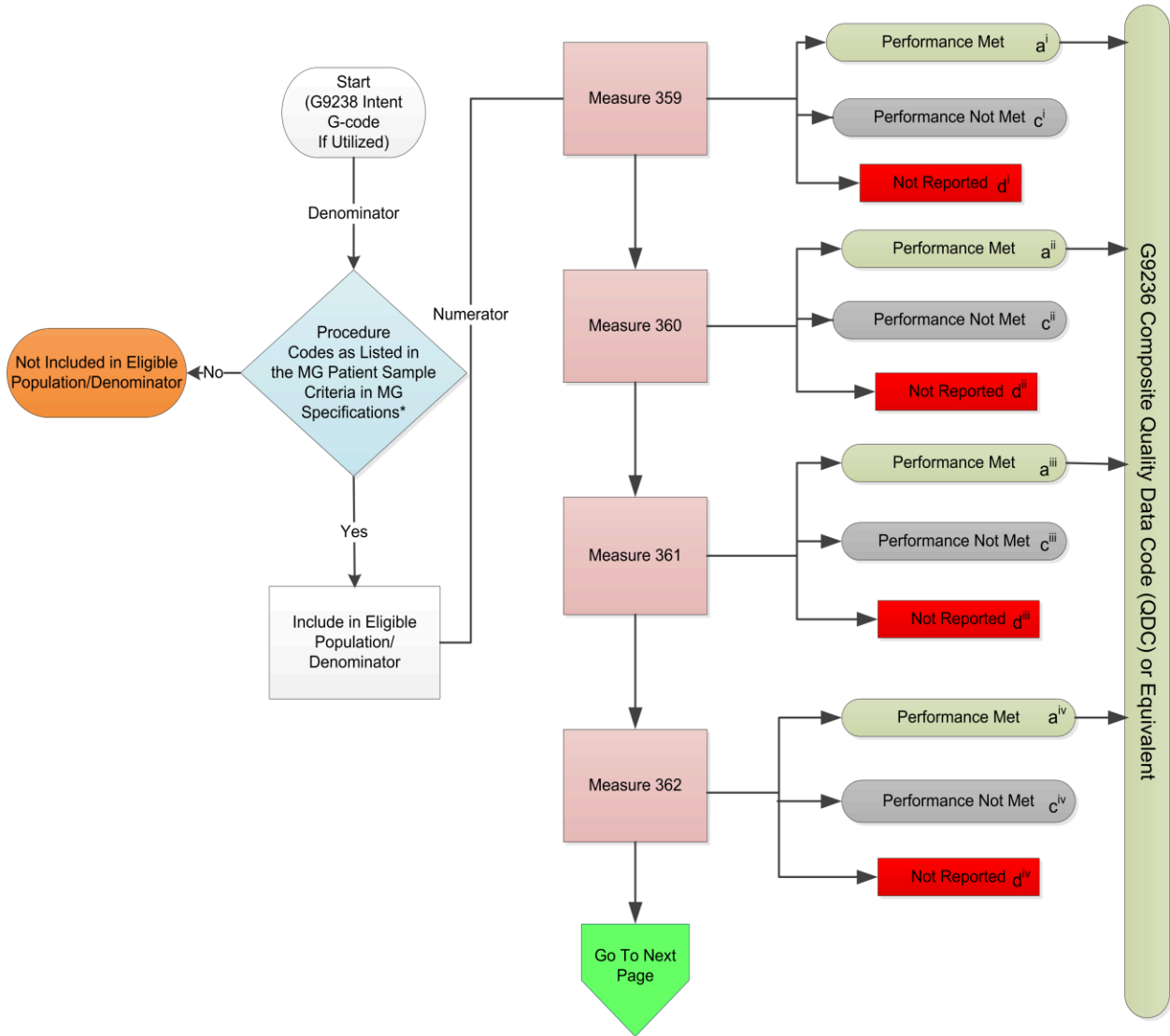


2016 Measures Group (MG) Flow Optimizing Patient Exposure to Ionizing Radiation (OPEIR)

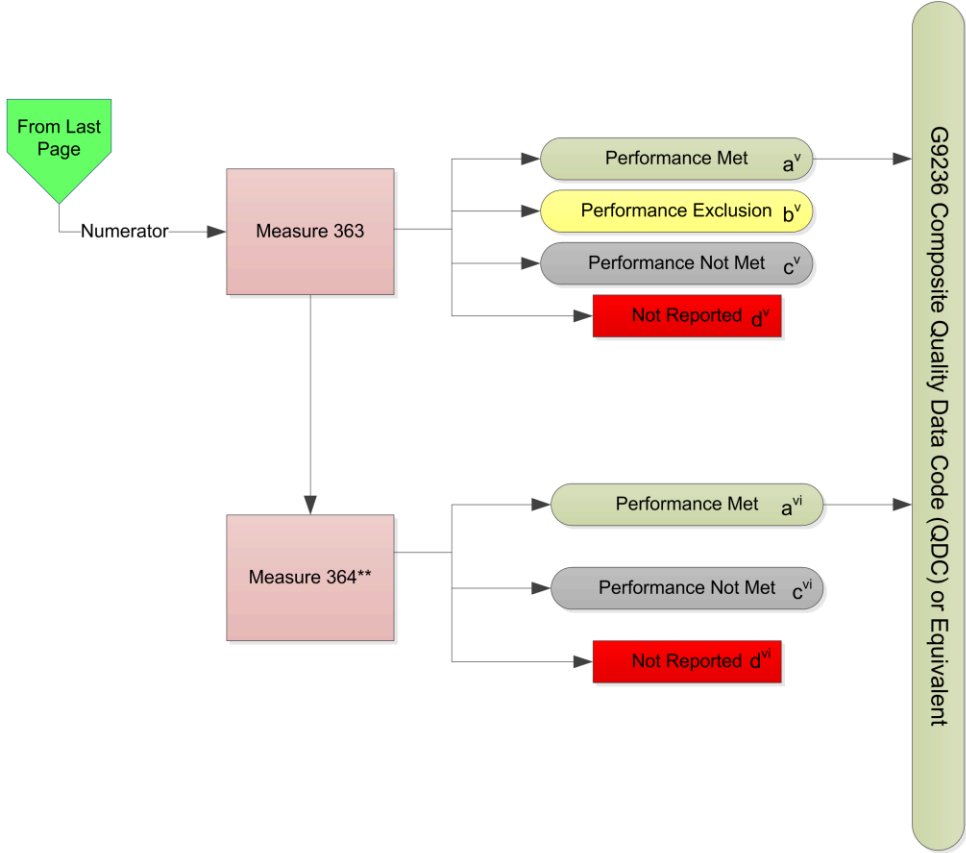
Note: For Measure numerator details, please refer to the Measures Groups Specification Manual



The measure diagrams were developed by CMS as a supplemental resource to be used in conjunction with the measure specifications. They should not be used alone or as a substitution for the measure specification.
* See the posted 2016 Measures Groups Specification Manual for Patient Sample Criteria, specific coding and instructions to report this measures group.

2016 Measures Group (MG) Flow Optimizing Patient Exposure to Ionizing Radiation (OPEIR)

Note: For Measure numerator details, please refer to the Measures Groups Specification Manual



