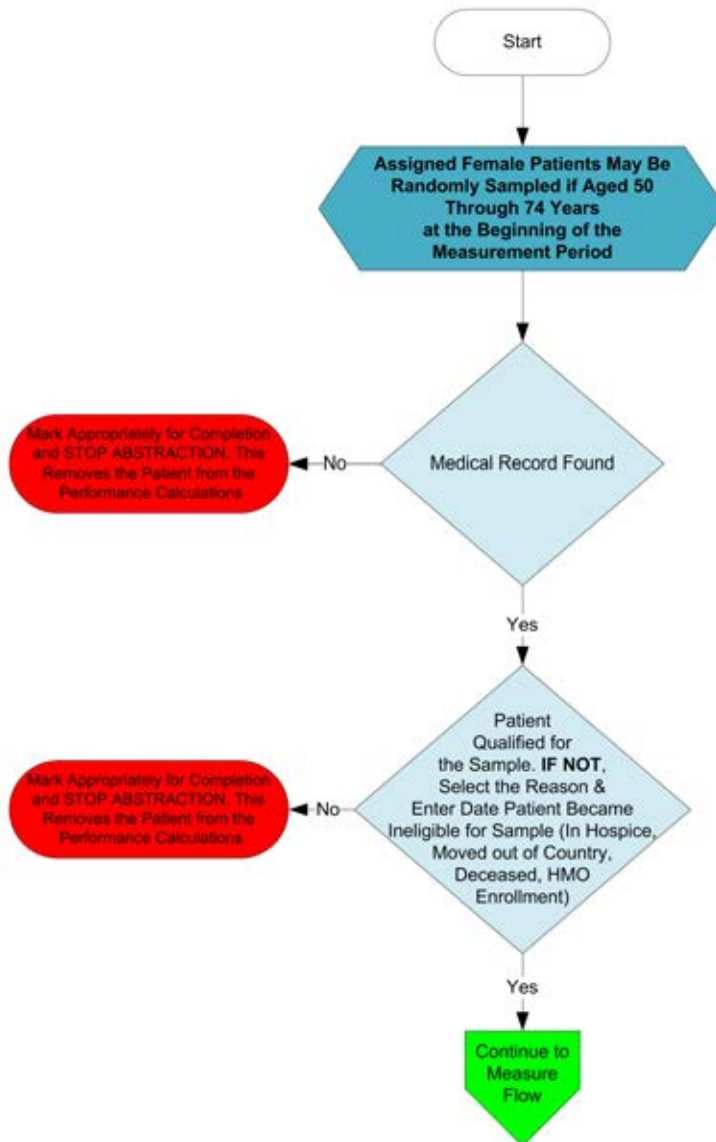
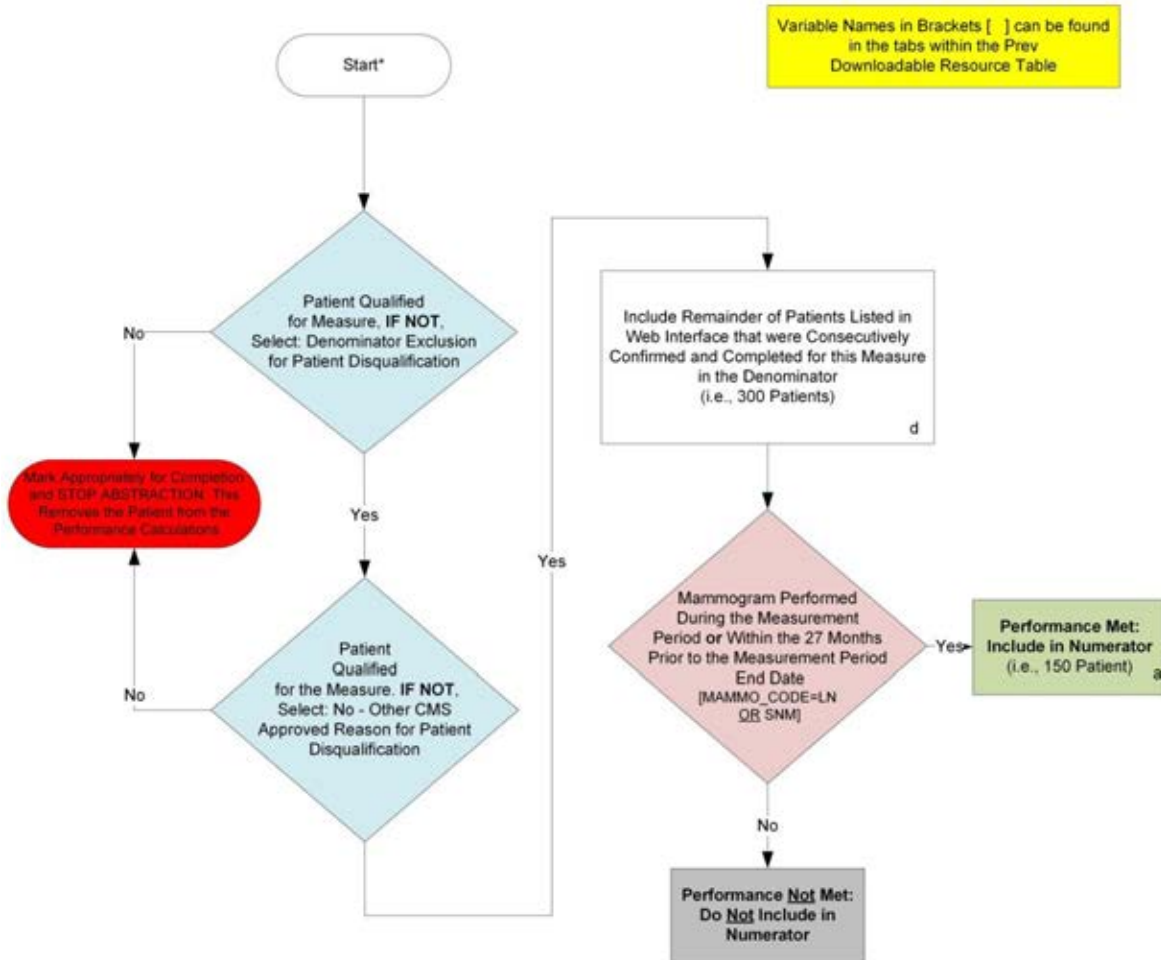


Patient Confirmation Flow for PREV-5

For 2014, confirmation of the "Medical Record Found", or indicating the patient is "Not Qualified for Sample" with a reason of "In Hospice", "Moved out of Country", "Deceased", or "HMO Enrollment", will only need to be done **once** per patient. For module or measure specific reasons a patient is "Not Confirmed" or excluded for "Denominator Exclusion" or "Other CMS Approved Reason", please refer to the associated Data Guidance.



2014 GPRO-PREV-5: Breast Cancer Screening
 This flow applies to GPRO Web Interface



SAMPLE CALCULATION:

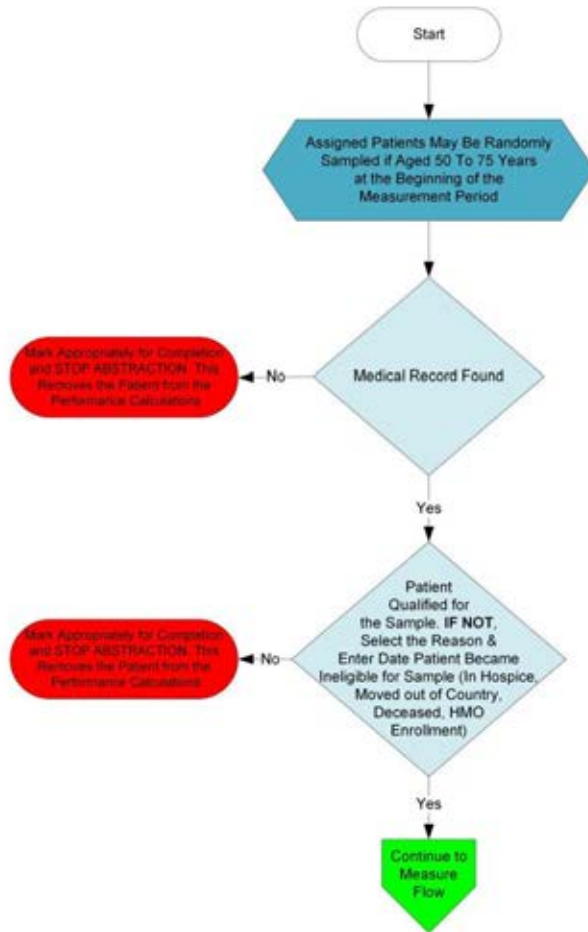
Performance Rate= $\frac{\text{Performance Met (a = 150 Patients)}}{\text{Eligible Denominator (d=300 Patients)}} = \frac{150 \text{ Patients}}{300 \text{ Patients}} = 50.00\%$

CALCULATION MAY CHANGE PENDING PERFORMANCES MET ABOVE

*See Data Guidance for further instructions to report this measure

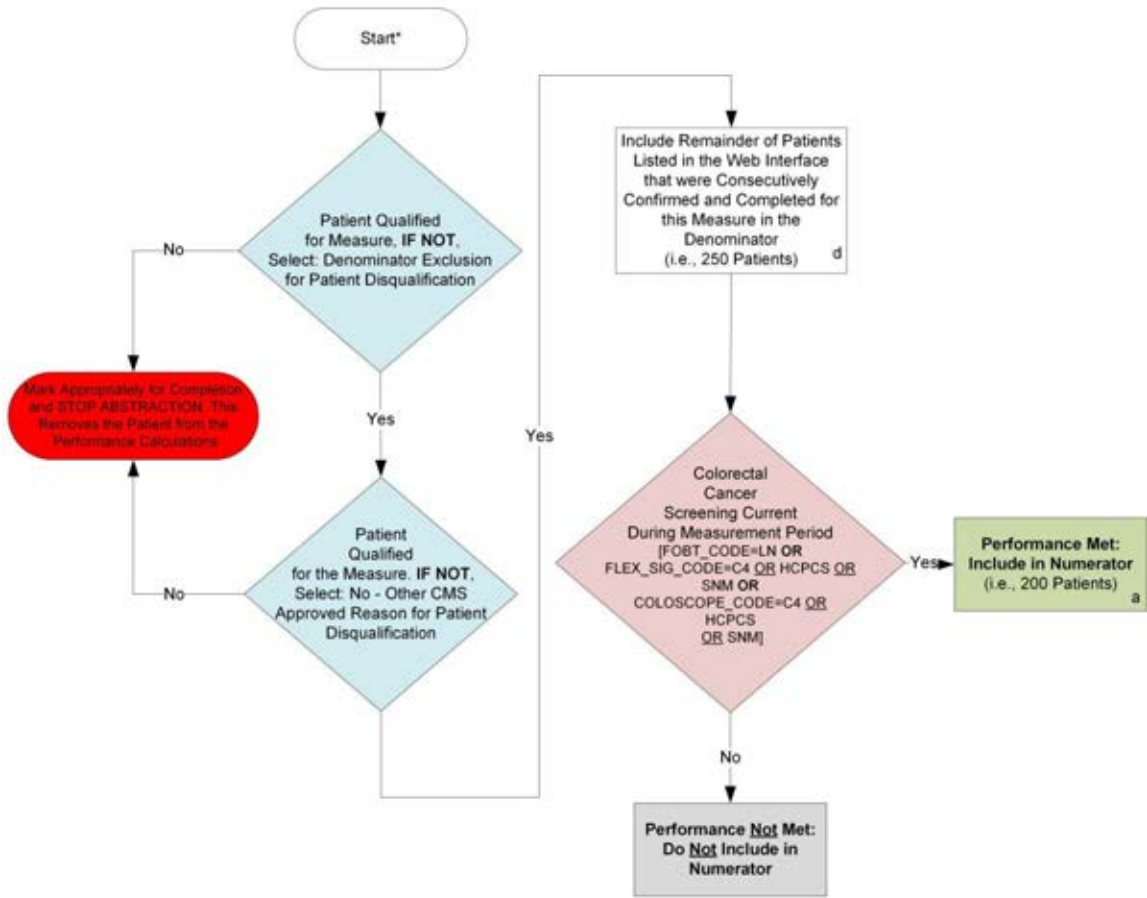
Patient Confirmation Flow for PREV-6

For 2014, confirmation of the "Medical Record Found", or indicating the patient is "Not Qualified for Sample" with a reason of "In Hospice", "Moved out of Country", "Deceased", or "HMO Enrollment", will only need to be done **once** per patient. For module or measure specific reasons a patient is "Not Confirmed" or excluded for "Denominator Exclusion" or "Other CMS Approved Reason", please refer to the associated Data Guidance.



