

Measure #326 (NQF 1525): Atrial Fibrillation and Atrial Flutter: Chronic Anticoagulation Therapy – National Quality Strategy Domain: Effective Clinical Care

2017 OPTIONS FOR INDIVIDUAL MEASURES:
CLAIMS ONLY

MEASURE TYPE:
Process

DESCRIPTION:

Percentage of patients aged 18 years and older with a diagnosis of nonvalvular atrial fibrillation (AF) or atrial flutter whose assessment of the specified thromboembolic risk factors indicate one or more high-risk factors or more than one moderate risk factor, as determined by CHADS2 risk stratification, who are prescribed warfarin OR another oral anticoagulant drug that is FDA approved for the prevention of thromboembolism

INSTRUCTIONS:

This measure is to be reported a minimum of **once per performance period** for patients with nonvalvular AF or atrial flutter seen during the performance period. This measure may be reported by eligible clinicians who perform the quality actions described in the measure based on the services provided and the measure-specific denominator coding.

Measure Reporting:

The listed denominator criteria is used to identify the intended patient population. The numerator quality-data codes included in this specification are used to submit the quality actions allowed by the measure. All measure-specific coding should be reported on the claim(s) representing the eligible encounter.

DENOMINATOR:

All patients aged 18 years and older with a diagnosis of nonvalvular AF or atrial flutter whose assessment of the specified thromboembolic risk factors indicate one or more high-risk factors or more than one moderate risk factor, as determined by CHADS2 risk stratification

Denominator Criteria (Eligible Cases):

Patients aged ≥ 18 years on date of encounter

AND

Diagnosis for nonvalvular atrial fibrillation or atrial flutter (ICD-10-CM): I48.0, I48.1, I48.2, I48.3, I48.4, I48.91, I48.92

AND

Patient encounter during the performance period (CPT): 99201, 99202, 99203, 99204, 99205, 99212, 99213, 99214, 99215, 99281, 99282, 99283, 99284, 99285, 99304, 99305, 99306, 99307, 99308, 99309, 99310, 99324, 99325, 99326, 99327, 99328, 99334, 99335, 99336, 99337, 99341, 99342, 99343, 99344, 99345, 99347, 99348, 99349, 99350

WITHOUT

Telehealth Modifier: GQ, GT

NUMERATOR:

Patients who are prescribed warfarin OR another oral anticoagulant drug that is FDA approved for the prevention of thromboembolism

Definition:

Prescribed – May include prescription given to the patient for warfarin OR another oral anticoagulant that is FDA approved for the prevention of thromboembolism at one or more visits in the measurement period OR patient already taking warfarin OR another oral anticoagulant that is FDA approved for the prevention

of thromboembolism as documented in current medication list.

The assessment of patients with nonvalvular AF or atrial flutter for thromboembolic risk factors should include the following criteria:

Table 1 - Risk Factors for Atrial Fibrillation and Atrial Flutter

Risk Factors	Weighting
Prior stroke, TIA or systemic embolism	High risk
Age ≥ 75 years	Moderate risk
Hypertension	Moderate risk
Diabetes Mellitus	Moderate risk
Heart failure or impaired left ventricular systolic function	Moderate risk

Numerator Quality-Data Coding Options:

If patient is not eligible for this measure because patient has mitral stenosis or prosthetic heart valves OR transient or reversible cause of AF

(One quality-data code [G9746] is required on the claim form to submit this numerator option)

Denominator Exclusion: G9746:

Patient has mitral stenosis or prosthetic heart valves
OR patient has transient or reversible cause of AF
(e.g., pneumonia, hyperthyroidism, pregnancy, cardiac surgery)

OR

Warfarin OR Another Oral Anticoagulant that is FDA Approved Prescribed

(Two quality-data codes [G8967 & G8972] are required on the claim form to submit this numerator option)

Performance Met: G8967:

Warfarin OR another oral anticoagulant that is FDA approved prescribed

AND

G8972:

One or more high risk factors for thromboembolism
OR more than one moderate risk factor for thromboembolism

OR

Warfarin OR Another Oral Anticoagulant that is FDA Approved not Prescribed for Medical Reasons

(Two quality-data codes [G8968 & G8972] are required on the claim form to submit this numerator option)

Denominator Exception: G8968:

Documentation of medical reason(s) for not prescribing warfarin OR another oral anticoagulant that is FDA approved for the prevention of thromboembolism (e.g., allergy, risk of bleeding, other medical reasons)

AND

G8972:

