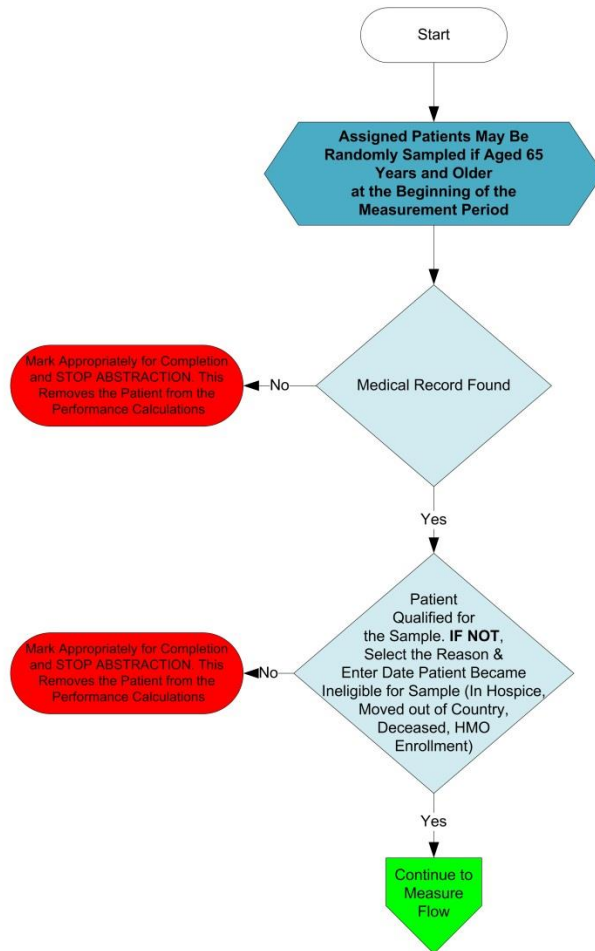
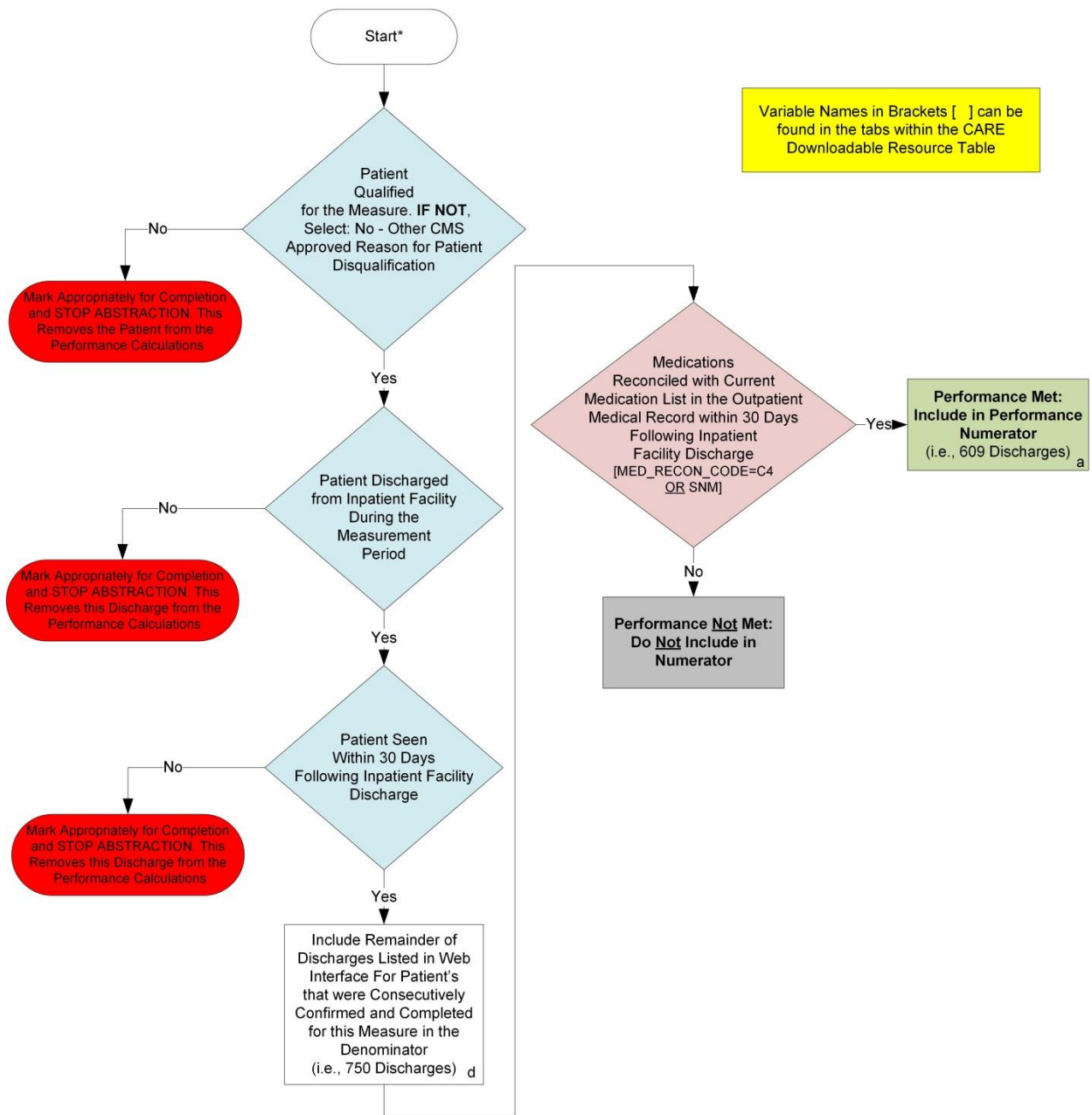


