



HOP QDRP Quality Measures for CY 2012 Payment Determination		
Cardiac Care (AMI and CP) Measures	Implementation	Due
OP-1: Median Time to Fibrinolysis	2008	Ongoing
OP-2: Fibrinolytic Therapy Received Within 30 Minutes	2008	Ongoing
OP-3: Median Time to Transfer to Another Facility for Acute Coronary Intervention	2008	Ongoing
OP-4: Aspirin at Arrival	2008	Ongoing
OP-5: Median Time to ECG	2008	Ongoing
Surgical Care Measures	Implementation	Due
OP-6: Timing of Antibiotic Prophylaxis	2008	Ongoing
OP-7: Prophylactic Antibiotic Selection for Surgical Patients	2008	Ongoing
Imaging Efficiency Measures	Implementation	Due
OP-8: MRI Lumbar Spine for Low Back Pain	2009	Ongoing
OP-9: Mammography Follow-up Rates	2009	Ongoing
OP-10: Abdomen CT – Use of Contrast Material	2009	Ongoing
OP-11: Thorax CT – Use of Contrast Material	2009	Ongoing
Structural Measure	Implementation	Submission
OP-12: The Ability for Providers with HIT to Receive Laboratory Data Electronically Directly into Their Qualified/Certified EHR System as Discrete Searchable Data	2011	Starting July 2011
Imaging Efficiency Measures	Implementation	Due
OP- 13: Cardiac Imaging for Preoperative Risk Assessment for Non-Cardiac Low- Risk Surgery	TBA	TBA
OP-14: Simultaneous Use of Brain Computed Tomography (CT) and Sinus CT	TBA	TBA
OP-15: Use of Brain CT in the Emergency Department (ED) for Atraumatic Headache	TBA	TBA



Cardiac Care (AMI and CP) Measures						
Measure Name and Description	Chart-Abstracted Clinical Data Quarters Required	Clinical Data and Population and Sampling Due in OPPS Clinical Warehouse	Record Validation Quarter	Record Validation Request (Records Due 45 Days After Request)	Hospital Compare Quarters	Hospital Compare Release
OP-1: Median Time to Fibrinolysis Median time from emergency department (ED) arrival to administration of fibrinolytic therapy in ED patients with ST-segment elevation or left bundle branch block (LBBB) on the electrocardiogram (ECG) performed closest to ED arrival and prior to transfer			Q2 2010	Nov 2010	Q2 2010	April 2011
	Q3 2010	02/01/11	Q3 2010	Feb 2011	Q3 2010	July 2011
	Q4 2010	05/01/11	Q4 2010	May 2011	Q4 2010	Oct 2011
	Q1 2011	08/01/10	Q1 2011	Aug 2011	Q1 2011	Jan 2012
	Q2 2011	11/01/10				
OP-2: Fibrinolytic Therapy Received Within 30 Minutes of ED Arrival ED acute myocardial infarction (AMI) patients with ST-segment elevation or LBBB on the ECG closest to arrival time receiving fibrinolytic therapy during the ED stay and having a time from ED arrival to fibrinolysis of 30			Q2 2010	Nov 2010	Q2 2010	April 2011
	Q3 2010	02/01/11	Q3 2010	Feb 2011	Q3 2010	July 2011
	Q4 2010	05/01/11	Q4 2010	May 2011	Q4 2010	Oct 2011



Cardiac Care (AMI and CP) Measures						
Measure Name and Description	Chart-Abstracted Clinical Data Quarters Required	Clinical Data and Population and Sampling Due in OPPS Clinical Warehouse	Record Validation Quarter	Record Validation Request (Records Due 45 Days After Request)	Hospital Compare Quarters	Hospital Compare Release
minutes or less	Q1 2011	08/01/10	Q1 2011	Aug 2011	Q1 2011	Dec 2011
	Q2 2011	11/01/10				
OP-3: Median Time to Transfer to Another Facility for Acute Coronary Intervention Median time from ED arrival to time of transfer to another facility for acute coronary intervention			Q2 2010	Nov 2010		
	Q3 2010	02/01/11	Q3 2010	Feb 2011		
	Q4 2010	05/01/11	Q4 2010	May 2011		
	Q1 2011	08/01/10	Q1 2011	Aug 2011		
	Q2 2011	11/01/10				
OP-3a: Median Time to Transfer to Another Facility for Acute Coronary This rate looks at all AMI patients who were transferred out for acute coronary intervention at another facility. It calculates the time from the			Q2 2010	Nov 2010		
	Q3 2010	02/01/11	Q3 2010	Feb 2011		