2014 GPRO-PREV-6 (NQF 0034): Colorectal Cancer Screening
 This flow applies to GPRO Web Interface

Variable Names in Brackets [] can be found in the tabs within the Prev Downloadable Resource Table



SAMPLE CALCULATION:

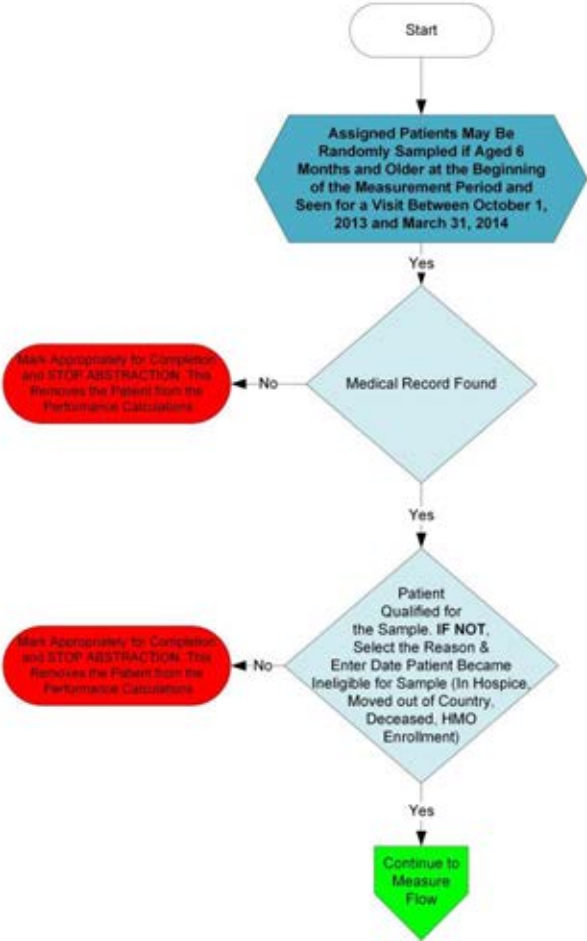
Performance Rate= $\frac{\text{Performance Met (a = 200 Patients)}}{\text{Eligible Denominator (d=250 Patients)}} = \frac{200 \text{ Patients}}{250 \text{ Patients}} = 80.00\%$

CALCULATION MAY CHANGE PENDING PERFORMANCES MET ABOVE

*See Data Guidance for further instructions to report this measure

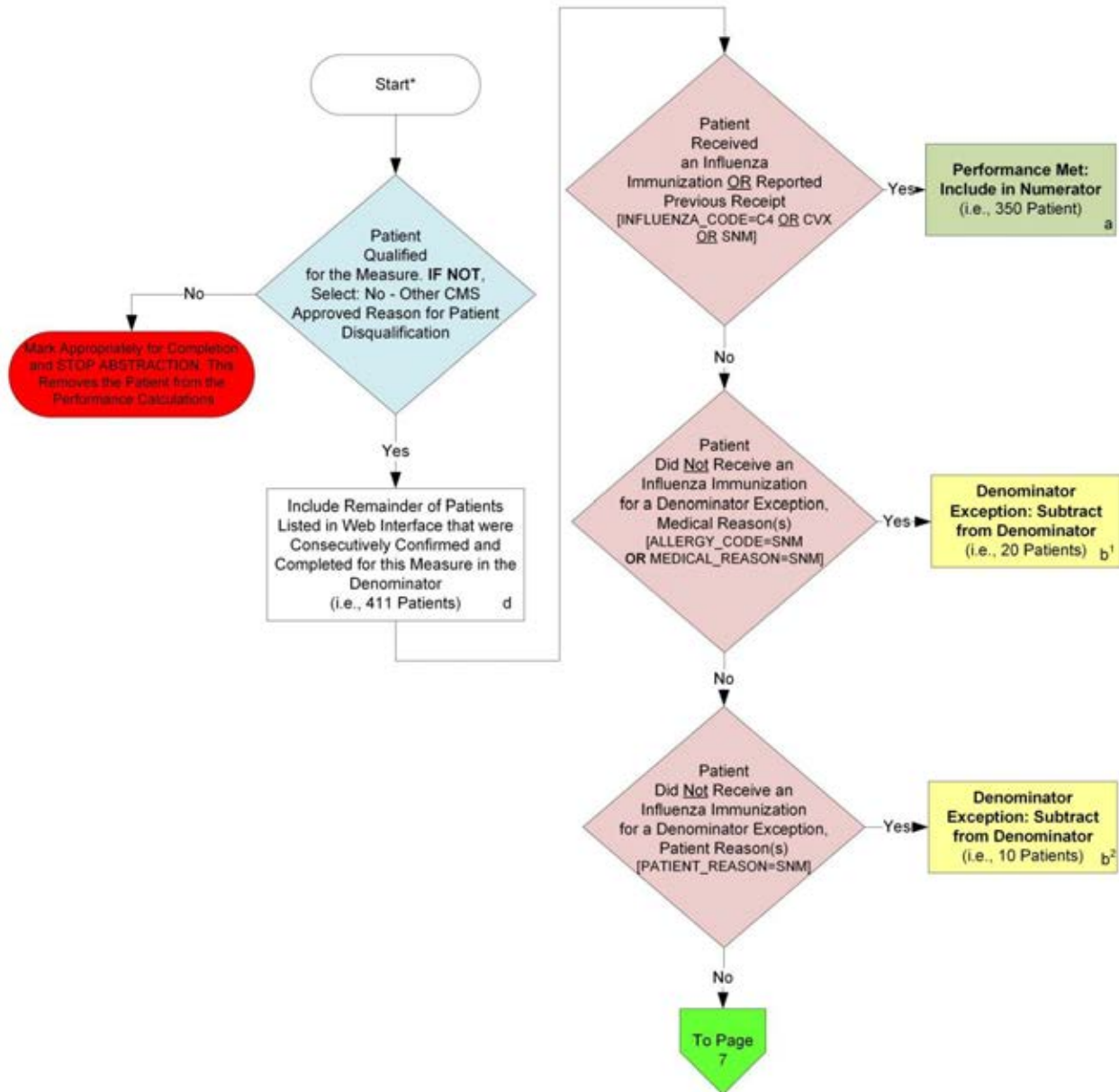
Patient Confirmation Flow for PREV-7

For 2014, confirmation of the "Medical Record Found", or indicating the patient is "Not Qualified for Sample" with a reason of "In Hospice", "Moved out of Country", "Deceased", or "HMO Enrollment", will only need to be done **once** per patient. For module or measure specific reasons a patient is "Not Confirmed" or excluded for "Other CMS Approved Reason", please refer to the associated Data Guidance.

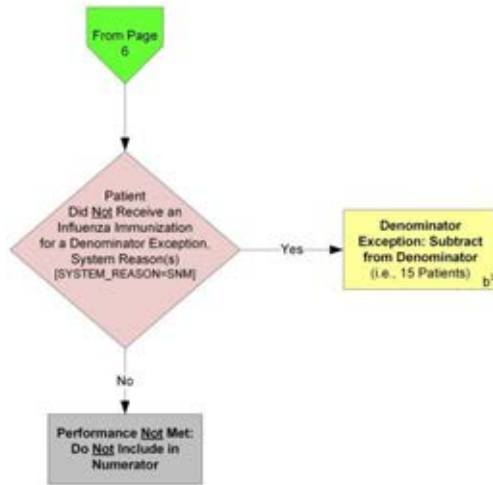


2014 GPRO PREV-7 (NQF 0041): Preventive Care and Screening: Influenza Immunization
 This flow applies to GPRO Web Interface

Variable Names in Brackets [] can be found in the tabs within the Prev Downloadable Resource Table



*See Data Guidance for further instructions to report this measure



SAMPLE CALCULATIONS:

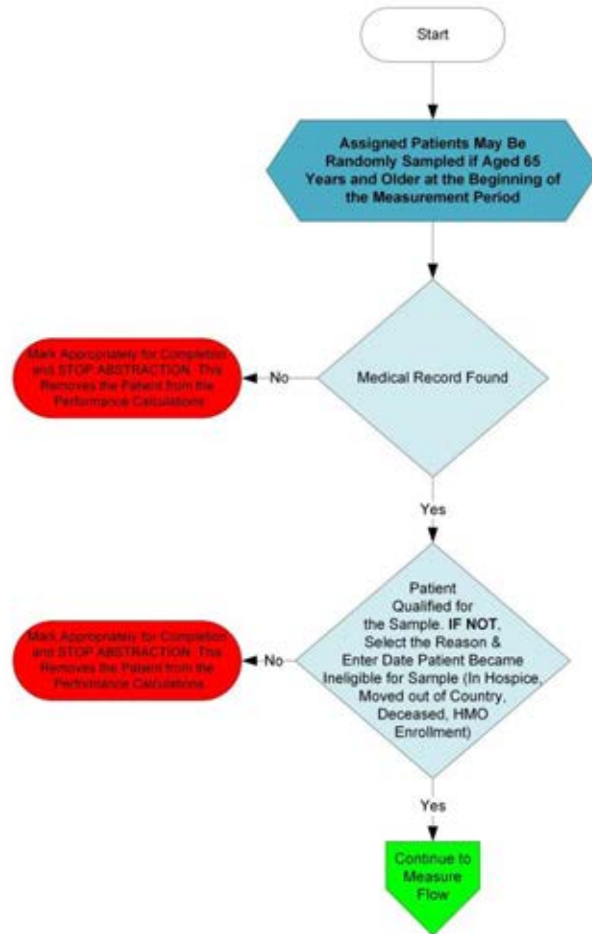
Performance Rate
 Performance Met (a=350 Patients) 350 Patients = 95.63%
 Eligible Denominator (d=411 Patients) - Denominator Exception (b¹=20 Patients + b²=10 Patients + b³=15 Patients) = 306 Patients

CALCULATIONS MAY CHANGE PENDING PERFORMANCES MET ABOVE

*See Data Guidance for further instructions to report this measure

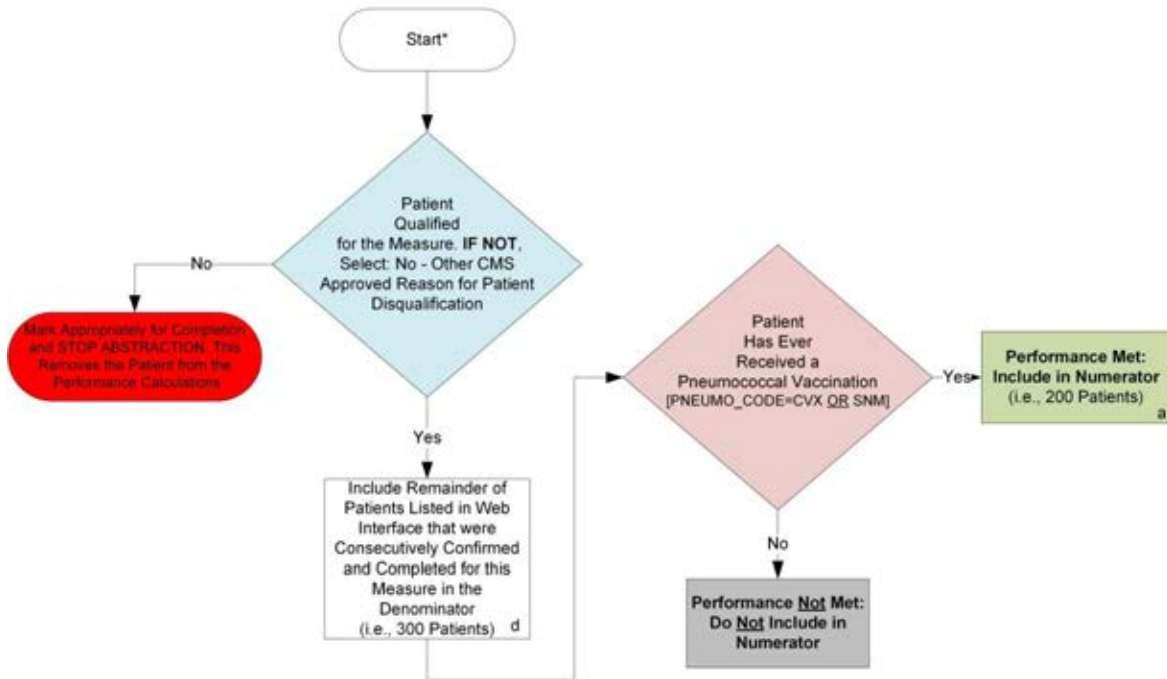
Patient Confirmation Flow for PREV-8

For 2014, confirmation of the "Medical Record Found", or indicating the patient is "Not Qualified for Sample" with a reason of "In Hospice", "Moved out of Country", "Deceased", or "HMO Enrollment", will only need to be done **once** per patient. For module or measure specific reasons a patient is "Not Confirmed" or excluded for "Other CMS Approved Reason", please refer to the associated Data Guidance.



