

2011 PHYSICIAN QUALITY REPORTING SYSTEM (PHYSICIAN QUALITY REPORTING) MEASURE- APPLICABILITY VALIDATION PROCESS FOR CLAIMS- BASED REPORTING OF INDIVIDUAL MEASURES

The 2011 Physician Quality Reporting System (“Physician Quality Reporting,” formerly known as Physician Quality Reporting Initiative or PQRI) will include validation processes. Under the claims-based reporting method of individual measure(s), the determination of satisfactory reporting will itself serve as a general validation because the analysis will assess whether quality-data codes (QDCs) are appropriately submitted in a sufficient proportion of the instances when a reporting opportunity exists. In addition, for those eligible professionals who satisfactorily submit QDCs for fewer than three Physician Quality Reporting measures, a measure-applicability validation process will determine whether they should have submitted QDCs for additional measures.

CMS will apply a two-step process to operationalize measure-applicability validation: (1) a “clinical relation” test, and (2) a “minimum threshold” test. Those who fail the validation process will not earn the Physician Quality Reporting incentive payment for 2011.

CMS may determine that it is necessary to modify the measure-applicability validation process after the start of the 2011 reporting period. However, any changes will result in the process being applied more leniently, thereby (1) allowing a greater number of eligible professionals to pass validation and (2) causing no eligible professional who would otherwise have passed to fail.

Prerequisites for Measure-Applicability Validation - Eligible professionals who submit QDCs for only one or only two Physician Quality Reporting measures for at least 50 percent of their patients or encounters eligible for each measure and who do not submit any QDCs for any other measure will be subject to the measure-applicability validation process. Selection of eligible professionals for measure-applicability validation may be accomplished through a sampling mechanism.

Step 1: Clinical Relation Test - The clinical relation test is the first step in the two-step measure-applicability validation that will be applied to those who are subject to the validation process. This test is based on: (1) an extension of the statutory presumption that if an eligible professional submits data for a measure, then that measure applies to her/his practice and (2) the concept that if one measure in a cluster of measures related to a particular clinical topic or eligible professional service is applicable to an eligible professionals practice, then other closely-related measures (measures in that same cluster) may also be applicable.

The following is an example of how the clinical relation test will be applied: An eligible professional who is subject to measure-applicability validation submitted QDCs for one of the Physician Quality Reporting measures related to pneumonia. The eligible professionals claims will then be analyzed using the minimum threshold test described below in Step 2 to determine whether another pneumonia measure (or two more pneumonia measures) could also have been submitted.

**2011 PHYSICIAN QUALITY REPORTING SYSTEM
(PHYSICIAN QUALITY REPORTING) MEASURE-
APPLICABILITY VALIDATION PROCESS FOR CLAIMS-
BASED REPORTING OF INDIVIDUAL MEASURES**

The list of clusters of related measures and the Physician Quality Reporting measures that are included within each cluster are presented below. CMS may determine this list should be modified to apply the measure-applicability validation process more leniently. Any such modifications will be published on the CMS Physician Quality Reporting website as soon as possible after a determination has been made.

**Clusters of Clinically Related Measures Used in Step 1 of 2011 Physician Quality Reporting
Measure-Applicability Validation for Claims-Based Reporting of Individual Measures**

Cluster Number	Cluster Title	Measure Number	Measure Title
1	Preventive	39	Screening or Therapy for Osteoporosis for Women Aged 65 Years and Older
		48	Urinary Incontinence: Assessment of Presence or Absence of Urinary Incontinence in Women Aged 65 Years and Older
		110	Preventive Care and Screening: Influenza Immunization for Patients \geq 50 Years Old
		111	Preventive Care and Screening: Pneumonia Vaccination for Patients 65 Years and Older
		112	Preventive Care and Screening: Screening Mammography
		113	Preventive Care and Screening: Colorectal Cancer Screening
2	Chronic Diabetic Care	1	Diabetes Mellitus: Hemoglobin A1c Poor Control in Diabetes Mellitus
		2	Diabetes Mellitus: Low Density Lipoprotein (LDL-C) Control in Diabetes Mellitus
		3	Diabetes Mellitus: High Blood Pressure Control in Diabetes Mellitus
		163	Diabetes Mellitus: Foot Exam
3	COPD Care	51	Chronic Obstructive Pulmonary Disease (COPD): Spirometry Evaluation
		52	Chronic Obstructive Pulmonary Disease (COPD): Bronchodilator Therapy
4	Asthma Care	53	Asthma: Pharmacologic Therapy
		64	Asthma: Asthma Assessment
		231	Asthma: Tobacco Use: Screening - Ambulatory Care Setting
		232	Asthma: Tobacco Use: Intervention - Ambulatory Care Setting