Cardiac Care (AMI and CP) Measures						
Measure Name and Description	Chart-Abstracted Clinical Data Quarters Required	Clinical Data and Population and Sampling Due in OPPS Clinical Warehouse	Record Validation Quarter	Record Validation Request (Records Due 45 Days After Request)	Hospital Compare Quarters	Hospital Compare Release
patient arrival to patient departure. OP-3a is the rate for all cases transferred for acute coronary intervention (OP-3b + 3c). OP-3a <i>will not be</i> publicly reported.	Q4 2010	05/01/11	Q4 2010	May 2011		
	Q1 2011	08/01/10	Q1 2011	Aug 2011		
	Q2 2011	11/01/10				
OP-3b: Median Time to Transfer to Another Facility for Acute Coronary Intervention This rate looks at all AMI patients who were transferred out for acute coronary intervention at another facility and <i>did not</i> have a contraindication to fibrinolytics. It calculates the time from the patient arrival to patient departure. OP-3b <i>will be</i>			Q2 2010	Nov 2010	Q2 2010	April 2011
	Q3 2010	02/01/11	Q3 2010	Feb 2011	Q3 2010	July 2011
	Q4 2010	05/01/11	Q4 2010	May 2011	Q4 2010	Oct 2011
	Q1 2011	08/01/10	Q1 2011	Aug 2011	Q1 2011	Jan 2012



Cardiac Care (AMI and CP) Measures						
Measure Name and Description	Chart-Abstracted Clinical Data Quarters Required	Clinical Data and Population and Sampling Due in OPPS Clinical Warehouse	Record Validation Quarter	Record Validation Request (Records Due 45 Days After Request)	Hospital Compare Quarters	Hospital Compare Release
publicly reported.	Q2 2011	11/01/10				
OP-3c: Median Time to Transfer to Another Facility for Acute Coronary Intervention – Quality Improvement Measure This rate looks at all AMI patients who were transferred out for acute coronary intervention at another facility and <i>did</i> have a contraindication to fibrinolytics. It calculates the time from the patient arrival to patient departure. OP-3c <i>will not be</i> publicly reported.			Q2 2010	Nov 2010		
	Q3 2010	02/01/11	Q3 2010	Feb 2011		
	Q4 2010	05/01/11	Q4 2010	May 2011		
	Q1 2011	08/01/10	Q1 2011	Aug 2011		
	Q2 2011	11/01/10				



Cardiac Care (AMI and CP) Measures						
Measure Name and Description	Chart-Abstracted Clinical Data Quarters Required	Clinical Data and Population and Sampling Due in OPPS Clinical Warehouse	Record Validation Quarter	Record Validation Request (Records Due 45 Days After Request)	Hospital Compare Quarters	Hospital Compare Release
OP-4: Aspirin at Arrival ED acute myocardial infarction (AMI) patients or chest pain (CP) patients (with probable cardiac CP) who received aspirin within 24 hours before ED arrival or prior to transfer			Q2 2010	Nov 2010	Q2 2010	Mar 2011
	Q3 2010	02/01/11	Q3 2010	Feb 2011	Q3 2010	June 2011
	Q4 2010	05/01/11	Q4 2010	May 2011	Q4 2010	Sept 2011
	Q1 2011	08/01/10	Q1 2011	Aug 2011	Q1 2011	Dec 2011
	Q2 2011	11/01/10				
OP-5: Median Time to ECG Median time from ED arrival to ECG (performed in the ED prior to transfer) for AMI or CP patients (with probable cardiac CP)			Q2 2010	Nov 2010	Q2 2010	Mar 2011
	Q3 2010	02/01/11	Q3 2010	Feb 2011	Q3 2010	June 2011
	Q4 2010	05/01/11	Q4 2010	May 2011	Q4 2010	Sept 2011
	Q1 2011	08/01/10	Q1 2011	Aug 2011	Q1 2011	Dec 2011



Cardiac Care (AMI and CP) Measures						
Measure Name and Description	Chart-Abstracted Clinical Data Quarters Required	Clinical Data and Population and Sampling Due in OPSS Clinical Warehouse	Record Validation Quarter	Record Validation Request (Records Due 45 Days After Request)	Hospital Compare Quarters	Hospital Compare Release
	Q2 2011	11/01/10				

Surgical Care Measures						
Measure Name and Description	Chart-Abstracted Clinical Data Quarters Required	Clinical Data Population and Sampling Due in OPSS Clinical Warehouse	Record Validation Quarter	Record Validation Request (Records Due 45 Days After Request)	Hospital Compare Quarters	Hospital Compare Release
OP-6: Timing of Antibiotic Prophylaxis Surgical patients with prophylactic antibiotics initiated within one hour* prior to surgical incision *Patients who received vancomycin or a fluoroquinolone for prophylaxis should have the antibiotic initiated within two hours prior to surgical incision. Due to the longer infusion time required			Q2 2010	Nov 2010	Q2 2010	Mar 2011
	Q3 2010	02/01/11	Q3 2010	Feb 2011	Q3 2010	June 2011
	Q4 2010	05/01/11	Q4 2010	May 2011	Q4 2010	Sept 2011



