

2023 Q03 Measure ID	Measure Title	Measure Description	Denominator	Numerator	Denominator Exclusions	Numerator Exclusions	High Priority Measure	High Priority Type	Measure Type	Include Teeth/Visit	Event Measure	Prevention Measure	Continuous Variable Measure	Risk Measure	Number and/or Range of Outcomes and/or Events to be Measured	Number of Performance Data to be Submitted and Audited	Overall Performance Rate	Risk-Adjusted Status	Submission Pathway	Core Setting	If Multiple Core Settings, Indicate the Core Setting Rate
AC2P19	Emergency Department (ED) for Missed Heat Treatment for Patients Aged 18 Years and Older	Percentage of emergency department visits for patients aged 18 years and older who presented with a skin rash and were discharged to a non-emergency care provider within 24 hours of the emergency care provider.	Emergency department visits for patients aged 18 years and older who presented with a skin rash and were discharged to a non-emergency care provider.	Emergency department visits for patients who have an indication for a heat CT.	None	None	Yes	Appropriate Use	Process	No	No	No	No	No	1	1	100% Performance Rate	No	Traditional MIPS	Emergency Department and Outpatient	
AC2P21	Completion Status of Patient Interviewing with Chief of Bed or Caregiver or Bedside	Percentage of emergency department visits for patients aged 18 years and older with an emergency department diagnosis of stroke who were interviewed by a stroke care provider.	Emergency department visits for patients aged 18 years and older with an emergency department diagnosis of stroke.	Emergency department visits for patients who were interviewed by a stroke care provider.	COVID-19	None	Yes	Appropriate Use	Process	No	Yes	Yes	No	No	1	1	100% Performance Rate	No	Traditional MIPS, MAP	Emergency Department and Outpatient	
AC2P22	Appropriate Emergency Department Utilization (ED) for Pediatric Epilepsy	Percentage of emergency department visits for patients aged 18 years and older with a CT diagnosis of seizure disorder who were discharged to a non-emergency care provider.	Emergency department visits for patients aged 18 years and older with a CT diagnosis of seizure disorder.	Emergency department visits for patients who were discharged to a non-emergency care provider.	None	None	Yes	Appropriate Use	Process	No	No	No	No	No	1	1	100% Performance Rate	No	Traditional MIPS	Emergency Department and Outpatient	
AC2P23	Tobacco Use Screening and Cessation Interventions for Patients with Asthma and COPD	Percentage of patients aged 18 years and older with a diagnosis of asthma or COPD seen in the ED and discharged to a non-emergency care provider who were screened for tobacco use.	Patients aged 18 years and older with a diagnosis of asthma or COPD seen in the ED and discharged to a non-emergency care provider.	Patients who were screened for tobacco use during an ED encounter.	None	None	No	NA	Process	No	No	Yes	No	No	1	1	100% Performance Rate	No	Traditional MIPS	Emergency Department and Outpatient	
AC2P24	Stroke Management: Risk, Stroke, Lactate, and Discharge to Home	Percentage of emergency department visits for patients aged 18 years and older with a CT diagnosis of stroke who were discharged to a non-emergency care provider.	Emergency department visits for patients aged 18 years and older with a CT diagnosis of stroke.	Emergency department visits for patients who were discharged to a non-emergency care provider.	None	None	Yes	Outcome	Outcome	No	No	No	No	No	1	1	100% Performance Rate	No	Traditional MIPS	Emergency Department and Outpatient	
AC2P25	Appropriate Foley Catheter use in the Emergency Department	Percentage of emergency department visits for patients aged 18 years and older with a CT diagnosis of urinary tract infection who were discharged to a non-emergency care provider.	Emergency department visits for patients aged 18 years and older with a CT diagnosis of urinary tract infection.	Emergency department visits for patients who were discharged to a non-emergency care provider.	None	None	Yes	Patient Safety	Process	No	No	No	No	No	1	1	100% Performance Rate	No	Traditional MIPS	Emergency Department and Outpatient	
AC2P26	Stroke Management: Risk, Stroke, Lactate, and Discharge to Home	Percentage of emergency department visits for patients aged 18 years and older with a CT diagnosis of stroke who were discharged to a non-emergency care provider.	Emergency department visits for patients aged 18 years and older with a CT diagnosis of stroke.	Emergency department visits for patients who were discharged to a non-emergency care provider.	Patients with stroke who are not in the ED.	None	No	NA	Process	No	No	Yes	No	No	1	1	100% Performance Rate	No	Traditional MIPS	Emergency Department and Outpatient	