**2011 PHYSICIAN QUALITY REPORTING SYSTEM
(PHYSICIAN QUALITY REPORTING) MEASURE -
APPLICABILITY VALIDATION PROCESS FOR CLAIMS -
BASED REPORTING OF INDIVIDUAL MEASURES**

Cluster Number	Cluster Title	Measure Number	Measure Title
5	Pneumonia Care	56	Community-Acquired Pneumonia (CAP): Vital Signs
		57	Community-Acquired Pneumonia (CAP): Assessment of Oxygen Saturation
		58	Community-Acquired Pneumonia (CAP): Assessment of Mental Status
		59	Community-Acquired Pneumonia (CAP): Empiric Antibiotic
6	Cancer Care 1	67	Myelodysplastic Syndrome (MDS) and Acute Leukemias: Baseline Cytogenetic Testing Performed on Bone Marrow
		68	Myelodysplastic Syndrome (MDS): Documentation of Iron Stores in Patients Receiving Erythropoietin Therapy
		69	Multiple Myeloma: Treatment with Bisphosphonates
		70	Chronic Lymphocytic Leukemia (CLL): Baseline Flow Cytometry
7	Cancer Care 2	71	Breast Cancer: Hormonal Therapy for Stage IC-IIIC Estrogen Receptor/Progesterone Receptor (ER/PR) Positive Breast Cancer
		72	Colon Cancer: Chemotherapy for Stage III Colon Cancer Patients
		194	Oncology: Cancer Stage Documented
8	Cancer Care 3: Radiation Oncology	104	Prostate Cancer: Adjuvant Hormonal Therapy for High-Risk Prostate Cancer Patients
		105	Prostate Cancer: Three-Dimensional (3D) Radiotherapy
9	Urinary Incontinence Care	49	Urinary Incontinence: Characterization of Urinary Incontinence in Women Aged 65 Years and Older
		50	Urinary Incontinence: Plan of Care for Urinary Incontinence in Women Aged 65 Years and Older
10	Fracture Follow-up Care	24	Osteoporosis: Communication with the Physician Managing Ongoing Care Post-Fracture of Hip, Spine, or Distal Radius for Men and Women Aged 50 Years and Older
		40	Osteoporosis: Management Following Fracture of Hip, Spine, or Distal Radius for Men and Women Aged 50 Years and Older

**2011 PHYSICIAN QUALITY REPORTING SYSTEM
(PHYSICIAN QUALITY REPORTING) MEASURE -
APPLICABILITY VALIDATION PROCESS FOR CLAIMS -
BASED REPORTING OF INDIVIDUAL MEASURES**

Cluster Number	Cluster Title	Measure Number	Measure Title
11	Ear, Nose, Throat Care	91	Acute Otitis Externa (AOE): Topical Therapy
		92	Acute Otitis Externa (AOE): Pain Assessment
		93	Acute Otitis Externa (AOE): Systemic Antimicrobial Therapy – Avoidance of Inappropriate Use
12	Pediatric ENT	65	Treatment for Children with Upper Respiratory Infection (URI): Avoidance of Inappropriate Use
		66	Appropriate Testing for Children with Pharyngitis
		94	Otitis Media with Effusion (OME): Diagnostic Evaluation – Assessment of Tympanic Membrane Mobility
13	Emergency Care	28	Aspirin at Arrival for Acute Myocardial Infarction (AMI)
		54	12-Lead Electrocardiogram (ECG) Performed for Non-Traumatic Chest Pain
		55	12-Lead Electrocardiogram (ECG) Performed for Syncope
14	Pathology	99	Breast Cancer Resection Pathology Reporting: pT Category (Primary Tumor) and pN Category (Regional Lymph Nodes) with Histologic Grade
		100	Colorectal Cancer Resection Pathology Reporting: pT Category (Primary Tumor) and pN Category (Regional Lymph Nodes) with Histologic Grade
15	Diagnostic Imaging	10	Stroke and Stroke Rehabilitation: Computed Tomography (CT) or Magnetic Resonance Imaging (MRI) Reports
		145	Radiology: Exposure Time Reported for Procedures Using Fluoroscopy
		146	Radiology: Inappropriate Use of “Probably Benign” Assessment Category in Mammography Screening
		147	Nuclear Medicine: Correlation with Existing Imaging Studies for All Patients Undergoing Bone Scintigraphy
		225	Radiology: Reminder System for Mammograms
16	Depression	9	Major Depressive Disorder (MDD): Antidepressant Medication During Acute Phase for Patients with MDD
		106	Major Depressive Disorder (MDD): Diagnostic Evaluation
		107	Major Depressive Disorder (MDD): Suicide Risk Assessment