2014 GPRO-PREV-8 (NQF 0043): Pneumonia Vaccination Status for Older Adults
 This flow applies to GPRO Web Interface

Variable Names in Brackets [] can be found in the tabs within the Prev Downloadable Resource Table



SAMPLE CALCULATION:

Performance Rate=

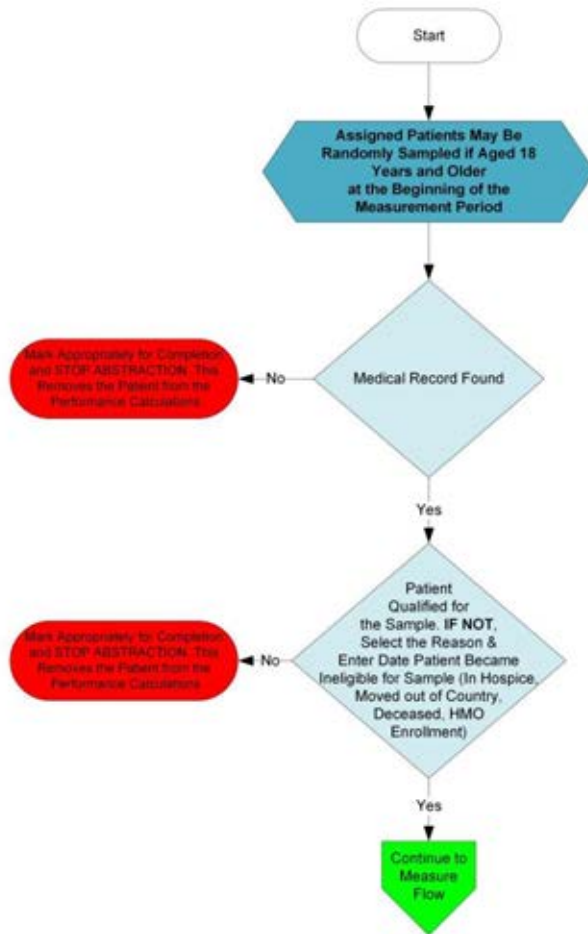
$$\frac{\text{Performance Met (a= 200 Patients)}}{\text{Eligible Denominator (d= 300 Patients)}} = \frac{200 \text{ Patients}}{300 \text{ Patients}} = 66.67\%$$

CALCULATION MAY CHANGE PENDING PERFORMANCE MET ABOVE

*See Data Guidance for further instructions to report this measure

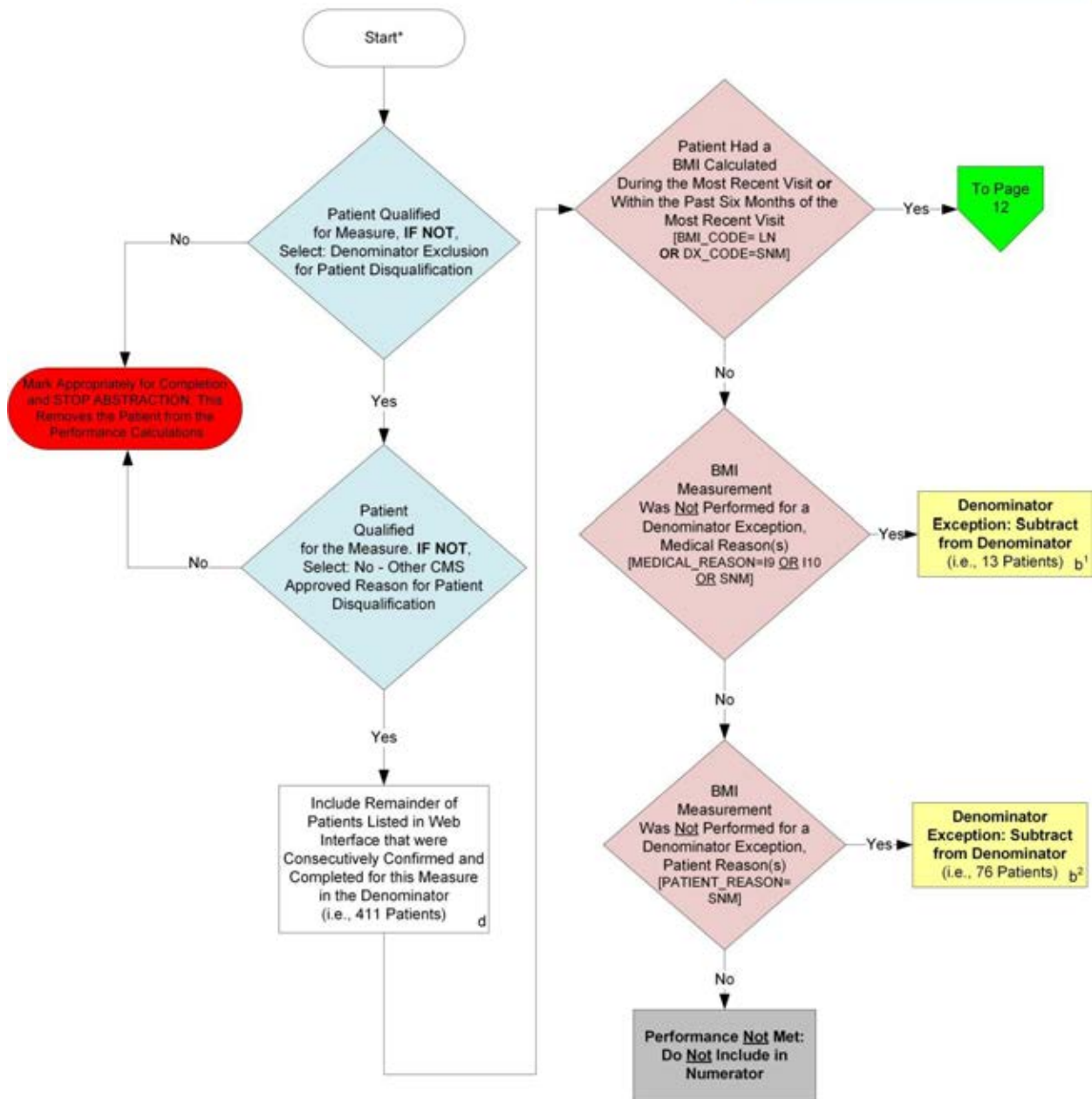
Patient Confirmation Flow for PREV-9

For 2014, confirmation of the "Medical Record Found", or indicating the patient is "Not Qualified for Sample" with a reason of "In Hospice", "Moved out of Country", "Deceased", or "HMO Enrollment", will only need to be done **once** per patient. For module or measure specific reasons a patient is "Not Confirmed" or excluded for "Denominator Exclusion" or "Other CMS Approved Reason", please refer to the associated Data Guidance.



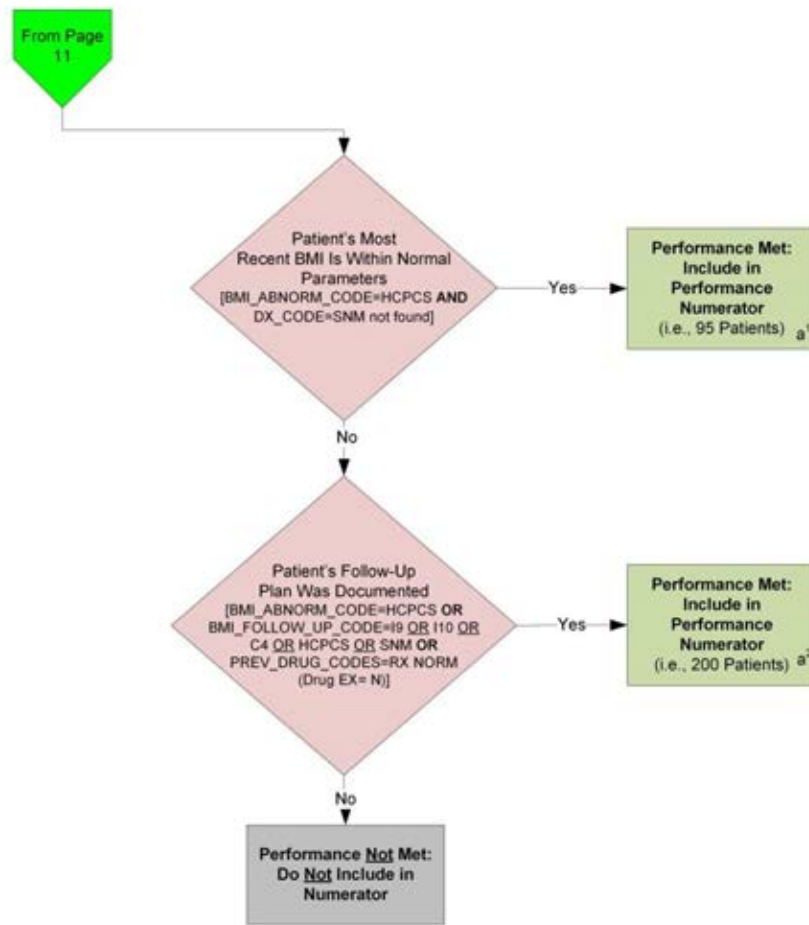
2014 GPRO Prev-9 (NQF 0421): Preventive Care and Screening: Body Mass Index (BMI) Screening and Follow-Up
 This flow applies to GPRO Web Interface

Variable Names in Brackets [] can be found in the tabs within the Prev Downloadable Resource Table



*See Data Guidance for further instructions to report this measure

2014 GPRO Prev-9 (NQF 0421): Preventive Care and Screening: Body Mass Index (BMI) Screening and Follow-Up
 This flow applies to GPRO Web Interface



SAMPLE CALCULATION:

Performance Rate=

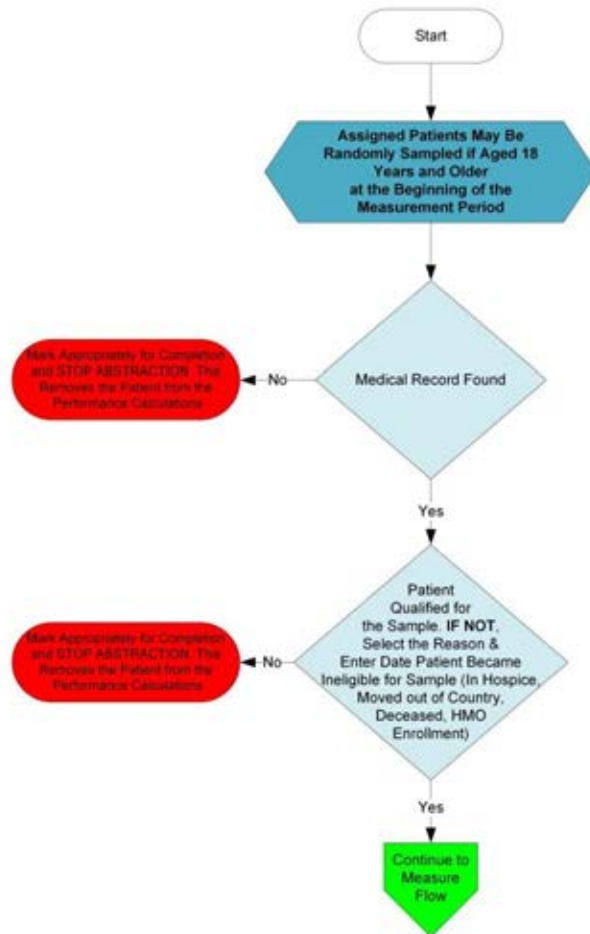
$$\frac{\text{Performance Met (a}^1 = 95 \text{ Patients} + \text{a}^2 = 200 \text{ Patients)}}{\text{Eligible Denominator (d= 411 Patients) - Denominator Exception (b}^1 = 13 \text{ Patients} + \text{b}^2 = 76 \text{ Patients)}} = \frac{295 \text{ Patients}}{322 \text{ Patients}} = 91.61\%$$