Patient Confirmation Flow for CARE-1

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 CARE-1 (NQF 0097): Medication Reconciliation
 This flow applies to GPRO Web Interface
 Note: This measure applies to each inpatient discharge



SAMPLE CALCULATION:

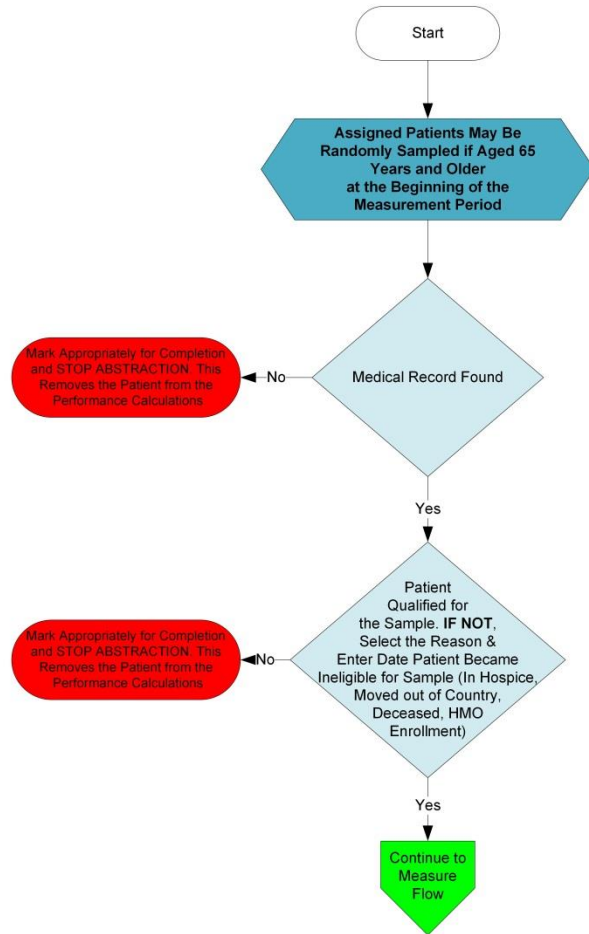
Performance Rate=
 Performance Met (a = 609 Discharges) _____ 609 Discharges = 81.20%
 Eligible Denominator (d= 750 Discharges) = 750 Discharges