**2011 PHYSICIAN QUALITY REPORTING SYSTEM
(PHYSICIAN QUALITY REPORTING) MEASURE -
APPLICABILITY VALIDATION PROCESS FOR CLAIMS -
BASED REPORTING OF INDIVIDUAL MEASURES**

Cluster Number	Cluster Title	Measure Number	Measure Title
17	Eye Care 1	12	Primary Open Angle Glaucoma (POAG): Optic Nerve Evaluation
		141	Primary Open-Angle Glaucoma (POAG): Reduction of Intraocular Pressure (IOP) by 15% OR Documentation of a Plan of Care
18	Eye Care 2	18	Diabetic Retinopathy: Documentation of Presence or Absence of Macular Edema and Level of Severity of Retinopathy
		19	Diabetic Retinopathy: Communication with the Physician Managing On-going Diabetes Care
19	Eye Care 3	14	Age-Related Macular Degeneration (AMD): Dilated Macular Examination
		140	Age-Related Macular Degeneration (AMD): Counseling on Antioxidant Supplement
20	Hepatitis Care	84	Hepatitis C: Ribonucleic Acid (RNA) Testing Before Initiating Treatment
		85	Hepatitis C: HCV Genotype Testing Prior to Treatment
		86	Hepatitis C: Antiviral Treatment Prescribed
		87	Hepatitis C: HCV Ribonucleic Acid (RNA) Testing at Week 12 of Treatment
		89	Hepatitis C: Counseling Regarding Risk of Alcohol Consumption
		90	Hepatitis C: Counseling Regarding Use of Contraception Prior to Antiviral Treatment
		183	Hepatitis C: Hepatitis A Vaccination in Patients with HCV
		184	Hepatitis C: Hepatitis B Vaccination in Patients with HCV
21	Renal Disease Care	79	End Stage Renal Disease (ESRD): Influenza Immunization in Patients with ESRD
		121	Chronic Kidney Disease (CKD): Laboratory Testing (Calcium, Phosphorus, Intact Parathyroid Hormone (iPTH) and Lipid Profile)
		122	Chronic Kidney Disease (CKD): Blood Pressure Management
		123	Chronic Kidney Disease (CKD): Plan of Care – Elevated Hemoglobin for Patients Receiving Erythropoiesis-Stimulating Agents (ESA)
		135	Chronic Kidney Disease (CKD): Influenza Immunization
		153	Chronic Kidney Disease (CKD): Referral for Arteriovenous (AV) Fistula

**2011 PHYSICIAN QUALITY REPORTING SYSTEM
(PHYSICIAN QUALITY REPORTING) MEASURE -
APPLICABILITY VALIDATION PROCESS FOR CLAIMS -
BASED REPORTING OF INDIVIDUAL MEASURES**