AC2P27	ED Median Time from ED arrival to ED departure for all Adult Patients	Time (in minutes) from ED arrival to ED departure for all adult patients.	All emergency department encounters for patients aged 18 years and older with a documented discharge disposition.	Time (in minutes) from ED arrival to ED departure for all adult patients.	Transfers, Psychiatric, and mental health patients; Patients who are not in the ED; Patients transferred to observation - Admissions.	None	Yes	Outcome	Outcome	No	No	No	No	No	1	1	100% Performance Rate	No	Traditional MIPS, MAP	Emergency Department and Outpatient	
AC2P28	ED Median Time from ED arrival to ED departure for all Pediatric Patients	Time (in minutes) from ED arrival to ED departure for all pediatric patients.	All emergency department encounters for patients aged 17 years and younger with a documented discharge disposition.	Time (in minutes) from ED arrival to ED departure for all pediatric patients.	Transfers, Psychiatric, and mental health patients; Patients who are not in the ED; Patients transferred to observation - Admissions.	None	Yes	Outcome	Outcome	No	No	No	No	No	1	1	100% Performance Rate	No	Traditional MIPS	Emergency Department and Outpatient	
AC2P29	Appropriate Emergency Department Utilization of Lumbar Pain Imaging for Patients Aged 18 Through 74 Years	Percentage of emergency department visits for patients aged 18 years and older with a CT diagnosis of low back pain who were discharged to a non-emergency care provider.	Emergency department visits for patients aged 18 years and older with a CT diagnosis of low back pain.	Emergency department visits for patients who were discharged to a non-emergency care provider.	None	None	Yes	Appropriate Use	Process	No	No	Yes	No	No	1	1	100% Performance Rate	No	Traditional MIPS, MAP	Emergency Department and Outpatient	
AC2P30	Appropriate Use of Imaging for Recurrent Rose Cold	Percentage of emergency department visits for patients aged 18 years and older with a CT diagnosis of recurrent rose cold who were discharged to a non-emergency care provider.	Emergency department visits for patients aged 18 years and older with a CT diagnosis of recurrent rose cold.	Emergency department visits for patients who were discharged to a non-emergency care provider.	None	None	Yes	Appropriate Use	Process	No	No	Yes	No	No	1	1	100% Performance Rate	No	Traditional MIPS	Emergency Department and Outpatient	
AC2P31	Appropriate Utilization of Cocaine Assessment with Discharge by Therapeutic Drug Monitoring in the Emergency Department	Percentage of emergency department visits for patients aged 18 years and older with a CT diagnosis of cocaine use who were discharged to a non-emergency care provider.	Emergency department visits for patients aged 18 years and older with a CT diagnosis of cocaine use.	Emergency department visits for patients who were discharged to a non-emergency care provider.	None	None	Yes	Appropriate Use	Process	No	No	Yes	No	No	1	1	100% Performance Rate	No	Traditional MIPS	Emergency Department and Outpatient	
AC2P32	Follow-Up Care Coordination Documented in Discharge Summary	Percentage of patients aged 18 years and older with a CT diagnosis of stroke who were discharged to a non-emergency care provider.	Emergency department visits for patients aged 18 years and older with a CT diagnosis of stroke.	Emergency department visits for patients who were discharged to a non-emergency care provider.	None	None	Yes	CAH Coordination	Process	No	No	No	No	No	1	1	100% Performance Rate	No	Traditional MIPS	Emergency Department and Outpatient, Hospital	
AC2P33	Chief of Bed - Admission of admission for adult patients who leave overnight	Percentage of adult patients admitted to the Emergency Department with the chief of bed present and seen discharged.	Adult patients 18-64 years of age with ED diagnosis of stroke who were discharged.	Adult patients 18-64 years of age with ED diagnosis of stroke who were discharged.	None	None	Yes	Outcome	Outcome	No	No	No	No	No	1	1	100% Performance Rate	No	Traditional MIPS	Emergency Department and Outpatient	
