

**Quality ID #7 (NQF 0070): Coronary Artery Disease (CAD): Beta-Blocker Therapy – Prior Myocardial Infarction (MI) or Left Ventricular Systolic Dysfunction (LVEF < 40%)**

- National Quality Strategy Domain: Effective Clinical Care
- Meaningful Measure Area: Management of Chronic Conditions

**2020 COLLECTION TYPE:**

MIPS CLINICAL QUALITY MEASURES (CQMS)

**MEASURE TYPE:**

Process

**DESCRIPTION:**

Percentage of patients aged 18 years and older with a diagnosis of coronary artery disease seen within a 12-month period who also have a prior MI or a current or prior LVEF < 40% who were prescribed beta-blocker therapy

**INSTRUCTIONS:**

This measure is to be submitted a minimum of **once per performance period** for all patients with a diagnosis of CAD seen during the performance period. Only patients who had at least two denominator-eligible visits during the performance period will be counted for Submission Criteria 1 and Submission Criteria 2 of this measure. This measure may be submitted by Merit-based Incentive Payment System (MIPS) eligible clinicians who perform the quality actions described in the measure for the primary management of patients with CAD based on the services provided and the measure-specific denominator coding.

The MIPS eligible clinician should submit data on one of the submission criteria, depending on the clinical findings. If the patient has CAD or history of cardiac surgery and a current or prior LVEF < 40%, use Submission Criteria 1. If the patient has CAD or history of cardiac surgery and has a prior (within the past 3 years) MI, use Submission Criteria 2. The 3-year lookback period for the prior MI should be from the time of the encounter that is used to qualify for the denominator and evaluate the numerator. If the patient has both prior (within the past 3 years) MI and LVEF < 40%, the MIPS eligible clinician should submit quality-data codes for Submission Criteria 1 and this will count as appropriate submission for this patient.

**Measure Submission Type:**

Measure data may be submitted by individual MIPS eligible clinicians, groups, or third party intermediaries. The listed denominator criteria are used to identify the intended patient population. The numerator options included in this specification are used to submit the quality actions as allowed by the measure. The quality-data codes listed do not need to be submitted by MIPS eligible clinicians, groups, or third party intermediaries that utilize this modality for submissions; however, these codes may be submitted for those third party intermediaries that utilize Medicare Part B claims data. For more information regarding Application Programming Interface (API), please refer to the Quality Payment Program (QPP) website.

**THERE ARE TWO SUBMISSION CRITERIA FOR THIS MEASURE:**

- 1) All patients with a diagnosis of CAD or history of cardiac surgery who have a current or prior LVEF < 40%

OR

- 2) All patients with a diagnosis of CAD or history of cardiac surgery who have a prior (within the past 3 years) MI

**SUBMISSION CRITERIA 1: ALL PATIENTS WITH A DIAGNOSIS OF CAD OR HISTORY OF CARDIAC SURGERY WHO HAVE A CURRENT OR PRIOR LVEF < 40%**

**DENOMINATOR (SUBMISSION CRITERIA 1):**

All patients aged 18 years and older with a diagnosis of coronary artery disease seen within a 12-month period who also have a current or prior LVEF < 40%

***DENOMINATOR NOTE:** The history of cardiac surgery serves as a proxy for a diagnosis of CAD; a diagnosis is not needed if the patient has documented history of cardiac surgery. Only one of the two criteria – a diagnosis of CAD or history of cardiac surgery proxy – is required. To meet the denominator criteria, a patient must have an active diagnosis of CAD (or proxy documented) at the time of the encounter that is used to qualify for the denominator and evaluate the numerator.*

*The encounter used to evaluate the numerator counts as 1 of the 2 encounters required for denominator inclusion. If the patient meets the CAD diagnosis criterion, the diagnosis needs to be active only at the encounter being evaluated for the numerator action. If the patient meets the proxy of a history of cardiac surgery inclusion criterion, there should be documentation of the proxy at the encounter being evaluated for the numerator action.*

*\*Signifies that this CPT Category I code is a non-covered service under the Medicare Part B Physician Fee Schedule (PFS). These non-covered services should be counted in the denominator population for MIPS QOMs.*

**Denominator Criteria (Eligible Cases) 1:**

Patients aged ≥ 18 years on date of encounter

**AND**

**Diagnosis for coronary artery disease (ICD-10-CM):** I20.0, I20.1, I20.8, I20.9, I24.0, I24.1, I24.8, I24.9, I25.10, I25.110, I25.111, I25.118, I25.119, I25.5, I25.6, I25.700, I25.701, I25.708, I25.709, I25.710, I25.711, I25.718, I25.719, I25.720, I25.721, I25.728, I25.729, I25.730, I25.731, I25.738, I25.739, I25.750, I25.751, I25.758, I25.759, I25.760, I25.761, I25.768, I25.769, I25.790, I25.791, I25.798, I25.799, I25.810, I25.811, I25.812, I25.82, I25.83, I25.89, I25.9, Z95.1, Z95.5, Z98.61