CALCULATION MAY CHANGE PENDING PERFORMANCE MET ABOVE

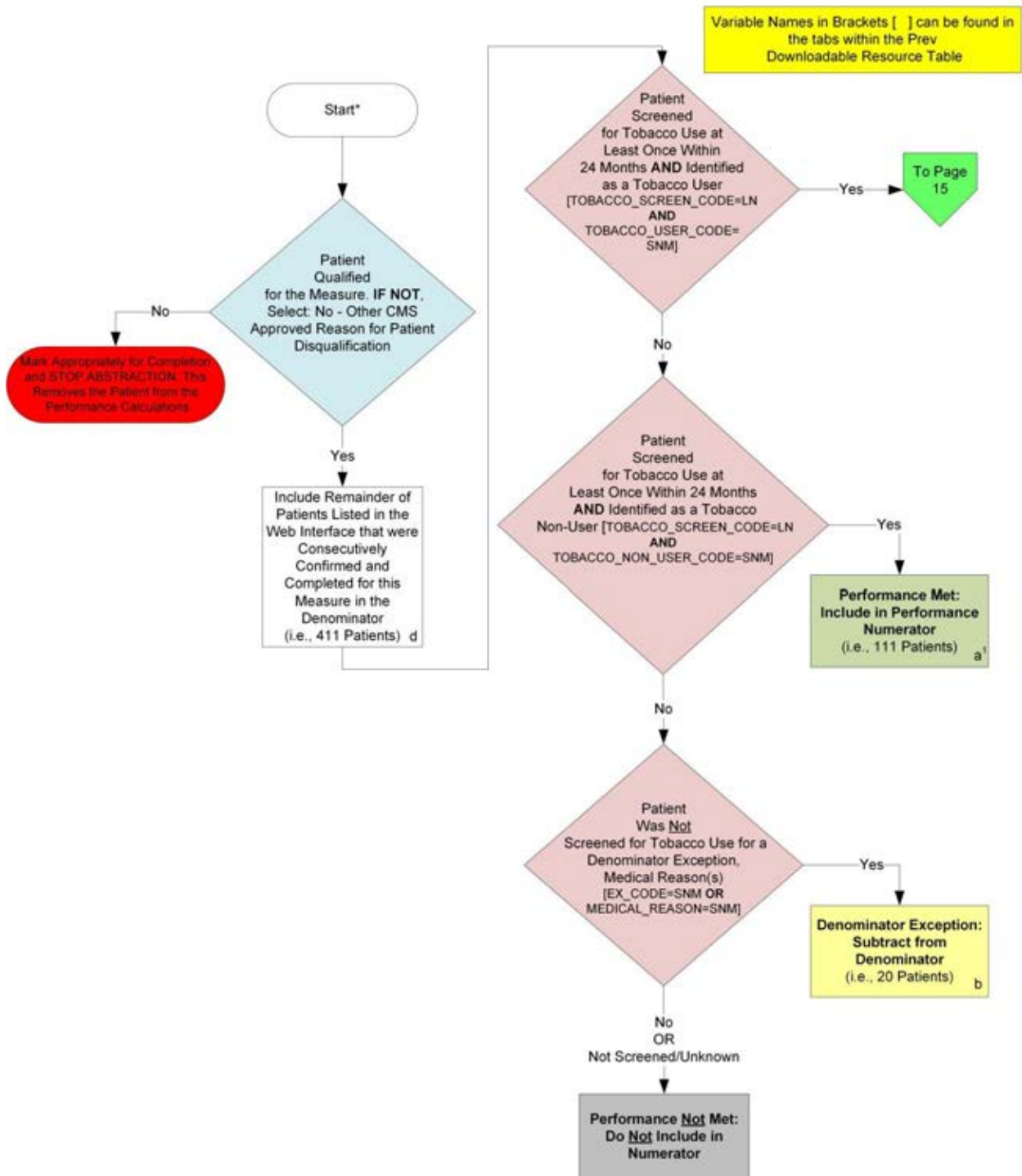
*See Data Guidance for further instructions to report this measure
 **EX represents Exclusions or Exceptions as appropriate

Patient Confirmation Flow for PREV-10

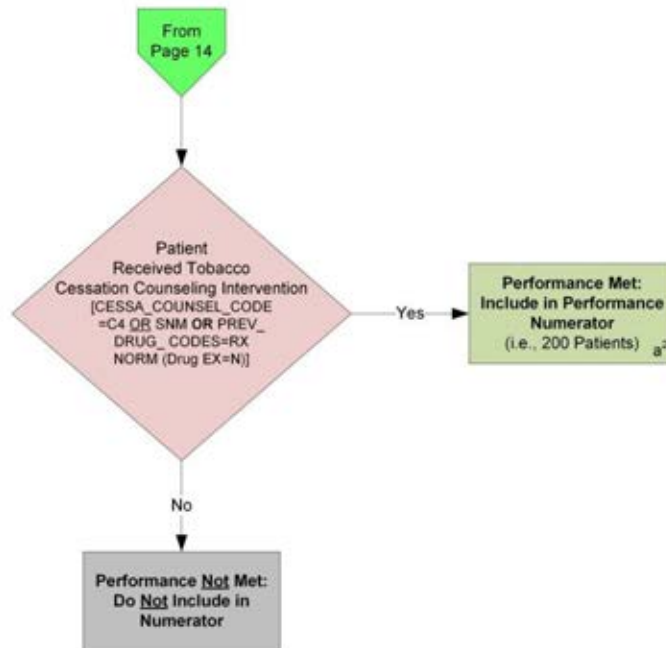
For 2014, confirmation of the "Medical Record Found", or indicating the patient is "Not Qualified for Sample" with a reason of "In Hospice", "Moved out of Country", "Deceased", or "HMO Enrollment", will only need to be done **once** per patient. For module or measure specific reasons a patient is "Not Confirmed" or excluded for "Other CMS Approved Reason", please refer to the associated Data Guidance.



2014 GPRO Prev-10 (NQF 0028): Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention
 This flow applies to GPRO Web Interface



*See Data Guidance for further instructions to report this measure
 **EX represents Exclusions or Exceptions as appropriate



SAMPLE CALCULATION:

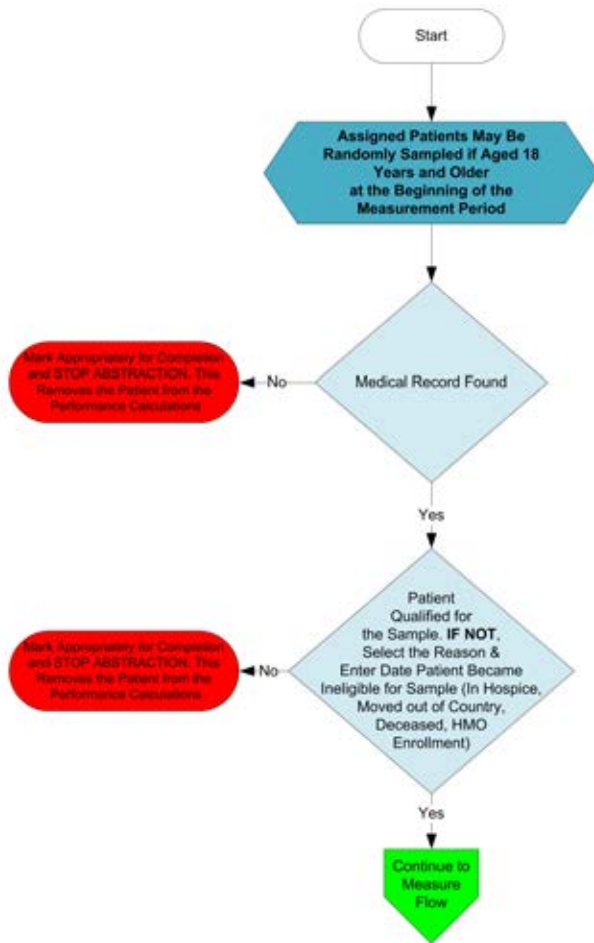
Performance Rate=
 Performance Met (a¹= 111 Patients + a²= 200 Patients) / Eligible Denominator (d=411 Patients) - Denominator Exception (b= 20 Patients) = $\frac{311 \text{ Patients}}{391 \text{ Patients}} = 79.54\%$

CALCULATION MAY CHANGE PENDING PERFORMANCE MET ABOVE

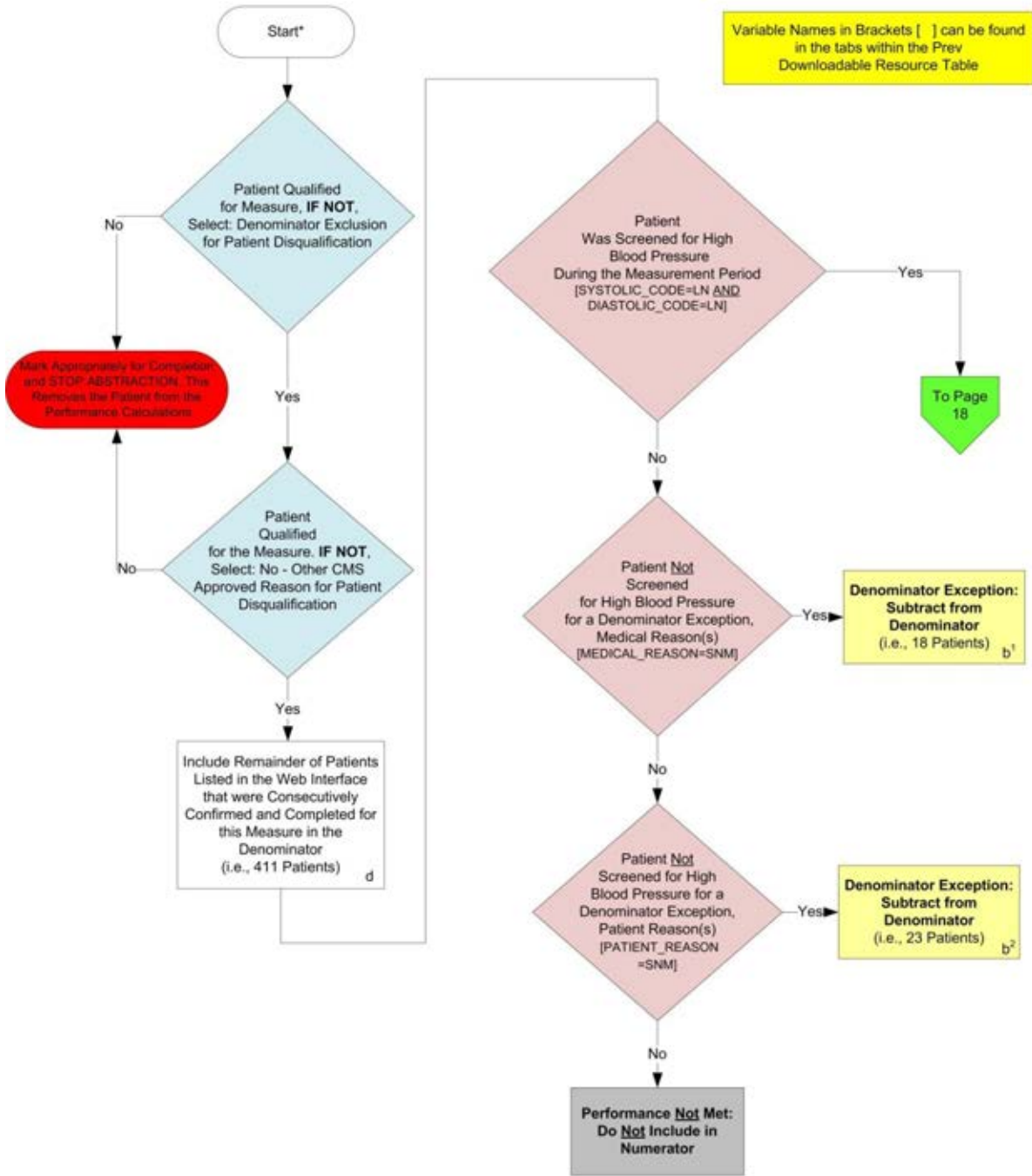
*See Data Guidance for further instructions to report this measure
 **EX represents Exclusions or Exceptions as appropriate

Patient Confirmation Flow for PREV-11

For 2014, confirmation of the "Medical Record Found", or indicating the patient is "Not Qualified for Sample" with a reason of "In Hospice", "Moved out of Country", "Deceased", or "HMO Enrollment", will only need to be done **once** per patient. For module or measure specific reasons a patient is "Not Confirmed" or excluded for "Denominator Exclusion" or "Other CMS Approved Reason", please refer to the associated Data Guidance.