One or more high risk factors for thromboembolism OR more than one moderate risk factor for thromboembolism

OR

Warfarin OR Another Oral Anticoagulant that is FDA Approved not Prescribed for Patient Reasons

(Two quality-data codes [G8969 & G8972] are required on the claim form to submit this numerator option)

Denominator Exception: G8969:

Documentation of patient reason(s) for not prescribing warfarin OR another oral anticoagulant that is FDA approved for the prevention of thromboembolism (e.g.,

AND
G8972:

economic, social, and/or religious impediments,
noncompliance, patient refusal, other patient reasons)

One or more high risk factors for thromboembolism
OR more than one moderate risk factor for
thromboembolism

OR

No Risk Factors or One Moderate Risk Factor for Thromboembolism, Patient not Eligible

(One quality-data code [G8970] is required on the claim form to submit this numerator option)

Denominator Exception: G8970:

No risk factors or one moderate risk factor for
thromboembolism

OR

Warfarin OR Another Oral Anticoagulant that is FDA Approved not Prescribed, Reason not Given

(Two quality-data codes [G8971 & G8972] are required on the claim form to submit this numerator option)

Performance Not Met: G8971:

Warfarin OR another oral anticoagulant that is FDA
approved not prescribed, reason not given

AND
G8972:

One or more high risk factors for thromboembolism
OR more than one moderate risk factor for
thromboembolism

RATIONALE:

Anticoagulation should be prescribed for all high risk patients with AF or atrial flutter except those with contraindications to anticoagulation. Aspirin is preferred in patients without risk factors or in those with contraindications to anticoagulation, and is an alternative to anticoagulation in those with only one moderate risk factor.

CLINICAL RECOMMENDATION STATEMENTS:

2013 Guidelines for the Management of Patients with Atrial Fibrillation (compilation of 2006 ACCF/AHA/ESC and 2011 ACCF/AHA/HRS recommendations): a Report of the American College of Cardiology Foundation/American Heart Association Task Force on Practice Guidelines:

Class I

Antithrombotic therapy to prevent thromboembolism is recommended for all patients with AF, except those with lone AF or contraindications. (Level of Evidence: A)

The selection of the antithrombotic agent should be based upon the absolute risks of stroke and bleeding and the relative risk and benefit for a given patient. (Level of Evidence: A)

For patients without mechanical heart valves at high risk of stroke, chronic oral anticoagulant therapy with a vitamin K antagonist is recommended in a dose adjusted to achieve the target intensity international normalized ratio (INR) of

2.1 to 3.0, unless contraindicated. Factors associated with highest risk for stroke in patients with AF are prior thromboembolism (stroke, transient ischemic attack, or systemic embolism) and rheumatic mitral stenosis. (Level of Evidence: A)

Anticoagulation with a vitamin K antagonist is recommended for patients with more than 1 moderate risk factor. Such factors include age 75 y or greater, hypertension, HF, impaired LV systolic function (ejection fraction 35% or less or fractional shortening less than 25%), and diabetes mellitus. (Level of Evidence: A)

Aspirin, 81–325 mg daily, is recommended as an alternative to vitamin K antagonists in low-risk patients or in those with contraindications to oral anticoagulation. (Level of Evidence: A)

Antithrombotic therapy is recommended for patients with atrial flutter as for those with AF. (Level of Evidence: C)

Dabigatran is useful as an alternative to warfarin for the prevention of stroke and systemic thromboembolism in patients with paroxysmal to permanent AF and risk factors for stroke or systemic embolization who do not have a prosthetic heart valve or hemodynamically significant valve disease, severe renal failure (creatinine clearance 15 mL/min) or advanced liver disease (impaired baseline clotting function). (Level of Evidence: B)

COPYRIGHT:

Physician performance measures and related data specifications were developed by the American Medical Association (AMA) convened Physician Consortium for Performance Improvement® (PCPI®), the American College of Cardiology (ACC), and the American Heart Association (AHA) to facilitate quality improvement activities by physicians. These performance measures are not clinical guidelines and do not establish a standard of medical care, and have not been tested for all potential applications. While copyrighted, they can be reproduced and distributed, without modification, for noncommercial purposes, e.g., use by health care providers in connection with their practices. Commercial use is defined as the sale, license, or distribution of the performance measures for commercial gain, or incorporation of the performance measures into a product or service that is sold, licensed or distributed for commercial gain. Commercial uses of the measures require a license agreement between the user and the AMA (on behalf of the PCPI) or the ACC or the AHA. Neither the AMA, ACC, AHA, the PCPI nor its members shall be responsible for any use of these measures.