**Measure #364 is only applicable when the patient is 18 years of age or older and has a specific procedure performed (see measures group overview for specific coding) accompanied by a finding of an incidental pulmonary nodule.

2016 Measures Group (MG) Flow Optimizing Patient Exposure to Ionizing Radiation (OPEIR)

Scenarios for Reporting (Patient) and Performance (Measure) Algorithms:

a= Performance Met; b=Performance Exclusion; c=Performance Not Met; d=Not Reported; e=Not Applicable

	Measure 359	Measure 360	Measure 361	Measure 362	Measure 363	Measure 364**
	(i)	(ii)	(iii)	(iv)	(v)	(vi)
Patient X Age 65 Finding of incidental pulmonary nodule	Met (a ⁱ)	Met (a ⁱⁱ)	Met (a ⁱⁱⁱ)	Met (a ^{iv})	Not Met (c ^v)	Met (a ^{vi})
Patient Y Age 17 Finding of incidental pulmonary nodule	Not Met (c)	Not Met (c ⁱⁱ)	Met (a ⁱⁱⁱ)	Met (a ^{iv})	Exclusion (b ^v)	Not Applicable (e ^{vi})
Patient Z Age 70 No Finding of incidental pulmonary nodule	Met (a ⁱ)	Met (a ⁱⁱ)	Not Met (c ⁱⁱⁱ)	Not Reported (d ^{iv})	Met (a ^v)	Not Applicable (e ^{vi})