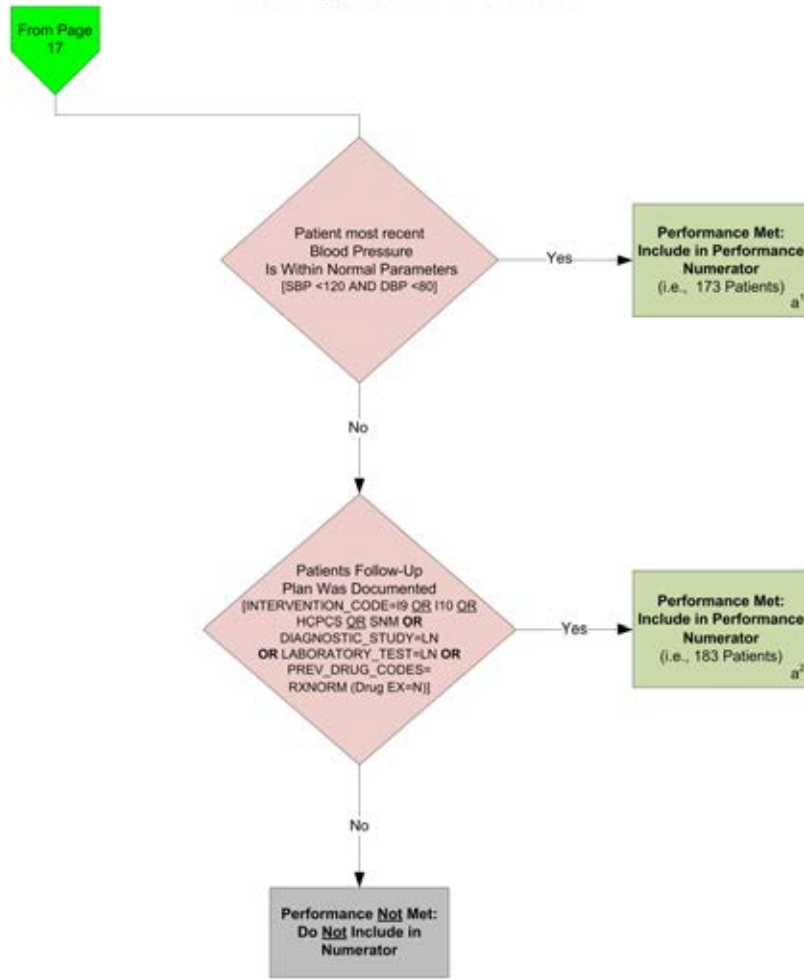
2014 GPRO Prev-11 (NQF N/A): Preventive Care and Screening: Screening for High Blood Pressure and Follow-Up Documented
 This flow applies to the GPRO Web Interface



*See Data Guidance for further instructions to report this measure

2014 GPRO Prev-11 (NQF N/A): Preventive Care and Screening: Screening for High Blood Pressure and Follow-Up Documented

This flow applies to the GPRO Web Interface



SAMPLE CALCULATION:

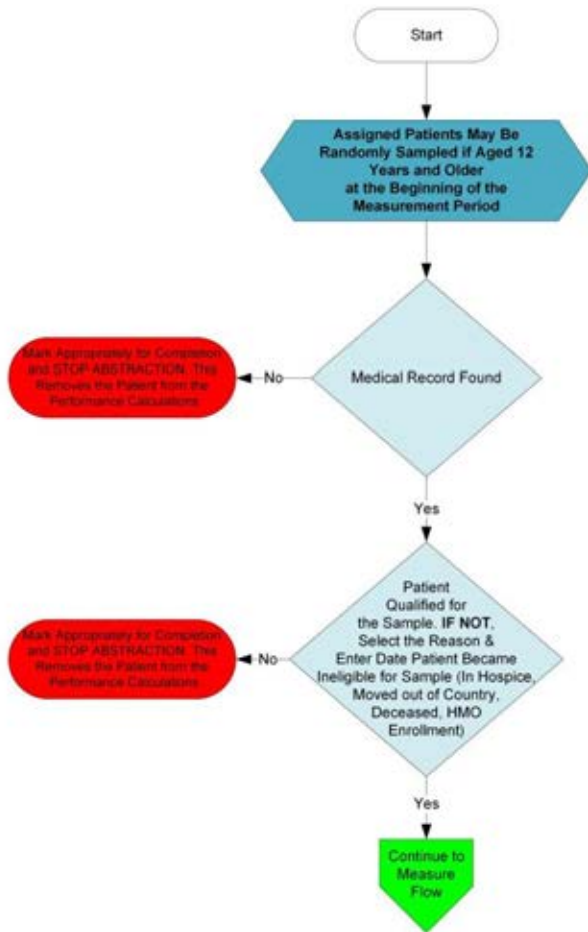
Performance Rate=
 Performance Met (a¹= 173 Patients + a²= 183 Patients) / Eligible Denominator (d=411 Patients) - Denominator Exception (b¹= 18 Patients + b²= 23 Patients) = 356 Patients / 370 Patients = 96.22%

CALCULATION MAY CHANGE PENDING PERFORMANCE MET ABOVE

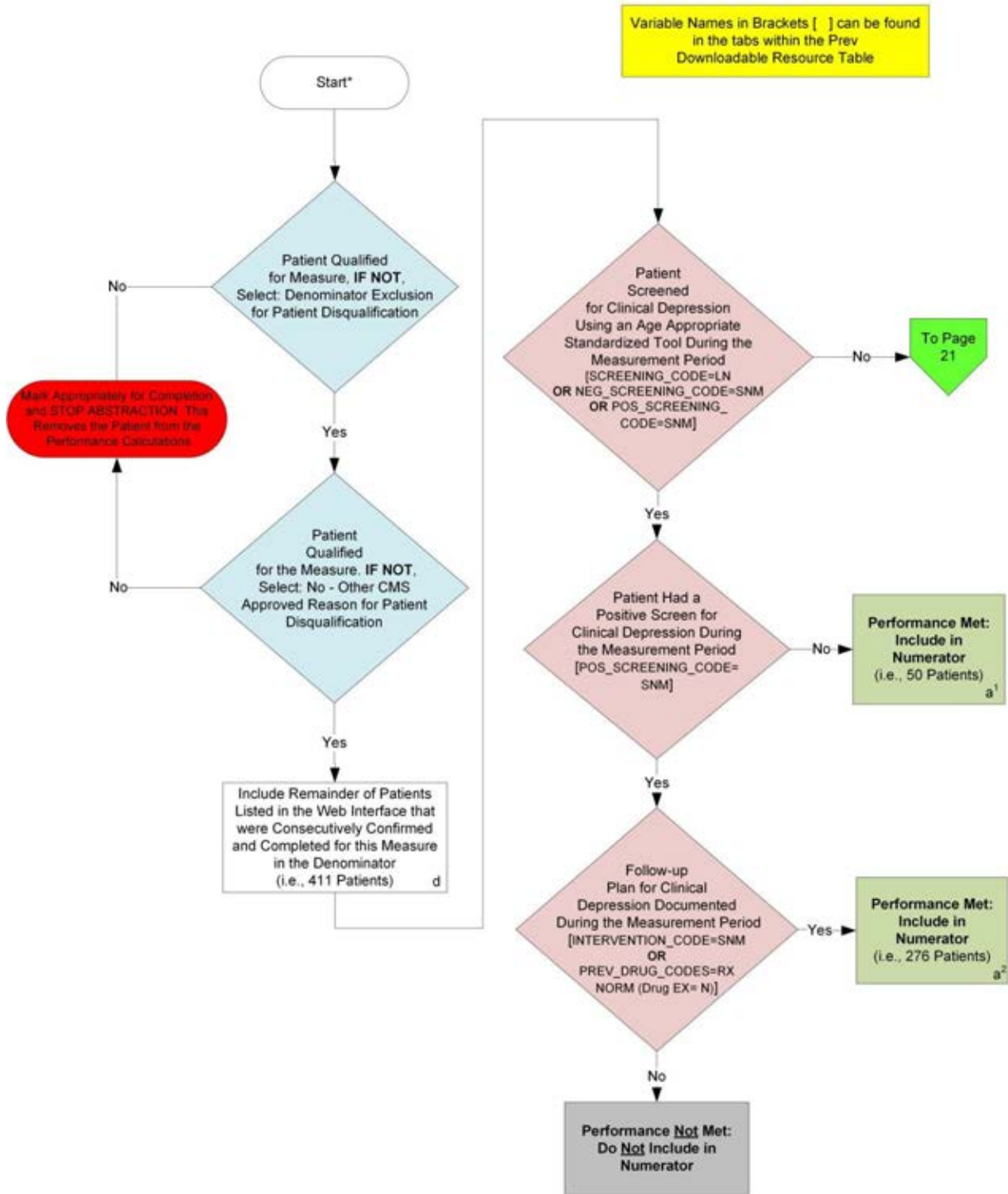
*See Data Guidance for further instructions to report this measure

Patient Confirmation Flow for PREV-12

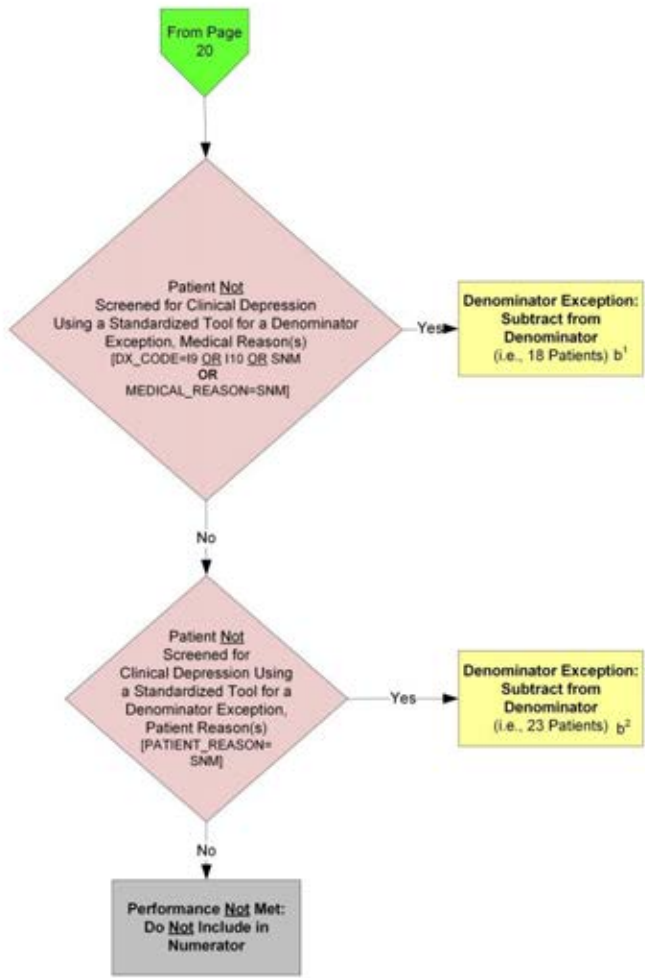
For 2014, confirmation of the "Medical Record Found", or indicating the patient is "Not Qualified for Sample" with a reason of "In Hospice", "Moved out of Country", "Deceased", or "HMO Enrollment", will only need to be done **once** per patient. For module or measure specific reasons a patient is "Not Confirmed" or excluded for "Denominator Exclusion" or "Other CMS Approved Reason", please refer to the associated Data Guidance.