**OR**

**History of cardiac surgery (CPT):** 33140, 33510, 33511, 33512, 33513, 33514, 33516, 33533, 33534, 33535, 33536, 92920, 92924, 92928, 92933, 92937, 92941, 92943, 92980, 92981, 92982, 92984, 92995, 92996

**AND**

**Patient encounter during performance period – to be used for numerator evaluation (CPT):** 99201, 99202, 99203, 99204, 99205, 99212, 99213, 99214, 99215, 99241\*, 99242\*, 99243\*, 99244\*, 99245\*, 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, 95, POS 02

**AND**

**At least one additional patient encounter during performance period (CPT):** 99201, 99202, 99203, 99204, 99205, 99212, 99213, 99214, 99215, 99241\*, 99242\*, 99243\*, 99244\*, 99245\*, 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

**WITH OR WITHOUT**

Telehealth Modifier: GQ, GT, 95, POS 02

**AND**

Left ventricular ejection fraction (LVEF) < 40%: G8694

**NUMERATOR (SUBMISSION CRITERIA 1):**

Patients who were prescribed beta-blocker therapy

**Definitions:**

**Prescribed** – May include prescription given to the patient for beta-blocker therapy at one or more visits in the measurement period OR patient already taking beta-blocker therapy as documented in current medication list.

**Beta-blocker Therapy** – For patients with prior LVEF < 40%, beta-blocker therapy includes the following: bisoprolol, carvedilol, or sustained release metoprolol succinate.

**NUMERATOR NOTE:** *To meet the intent of the measure, the numerator quality action must be performed at the encounter at which the active diagnosis of CAD or history of cardiac surgery proxy is documented. Denominator Exception(s) are determined on the date of the denominator-eligible encounter.*

**Numerator Options:**

<b><u>Performance Met:</u></b>	Beta-blocker therapy prescribed or currently being taken (G9189)
<b><u>OR</u></b>	
<b><u>Denominator Exception:</u></b>	Documentation of medical reason(s) for not prescribing beta-blocker therapy (e.g., allergy, intolerance, other medical reasons) (G9190)
<b><u>OR</u></b>	
<b><u>Denominator Exception:</u></b>	Documentation of patient reason(s) for not prescribing beta-blocker therapy (e.g., patient declined, other patient reasons) (G9191)
<b><u>OR</u></b>	
<b><u>Denominator Exception:</u></b>	Documentation of system reason(s) for not prescribing beta-blocker therapy (e.g., other reasons attributable to the health care system) (G9192)
<b><u>OR</u></b>	
<b><u>Performance Not Met:</u></b>	Beta-blocker therapy not prescribed, reason not given (G9188)

**OR**

**SUBMISSION CRITERIA 2: ALL PATIENTS WITH A DIAGNOSIS OF CAD OR HISTORY OF CARDIAC SURGERY WHO HAVE A PRIOR (WITHIN THE PAST 3 YEARS) MI**

**DENOMINATOR (SUBMISSION CRITERIA 2):**

All patients aged 18 years and older with a diagnosis of coronary artery disease seen within a 12-month period who also have prior (within the past 3 years) MI

**Definition:**

**Prior Myocardial Infarction (MI)** – for Submission Criteria 2, prior MI is limited to those occurring within the past 3 years.

**DENOMINATOR NOTE:** *The history of cardiac surgery serves as a proxy for a diagnosis of CAD; a diagnosis is not needed if the patient has documented history of cardiac surgery. Only one of the two criteria – a diagnosis of CAD or history of cardiac surgery proxy – is required. To meet the denominator criteria, a patient must have an active diagnosis of CAD (or proxy documented) at the time of the encounter that is used to qualify for the denominator and evaluate the numerator.*

*The encounter used to evaluate the numerator counts as 1 of the 2 encounters required for denominator*

*inclusion. If the patient meets the CAD diagnosis criterion, the diagnosis needs to be active only at the encounter being evaluated for the numerator action. If the patient meets the proxy of a history of cardiac surgery inclusion criterion, there should be documentation of the proxy at the encounter being evaluated for the numerator action.*

*\*Signifies that this CPT Category I code is a non-covered service under the Medicare Part B PFS. These non-covered services should be counted in the denominator population for MIPS CQMs.*

**Denominator Criteria (Eligible Cases) 2:**

Patients aged  $\geq 18$  years on date of encounter

**AND**

**Diagnosis for coronary artery disease (ICD-10-CM):** I20.0, I20.1, I20.8, I20.9, I24.0, I24.1, I24.8, I24.9, I25.10, I25.110, I25.111, I25.118, I25.119, I25.5, I25.6, I25.700, I25.701, I25.708, I25.709, I25.710, I25.711, I25.718, I25.719, I25.720, I25.721, I25.728, I25.729, I25.730, I25.731, I25.738, I25.739, I25.750, I25.751, I25.758, I25.759, I25.760, I25.761, I25.768, I25.769, I25.790, I25.791, I25.798, I25.799, I25.810, I25.811, I25.812, I25.82, I25.83, I25.89, I25.9, Z95.1, Z95.5, Z98.61