Reporting Algorithm***

Patient X [aⁱ,aⁱⁱ,aⁱⁱⁱ,a^{iv},c^v,a^{vi}] + Patient Y [cⁱ,cⁱⁱ,aⁱⁱⁱ,a^{iv},b^v,e^{vi}] + Patient Z [aⁱ,aⁱⁱ,cⁱⁱⁱ,d^{iv},a^v,e^{vi}] = 1+1+0 = 2 of the Required 20 Patient Sample Reported

Performance Algorithms

Measure 359

Performance Met (2) _____ = $\frac{2}{3}$ = 66.67%
Reported QDC for eligible patient (3)

Measure 360

Performance Met (2) _____ = $\frac{2}{3}$ = 66.67%
Reported QDC for eligible patient (3)

Measure 361

Performance Met (2) _____ = $\frac{2}{3}$ = 66.67%
Reported QDC for eligible patient (3)

Measure 362

Performance Met (2) _____ = $\frac{2}{2}$ = 100.00%
Reported QDC for eligible patient (2)

Measure 363

Performance Met (1) _____ = $\frac{1}{2}$ = 50.00%
Reported QDC for eligible patient (3) - Performance Exclusion (1)

Measure 364

Performance Met (1) _____ = $\frac{1}{1}$ = 100.00%
Reported QDC for eligible patient (1)

**Measure #364 is only applicable when the patient is 18 years of age or older and has a specific procedure performed (see measures group overview for specific coding) accompanied by a finding of an incidental pulmonary nodule.

***Reporting of all applicable measures contained in measures group, per eligible patient, equals one.

2016 Measures Group (MG) Flow Optimizing Patient Exposure to Ionizing Radiation (OPEIR)

Please refer to the specific section of the 2016 PQRS Measures Groups Specifications Manual to identify the OPEIR Measures Group Patient Sample Criteria (denominator), individual measures, and numerator options information for use in reporting this Measures Group.

1. Start with G9238 Intent G-code if Utilized
2. Check Procedure Performed:
 - a. If Procedure as Listed in the Measure Group Patient Sample Criteria equals No, do not include in Eligible Population/Denominator. Stop Processing.
 - b. If Procedure as Listed in the Measure Group Patient Sample Criteria equals Yes, include in the Eligible Population/Denominator.
3. Denominator Population
 - a. Include in Eligible Population/Denominator all eligible patients who meet the Patient Sample Criteria (denominator) for the Measures Group. For each measure within the measures group each numerator option is represented by a letter which is used in the Scenarios for Reporting and Performance Algorithms at the end of this document.
4. Start Numerator Options for Measures within the Measures Group
5. Composite Quality Data Code (QDC) G9236 has been created for registries that utilize claims data. This QDC may be reported in lieu of individual QDCs when all quality clinical actions for all applicable measures within the group have been performed for this patient.
6. Measure 359
 - a. Numerator option Performance Met has an arrow pointing to G9236 Composite Quality Data Code (QDC) or Equivalent. Performance Met is represented by letter aⁱ.
 - b. Numerator option Performance Not Met is represented by letter cⁱ.
 - c. Numerator option Not Reported is represented by letter dⁱ.
7. Measure 360
 - a. Numerator option Performance Met has an arrow pointing to G9236 Composite Quality Data Code (QDC) or Equivalent. Performance Met is represented by letter aⁱⁱ.
 - b. Numerator option Performance Not Met is represented by letter cⁱⁱ.
 - c. Numerator option Not Reported is represented by letter dⁱⁱ.
8. Measure 361
 - a. Numerator option Performance Met has an arrow pointing to G9236 Composite Quality Data Code (QDC) or Equivalent. Performance Met is represented by letter aⁱⁱⁱ.
 - b. Numerator option Performance Not Met is represented by letter cⁱⁱⁱ.