2014 GPRO-PREV-12 (NQF 0418): Preventive Care and Screening: Screening for Clinical Depression and Follow-Up Plan
 This flow applies to GPRO Web Interface



*See Data Guidance for further instructions to report this measure
 **EX represents Exclusions or Exceptions as appropriate



SAMPLE CALCULATION:

Performance Rate=

$$\frac{\text{Performance Met (a}^1\text{ = 50 Patients + a}^2\text{ = 276 Patients)}}{\text{Eligible Denominator (d=411 Patients) - Denominator Exception (b}^1\text{ = 18 Patients + b}^2\text{ = 23 Patients)}} = \frac{326 \text{ Patients}}{370 \text{ Patients}} = 88.11\%$$

CALCULATION MAY CHANGE PENDING PERFORMANCES MET ABOVE

*See Data Guidance for further instructions to report this measure

Patient Confirmation Flow for PREV-5

For 2014, confirmation of the “Medical Record Found”, or indicating the patient is “Not Qualified for Sample” with a reason of “In Hospice”, “Moved out of Country”, “Deceased”, or “HMO Enrollment”, will only need to be done **once** per patient. For module or measure specific reasons a patient is “Not Confirmed” or excluded for “Denominator Exclusion” or “Other CMS Approved Reason”, please refer to the associated Data Guidance.

1. Start PREV-5 Patient Confirmation Flow. Assigned female patients may be randomly sampled if aged 50 through 74 years at the beginning of the measurement period.
2. Check to determine if Medical Record can be found
 - a. If no, Medical Record not found, mark appropriately for completion and stop abstraction. This removes the patient from the performance calculations. Stop processing.
 - b. If yes, Medical Record found, continue processing.
3. Check to determine if Patient Qualified for the sample
 - a. If no, the patient does not qualify for the sample, select the reason why and enter the date the patient became ineligible for sample. For example; In Hospice, Moved out of Country, Deceased, HMO Enrollment. Mark appropriately for completion and stop abstraction. This removes the patient from the performance calculations. Stop processing.
 - b. If yes, the patient does qualify for the sample; continue to the 2014 PREV-5 measure flow.

2014 GPRO-PREV-5: Breast Cancer Screening

This flow applies to GPRO Web Interface

Variable names can be found in the tabs within the PREV Downloadable Resource Table.
See Data Guidance for further instructions to report this measure

1. Start processing 2014 GPRO PREV-5 Flow for the patients that qualified for sample in the PREV-5 Patient Confirmation Flow.
2. Check to determine if the patient qualified for the measure
 - a. If no, the patient did not qualify for the measure select: Denominator Exclusion for Patient Disqualification. Mark appropriately for completion and stop abstraction. This removes the patient from the performance calculations. Stop processing.
 - b. If yes, the patient does qualify for the measure, the patient will be included in the eligible denominator for performance rate calculations. Continue processing.
3. Check to determine if the patient qualified for the measure
 - a. If no, the patient did not qualify for the measure select: No – Other CMS Approved Reason for patient disqualification. Mark appropriately for completion and stop abstraction. This removes the patient from the performance calculations. Stop processing.
 - b. If yes, the patient does qualify for the measure, the patient will be included in the eligible denominator for performance rate calculations. Note: Include remainder of patients listed in Web Interface that were consecutively confirmed and completed for this measure in the denominator. For the sample performance rate calculation in the flow these patients would fall into the 'd' category (eligible denominator, i.e. 300 patients). Continue processing.
4. Check to determine if the patient had a mammogram performed during the measurement period **or** within the 27 months prior to the measurement period end date. Variable Names: MAMMO_CODE=LN OR SNM.
 - a. If no, the patient did not have a mammogram performed during the measurement period **or** within the 27 months prior to the measurement period end date, performance is not met and should not be included in the numerator. Stop processing.
 - b.
 - c. If yes, the patient did have a mammogram performed during the measurement period **or** within the 27 months prior to the measurement period end date, performance is met and the patient will be included in the numerator. For the sample performance rate calculation in the flow these patients would fall into the 'a' category (numerator, i.e. 150 patients). Stop processing.

Sample Calculation

Performance Rate Equals

Performance Met is category 'a' in the measure flow (150 patients)

Eligible Denominator is category 'd' in the measure flow (300 patients)

150 (Performance Met) divided by 300 (Eligible Denominator) equals a performance rate of 50.00 percent

Calculation May Change Pending Performance Met

Patient Confirmation Flow for PREV-6

For 2014, confirmation of the “Medical Record Found”, or indicating the patient is “Not Qualified for Sample” with a reason of “In Hospice”, “Moved out of Country”, “Deceased”, or “HMO Enrollment”, will only need to be done **once** per patient. For module or measure specific reasons a patient is “Not Confirmed” or excluded for “Denominator Exclusion” or “Other CMS Approved Reason”, please refer to the associated Data Guidance.

1. Start PREV-6 Patient Confirmation Flow. Assigned patients may be randomly sampled if aged 50 to 75 years at the beginning of the measurement period.
2. Check to determine if Medical Record can be found
 - a. If no, Medical Record not found, mark appropriately for completion and stop abstraction. This removes the patient from the performance calculations. Stop processing.
 - b. If yes, Medical Record found, continue processing.
3. Check to determine if Patient Qualified for the sample
 - a. If no, the patient does not qualify for the sample, select the reason why and enter the date the patient became ineligible for sample. For example; In Hospice, Moved out of Country, Deceased, HMO Enrollment. Mark appropriately for completion and stop abstraction. This removes the patient from the performance calculations. Stop processing.
 - b. If yes, the patient does qualify for the sample; continue to the 2014 PREV-6 measure flow.

2014 GPRO-PREV-6 (NQF 0034): Colorectal Cancer Screening

This flow applies to GPRO Web Interface

Variable names can be found in the tabs within the PREV Downloadable Resource Table. See Data Guidance for further instructions to report this measure.

1. Start processing 2014 GPRO PREV-6 (NQF 0034) Flow for the patients that qualified for sample in the PREV-6 Patient Confirmation Flow.
2. Check to determine if the patient qualified for the measure
 - a. If no, the patient did not qualify for the measure select: Denominator Exclusion for Patient Disqualification. Mark appropriately for completion and stop abstraction. This removes the patient from the performance calculation. Stop processing.
3. If yes, the patient does qualify for the measure, the patient will be included in the eligible denominator for performance rate calculation. Check to determine if the patient qualified for the measure
 - a. If no, the patient did not qualify for the measure select: No – Other CMS Approved Reason for patient disqualification. Mark appropriately for completion and stop abstraction. This removes the patient from the performance calculation. Stop processing.
 - b. If yes, the patient does qualify for the measure, the patient will be included in the eligible denominator for performance rate calculation. Note: Include remainder of patients listed in Web Interface that were consecutively confirmed and completed for this measure in the denominator. For the sample performance rate calculation in the flow these patients would fall into the 'd' category (eligible denominator, i.e. 250 patients). Continue processing.
4. Check to determine if the patient's colorectal cancer screening is current during the measurement period. Variable Names: FOBT_CODE=LN **OR** FLEX_SIG_CODE=C4 OR HCPCS OR SNM **OR** COLOSCOPE_CODE=C4 OR HCPCS OR SNM.
 - a. If no, the patient's colorectal cancer screening is not current during the measurement period performance is not met and should not be included in the numerator. Stop processing.
 - b. If yes, the patient's colorectal cancer screening is current during the measurement period, performance is met and the patient will be included in the numerator. For the sample performance rate calculation in the flow these patients would fall into the 'a' category (numerator, i.e. 200 patients). Stop processing.

Sample Calculation

Performance Rate Equals

Performance Met is category a in the measure flow (200 patients)

Eligible Denominator is category d in measure flow (250 patients)

200 (Performance Met) divided by 250 (Eligible Denominator) equals a performance rate of 80.00 percent

Calculation May Change Pending Performance Met

Patient Confirmation Flow for PREV-7

For 2014, confirmation of the “Medical Record Found”, or indicating the patient is “Not Qualified for Sample” with a reason of “In Hospice”, “Moved out of Country”, “Deceased”, or “HMO Enrollment”, will only need to be done **once** per patient. For module or measure specific reasons a patient is “Not Confirmed” or excluded for “Other CMS Approved Reason”, please refer to the associated Data Guidance.

1. Start PREV-7 Patient Confirmation Flow. Assigned patients may be randomly sampled if aged 6 months and older at the beginning of the measurement period and seen for a visit between October 1, 2013 and March 31, 2014.
2. Check to determine if Medical Record can be found
 - a. If no, Medical Record not found, mark appropriately for completion and stop abstraction. This removes the patient from the performance calculations. Stop processing.
 - b. If yes, Medical Record found, continue processing.
3. Check to determine if Patient Qualified for the sample
 - a. If no, the patient does not qualify for the sample, select the reason why and enter the date the patient became ineligible for sample. For example; In Hospice, Moved out of Country, Deceased, HMO Enrollment. Mark appropriately for completion and stop abstraction. This removes the patient from the performance calculations. Stop processing.
 - b. If yes, the patient does qualify for the sample; continue to the 2014 PREV-7 measure flow.

2014 GPRO PREV-7 (NQF 0041): Preventive Care and Screening: Influenza Immunization

This flow applies to GPRO Web Interface

Variable names can be found in the tabs within the PREV Downloadable Resource Table.
See Data Guidance for further instructions to report this measure.

1. Start processing 2014 GPRO PREV-7 (NQF 0041) Flow for the patients that qualified for sample in the PREV-7 Patient Confirmation Flow.
2. Check to determine if the patient qualified for the measure
 - a. If no, the patient did not qualify for the measure select: No – Other CMS Approved Reason for patient disqualification. Mark appropriately for completion and stop abstraction. This removes the patient from the performance calculations. Stop processing.
 - b. If yes, the patient does qualify for the measure, the patient will be included in the eligible denominator for performance rate calculation. Note: Include remainder of patients listed in Web Interface that were consecutively confirmed and completed for this measure in the denominator. For the sample performance rate calculation in the flow these patients would fall into the 'd' category (eligible denominator, i.e. 411 patients). Continue processing.
3. Check to determine if the patient received an influenza immunization OR reported previous receipt. Variable Names: INFLUENZA_CODE=C4 OR CVX OR SNM.
 - a. If no, the patient did not receive an influenza immunization OR did not report previous receipt, continue processing.
 - b. If yes, the patient received an influenza immunization OR reported previous receipt, performance is met and the patient will be included in the numerator. For the sample performance rate calculation in the flow these patients would fall into the 'a' category (numerator, i.e. 350 patients). Stop processing.
4. Check to determine if the patient did Not receive an influenza immunization for a denominator exception, medical reason(s). Variable Names: ALLERGY_CODE=SNM **OR** MEDICAL_REASON=SNM.
 - a. If no, the patient did Not receive an influenza immunization for a denominator exception, medical reason(s), continue processing.
 - b. If yes, the patient did Not receive an influenza immunization for a denominator exception, medical reason(s), this is a denominator exception and the case should be subtracted from the eligible denominator. For the sample performance rate calculation in the flow these patients would fall into the 'b' category (denominator exception, i.e. 20 patients). Stop processing.
5. Check to determine if the patient did Not receive an influenza immunization for a denominator exception, patient reason(s). Variable Names: PATIENT_REASON=SNM.
 - a. If no, the patient did Not receive an influenza immunization for a denominator exception, patient reason(s), continue processing.
 - b. If yes, the patient did Not receive an influenza immunization for a denominator exception, patient reason(s), this is a denominator exception and the case should be subtracted from the eligible denominator. For the sample performance rate calculation in the flow

these patients would fall into the 'b²' category (denominator exception, i.e. 10 patients).
Stop processing.

6. Check to determine if the patient did Not receive an influenza immunization for system reason(s).
Variable Names: SYSTEM_REASON=SNM.

- a. If no, the patient did Not receive an influenza immunization for a denominator exception, system reason(s), performance is not met and should not be included in the numerator.
Stop processing.
- b. If yes, the patient did Not receive an influenza immunization for a denominator exception, system reason(s), this is a denominator exception and the case should be subtracted from the eligible denominator. For the sample performance rate calculation in the flow these patients would fall into the 'b³' category (denominator exception, i.e. 15 patients).
Stop processing.

Sample Calculation

Performance Rate Equals

Performance Met is category 'a' in the measure flow (350 patients)

Eligible Denominator is category 'd' in measure flow (411 patients)

Denominator Exception is category 'b¹ plus b² plus b³ (45 patients)

350 (Performance Met) divided by 366 (Eligible Denominator minus Denominator Exception) equals a performance rate of 95.63 percent

Calculation May Change Pending Performance Met

Patient Confirmation Flow for PREV-8

For 2014, confirmation of the “Medical Record Found”, or indicating the patient is “Not Qualified for Sample” with a reason of “In Hospice”, “Moved out of Country”, “Deceased”, or “HMO Enrollment”, will only need to be done **once** per patient. For module or measure specific reasons a patient is “Not Confirmed” or excluded for “Other CMS Approved Reason”, please refer to the associated Data Guidance.