Cluster Number	Cluster Title	Measure Number	Measure Title
22	Stroke Management	31	Stroke and Stroke Rehabilitation: Deep Vein Thrombosis Prophylaxis (DVT) for Ischemic Stroke or Intracranial Hemorrhage
		35	Stroke and Stroke Rehabilitation: Screening for Dysphagia
23	Stroke Discharge	32	Stroke and Stroke Rehabilitation: Discharged on Antiplatelet Therapy
		36	Stroke and Stroke Rehabilitation: Consideration of Rehabilitation Services
24	Surgical Care	20	Perioperative Care: Timing of Antibiotic Prophylaxis – Ordering Physician
		21	Perioperative Care: Selection of Prophylactic Antibiotic – First OR Second Generation Cephalosporin
		22	Perioperative Care: Discontinuation of Prophylactic Antibiotics (Non-Cardiac Procedures)
		23	Perioperative Care: Venous Thromboembolism (VTE) Prophylaxis (When Indicated in ALL Patients)
25	Cardiac Surgical Care	43	Coronary Artery Bypass Graft (CABG): Use of Internal Mammary Artery (IMA) in Patients with Isolated CABG Surgery
		44	Coronary Artery Bypass Graft (CABG): Preoperative Beta-Blocker in Patients with Isolated CABG Surgery
		45	Perioperative Care: Discontinuation of Prophylactic Antibiotics (Cardiac Procedures)
26	Diabetic Foot Care	126	Diabetes Mellitus: Diabetic Foot and Ankle Care, Peripheral Neuropathy – Neurological Evaluation
		127	Diabetes Mellitus: Diabetic Foot and Ankle Care, Ulcer Prevention – Evaluation of Footwear
27	Osteoarthritis Care	109	Osteoarthritis (OA): Function and Pain Assessment
		142	Osteoarthritis (OA): Assessment for Use of Anti-Inflammatory or Analgesic Over-the-Counter (OTC) Medications
28	Rheumatoid Arthritis Care	108	Rheumatoid Arthritis (RA): Disease Modifying Anti-Rheumatic Drug (DMARD) Therapy
		176	Rheumatoid Arthritis (RA): Tuberculosis Screening
		177	Rheumatoid Arthritis (RA): Periodic Assessment of Disease Activity
		178	Rheumatoid Arthritis (RA): Functional Status Assessment
		179	Rheumatoid Arthritis (RA): Assessment and Classification of Disease Prognosis
		180	Rheumatoid Arthritis (RA): Glucocorticoid Management

**2011 PHYSICIAN QUALITY REPORTING SYSTEM
(PHYSICIAN QUALITY REPORTING) MEASURE-
APPLICABILITY VALIDATION PROCESS FOR CLAIMS-
BASED REPORTING OF INDIVIDUAL MEASURES**

Cluster Number	Cluster Title	Measure Number	Measure Title
29	Falls	154	Falls: Risk Assessment
		155	Falls: Plan of Care
30	Anesthesia Care 1	30	Perioperative Care: Timely Administration of Prophylactic Parenteral Antibiotics
		76	Prevention of Catheter-Related Bloodstream Infections (CRBSI): Central Venous Catheter (CVC) Insertion Protocol
<i>When reporting # 76 alone, it is not subject to MAV</i>			
31	Anesthesia Care 2	76	Prevention of Catheter-Related Bloodstream Infections (CRBSI): Central Venous Catheter (CVC) Insertion Protocol
		193	Perioperative Temperature Management
<i>When reporting # 76 alone, it is not subject to MAV</i>			
32	Ear Care	188	Referral for Otologic Evaluation for Patients with Congenital or Traumatic Deformity of the Ear
		189	Referral for Otologic Evaluation for Patients with a History of Active drainage from the Ear within Previous 90 Days
		190	Referral for Otologic Evaluation for Patients with a History of Sudden or Rapidly Progressive Hearing Loss
33	Ischemic Vascular Disease	201	Ischemic Vascular Disease (IVD): Blood Pressure Management Control
		202	Ischemic Vascular Disease (IVD): Complete Lipid Profile
		203	Ischemic Vascular Disease (IVD): Low Density Lipoprotein (LDL-C) Control
		204	Ischemic Vascular Disease (IVD): Use of Aspirin or Another Anti-Thrombotic

Measures not included within a cluster in 2011 Physician Quality Reporting. For 2011 measure-applicability validation, CMS will not include measures that are deemed to be generally or broadly applicable to all or many Medicare patients and therefore potentially unreasonable to attribute to individual eligible professionals using claims-based data. Other measures are not included in a cluster of closely clinically related measures for other clinical or technical reasons, such as: (1) the measure may not fit any cluster; or (2) the measure may fit reasonably with more than one cluster.

Measures excluded from 2011 measure-applicability validation for claims-based participation may or may not be included in groupings of measures used in validation protocols for other mechanisms of data submission, such as those based on extracts from medical registries or electronic health records, or for other purposes or programs.