- c. Numerator option Not Reported is represented by letter dⁱⁱⁱ.
9. Measure 362
- a. Numerator option Performance Met has an arrow pointing to G9236 Composite Quality Data Code (QDC) or Equivalent. Performance Met is represented by letter a^v.
 - b. Numerator option Performance Not Met is represented by letter c^v.
 - c. Numerator option Not Reported is represented by letter d^{iv}.
10. Measure 363
- a. Numerator option Performance Met has an arrow pointing to G9236 Composite Quality Data Code (QDC) or Equivalent. Performance Met is represented by letter a^v.
 - b. Numerator option Performance Exclusion is represented by letter b^v.
 - c. Numerator option Performance Not Met is represented by letter c^v.
 - d. Numerator option Not Reported is represented by letter d^v.
11. Measure 364
- a. Measure #364 is only reported when the patient is 18 years of age or older and has a specific procedure performed (see measures group overview for specific coding) accompanied by a finding of an incidental pulmonary nodule. When measure #364 is Not Applicable it is represented by letter e^{vi} in the Scenarios for Reporting Algorithms.
 - b. Numerator option Performance Met has an arrow pointing to G9236 Composite Quality Data Code (QDC) or Equivalent. Performance Met is represented by letter a^{vi}.
 - c. Numerator option Performance Not Met is represented by letter c^{vi}.
 - d. Numerator option Not Reported is represented by letter d^{vi}.
12. Scenarios for Reporting and Performance Algorithms
13. Patient X Age 65 with Finding of Incidental Pulmonary Nodule
- a. Patient X Met Measure 359 (represented by aⁱ)
 - b. Patient X Met Measure 360 (represented by aⁱⁱ)
 - c. Patient X Met Measure 361 (represented by aⁱⁱⁱ)
 - d. Patient X Met Measure 362 (represented by a^{iv})
 - e. Patient X Not Met but Reported Measure 363 (represented by c^v)
 - f. Patient X Met Measure 364 (represented by a^{vi})

14. Patient Y Age 17 with Finding of Incidental Pulmonary Nodule
 - a. Patient Y Not Met but Reported Measure 359 (represented by cⁱ)
 - b. Patient Y Not Met but Reported Measure 360 (represented by cⁱⁱ)
 - c. Patient Y Met Measure 361 (represented by aⁱⁱⁱ)
 - d. Patient Y Met Measure 362 (represented by a^{iv})
 - e. Patient Y Exclusion Reported for Measure 363 (represented by b^v)
 - f. Patient Y Not Applicable for Measure 364 (represented by e^{vi})
15. Patient Z Age 70 No Finding of Incidental Pulmonary Nodule
 - a. Patient Z Met Measure 359 (represented by aⁱ)
 - b. Patient Z Met Measure 360 (represented by aⁱⁱ)
 - c. Patient Z Not Met but Reported Measure 361 (represented by cⁱⁱⁱ)
 - d. Patient Z did Not Report Measure 362 (represented by d^{iv})
 - e. Patient Z Met Measure 363 (represented by a^v)
 - f. Patient Z Not Applicable for Measure 364 (represented by e^{vi})
16. Reporting Algorithm
 - a. Reporting of all applicable measures contained in the measures group, per eligible patient, equals one
 - b. Patient X Reporting equals 1 Plus Patient Y Reporting equals 1 Plus Patient Z Reporting equals 0 for a total of 2 of the Required 20 Patient Sample Reported
17. Performance Algorithms
18. Measure 359
 - a. Performance Met equals 2 divided by Reported QDC for 3 eligible patients equals 66.67% Performance Rate
19. Measure 360
 - a. Performance Met equals 2 divided by Reported QDC for 3 eligible patients equals 66.67% Performance Rate
20. Measure 361
 - a. Performance Met equals 2 divided by Reported QDC for 3 eligible patients equals 66.67% Performance Rate
21. Measure 362
 - a. Performance Met equals 2 divided by Reported QDC for 2 eligible patients equals 100% Performance Rate

22. Measure 363

- a. Performance Met equals 1 divided by Reported QDC for 3 eligible patients minus 1 Performance Exclusions equals 50.00% Performance Rate

23. Measure 364

- a. Performance Met equals 1 divided by Reported QDC for 1 eligible patient equals 100% Performance Rate