1. Start PREV-8 Patient Confirmation Flow. Assigned patients may be randomly sampled if aged 65 years and older at the beginning of the measurement period.
2. Check to determine if Medical Record can be found
 - a. If no, Medical Record not found, mark appropriately for completion and stop abstraction. This removes the patient from the performance calculations. Stop processing.
 - b. If yes, Medical Record found, continue processing.
3. Check to determine if Patient Qualified for the sample
 - a. If no, the patient does not qualify for the sample, select the reason why and enter the date the patient became ineligible for sample. For example; In Hospice, Moved out of Country, Deceased, HMO Enrollment. Mark appropriately for completion and stop abstraction. This removes the patient from the performance calculations. Stop processing.
 - b. If yes, the patient does qualify for the sample; continue to the 2014 PREV-8 measure flow.

2014 GPRO-PREV-8 (NQF 0043): Pneumonia Vaccination Status for Older Adults

This flow applies to GPRO Web Interface

Variable names can be found in the tabs within the PREV Downloadable Resource Table. See Data Guidance for further instructions to report this measure.

1. Start processing 2014 GPRO PREV-8 (NQF 0043) Flow for the patients that qualified for sample in the PREV-8 Patient Confirmation Flow.
2. Check to determine if the patient qualified for the measure
 - a. If no, the patient did not qualify for the measure select: No – Other CMS Approved Reason for patient disqualification. Mark appropriately for completion and stop abstraction. This removes the patient from the performance calculations. Stop processing.
 - b. If yes, the patient does qualify for the measure, the patient will be included in the eligible denominator for performance rate calculations. Note: Include remainder of patients listed in Web Interface that were consecutively confirmed and completed for this measure in the denominator. For the sample performance rate calculation in the flow these patients would fall into the 'd' category (eligible denominator, i.e. 300 patients). Continue processing.
3. Check to determine if the patient has ever received a pneumococcal vaccination. Variable Names: PNEUMO_CODE= CVX OR SNM.
 - a. If no, the patient has not ever received a pneumococcal vaccination, performance is not met and should not be included in the numerator. Stop processing.
 - a. If yes, patient has ever received a pneumococcal vaccination, performance is met and the patient will be included in the numerator. For the sample performance rate calculation in the flow these patients would fall into the 'a' category (numerator, i.e. 200 patients). Stop processing.

Sample Calculation

Performance Rate Equals

Performance Met is category 'a' in the measure flow (200 patients)

Eligible Denominator is category 'd' in measure flow (300 patients)

200 (Performance Met) divided by 300 (Eligible Denominator) equals a performance rate of 66.67 percent

Calculation May Change Pending Performance Met

Patient Confirmation Flow for PREV-9

For 2014, confirmation of the “Medical Record Found”, or indicating the patient is “Not Qualified for Sample” with a reason of “In Hospice”, “Moved out of Country”, “Deceased”, or “HMO Enrollment”, will only need to be done **once** per patient. For module or measure specific reasons a patient is “Not Confirmed” or excluded for “Denominator Exclusion” or “Other CMS Approved Reason”, please refer to the associated Data Guidance.

1. Start PREV-9 Patient Confirmation Flow. Assigned patients may be randomly sampled if aged 18 years and older at the beginning of the measurement period.
2. Check to determine if Medical Record can be found
 - a. If no, Medical Record not found, mark appropriately for completion and stop abstraction. This removes the patient from the performance calculations. Stop processing.
 - b. If yes, Medical Record found, continue processing.
3. Check to determine if Patient Qualified for the sample
 - a. If no, the patient does not qualify for the sample, select the reason why and enter the date the patient became ineligible for sample. For example; In Hospice, Moved out of Country, Deceased, HMO Enrollment. Mark appropriately for completion and stop abstraction. This removes the patient from the performance calculations. Stop processing.
 - b. If yes, the patient does qualify for the sample; continue to the 2014 PREV-9 measure flow.

2014 GPRO Prev-9 (NQF 0421): Preventive Care and Screening: Body Mass Index (BMI) Screening and Follow-Up

This flow applies to GPRO Web Interface

Variable names can be found in the tabs within the PREV Downloadable Resource Table. See Data Guidance for further instructions to report this measure.

1. Start processing 2014 GPRO PREV-9 (NQF 0421) Flow for the patients that qualified for sample in the PREV-9 Patient Confirmation Flow.
2. Check to determine if the patient qualified for the measure
 - a. If no, the patient did not qualify for the measure select: Denominator Exclusion for Patient Disqualification. Mark appropriately for completion and stop abstraction. This removes the patient from the performance calculations. Stop processing.
 - b. If yes, the patient does qualify for the measure, the patient will be included in the eligible denominator for performance rate calculations.
3. Check to determine if the patient qualified for the measure
 - a. If no, the patient did not qualify for the measure select: No – Other CMS Approved Reason for patient disqualification. Mark appropriately for completion and stop abstraction. This removes the patient from the performance calculations. Stop processing.
 - b. If yes, the patient does qualify for the measure, the patient will be included in the eligible denominator for performance rate calculations. Note: Include remainder of patients listed in Web Interface that were consecutively confirmed and completed for this measure in the denominator. For the sample performance rate calculation in the flow these patients would fall into the 'd' category (eligible denominator, i.e. 411 patients). Continue processing.
4. Check to determine if the patient had a BMI calculated during the most recent visit or within the past six months of the most recent visit. Variable Names: BMI_CODE=LN OR DX_CODE=SNM.
 - a. If no, the patient did not have a BMI calculated during the most recent visit or within the past six months of the most recent visit, continue processing and proceed to step 5.
 - b. If yes, the patient had a BMI calculated during the most recent visit or within the past six months of the most recent visit, continue processing and proceed to step 7.
5. Check to determine if BMI measurement was Not performed for a denominator exception, medical reason(s). Variable Names: MEDICAL_REASON=I9 OR I10 OR SNM.
 - a. If no, the BMI measurement was Not performed for a denominator exception, medical reason(s), continue processing.
 - b. If yes, the BMI measurement was Not performed for a denominator exception, medical reason(s), this is a denominator exception and the case should be subtracted from the eligible denominator. For the sample performance rate calculation in the flow these patients would fall into the 'b1' category (denominator exception, i.e. 13 patients). Stop processing.
6. Check to determine if BMI measurement was Not performed for a denominator exception, patient Reason(s). Variable Names: PATIENT_REASON=SNM.

- a. If no, the BMI measurement was Not performed for a denominator exception, patient reason(s), performance is not met and should not be included in the numerator. Stop processing.
 - b. If yes, the BMI measurement was Not performed for a denominator exception, patient reason(s), this is a denominator exception and the case should be subtracted from the eligible denominator. For the sample performance rate calculation in the flow these patients would fall into the 'b²' category (denominator exception, i.e. 76 patients). Stop processing.
7. Check to determine if the patient's most recent BMI is within normal parameters. Variable Names: BMI_ABNORM_CODE=HCPCS **AND** DX_CODE=SNM not found.
- a. If no, the patient's most recent BMI is not within normal parameters, continue processing.
 - b. If yes, the patient's most recent BMI is within normal parameters, performance is met and the patient will be included in the numerator. For the sample performance rate calculation in the flow these patients would fall into the 'a¹' category (numerator, i.e. 95 patients). Stop processing.
8. Check to determine if the patient's follow-up plan was documented. Variable Names: BMI_ABNORM_CODE=HCPCS **OR** BMI_FOLLOW_UP_CODE=I9 OR I10 OR C4 OR HCPCS OR SNM **OR** PREV_DRUG_CODES=RXNORM (Drug EX=N).
- a. If no, the patient's BMI is not outside normal parameters AND follow-up plan was not documented, performance is not met and should not be included in the numerator. Stop processing.
 - b. If yes, the patient's BMI is outside normal parameters AND follow-up plan was documented, performance is met and the patient will be included in the numerator. For the sample performance rate calculation in the flow these patients would fall into the 'a²' category (numerator, i.e. 200 patients). Stop processing.

Sample Calculation

Performance Rate Equals

Performance Met is category 'a¹ plus a²' in the measure flow (295 patients)

Eligible Denominator is category d in measure flow (411 patients)

Denominator Exception is category 'b¹ plus b²' in measure flow (89 patients)

295 (Performance Met) divided by 322 (Eligible Denominator minus Denominator Exception) equals a performance rate of 91.61 percent

Calculation May Change Pending Performance Met

Patient Confirmation Flow for PREV-10

For 2014, confirmation of the “Medical Record Found”, or indicating the patient is “Not Qualified for Sample” with a reason of “In Hospice”, “Moved out of Country”, “Deceased”, or “HMO Enrollment”, will only need to be done **once** per patient. For module or measure specific reasons a patient is “Not Confirmed” or excluded for “Other CMS Approved Reason”, please refer to the associated Data Guidance.

1. Start PREV-10 Patient Confirmation Flow. Assigned patients may be randomly sampled if aged 18 years and older at the beginning of the measurement period.
2. Check to determine if Medical Record can be found
 - a. If no, Medical Record not found, mark appropriately for completion and stop abstraction. This removes the patient from the performance calculations. Stop processing.
 - b. If yes, Medical Record found, continue processing.
3. Check to determine if Patient Qualified for the sample
 - a. If no, the patient does not qualify for the sample, select the reason why and enter the date the patient became ineligible for sample. For example; In Hospice, Moved out of Country, Deceased, HMO Enrollment. Mark appropriately for completion and stop abstraction. This removes the patient from the performance calculations. Stop processing.
 - b. If yes, the patient does qualify for the sample; continue to the 2014 PREV-10 measure flow.

2014 GPRO Prev-10 (NQF 0028): Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention

This flow applies to GPRO Web Interface

Variable names can be found in the tabs within the PREV Downloadable Resource Table.
See Data Guidance for further instructions to report this measure.

EX represents exclusion or exception as appropriate.

1. Start processing 2014 GPRO PREV-10 (NQF 0028) Flow for the patients that qualified for sample in the PREV-10 Patient Confirmation Flow.
2. Check to determine if the patient qualified for the measure.
 - a. If no, the patient did not qualify for the measure select: No – Other CMS Approved Reason for patient disqualification. Mark appropriately for completion and stop abstraction. This removes the patient from the performance calculations. Stop processing.
 - b. If yes, the patient does qualify for the measure, the patient will be included in the eligible denominator for performance rate calculations. Note: Include remainder of patients listed in Web Interface that were consecutively confirmed and completed for this measure in the denominator. For the sample performance rate calculation in the flow these patients would fall into the 'd' category (eligible denominator, i.e. 411 patients). Continue processing.
3. Check to determine if the patient has been screened for tobacco use at least once within 24 months **AND** identified as a tobacco user. Variable Names: TOBACCO_SCREEN_CODE=LN **AND** TOBACCO_USER_CODE=SNM.
 - a. If no, the patient has not been screened for tobacco use at least once within 24 months **AND** not identified as a tobacco user, continue processing.
 - b. If yes, the patient has been screened for tobacco use at least once within 24 months **AND** identified as a tobacco user, continue processing and proceed to step 6.
4. Check to determine if the patient has been screened for tobacco use at least once within 24 months **AND** identified as a tobacco non-user. Variable Names: TOBACCO_SCREEN_CODE=LN **AND** TOBACCO_NON_USER_CODE=SNM.
 - a. If no, the patient has not been screened for tobacco use at least once within 24 months **AND** was not identified as a tobacco non-user, continue processing.
 - b. If yes, the patient has been screened for tobacco use at least once within 24 months **AND** was identified as a tobacco non-user, performance is met and the patient will be included in the numerator. For the sample performance rate calculation in the flow these patients would fall into the 'a' category (numerator, i.e. 111 patients). Stop processing.
5. Check to determine if the patient was Not screened for tobacco use for a denominator exception, medical reason(s). Variable Names: EX_CODE=SNM **OR** MEDICAL_REASON=SNM.
 - a. If no, the patient was Not screened for tobacco use for a denominator exception, medical reason(s), or screening status is unknown, performance is not met and should not be included in the numerator. Stop processing.
 - b. If yes, patient was Not screened for tobacco use for a denominator exception, medical reason(s), this is a denominator exception and the case should be subtracted from the eligible denominator. For the sample performance rate calculation in the flow these

patients would fall into the 'b' category (denominator exception, i.e. 20 patients). Stop processing.