**OR**

**History of cardiac surgery (CPT):** 33140, 33510, 33511, 33512, 33513, 33514, 33516, 33533, 33534, 33535, 33536, 92920, 92924, 92928, 92933, 92937, 92941, 92943, 92980, 92981, 92982, 92984, 92995, 92996

**AND**

**Diagnosis for myocardial infarction – includes patient that had a prior (within the past 3 years) myocardial infarction (ICD-10-CM):** I21.01, I21.02, I21.09, I21.11, I21.19, I21.21, I21.29, I21.3, I21.4, I21.9, I21.A1, I21.A9, I22.0, I22.1, I22.2, I22.8, I22.9, I24.1, I25.2

**AND**

**Patient encounter during performance period – to be used for numerator evaluation (CPT):** 99201, 99202, 99203, 99204, 99205, 99212, 99213, 99214, 99215, 99241\*, 99242\*, 99243\*, 99244\*, 99245\*, 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, 95, POS 02

**AND**

**At least one additional patient encounter during performance period (CPT):** 99201, 99202, 99203, 99204, 99205, 99212, 99213, 99214, 99215, 99241\*, 99242\*, 99243\*, 99244\*, 99245\*, 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

**WITH OR WITHOUT**

Telehealth Modifier: GQ, GT, 95, POS 02

**NUMERATOR (SUBMISSION CRITERIA 2):**

Patients who were prescribed beta-blocker therapy

**Definitions:**

**Prescribed** – May include prescription given to the patient for beta-blocker therapy at one or more visits in the measurement period OR patient already taking beta-blocker therapy as documented in current medication list.

**Beta-blocker Therapy** – For patients with prior MI, beta-blocker therapy includes any agent within the beta-blocker drug class. As of 2015, no recommendations or evidence are cited in current stable ischemic heart

disease guidelines for preferential use of specific agents.

**NUMERATOR NOTE:** *To meet the intent of the measure, the numerator quality action must be performed at the encounter at which the active diagnosis of CAD or history of cardiac surgery proxy is documented. Denominator Exception(s) are determined on the date of the denominator-eligible encounter.*

**Numerator Options:**

***Performance Met:*** Beta-blocker therapy prescribed or currently being taken (4008F)

**OR**

***Denominator Exception:*** Documentation of medical reason(s) for not prescribing beta-blocker therapy (e.g., allergy, intolerance, other medical reasons) (4008F with 1P)

**OR**

***Denominator Exception:*** Documentation of patient reason(s) for not prescribing beta-blocker therapy (e.g., patient declined, other patient reasons) (4008F with 2P)

**OR**

***Denominator Exception:*** Documentation of system reason(s) for not prescribing beta-blocker therapy (e.g., other reasons attributable to the health care system) (4008F with 3P)

**OR**

***Performance Not Met:*** Beta-blocker therapy not prescribed, reason not otherwise specified (4008F with 8P)

**RATIONALE:**

For patients with coronary artery disease (CAD), beta-blockers are recommended for 3 years after myocardial infarction or acute coronary syndrome. Beta-blockers, particularly carvedilol, metoprolol succinate, or bisoprolol, which have been shown to reduce risk of death, are recommended indefinitely for patients with CAD and LV systolic dysfunction. These agents have proven efficacy in reducing angina onset and improving the ischemic threshold during exercise. In patients who have suffered an MI, beta-blockers significantly reduce deaths and recurrent MIs (ACCF/AHA/ACP/AATS/PCNA/SCAI/STS, 2012).

Nonadherence to cardio protective medications is prevalent among outpatients with CAD and can be associated with a broad range of adverse outcomes, including all-cause and cardiovascular mortality, cardiovascular hospitalizations, and the need for revascularization procedures (ACC/AHA, 2002).

This measure is intended to promote beta-blocker usage in select patients with CAD.

**CLINICAL RECOMMENDATION STATEMENTS:**

Beta-blocker therapy should be started and continued for 3 years in all patients with normal LV function after MI or ACS. (Class I, Level of Evidence: B) (ACCF/AHA/ACP/AATS/PCNA/SCAI/STS, 2012)

Beta-blocker therapy should be used in all patients with LV systolic dysfunction (EF  $\leq$  40%) with heart failure or prior MI, unless contraindicated. (Use should be limited to carvedilol, metoprolol succinate, or bisoprolol, which have been shown to reduce risk of death.) (Class I, Level of Evidence: A) (ACCF/AHA/ACP/AATS/PCNA/SCAI/STS, 2012)

**COPYRIGHT:**

The Measure is not a clinical guideline, does not establish a standard of medical care, and has not been tested for all potential applications.