THE MEASURES AND SPECIFICATIONS ARE PROVIDED “AS IS” WITHOUT WARRANTY OF ANY KIND.

© 2014 American College of Cardiology, American Heart Association and American Medical Association. All Rights Reserved.

Limited proprietary coding is contained in the measure specifications for convenience. Users of the proprietary code sets should obtain all necessary licenses from the owners of these code sets. The AMA, the ACC, the AHA, the PCPI and its members disclaim all liability for use or accuracy of any Current Procedural Terminology (CPT®) or other coding contained in the specifications.

CPT® contained in the measures specifications is copyright 2016 American Medical Association. LOINC® copyright 2004-2016 Regenstrief Institute, Inc. This material contains SNOMED CLINICAL TERMS (SNOMED CT®) copyright 2004-2016 International Health Terminology Standards Development Organisation. All Rights Reserved. Use of SNOMED CT® is only authorized within the United States.

2017 Claims Individual Measure Flow **#326 NQF #1525: Atrial Fibrillation and Atrial Flutter: Chronic Anticoagulation Therapy**



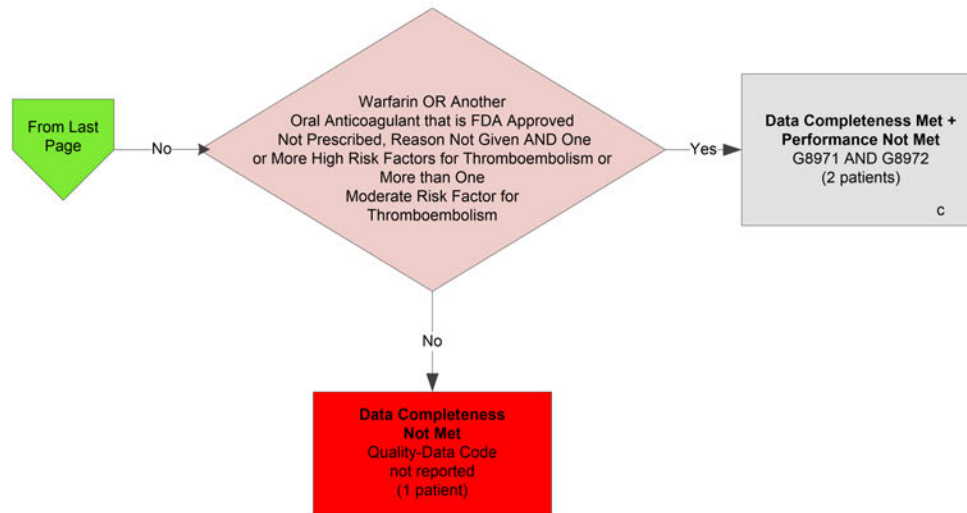
* See the posted Measure Specification for specific coding and instructions to report this measure.

NOTE: Reporting Frequency: Patient-process

CPT only copyright 2016 American Medical Association. All rights reserved.
 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.

v1

2017 Claims Individual Measure Flow
#326 NQF #1525: Atrial Fibrillation and Atrial Flutter: Chronic Anticoagulation Therapy



SAMPLE CALCULATIONS:

Data Completeness=

$$\frac{\text{Denominator Exclusion (x=0 pts)} + \text{Performance Met (a=3 pts)} + \text{Denominator Exception (b}^1 + \text{b}^2 + \text{b}^3 = 2 \text{ pts)} + \text{Performance Not Met (c=2 pts)}}{\text{Eligible Population / Denominator (d=8 pts)}} = \frac{7 \text{ pts}}{8 \text{ pts}} = 87.50\%$$

Performance Rate=

$$\frac{\text{Performance Met (a=3 pts)}}{\text{Data Completeness Numerator (7 pts) - Denominator Exclusion (x=0 pts) - Denominator Exception (b}^1 + \text{b}^2 + \text{b}^3 = 2 \text{ pts)}} = \frac{3 \text{ pts}}{5 \text{ pts}} = 60.00\%$$

NOTE: Reporting Frequency: Patient-process

CPT only copyright 2016 American Medical Association. All rights reserved.
v1

2017 Claims Individual Measure Flow

#326 NQF #1525: Atrial Fibrillation and Atrial Flutter: Chronic Anticoagulation Therapy

Please refer to the specific section of the Measure Specification to identify the denominator and numerator information for use in reporting this Individual Measure.