6. Check to determine if the patient tobacco cessation counseling intervention was received if the patient was identified as a tobacco user. Variable Names: CESSA_COUNSEL_CODE=C4 OR SNM **OR** PREV_DRUG_CODES=RXNORM (Drug EX=N).
 - a. If no, the patient was identified as a tobacco user and did not receive tobacco cessation counseling intervention, performance is not met and should not be included in the numerator. Stop processing.
 - b. If yes, patient was identified as a tobacco user and received tobacco cessation counseling intervention, performance is met and the patient will be included in the numerator. For the sample performance rate calculation in the flow these patients would fall into the 'a²' category (numerator, i.e. 200 patients). Stop processing.

Sample Calculation

Performance Rate Equals

Performance Met is category 'a¹ plus a²' in the measure flow (311 patients)

Eligible Denominator is category d in measure flow (411 patients)

Denominator Exception is category b in measure flow (20 patients)

311 (Performance Met) divided by 391 (Eligible Denominator minus Denominator Exception) equals a performance rate of 79.54 percent

Calculation May Change Pending Performance Met

Patient Confirmation Flow for PREV-11

For 2014, confirmation of the “Medical Record Found”, or indicating the patient is “Not Qualified for Sample” with a reason of “In Hospice”, “Moved out of Country”, “Deceased”, or “HMO Enrollment”, will only need to be done **once** per patient. For module or measure specific reasons a patient is “Not Confirmed” or excluded for “Denominator Exclusion” or “Other CMS Approved Reason”, please refer to the associated Data Guidance.

1. Start PREV-11 Patient Confirmation Flow. Assigned patients may be randomly sampled if aged 18 years and older at the beginning of the measurement period.
2. Check to determine if Medical Record can be found
 - a. If no, Medical Record not found, mark appropriately for completion and stop abstraction. This removes the patient from the performance calculations. Stop processing.
 - b. If yes, Medical Record found, continue processing.
3. Check to determine if Patient Qualified for the sample
 - a. If no, the patient does not qualify for the sample, select the reason why and enter the date the patient became ineligible for sample. For example; In Hospice, Moved out of Country, Deceased, HMO Enrollment. Mark appropriately for completion and stop abstraction. This removes the patient from the performance calculations. Stop processing.
 - b. If yes, the patient does qualify for the sample; continue to the 2014 PREV-11 measure flow.

2014 GPRO Prev-11 (NQF N/A): Preventive Care and Screening: Screening for High Blood Pressure and Follow-Up Documented

This flow applies to GPRO Web Interface

Variable names can be found in the tabs within the PREV Downloadable Resource Table. See Data Guidance for further instructions to report this measure.

1. Start processing 2014 GPRO PREV-11 (NQF N/A) Flow for the patients that qualified for sample in the PREV-11 Patient Confirmation Flow.
2. Check to determine if the patient qualified for the measure
 - a. If no, the patient did not qualify for the measure select: Denominator Exclusion for Patient Disqualification. Mark appropriately for completion and stop abstraction. This removes the patient from the performance calculations. Stop processing.
 - b. If yes, the patient does qualify for the measure, the patient will be included in the eligible denominator for performance rate calculations.
3. Check to determine if the patient qualified for the measure
 - a. If no, the patient did not qualify for the measure select: No – Other CMS Approved Reason for patient disqualification. Mark appropriately for completion and stop abstraction. This removes the patient from the performance calculations. Stop processing.
 - b. If yes, the patient does qualify for the measure, the patient will be included in the eligible denominator for performance rate calculations. Note: Include remainder of patients listed in Web Interface that were consecutively confirmed and completed for this measure in the denominator. For the sample performance rate calculation in the flow these patients would fall into the 'd' category (eligible denominator, i.e. 411 patients). Continue processing.
4. Check to determine if the patient was screened for high blood pressure during the measurement period. Variable Names SYSTOLIC_CODE=LN AND DIASTOLIC_CODE=LN
 - a. If no, the patient was not screened for high blood pressure during the measurement period, continue processing.
 - b. If yes, the patient was screened for high blood pressure during the measurement period, proceed to step 7 and continue processing.
5. Check to determine if the patient was Not screened for high blood pressure for a denominator exception, medical reason(s). Variable Names: MEDICAL_REASON=SNM.
 - a. If no, the patient was Not screened for high blood pressure for a denominator exception, medical reason(s), continue processing.
 - b. If yes, patient was Not screened for high blood pressure for a denominator exception, medical reason(s), this is a denominator exception and the case should be subtracted from the eligible denominator. For the sample performance rate calculation in the flow these patients would fall into the 'b1' category (denominator exception, i.e. 18 patients). Stop processing.
6. Check to determine if the patient was Not screened for high blood pressure for a denominator exception, patient reason(s). Variable Names: PATIENT_REASON=SNM.

- a. If no, the patient was Not screened for high blood pressure for a denominator exception, patient reason(s), performance is not met and the patient should not be included in the numerator. Stop processing.
 - b. If yes, patient was Not screened for high blood pressure for a denominator exception, patient reason(s), this is a denominator exception and the case should be subtracted from the eligible denominator. For the sample performance rate calculation in the flow these patients would fall into the 'b²' category (denominator exception, i.e. 23 patients). Stop processing.
7. Check to determine if the patient's most recent blood pressure is within normal parameters.
Variable Names: SBP <120 AND DBP <80.
- a. If no, the patient's most recent blood pressure is not within normal parameters, continue processing.
 - b. If yes, the patient's most recent blood pressure is within normal parameters, performance is met and the patient will be included in the numerator. For the sample performance rate calculation in the flow these patients would fall into the 'a¹' category (denominator exception, i.e. 173 patients). Stop processing.
8. Check to determine if the patient's follow-up plan was documented. Variable Names:
INTERVENTION_CODE=I9 OR I10 OR HCPCS OR SNM OR DIAGNOSTIC_STUDY=LN OR
LABORATORY_TEST=LN OR PREV_DRUG_CODES=RXNORM (Drug EX=N).
- a. If no, the patient's follow-up plan was not documented, performance is not met and the patient should not be included in the numerator.
 - b. If yes, the patient's follow-up plan was documented, performance is met and the patient will be included in the numerator. For the sample performance rate calculation in the flow these patients would fall into the 'a²' category (denominator exception, i.e. 183 patients). Stop processing.

Sample Calculation

Performance Rate Equals

Performance Met is category 'a¹ plus a²' in the measure flow (356 patients)

Eligible Denominator is category 'd' in measure flow (411 patients)

Denominator Exception is category 'b¹ plus b²' in measure flow (41 patients)

356 (Performance Met) divided by 370 (Eligible Denominator minus Denominator Exception) equals a performance rate of 96.22 percent

Calculation May Change Pending Performance Met

Patient Confirmation Flow for PREV-12

For 2014, confirmation of the “Medical Record Found”, or indicating the patient is “Not Qualified for Sample” with a reason of “In Hospice”, “Moved out of Country”, “Deceased”, or “HMO Enrollment”, will only need to be done **once** per patient. For module or measure specific reasons a patient is “Not Confirmed” or excluded for “Denominator Exclusion” or “Other CMS Approved Reason”, please refer to the associated Data Guidance.

1. Start PREV-12 Patient Confirmation Flow. Assigned patients may be randomly sampled if aged 12 years and older at the beginning of the measurement period.
2. Check to determine if Medical Record can be found
 - a. If no, Medical Record not found, mark appropriately for completion and stop abstraction. This removes the patient from the performance calculations. Stop processing.
 - b. If yes, Medical Record found, continue processing.
3. Check to determine if Patient Qualified for the sample
 - a. If no, the patient does not qualify for the sample, select the reason why and enter the date the patient became ineligible for sample. For example; In Hospice, Moved out of Country, Deceased, HMO Enrollment. Mark appropriately for completion and stop abstraction. This removes the patient from the performance calculations. Stop processing.
 - b. If yes, the patient does qualify for the sample; continue to the 2014 PREV-12 measure flow.

2014 GPRO-PREV-12 (NQF 0418): Preventive Care and Screening: Screening for Clinical Depression and Follow-Up Plan

This flow applies to GPRO Web Interface

Variable names can be found in the tabs within the PREV Downloadable Resource Table.
See Data Guidance for further instructions to report this measure.
EX represents exclusion or exception as appropriate.

1. Start processing 2014 GPRO PREV-12 (NQF 0418) Flow for the patients that qualified for sample in the PREV-12 Patient Confirmation Flow.
2. Check to determine if the patient qualified for the measure
 - a. If no, the patient did not qualify for the measure select: Denominator Exclusion for patient disqualification. Mark appropriately for completion and stop abstraction. This removes the patient from the performance calculations. Stop processing.
 - b. If yes, the patient does qualify for the measure, the patient will be included in the eligible denominator for performance rate calculations.
3. Check to determine if the patient qualified for the measure
 - a. If no, the patient did not qualify for the measure select: No – Other CMS Approved Reason for patient disqualification. Mark appropriately for completion and stop abstraction. This removes the patient from the performance calculations. Stop processing.
 - b. If yes, the patient does qualify for the measure, the patient will be included in the eligible denominator for performance rate calculations. Note: Include remainder of patients listed in Web Interface that were consecutively confirmed and completed for this measure in the denominator. For the sample performance rate calculation in the flow these patients would fall into the 'd' category (eligible denominator, i.e. 411 patients). Continue processing.
4. Check to determine if the patient was screened for clinical depression using an age appropriate standardized tool during the measurement period. Variable Names: SCREENING_CODE=LN **OR** NEG_SCREENING_CODE=SNM **OR** POS_SCREENING_CODE=SNM].
 - a. If no, the patient was not screened for clinical depression using an age appropriate standardized tool during the measurement period, continue processing and proceed to step 7.
 - b. If yes, the patient was screened for clinical depression using an age appropriate standardized tool during the measurement period, continue processing.
5. Check to determine if the patient had a positive screen for clinical depression during the measurement period. Variable Name: POS_SCREENING_CODE=SNM
 - a. If no, the patient did not have a positive screen for clinical depression during the measurement period, performance is met and the patient will be included in the numerator. For the sample performance rate calculation in the flow these patients would fall into the 'a1' category (numerator, i.e. 50 patients). Stop processing.
 - b. If yes, patient had a positive screen for clinical depression during the measurement period, continue processing.

6. Check to determine if the patient had a follow-up plan for clinical depression documented during the measurement period. Variable Names: INTERVENTION_CODE=SNM **OR** PREV_DRUG_CODES=RXNORM (Drug EX=N).
 - a. If no, the patient did not have a follow-up plan for clinical depression documented during the measurement period, performance is not met and the patient should not be included in the numerator. Stop processing.
 - b. If yes, the patient had a follow-up plan for clinical depression documented during the measurement period, performance is met and the patient will be included in the numerator. For the sample performance rate calculation in the flow these patients would fall into the 'a²' category (numerator, i.e. 276 patients). Stop processing.

7. Check to determine if the patient was Not screened for clinical depression using a standardized tool for a denominator exception, medical reason(s). Variable Names: DX_CODE=I9 OR I10 OR SNM **OR** EX_CODE=SNM **OR** MEDICAL_REASON=SNM.
 - a. If no, the patient was Not screened for clinical depression using a standardized tool for a denominator exception, medical reason(s), continue processing.
 - b. If yes, the patient was Not screened for clinical depression using a standardized tool for a denominator exception, medical reason(s), this is a denominator exception and the case should be subtracted from the eligible denominator. For the sample performance rate calculation in the flow these patients would fall into the 'b¹' category (denominator exception, i.e. 18 patients). Stop processing.

8. Check to determine if the patient was Not screened for clinical depression using a standardized tool for a denominator exception, patient reason(s). Variable Names: PATIENT_REASON=SNM.
 - a. If no, the patient Not screened for clinical depression using a standardized tool for a denominator exception, patient reason(s), performance is not met and the patient should not be included in the numerator. Stop processing.
 - b. If yes, the patient was Not screened for clinical depression using a standardized tool for a denominator exception, patient reason(s), this is a denominator exception and the case should be subtracted from the eligible denominator. For the sample performance rate calculation in the flow these patients would fall into the 'b²' category (denominator exception, i.e. 23 patients). Stop processing.

Sample Calculation

Performance Rate Equals

Performance Met is category 'a¹ plus a²' in the measure flow (326 patients)

Eligible Denominator is category d in measure flow (411 patients)

Denominator Exception is category 'b¹ plus b²' in measure flow (41 patients)

326 (Performance Met) divided by 370 (Eligible Denominator minus Denominator Exception) equals a performance rate of 88.11 percent

Calculation May Change Pending Performance Met