiazide) valsartan (+/- amlodipine, hydrochlorothiazide nebivolol)	benazepril (+/- amlodipine, hydrochlorothiazide) captopril (+/- hydrochlorothiazide) enalapril (+/- hydrochlorothiazide) fosinopril (+/- hydrochlorothiazide) lisinopril (+/- hydrochlorothiazide) moexipril (+/- hydrochlorothiazide) perindopril (+/- amlodipine) quinapril (+/- hydrochlorothiazide) ramipril trandolapril (+/- verapamil)	aliskiren (+/- amlodipine, hydrochlorothiazide)

*Please refer to the following link for the full measure descriptions:

<https://mshp.mountsinai.org/web/mshp/for-providers/quality/quality-measure-descriptions/internal-medicine-outpatient-family-medicine>