The Measure, while copyrighted, 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 Measure for commercial gain, or incorporation of the Measure into a product or

service that is sold, licensed or distributed for commercial gain.

Commercial uses of the Measure require a license agreement between the user and the American Medical Association (AMA), American College of Cardiology (ACC) or the American Heart Association (AHA). Neither the AMA, nor ACC, nor AHA, nor the former AMA-convened Physician Consortium for Performance Improvement® (AMA-PCPI), nor the PCPI® Foundation (PCPI®), nor their members shall be responsible for any use of the Measure.

AMA and PCPI encourage use of the Measure by other health care professionals, where appropriate.

**THE MEASURE AND SPECIFICATIONS ARE PROVIDED "AS IS" WITHOUT WARRANTY OF ANY KIND.**

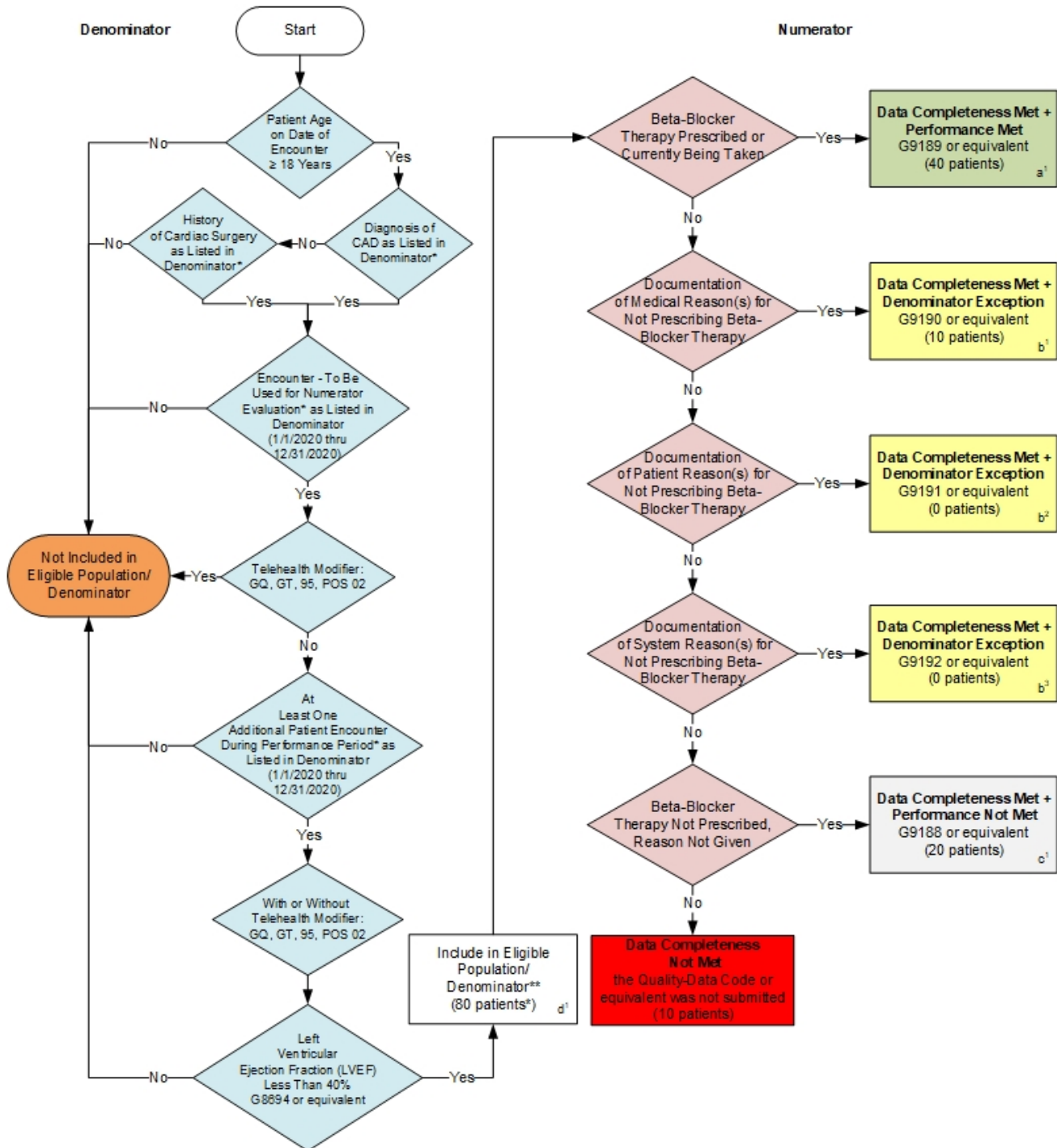
© 2019 American College of Cardiology, American Heart Association and American Medical Association. All Rights Reserved.

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, ACC, AHA, the PCPI and its members and former members of the AMA-PCPI disclaim all liability for use or accuracy of any Current Procedural Terminology (CPT®) or other coding contained in the specifications.