2011 PHYSICIAN QUALITY REPORTING SYSTEM (PHYSICIAN QUALITY REPORTING) MEASURE- APPLICABILITY VALIDATION PROCESS FOR CLAIMS- BASED REPORTING OF INDIVIDUAL MEASURES

Based on such developments as refinements to a particular measure's specifications or enhancements of the Physician Quality Reporting list of available claims-based measures, any measure excluded from measure-applicability validation for 2011 may also, in subsequent program years, be included in a measure-applicability validation for claims-based participation in Physician Quality Reporting.

At a minimum, the following claim-based measures will be excluded from measure-applicability validation for 2011:

Measure 6 --	Coronary Artery Disease (CAD): Oral Antiplatelet Therapy Prescribed for Patients with CAD
Measure 41 --	Osteoporosis: Pharmacologic Therapy for Men and Women Aged 50 Years and Older
Measure 46 --	Medication Reconciliation: Reconciliation After Discharge from an Inpatient Facility
Measure 47 --	Advance Care Plan
Measure 102 --	Prostate Cancer: Avoidance of Overuse of Bone Scan for Staging Low-Risk Prostate Cancer Patients
Measure 116 --	Antibiotic Treatment for Adults with Acute Bronchitis: Avoidance of Inappropriate Use
Measure 117 --	Diabetes Mellitus: Dilated Eye Exam in Diabetic Patient
Measure 119 --	Diabetes Mellitus: Urine Screening for Microalbumin or Medical Attention for Nephropathy in Diabetic Patients
Measure 124 --	Health Information Technology (HIT): Adoption/Use of Electronic Health Records (EHR)
Measure 128 --	Preventive Care and Screening: Body Mass Index (BMI) Screening and Follow-Up
Measure 130 --	Documentation of Current Medications in the Medical Record
Measure 131 --	Pain Assessment Prior to Initiation of Patient Therapy and Follow-Up
Measure 134 --	Screening for Clinical Depression and Follow-Up Plan
Measure 156 --	Oncology: Radiation Dose Limits to Normal Tissues
Measure 157 --	Thoracic Surgery: Recording of Clinical Stage for Lung Cancer and Esophageal Cancer Resection
Measure 158 --	Carotid Endarterectomy: Use of Patch During Conventional Carotid Endarterectomy
Measure 172 --	Hemodialysis Vascular Access Decision-Making by Surgeon to Maximize Placement of Autogenous Arterial Venous (AV) Fistula
Measure 173 --	Preventive Care and Screening: Unhealthy Alcohol Use – Screening
Measure 175 --	Pediatric End Stage Renal Disease (ESRD): Influenza Immunization
Measure 181 --	Elder Maltreatment Screen and Follow-Up Plan
Measure 182 --	Functional Outcome Assessment in Chiropractic Care
Measure 185 --	Endoscopy & Polyp Surveillance: Colonoscopy Interval for Patients with a History of Adenomatous Polyps – Avoidance of Inappropriate Use
Measure 186 --	Wound Care: Use of Compression System in Patients with Venous Ulcers
Measure 195 --	Radiology: Stenosis Measurement in Carotid Imaging Studies
Measure 226 --	Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention
Measure 235 --	Hypertension (HTN): Plan of Care

Prior to performing the analysis to determine satisfactory reporting, CMS may determine that additional Physician Quality Reporting measures should be excluded from measure-applicability validation. Any additions to this list will be published on the CMS Physician Quality Reporting website as soon as possible after a determination has been made.

Step 2: Minimum Threshold Test - This second step will be applied to those who are subject to measure-applicability validation and who have potential additional measures that could have been submitted identified during the clinical relation test.

2011 PHYSICIAN QUALITY REPORTING SYSTEM (PHYSICIAN QUALITY REPORTING) MEASURE- APPLICABILITY VALIDATION PROCESS FOR CLAIMS- BASED REPORTING OF INDIVIDUAL MEASURES

The minimum threshold test is based on the concept that during the 2011 reporting periods January 1, 2011 through December 31, 2011; **OR** July 1, 2011 through December 31, 2011, if an eligible professional treated more than a certain number of Medicare patients with a condition to which a certain measure applied (that is, the eligible professional treated more than a “threshold” number of patients or encounters), then that eligible professional should be accountable for submitting the QDC(s) for that measure. For the 2011 reporting periods, the common minimum threshold, based on statistical and clinical frequency considerations, will not be less than 15 patients (or encounters) for the 12-month reporting period or 8 patients (or encounters) for the 6-month reporting period for each 2011 Physician Quality Reporting measure.