CALCULATION MAY CHANGE PENDING PERFORMANCE MET ABOVE

*See Data Guidance for further instructions to report this measure

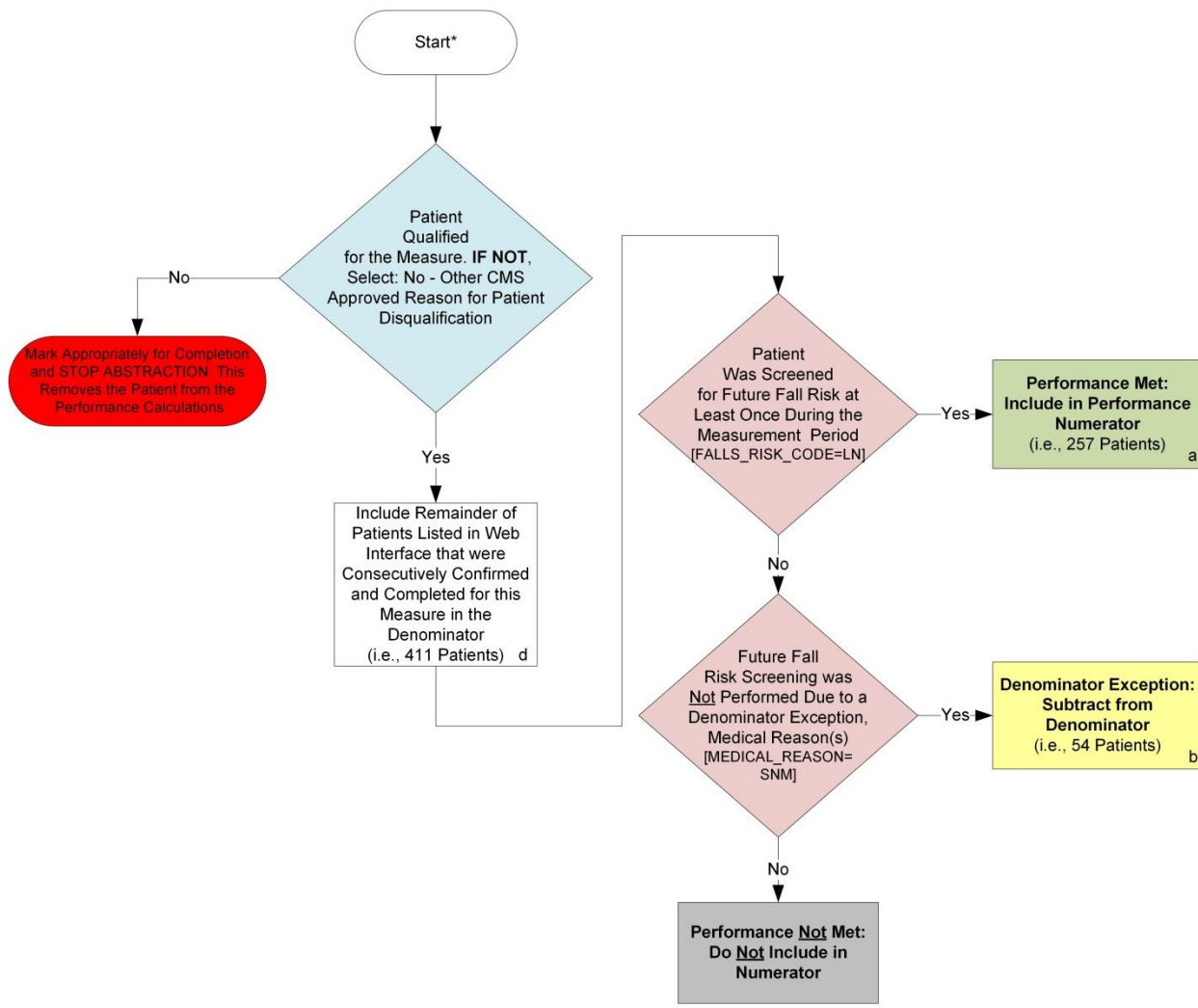
Patient Confirmation Flow for CARE-2

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 CARE-2 (NQF 0101): Falls: Screening for Future Fall Risk
 This flow applies to the GPRO Web Interface

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



SAMPLE CALCULATION:

Performance Rate=

$$\frac{\text{Performance Met (a=257 Patients)}}{\text{Eligible Denominator (d=411 Patients) - Denominator Exception (b=54 Patients)}} = \frac{257 \text{ Patients}}{357 \text{ Patients}} = 71.99\%$$

CALCULATION MAY CHANGE PENDING PERFORMANCE MET ABOVE

*See Data Guidance for further instructions to report this measure

Patient Confirmation Flow for CARE-1

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 CARE-1 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 GPRO-CARE-1 measure flow.