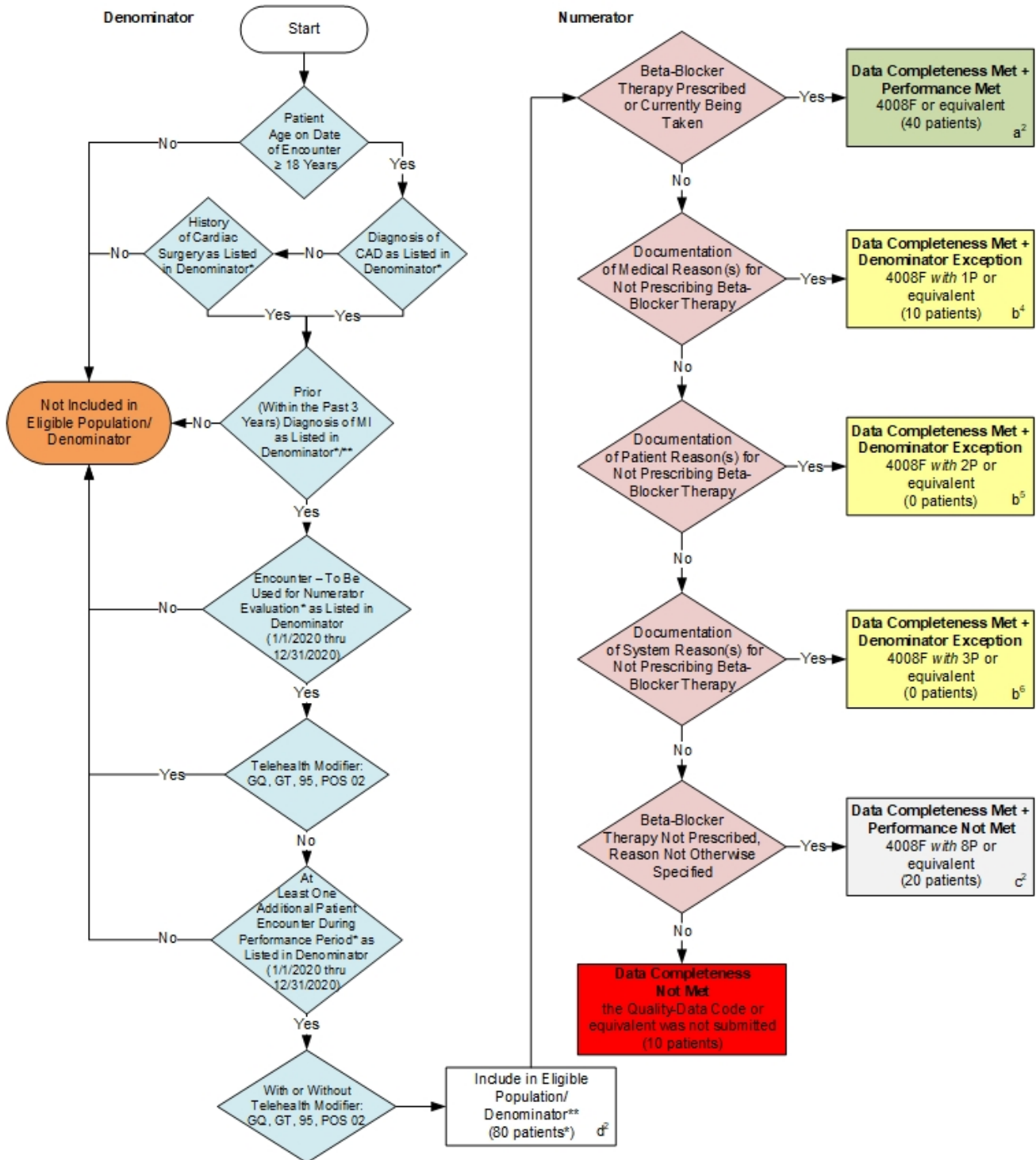
CPT® contained in the Measure specifications is copyright 2004-2019 American Medical Association. LOINC® is copyright 2004-2019 Regenstrief Institute, Inc. This material contains SNOMED Clinical Terms® (SNOMED CT®) copyright 2004-2019 International Health Terminology Standards Development Organisation. ICD-10 is copyright 2019 World Health Organization. All Rights Reserved.