AC2P34	Stroke - Admission of admission for adult patients who leave overnight	Percentage of emergency department visits for patients aged 18 years and older with a CT diagnosis of stroke who were discharged to a non-emergency care provider.	Emergency department visits for patients aged 18 years and older with a CT diagnosis of stroke.	Emergency department visits for patients who were discharged to a non-emergency care provider.	None	None	Yes	Outcome	Outcome	No	No	Yes	No	No	1	1	100% Performance Rate	No	Traditional MIPS	Emergency Department and Outpatient	
AC2P35	Admission of Chief of Bed in pediatric patients with Asthma, Bronchitis, or Croup	Percentage of ED visits for pediatric patients with Asthma, Bronchitis, or Croup for whom the Chief of Bed was present.	Emergency department visits for pediatric patients with Asthma, Bronchitis, or Croup.	Emergency department visits for pediatric patients with Asthma, Bronchitis, or Croup.	None	None	Yes	Appropriate Use	Process	No	No	No	No	No	1	1	100% Performance Rate	No	Traditional MIPS	Emergency Department and Outpatient	

AC2FD	Avoidance of Opioid therapy for acute pain.	All acute encounters for patients aged 18 years and older with diagnosed acute pain, with none not prescribed Opioid or Opioid	All acute encounters for patients aged 18 years and older prescribed by the Diggle Professional (the Diggle Professional)	All acute encounters for patients who were not prescribed Opioid or Opioid	Patients with active cancer, palliative care, and/or the case	Opioid prescribed for acute dental trauma (e.g., tooth or hand fracture, etc.)	None	Yes	Opioid/MSF	Process	No	No	Yes	No	No	N/A	1	1st Performance Rate	No	Traditional MSF	Emergency Department and Services	N/A
CCP3B	Head CT for Patients with Uncomplicated Syncope	Percentage of Adult Syncope Patients Who Did Not Receive Head CT Scan Unjustified by the Provider	Any patient greater than or equal to 18 years of age, presented to the Diggle Professional in the Emergency Department, Urgent Care Clinic, Palliative Care or Home Care with a Full Diagnostic of Syncope (Not including transitory, atypical, or idiopathic)	Syncope Patients Who Did Not Have a Head CT Ordered by the Provider	None	Patients who did have a Head CT ordered for medical reasons documented in the Diggle Professional's chart (including neurological, trauma, acute intracranial hemorrhage, acute subdural or intracranial hemorrhage, stroke, or aneurysm)	None	Yes	Appropriate Use	Process	Yes	No	Yes	No	No	N/A	1	1st Performance Rate	No	Traditional MSF	Emergency Care, Urgent Care, Emergency Department and Services, Hospital Inpatient	N/A
NA	18 Beta2-agonist and Treatment of Inpatient Women at Risk of Low Blood Exposure	Percentage of Inpatient Adult 18 Years old and Older at Risk of Low Blood Exposure Who Did Not Receive 18 Beta2-agonist or an alternative therapy (e.g., intravenous magnesium sulfate) if the provider	All inpatient Female greater than or equal to 18 Years of age who were 18 Beta2-agonist prescribed by the Diggle Professional (the Diggle Professional) and received an alternative therapy (including transfusion, diuretic, or other medical management)	Percentage of Inpatient Adult 18 Years old and Older at Risk of Low Blood Exposure Who Did Not Receive 18 Beta2-agonist or an alternative therapy (including transfusion, diuretic, or other medical management)	None	Patients who did not have 18 Beta2-agonist treatment of all not receive an order (18 Beta2-agonist therapy) if the provider documented the Diggle Professional's chart (including transfusion, diuretic, or other medical management)	None	No	N/A	Process	Yes	No	Yes	No	No	N/A	1	1st Performance Rate	No	Traditional MSF	Emergency Department and Services	N/A
CCP3B	Avoidance of Opioids for Low Back Pain or Migraine	Percentage of Patients with Low Back Pain or Migraine Who Were Not Prescribed an Opioid	Any patient greater than or equal to 18 years of age, presented to the Diggle Professional (the Diggle Professional) for a diagnosis of Low Back Pain or Migraine	Patients who were not prescribed an Opioid	Patients with active cancer, palliative care, and/or the case	Opioid prescribed for medical reasons documented in the Diggle Professional's chart (including neurological, trauma, acute intracranial hemorrhage, acute subdural or intracranial hemorrhage, stroke, or aneurysm)	None	Yes	Opioid/MSF	Process	Yes	No	Yes	No	No	N/A	1	1st Performance Rate	No	Traditional MSF, MSF	Emergency Care, Urgent Care, Emergency Department and Services, Hospital Inpatient, Outpatient Services	N/A