The following are examples of how the minimum threshold test will be applied: An emergency department physician treated 20 Medicare patients with pneumonia during the 2011 12-month reporting period. If that emergency department physician is subject to validation and was found to have submitted a QDC for at least one of the pneumonia measures under the clinical relation test, then the physician would be deemed responsible for submitting QDCs for at least one other Physician Quality Reporting pneumonia measure and will not earn the 2011 incentive payment. Alternatively, if an internist was subject to validation and was found to have submitted a QDC for at least one of the pneumonia measures under the clinical relation test, but treated only two Medicare patients with pneumonia during the same period, then the internist would not be responsible for submitting the additional pneumonia measures and would not be precluded from receiving an incentive payment.

During the reporting period, CMS will determine a minimum threshold for each individual Physician Quality Reporting measure based on analysis of Part B claims data. However, no threshold will fall below the common threshold of 15 patients (or encounters) described above.

Other Program Integrity Considerations. QDCs submitted on claims must be supported in medical record documentation. Other laws and regulations relating to Medicare program integrity may also apply to Physician Quality Reporting.

Measures Reported via Registry or Measure Group Only - Not Applicable to Measure-Applicability Validation. The following list of measures will be reported through qualified registries or by measure group reporting only, therefore, are not subject to measure-applicability validation.

Measure 5 --	Heart Failure: Angiotensin-Converting Enzyme (ACE) Inhibitor or Angiotensin Receptor Blocker (ARB) Therapy for Left Ventricular Systolic Dysfunction (LVSD)
Measure 7 --	Coronary Artery Disease (CAD): Beta-Blocker Therapy for CAD Patients with Prior Myocardial Infarction (MI)
Measure 8 --	Heart Failure: Beta-Blocker Therapy for Left Ventricular Systolic Dysfunction (LVSD)
Measure 33 --	Stroke and Stroke Rehabilitation: Anticoagulant Therapy Prescribed for Atrial Fibrillation at Discharge
Measure 81 --	End Stage Renal Disease (ESRD): Plan of Care for Inadequate Hemodialysis in ESRD Patients
Measure 82 --	End Stage Renal Disease (ESRD): Plan of Care for Inadequate Peritoneal Dialysis
Measure 83 --	Hepatitis C: Testing for Chronic Hepatitis C – Confirmation of Hepatitis C Viremia
Measure 118 --	Coronary Artery Disease (CAD): Angiotensin-Converting Enzyme (ACE) Inhibitor or Angiotensin Receptor Blocker (ARB) Therapy for Patients with CAD and Diabetes and /or Left Ventricular Systolic Dysfunction (LVSD)

**2011 PHYSICIAN QUALITY REPORTING SYSTEM
(PHYSICIAN QUALITY REPORTING) MEASURE-
APPLICABILITY VALIDATION PROCESS FOR CLAIMS-
BASED REPORTING OF INDIVIDUAL MEASURES**