**2020 Clinical Quality Measure Flow for Quality ID #7 NQF #0070:  
Coronary Artery Disease (CAD): Beta-Blocker Therapy –  
Prior Myocardial Infarction (MI) or Left Ventricular Systolic Dysfunction (LVEF < 40%)  
Submission Criteria One**

*Disclaimer: Refer to the measure specification for specific coding and instructions to submit this measure.*



## Submission Criteria Two





**SAMPLE CALCULATIONS:**

**Data Completeness =**

$$\frac{\text{Performance Met (a}^1\text{+a}^2\text{=80 patients) + Denominator Exception (b}^1\text{+b}^2\text{+b}^3\text{+b}^4\text{+b}^5\text{+b}^6\text{=20 patients) + Performance Not Met (c}^1\text{+c}^2\text{=40 patients)}}{\text{Eligible Population / Denominator (d}^1\text{+d}^2\text{=160 patients)}} = \frac{140 \text{ patients}}{160 \text{ patients}} = 87.50\%$$

**Performance Rate =**

$$\frac{\text{Performance Met (a}^1\text{+a}^2\text{=80 patients)}}{\text{Data Completeness Numerator (140 patients) - Denominator Exception (b}^1\text{+b}^2\text{+b}^3\text{+b}^4\text{+b}^5\text{+b}^6\text{=20 patients)}} = \frac{80 \text{ patients}}{120 \text{ patients}} = 66.67\%$$

\*See the posted measure specification for specific coding and instructions to submit this measure.

\*\*If the patient has both prior (within the past 3 years) MI and LVEF < 40%, the MIPS eligible clinician should submit quality data codes for Submission Criteria 1 and this will count as appropriate submission for this patient.

NOTE: Submission Frequency: Patient-Process

CPT only copyright 2019 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. v4

**2020 Clinical Quality Measure Flow Narrative for Quality ID #7 NQF#0070:  
Coronary Artery Disease (CAD): Beta-Blocker Therapy – Prior Myocardial Infarction (MI) or Left  
Ventricular Systolic Dysfunction (LVEF < 40%)**

*Disclaimer: Refer to the measure specification for specific coding and instructions to submit this measure.*

**Submission Criteria One:**

1. Start with Denominator
2. Check Patient Age:
  - a. If Patient Age on Date of Encounter is greater than or equal to 18 Years equals No during the measurement period, do not include in Eligible Population. Stop Processing.
  - b. If Patient Age on Date of Encounter is greater than or equal to 18 Years equals Yes during the measurement period, proceed to check Patient Diagnosis (CAD).
3. Check Patient Diagnosis (CAD):
  - a. If Diagnosis of CAD as Listed in Denominator equals No, proceed to check Patient Procedure (History of Cardiac Surgery).
  - b. If Diagnosis of CAD as Listed in Denominator equals Yes, proceed to check Encounter-To be Used for Numerator Evaluation.
4. Check Patient Procedure (History of Cardiac Surgery):
  - a. If History of Cardiac Surgery as Listed in Denominator equals No, do not include in Eligible Population. Stop Processing.
  - b. If History of Cardiac Surgery as Listed in Denominator equals Yes, proceed to check Encounter – To Be Used for Numerator Evaluation.
5. Check Encounter – To Be Used for Numerator Evaluation:
  - a. If Encounter – To Be Used for Numerator Evaluation as Listed in Denominator equals No, do not include in Eligible Population. Stop Processing.
  - b. If Encounter – To Be Used for Numerator Evaluation as Listed in Denominator equals Yes, proceed to check Telehealth Modifier.
6. Check Telehealth Modifier:
  - a. If Telehealth Modifier equals Yes, do not include in Eligible Population. Stop Processing.
  - b. If Telehealth Modifier equals No, proceed to check At Least One Additional Patient Encounter During Performance Period.
7. Check At Least One Additional Patient Encounter During Performance Period:
  - a. If At Least One Additional Patient Encounter During Performance Period as Listed in Denominator equals No, do not include in Eligible Population. Stop Processing.
  - b. If At Least One Additional Patient Encounter During Performance Period as Listed in Denominator equals Yes, proceed to With or Without Telehealth Modifier.

8. With or Without Telehealth Modifier
9. Check Left Ventricular Ejection Fraction (LVEF) Less Than 40 percent:
  - a. If Left Ventricular Ejection Fraction (LVEF) Less Than 40 percent equals No, do not include in Eligible Population. Stop Processing.
  - b. If Left Ventricular Ejection Fraction (LVEF) Less Than 40 percent equals Yes, include in Eligible Population.
10. 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<sup>1</sup> equals 80 patients in the Sample Calculation.
11. Start Numerator
12. Check Beta-Blocker Therapy Prescribed or Currently Being Taken:
  - a. If Beta-Blocker Therapy Prescribed or Currently Being Taken equals Yes, include in Data Completeness Met and Performance Met.
  - b. Data Completeness Met and Performance Met letter is represented in the Data Completeness and Performance Rate in the Sample Calculation listed at the end of this document. Letter a<sup>1</sup> equals 40 patients in the Sample Calculation.
  - c. If Beta-Blocker Therapy Prescribed or Currently Being Taken equals No, proceed to check Documentation of Medical Reason(s) for Not Prescribing Beta-Blocker Therapy.
13. Check Documentation of Medical Reason(s) for Not Prescribing Beta-Blocker Therapy:
  - a. If Documentation of Medical Reason(s) for Not Prescribing Beta-Blocker Therapy equals Yes, include in Data Completeness Met and Denominator Exception.
  - b. Data Completeness Met and Denominator Exception letter is represented in the Data Completeness and Performance Rate in the Sample Calculation listed at the end of this document. Letter b<sup>1</sup> equals 10 patients in the Sample Calculation.
  - c. If Documentation of Medical Reason(s) for Not Prescribing Beta-Blocker Therapy equals No, proceed to check Documentation of Patient Reason(s) for Not Prescribing Beta-Blocker Therapy.
14. Check Documentation of Patient Reason(s) for Not Prescribing Beta-Blocker Therapy:
  - a. If Documentation of Patient Reason(s) for Not Prescribing Beta-Blocker Therapy equals Yes, include in Data Completeness Met and Denominator Exception.
  - b. Data Completeness Met and Denominator Exception letter is represented in the Data Completeness and Performance Rate in the Sample Calculation listed at the end of this document. Letter b<sup>2</sup> equals 0 patients in the Sample Calculation.
  - c. If Documentation of Patient Reason(s) for Not Prescribing Beta-Blocker Therapy equals No, proceed to check Documentation of System Reason(s) for Not Prescribing Beta-Blocker Therapy.