2014 GPRO CARE-1 (NQF 0097): Medication Reconciliation

This flow applies to GPRO Web Interface

Note: This measure applies to each inpatient discharge

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

1. Start processing 2014 GPRO CARE-1 (NQF 0097) Flow for the patients that qualified for sample in the CARE-1 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, continue processing.
3. Check to determine if the patient was discharged from an inpatient facility during the measurement period.
 - a. If no, the patient was not discharged from an inpatient facility during the measurement period, mark appropriately for completion and stop abstraction. This removes the patient from the performance calculations. Stop processing.
 - b. If yes, the patient was discharged from an inpatient facility during the measurement period, continue processing.
4. Check to determine if the patient was seen within 30 days following the inpatient facility discharge.
 - a. If no, the patient was not seen within 30 days following the inpatient facility discharge, mark appropriately for completion and stop abstraction. This removes the patient from the performance calculations. Stop processing.
 - b. If yes, the patient was seen within 30 days following the inpatient facility discharge, the patient is included in the eligible denominator for performance rate calculations. Note: Include remainder of patients listed in the 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. 750 discharges). Continue processing.
5. Check to determine if the medications were reconciled with the current medication list in the outpatient medical record within 30 days following inpatient facility discharge. Variable Names: MED_RECON_CODE=C4 OR SNM.
 - a. If no, the medications were not reconciled with the current medication list in the outpatient medical record within 30 days following the inpatient facility discharge, performance is not met and should not be included in the numerator. Stop processing.
 - b. If yes, the medications were reconciled with the current medication list in the outpatient medical record within 30 days following the inpatient facility discharge, performance is met and the patient is included in the numerator. For the sample performance rate calculation in the flow these patients would fall into the 'a' category (numerator, i.e. 609 discharges). Stop processing.

Sample Calculation

Performance Rate Equals

Performance Met is category 'a' in the measure flow (609 discharges)

Eligible Denominator is category 'd' in measure flow (750 discharges)

609 (Performance Met) divided by 750 (Eligible Denominator) equals a performance rate of 81.20 percent

Calculation May Change Pending Performance Met

Patient Confirmation Flow for CARE-2

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 CARE-2 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 GPRO-CARE-2 measure flow.

2014 GPRO CARE-2 (NQF 0101): Falls: Screening for Future Fall Risk

This flow applies to GPRO Web Interface

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

1. Start processing 2014 GPRO CARE-2 (NQF 0101) Flow for the patients that qualified for sample in the CARE-2 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 the 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 was screened for future fall risk at least once during the measurement period. Variable Names: FALLS_RISK_CODE=LN.
 - a. If no, the patient was not was not screened for future fall risk at least once during the measurement period, continue processing.
 - b. If yes, the patient was screened for future fall risk at least once 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. 257 patients). Stop processing.
4. Check to determine if the patient was Not screened for future fall risk due to a denominator exception, medical reason(s). Variable Names MEDICAL_REASON=SNM.
 - a. If no, the patient was Not screened for future fall risk due to a denominator exception, medical reason(s), performance is not met and should not be included in the numerator. Stop processing.
 - b. If yes, the patient was Not screened for future fall risk due to 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. 54 patients). Stop processing.

Sample Calculation

Performance Rate Equals

Performance Met is category 'a' in the measure flow (257 patients)

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

Denominator Exception is category 'b' in measure flow (54 patients)

257 (Performance Met) divided by 357 (Eligible Denominator minus Denominator Exception) equals a performance rate of 71.99 percent

Calculation May Change Pending Performance Met