Measure 137 --	Melanoma: Continuity of Care-Recall System
Measure 138 --	Melanoma: Coordination of Care
Measure 143 --	Oncology: Medical and Radiation – Pain Intensity Quantified
Measure 144 --	Oncology: Medical and Radiation – Plan of Care for Pain
Measure 148 --	Back Pain: Initial Visit
Measure 149 --	Back Pain: Physical Exam
Measure 150 --	Back Pain: Advice for Normal Activities
Measure 151 --	Back Pain: Advice Against Bed Rest
Measure 159 --	HIV/AIDS: CD4+ Cell Count or CD4+ Percentage
Measure 160 --	HIV/AIDS: Pneumocystis Jiroveci Pneumonia (PCP) Prophylaxis
Measure 161 --	HIV/AIDS: Adolescent and Adult Patients with HIV/AIDS Who Are Prescribed Potent Antiretroviral Therapy
Measure 162 --	HIV/AIDS: HIV RNA Control After Six Months of Potent Antiretroviral Therapy
Measure 164 --	Coronary Artery Bypass Graft (CABG): Prolonged Intubation (Ventilation)
Measure 165 --	Coronary Artery Bypass Graft (CABG): Deep Sternal Wound Infection Rate
Measure 166 --	Coronary Artery Bypass Graft (CABG): Stroke/Cerebrovascular Accident (CVA)
Measure 167 --	Coronary Artery Bypass Graft (CABG): Postoperative Renal Insufficiency
Measure 168 --	Coronary Artery Bypass Graft (CABG): Surgical Re-exploration
Measure 169 --	Coronary Artery Bypass Graft (CABG): Antiplatelet Medications at Discharge
Measure 170 --	Coronary Artery Bypass Graft (CABG): Beta-Blockers Administered at Discharge
Measure 171 --	Coronary Artery Bypass Graft (CABG): Lipid Management and Counseling
Measure 187 --	Stroke and Stroke Rehabilitation: Thrombolytic Therapy Administered
Measure 191 --	Cataracts: 20/40 or Better Visual Acuity within 90 Days Following Cataract Surgery
Measure 192 --	Cataracts: Complication within 30 Days Following Cataract Surgery Requiring Additional Surgical Procedures
Measure 196 --	Coronary Artery Disease (CAD): Symptom and Activity Assessment
Measure 197 --	Coronary Artery Disease (CAD): Drug Therapy for Lowering LDL-Cholesterol
Measure 198 --	Heart Failure: Left Ventricular Function (LVF) Assessment
Measure 199 --	Heart Failure: Patient Education
Measure 200 --	Heart Failure: Warfarin Therapy Patients with Atrial Fibrillation
Measure 205 --	HIV/AIDS: Sexually Transmitted Disease Screening for Chlamydia and Gonorrhea
Measure 206 --	HIV/AIDS: Screening for High Risk Sexual Behaviors
Measure 207 --	HIV/AIDS: Screening for Injection Drug Use
Measure 208 --	HIV/AIDS: Sexually Transmitted Disease Screening for Syphilis
Measure 209 --	Functional Communication Measure - Spoken Language Comprehension
Measure 210 --	Functional Communication Measure - Attention
Measure 211 --	Functional Communication Measure - Memory
Measure 212 --	Functional Communication Measure - Motor Speech
Measure 213 --	Functional Communication Measure - Reading
Measure 214 --	Functional Communication Measure - Spoken Language English

**2011 PHYSICIAN QUALITY REPORTING SYSTEM
(PHYSICIAN QUALITY REPORTING) MEASURE-
APPLICABILITY VALIDATION PROCESS FOR CLAIMS-
BASED REPORTING OF INDIVIDUAL MEASURES**

- Measure 215 -- Functional Communication Measure – Writing
- Measure 216 -- Functional Communication Measure - Swallowing
- Measure 217 -- Functional Deficit: Change in Risk-Adjusted Functional Status for Patients with Knee Impairments
- Measure 218 -- Functional Deficit: Change in Risk- Adjusted Functional Status for Patients with Hip Impairments
- Measure 219 -- Functional Deficit: Change in Risk- Adjusted Functional Status for Patients with Lower Leg, Foot or Ankle Impairments
- Measure 220 -- Functional Deficit: Change in Risk-Adjusted Functional Status for Patients with Lumbar Spine Impairments
- Measure 221-- Functional Deficit: Change in Risk-Adjusted Functional Status for Patients with Shoulder Impairments
- Measure 222 -- Functional Deficit: Change in Risk-Adjusted Functional Status for Patients with Elbow, Wrist or Hand Impairments
- Measure 223 -- Functional Deficit: Change in Risk-Adjusted Functional Status for Patients with Neck, Cranium, Mandible, Thoracic Spine, Ribs, or Other General Orthopedic Impairments
- Measure 224 -- Melanoma: Overutilization of Imaging Studies in Stage 0-IA Melanoma
- Measure 228 -- Heart Failure (HF): Left Ventricular Function (LVF) Testing
- Measure 233 -- Thoracic Surgery: Recording of Performance Status Prior to Lung or Esophageal Cancer Resection
- Measure 234 -- Thoracic Surgery: Pulmonary Function Tests Before Major Anatomic Lung Resection (Pneumonectomy, Lobectomy, or Formal Segmentectomy)