15. Check Documentation of System Reason(s) for Not Prescribing Beta-Blocker Therapy:
  - a. If Documentation of System Reason(s) for Not Prescribing Beta-Blocker Therapy equals Yes, include in Data Completeness Met and Denominator Exception.
  - b. Data Completeness Met and Denominator Exception letter is represented in the Data Completeness and Performance Rate in the Sample Calculation listed at the end of this document. Letter b<sup>3</sup> equals 0 patients in the Sample Calculation.
  - c. If Documentation of System Reason(s) for Not Prescribing Beta-Blocker Therapy equals No, proceed to check Beta-Blocker Therapy Not Prescribed, Reason Not Given.
16. Check Beta-Blocker Therapy Not Prescribed, Reason Not Given:
  - a. If Beta-Blocker Therapy Not Prescribed, Reason Not Given equals Yes, include in Data Completeness Met and Performance Not Met.
  - b. Data Completeness Met and Performance Not Met letter is represented in the Data Completeness in the Sample Calculation listed at the end of this document. Letter c<sup>1</sup> equals 20 patients in the Sample Calculation.
  - c. If Beta-Blocker Therapy Not Prescribed, Reason Not Given equals No, proceed to check Data Completeness Not Met.
17. Check Data Completeness Not Met:
  - a. If Data Completeness Not Met, the Quality Data Code or equivalent was not submitted. 10 patients have been subtracted from the Data Completeness Numerator in the Sample Calculation.

**Submission Criteria Two:**

1. Start with Denominator
2. Check Patient Age:
  - a. If Patient Age on Date of Encounter is greater than or equal to 18 Years equals No during the measurement period, do not include in Eligible Population. Stop Processing.
  - b. If Patient Age on Date of Encounter is greater than or equal to 18 Years equals Yes during the measurement period, proceed to check Patient Diagnosis (CAD).
3. Check Patient Diagnosis (CAD):
  - a. If Diagnosis of CAD as Listed in Denominator equals No, proceed to check Patient Procedure (History of Cardiac Surgery).
  - b. If Diagnosis of CAD as Listed in Denominator equals Yes, proceed to check Current or Prior (Within the Past 3 Years) Diagnosis of MI.
4. Check Patient Procedure (History of Cardiac Surgery):
  - a. If History of Cardiac Surgery as Listed in Denominator equals No, do not include in Eligible Population. Stop Processing.
  - b. If History of Cardiac Surgery as Listed in Denominator equals Yes, proceed to check Current or Prior (Within the Past 3 Years) Diagnosis of MI.

5. Check Prior (Within the Past 3 Years) Diagnosis of MI:
  - a. If Prior (Within the Past 3 Years) Diagnosis of MI as Listed in Denominator equals No, do not include in Eligible Population. Stop Processing.
  - b. If Prior (Within the Past 3 Years) Diagnosis of MI as Listed in Denominator equals Yes, proceed to check Encounter–To Be Used for Numerator Evaluation.
6. Check Encounter – To Be Used for Numerator Evaluation:
  - a. If Encounter – To Be Used for Numerator Evaluation as Listed in Denominator equals No, do not include in Eligible Population. Stop Processing.
  - b. If Encounter – To Be Used for Numerator Evaluation as Listed in Denominator equals Yes, proceed to check Telehealth Modifier.
7. Check Telehealth Modifier:
  - a. If Telehealth Modifier equals Yes, do not include in Eligible Population. Stop Processing.
  - b. If Telehealth Modifier equals No, proceed to check At Least One Additional Patient Encounter During Performance Period.
8. Check At Least One Additional Patient Encounter During Performance Period:
  - a. If At Least One Additional Patient Encounter During Performance Period as Listed in Denominator equals No, do not include in Eligible Population. Stop Processing.
  - b. If At Least One Additional Patient Encounter During Performance Period as Listed in Denominator equals Yes, proceed to With or Without Telehealth Modifier.
9. With or Without Telehealth Modifier:
10. 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<sup>2</sup> equals 80 patients in the Sample Calculation.
11. Start Numerator
12. Check Beta-Blocker Therapy Prescribed or Currently Being Taken:
  - a. If Beta-Blocker Therapy Prescribed or Currently Being Taken equals Yes, include in Data Completeness Met and Performance Met.
  - b. Data Completeness Met and Performance Met letter is represented in the Data Completeness and Performance Rate in the Sample Calculation listed at the end of this document. Letter a<sup>2</sup> equals 40 patients in the Sample Calculation.
  - c. If Beta-Blocker Therapy Prescribed or Currently Being Taken equals No, proceed to check Documentation of Medical Reason(s) for Not Prescribing Beta-Blocker Therapy.
13. Check Documentation of Medical Reason(s) for Not Prescribing Beta-Blocker Therapy:
  - a. If Documentation of Medical Reason(s) for Not Prescribing Beta-Blocker Therapy equals Yes, include in Data Completeness Met and Denominator Exception.