1. Start with Denominator
2. Check Patient Age:
 - a. If the Age is greater than or equal to 18 years of age on Date of Service and equals No during the measurement period, do not include in Eligible Patient Population. Stop Processing.
 - b. If the Age is greater than or equal to 18 years of age on Date of Service and equals Yes during the measurement period, proceed to check Patient Diagnosis.
3. Check Patient Diagnosis:
 - a. If Diagnosis of Nonvalvular Atrial Fibrillation or Atrial Flutter as Listed in the Denominator equals No, do not include in Eligible Patient Population. Stop Processing.
 - b. If Diagnosis of Nonvalvular Atrial Fibrillation or Atrial Flutter as Listed in the Denominator equals Yes, proceed to Encounter Performed.
4. Check Encounter Performed:
 - a. If Encounter Performed as Listed in the Denominator equals No, do not include in Eligible Patient Population. Stop Processing.
 - b. If Encounter as Listed in the Denominator equals Yes, proceed to check Telehealth Modifier.
5. Check Telehealth Modifier:
 - a. If Telehealth Modifier equals Yes, do not include in Eligible Patient Population. Stop Processing.
 - b. If Telehealth Modifier equals No, include in the Eligible population.
6. Denominator Population:
 - a. Denominator population is all Eligible Patients in the denominator. Denominator is represented as Denominator in the Sample Calculation listed at the end of this document. Letter d equals 8 patients in the sample calculation.
7. Start Numerator
8. Check Patient has Mitral Stenosis or Prosthetic Heart Valves OR Patient has Transient or Reversible Cause of AF (e.g., pneumonia, hyperthyroidism, pregnancy, cardiac surgery):
 - a. If Patient has Mitral Stenosis or Prosthetic Heart Valves OR Patient has Transient or Reversible Cause of AF (e.g., allergy, risk of bleeding, other medical reasons) equals Yes, include in Data Completeness Met and Denominator Exclusion.
 - b. Data Completeness Met and Denominator Exclusion is represented in the Data Completeness in the Sample Calculation listed at the end of this document. Letter x equals 0 patients in the Sample Calculation.
 - c. If Patient has Mitral Stenosis or Prosthetic Heart Valves OR Patient has Transient or Reversible Cause of

AF (e.g., pneumonia, hyperthyroidism, pregnancy, cardiac surgery) equals No, proceed to Warfarin OR Another Oral Anticoagulant that is FDA Approved Prescribed AND One or More High Risk Factors for Thromboembolism or More Than One Moderate Risk Factor for Thromboembolism.

9. Check Warfarin OR Another Oral Anticoagulant that is FDA Approved Prescribed AND One or More High Risk Factors for Thromboembolism or More Than One Moderate Risk Factor for Thromboembolism:
 - a. If Warfarin or Another Oral Anticoagulant that is FDA Approved Prescribed and One or More High Risk Factors for Thromboembolism or more than one Moderate Risk Factor for Thromboembolism equals Yes, include in Data Completeness Met and Performance Met.
 - b. Data Completeness Met and Performance Met is represented in the Data Completeness in the Sample Calculation listed at the end of this document. Letter a equals 3 patients in Sample Calculation.
 - c. If Warfarin OR Another Oral Anticoagulant that is FDA Approved Prescribed and One or More High Risk Factors for Thromboembolism or more than one Moderate Risk Factor for Thromboembolism equals No, proceed to check Documentation of Medical Reason(s) for Not Prescribing Warfarin or Another Oral Anticoagulant that is FDA Approved for Prevention of Thromboembolism AND One or More High Risk Factors for Thromboembolism or More Than One Moderate Risk Factor for Thromboembolism.
10. Check Documentation of Medical Reason(s) for Not Prescribing Warfarin or Another Oral Anticoagulant that is FDA Approved for Prevention of Thromboembolism AND One or More High Risk Factors for Thromboembolism or More Than One Moderate Risk Factor for Thromboembolism:
 - a. If Documentation of Medical Reason(s) for Not Prescribing Warfarin or Another Oral Anticoagulant that is FDA Approved for Prevention of Thromboembolism AND One or More High Risk Factors for Thromboembolism or More Than One Moderate Risk Factor for Thromboembolism equals Yes, include in the Data Completeness Met and Denominator Exception.
 - b. Data Completeness Met and Denominator Exception is represented in the Data Completeness in the Sample Calculation listed at the end of this document. Letter b1 equals 0 patients in the Sample Calculation.
 - c. If Documentation of Medical Reason(s) for Not Prescribing Warfarin or Another Oral Anticoagulant that is FDA Approved for Prevention of Thromboembolism AND One or More High Risk Factors for Thromboembolism or More Than One Moderate Risk Factor for Thromboembolism equals No, proceed to check Documented Patient Reason(s) for Not Prescribing Warfarin or Another Oral Anticoagulant that is FDA Approved for Prevention of Thromboembolism AND One or More High Risk Factors for Thromboembolism or More Than One Moderate Risk Factor for Thromboembolism.
11. Check Documentation of Patient Reason(s) for Not Prescribing Warfarin or Another Oral Anticoagulant that is FDA Approved for Prevention of Thromboembolism AND One or More High Risk Factors for Thromboembolism or More Than One Moderate Risk Factor for Thromboembolism:
 - a. If Documented Patient Reason(s) for Not Prescribing Warfarin or Another Oral Anticoagulant that is FDA Approved for Prevention of Thromboembolism AND One or More High Risk Factors for Thromboembolism or More Than One Moderate Risk Factor for Thromboembolism equals Yes, include in the Data Completeness Met and Denominator Exception.
 - b. Data Completeness Met and Denominator Exception is represented in the Data Completeness in the Sample Calculation listed at the end of this document. Letter b2 equals 2 patients in the Sample Calculation.
 - c. If Documentation of Patient Reason(s) for Not Prescribing Warfarin or Another Oral Anticoagulant that is