CCP3B	Clinical Decision Support for Urinary Catheter Use in Outpatient Patients	Percentage of Urgent Care Patients Who Have Prescribed Urinary Catheter Within 30 Minutes of Urgent Care Clinic (UCC) Arrival	Any Patient Encountered by the Diggle Professional (MD/DO/PA/NP) in the Urgent Care Clinic	Urgent Care Patients Who Have Prescribed (MD/DO/PA/NP) Urinary Catheter Within 30 Minutes of Urgent Care Clinic Arrival	None	None	None	Yes	Patient Safety	Process	Yes	No	Yes	No	No	N/A	1	1st Performance Rate	No	Traditional MSF	Emergency Care, Urgent Care	N/A
CCP3D	Discharge Prescription of Anticholinergic Agents	Percentage of Discharge Prescriptions of Anticholinergic Agents Prescribed by an Acute Care Facility Who Were Prescribed Without a Discharge	Any patient prescribed by the Diggle Professional in the acute care setting (UCC, ED, Urgent Care, Home Care, Palliative Care, etc.) with a diagnosis of Acute Care Facility who were prescribed Anticholinergic Agents	Patients who were not prescribed Anticholinergic Agents	Patients with Prescription National ID, Educated About Medication at Discharge	None	None	Yes	Opioid/MSF	Process	Yes	No	Yes	No	No	N/A	1	1st Performance Rate	No	Traditional MSF	Emergency Department and Services, Hospital Inpatient	N/A
CCP3E	Appropriate Treatment of Psychosis and Agitation in the Emergency Department	Percentage of Adult Patients With Psychosis or Agitation Who Were Observed on One Antipsychotic Medication in the Emergency Department	Any patient greater than or equal to 18 years of age, presented to the Diggle Professional in the Emergency Department (ED), Urgent Care, Home Care, or Palliative Care with a diagnosis of Psychosis or Agitation	Patients who were not prescribed at least one oral dose of a typical or atypical antipsychotic or an antipsychotic combination medication	None	One dose of a typical or atypical antipsychotic or an antipsychotic combination medication not prescribed for medical reasons documented in the Diggle Professional's chart (including transfusion, diuretic, or other medical management)	None	No	N/A	Process	Yes	No	Yes	No	No	N/A	1	1st Performance Rate	No	Traditional MSF	Emergency Department and Services	N/A
CCP3E	Avoidance of Long-Acting (LA) or Extended-Release (ER) Opioid Prescriptions for Acute Pain	Percentage of Adult Patients Who Were Prescribed an Opioid with LA or ER formulation for Acute Pain	Any patient greater than or equal to 18 years of age, presented to the Diggle Professional in the Emergency Department (ED), Urgent Care, Home Care, or Palliative Care with a diagnosis of Acute Pain	Patients who were not prescribed a long-acting (LA) or extended-release (ER) opioid for acute pain, and any opioid prescription for greater than 3 days, duration 90 days, or more	None	LA/ER formulation opioid prescribed for medical reasons documented in the Diggle Professional's chart (including transfusion, diuretic, or other medical management)	None	Yes	Opioid/MSF	Process	Yes	No	Yes	No	No	N/A	1	1st Performance Rate	No	Traditional MSF	Emergency Care, Urgent Care, Emergency Department and Services, Hospital Inpatient, Outpatient Services	N/A
CCP3E	Appropriate Utilization of Intravenous for Cellular	Percentage of Patients with Cellular Who Did Not Receive Intravenous (IV) Medication or Specific Test for Cellular	Any patient greater than or equal to 18 years of age, presented to the Diggle Professional in the Emergency Department (ED), Urgent Care, Home Care, or Palliative Care with a diagnosis of Cellular	Patients who did not receive Intravenous (IV) Medication or Specific Test for Cellular	None	None	None	Yes	Appropriate Use	Process	Yes	No	Yes	No	No	N/A	1	1st Performance Rate	No	Traditional MSF	Emergency Department and Services, Hospital Inpatient	N/A
AC2FD	Avoidance of Acute High-Risk Prescriptions in patients, patients at discharge	The percentage of acute 65 years of age and older who were prescribed an Acute High-Risk Medication at discharge	All patients 65 years of age and older with an ED visit and discharged	All patients included in the Denominator, who were prescribed members of the acute high-risk medications	Patients with any of the following discharge diagnosis: Acute Myocardial Infarction, Heart Failure, Atrial Fibrillation, Stroke, or other medical condition	None	None	Yes	Appropriate Use	Process	No	Yes	Yes	No	No	N/A	1	1st Performance Rate	No	Traditional MSF	Emergency Department and Services	N/A