- b. Data Completeness Met and Denominator Exception letter is represented in the Data Completeness and Performance Rate in the Sample Calculation listed at the end of this document. Letter b<sup>4</sup> equals 10 patients in the Sample Calculation.
  - c. If Documentation of Medical Reason(s) for Not Prescribing Beta-Blocker Therapy equals No, proceed to check Documentation of Patient Reason(s) for Not Prescribing Beta-Blocker Therapy.
14. Check Documentation of Patient Reason(s) for Not Prescribing Beta-Blocker Therapy:
- a. If Documentation of Patient Reason(s) for Not Prescribing Beta-Blocker Therapy equals Yes, include in Data Completeness Met and Denominator Exception.
  - b. Data Completeness Met and Denominator Exception letter is represented in the Data Completeness and Performance Rate in the Sample Calculation listed at the end of this document. Letter b<sup>5</sup> equals 0 patients in the Sample Calculation.
  - c. If Documentation of Patient Reason(s) for Not Prescribing Beta-Blocker Therapy equals No, proceed to check Documentation of System Reason(s) for Not Prescribing Beta-Blocker Therapy.
15. Check Documentation of System Reason(s) for Not Prescribing Beta-Blocker Therapy:
- a. If Documentation of System Reason(s) for Not Prescribing Beta-Blocker Therapy equals Yes, include in Data Completeness Met and Denominator Exception.
  - b. Data Completeness Met and Denominator Exception letter is represented in the Data Completeness and Performance Rate in the Sample Calculation listed at the end of this document. Letter b<sup>6</sup> equals 0 patients in the Sample Calculation.
  - c. If Documentation of System Reason(s) for Not Prescribing Beta-Blocker Therapy equals No, proceed to check Beta-Blocker Therapy Not Prescribed, Reason Not Otherwise Specified.
16. Check Beta-Blocker Therapy Not Prescribed, Reason Not Otherwise Specified:
- a. If Beta-Blocker Therapy Not Prescribed, Reason Not Otherwise Specified equals Yes, include in Data Completeness Met and Performance Not Met.
  - b. Data Completeness Met and Performance Not Met letter is represented in the Data Completeness in the Sample Calculation listed at the end of this document. Letter c<sup>2</sup> equals 20 patients in the Sample Calculation.
  - c. If Beta-Blocker Therapy Not Prescribed, Reason Not Otherwise Specified equals No, proceed to check Data Completeness Not Met.
17. Check Data Completeness Not Met:
- a. If Data Completeness Not Met, the Quality Data Code or equivalent was not submitted. 10 patients have been subtracted from the Data Completeness Numerator in the Sample Calculation.

**SAMPLE CALCULATION S:**

$$\frac{\text{Data Completeness} = \text{Performance Met (a}^1 + \text{a}^2 = 80 \text{ patients)} + \text{Denominator Exception (b}^1 + \text{b}^2 + \text{b}^3 + \text{b}^4 + \text{b}^5 + \text{b}^6 = 20 \text{ patients)} + \text{Performance Not Met (c}^1 + \text{c}^2 = 40 \text{ patients)}}{\text{Eligible Population / Denominator (d}^1 + \text{d}^2 = 160 \text{ patients)}} = \frac{140 \text{ patients}}{160 \text{ patients}} = 87.50\%$$

$$\text{Performance Rate} = \frac{\text{Performance Met (a}^1 + \text{a}^2 = 80 \text{ patients)}}{\text{Data Completeness Numerator (140 patients) - Denominator Exception (b}^1 + \text{b}^2 + \text{b}^3 + \text{b}^4 + \text{b}^5 + \text{b}^6 = 20 \text{ patients)}} = \frac{80 \text{ patients}}{120 \text{ patients}} = 66.67\%$$