

CBE ID

0021

Title

Annual monitoring for patients on persistent medications

Project

Patient Safety Measures: Complications Endorsement Maintenance

Endorsement Status

Endorsement Removed

Is Under Review

No

Previous Endorsement Cycle

Fall 2012

Removal Date

Tue, 10/16/2012 - 20:00

Initial Endorsement

Sun, 08/09/2009 - 20:00

Steward

National Committee for Quality Assurance

1.0 New or Maintenance

Maintenance

1.1 Measure Structure

Single Measure

1.3 Electronic Clinical Quality Measure (eCQM)

No

1.6 Measure Description

The percentage of members 18 years of age and older who received at least 180 treatment days of ambulatory medication therapy for a select therapeutic agent during the measurement year and at least one therapeutic monitoring event for the therapeutic agent in the measurement year. For each product line, report each of the four rates separately and as a total rate.

- Annual monitoring for members on angiotensin converting enzyme (ACE) inhibitors or angiotensin receptor blockers (ARB)
- Annual monitoring for members on digoxin
- Annual monitoring for members on diuretics

- Annual monitoring for members on anticonvulsants
- Total rate (the sum of the four numerators divided by the sum of the four denominators)

1.7 Measure Type

Process

1.8 Level of Analysis

Clinician: Group/Practice, Clinician: Individual, Health Plan

1.9 Care Setting

Urgent Care - Ambulatory, Ambulatory Care: Clinician Office, Outpatient Services

1.14 Numerator

For annual monitoring for members on ACE inhibitors or ARBs, digoxin, and diuretics: The number of patients with at least one serum potassium and either a serum creatinine or a blood urea nitrogen therapeutic monitoring test in the measurement year. For annual monitoring for members on anticonvulsants: At least one drug serum concentration level monitoring test for the prescribed drug in the measurement year. Sum of the 4 numerators.

1.15 Denominator

Members on persistent medications—defined as members who received at least 180 treatment days of ambulatory medication in the measurement year.

1.20 Types of Data Sources

Claims Data, Electronic Health Data, Electronic Health Records: Electronic Health Records

6.1.2 Current or Planned Use(s)

Public Reporting, Quality Improvement with Benchmarking (external benchmarking to multiple organizations), Regulatory and Accreditation Programs

6.1.3 Current Use(s)

Public Reporting, Quality Improvement with Benchmarking (external benchmarking to multiple organizations), Regulatory and Accreditation Programs

Exclusions

For Annual Monitoring for Members on Anticonvulsants:
(optional) Members from each eligible population rate who had an inpatient (acute or nonacute) claim/encounter during the measurement year.

Risk Adjustment

No risk adjustment or risk stratification

Target Population

Populations at Risk: Populations at Risk

Steward Organization

National Committee for Quality Assurance

Steward POC email

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