FDA Approved for Prevention of Thromboembolism AND One or More High Risk Factors for Thromboembolism or More Than One Moderate Risk Factor for Thromboembolism equals No, proceed to check No Risk Factors or One Moderate Risk Factor for Thromboembolism.

12. Check No Risk Factors or One Moderate Risk Factor for Thromboembolism:

- a. If No Risk Factors or One Moderate Risk Factor for Thromboembolism equals Yes, include in the Data Completeness Met and Denominator Exception.
- b. Data Completeness Met and Denominator Exception is represented in the Data Completeness in the Sample Calculation listed at the end of this document. Letter b3 equals 0 patients in the Sample Calculation.
- c. If No Risk Factors or One Moderate Risk Factor for Thromboembolism equals No, proceed to check Warfarin OR Another Oral Anticoagulant that is FDA Approved Not Prescribed, Reason Not Given AND One or More High Risk Factors for Thromboembolism or More Than One Moderate Risk Factor for Thromboembolism.

13. Check Warfarin OR Another Oral Anticoagulant that is FDA Approved Not Prescribed, Reason Not Given AND One or More High Risk Factors for Thromboembolism or More Than One Moderate Risk Factor for Thromboembolism:

- a. If Warfarin or Another Oral Anticoagulant that is FDA Approved Not Prescribed, Reason Not Given AND One or More High Risk Factors for Thromboembolism or More Than One Moderate Risk Factor for Thromboembolism equals Yes, include in Data Completeness Met and Performance Not Met.
- b. Data Completeness Met and Performance Not Met is represented in the Data Completeness in the Sample Calculation listed at the end of this document. Letter c equals 2 patients in the Sample Calculation.
- c. If Warfarin or Another Oral Anticoagulant that is FDA Approved Not Prescribed, Reason Not Given AND One or More High Risk Factors for Thromboembolism or More Than One Moderate Risk Factor for Thromboembolism equals No, proceed to Data Completeness Not Met.

14. Check Data Completeness Not Met:

- a. If Data Completeness Not Met equals No, the Quality Data Code or equivalent was not reported. 1 patient has been subtracted from the data completeness numerator in the sample calculation.

SAMPLE CALCULATIONS:

Data Completeness=

$$\frac{\text{Denominator Exclusion (x=0 pts)} + \text{Performance Met (a=3 pts)} + \text{Denominator Exception (b}^1 + \text{b}^2 + \text{b}^3 = 2 \text{ pts)} + \text{Performance Not Met (c=2 pts)}}{\text{Eligible Population / Denominator (d=8 pts)}} = \frac{7 \text{ pts}}{8 \text{ pts}} = 87.50\%$$

Performance Rate=

$$\frac{\text{Performance Met (a=3 pts)}}{\text{Data Completeness Numerator (7 pts) - Denominator Exclusion (x=0 pts) - Denominator Exception (b}^1 + \text{b}^2 + \text{b}^3 = 2 \text{ pts)}} = \frac{3 \text{ pts}}{5 \text{ pts}} = 60.00\%$$