Surgical Care Measures						
Measure Name and Description	Chart-Abstracted Clinical Data Quarters Required	Clinical Data Population and Sampling Due in OPSS Clinical Warehouse	Record Validation Quarter	Record Validation Request (Records Due 45 Days After Request)	Hospital Compare Quarters	Hospital Compare Release
for vancomycin or a fluoroquinolone, it is acceptable to start these antibiotics within two hours prior to incision time.	Q1 2011	08/01/10	Q1 2011	Aug 2011	Q1 2011	Dec 2011
	Q2 2011	11/01/10				
OP-7: Prophylactic Antibiotic Selection for Surgical Patients Surgical patients who received prophylactic antibiotics consistent with current guidelines (specific to each type of surgical procedure)			Q2 2010	Nov 2010	Q2 2010	Mar 2011
	Q3 2010	02/01/11	Q3 2010	Feb 2011	Q3 2010	June 2011
	Q4 2010	05/01/11	Q4 2010	May 2011	Q4 2010	Sept 2011
	Q1 2011	08/01/10	Q1 2011	Aug 2011	Q1 2011	Dec 2011
	Q2 2011	11/01/10				



Imaging Efficiency Measures (Note: No additional data is required for the Imaging Measures.)			
Measure Name and Description	Reporting Period	Hospital Compare Quarters	Hospital Compare Release
OP-8: MRI Lumbar Spine for Low Back Pain The percentage of patients who had an Magnetic Resonance Imaging (MRI) of the lumbar spine with a diagnosis of low back pain without claims based on evidence of antecedent conservative therapy; studies are limited to the outpatient place of service.	January 1, 2010 – December 31, 2010	CY 2009	June 2011
OP-9: Mammography Follow-up Rates The percentage of patients with mammography screening studies who are followed by a diagnostic mammography or ultrasound of the breast study in an outpatient or office setting	January 1, 2010 – December 31, 2010	CY 2009	June 2011
OP-10: Abdomen Computed Tomography (CT) Use of Contrast Material The percentage of abdomen studies that are performed with and without contrast out of all abdomen studies performed (those with contrast, those without contrast, and those with both)	January 1, 2010 – December 31, 2010	CY 2009	June 2011
OP-11: Thorax CT Use of Contrast Material The percentage of thorax studies that are performed with and without contrast out of all thorax studies performed (those with contrast, those without contrast, and those with both)	January 1, 2010 – December 31, 2010	CY 2009	June 2011



Structural Measure				
Measure Name and Description	Reference Period	Submission Period	Hospital Compare Quarters	Hospital Compare Release
<p>OP-12: The Ability for Providers with Health Information Technology (HIT) to Receive Laboratory Data Electronically Directly into Their Qualified/Certified Electronic Health Record (EHR) System as Discrete Searchable Data</p> <p>Assesses the extent to which a provider uses a certified/qualified EHR system that incorporates an electronic data interchange with one or more laboratories allowing for direct electronic transmission of laboratory data into the EHR as discrete searchable data elements</p>	Beginning with January 1, 2011, Encounters	Beginning July 2011	TBA	TBA

Imaging Efficiency Measures (Note: No additional data is required for the Imaging Measures.)			
Measure Name and Description	Reporting Period	Hospital Compare Quarters	Hospital Compare Release
<p>OP-13: Cardiac Imaging for Preoperative Risk Assessment for Non-Cardiac Low-Risk Surgery</p> <p>The percentage of stress echocardiography, single photon emission computed tomography myocardial perfusion imaging (SPECT MPI) or stress MRI studies performed at a hospital outpatient facility in the 30 days prior to a low-risk, non-cardiac surgery performed anywhere</p>	TBA	TBA	TBA



Imaging Efficiency Measures (Note: No additional data is required for the Imaging Measures.)			
Measure Name and Description	Reporting Period	Hospital Compare Quarters	Hospital Compare Release
OP-14: Simultaneous Use of Brain CT and Sinus CT The percentage of brain CT studies with a simultaneous sinus CT (i.e., brain and sinus CT studies performed on the same day at the same facility)	TBA	TBA	TBA
OP-15: Use of Brain CT in the ED for Atraumatic Headache The percentage of ED visits for headache with a coincident brain CT study	TBA	TBA	TBA

This material was prepared by FMQAI, the Support Center for the Hospital Outpatient Quality Data Reporting Program (HOP QDRP), under contract with the Centers for Medicare & Medicaid Services (CMS), an agency of the U.S. Department of Health and Human Services (HHS). FL-9SOW-2011SS1T11-6-12274