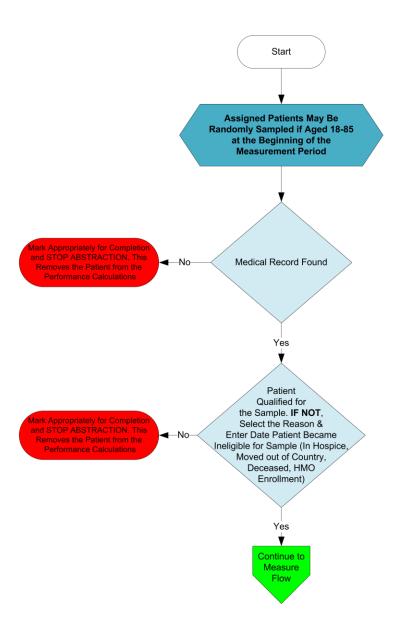
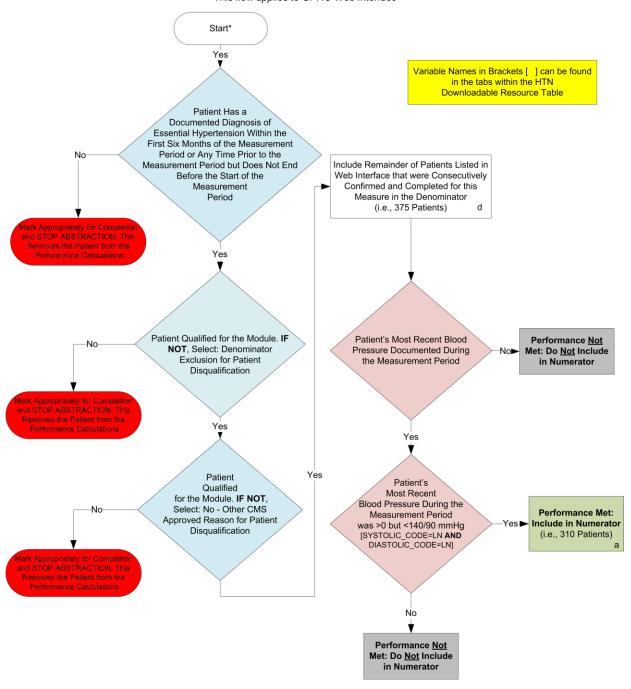
Patient Confirmation Flow for HTN-2

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 "Denominator Exclusion" or "Other CMS Approved Reason", please refer to the associated Data Guidance.



2014 GPRO-HTN-2 (NQF 0018): Controlling High Blood Pressure This flow applies to GPRO Web Interface



^{*}See Data Guidance for further instructions to report this measure

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- 1. Start HTN-2 Patient Confirmation Flow. Assigned patients may be randomly assigned if aged 18 through 85 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 GPRO-HTN-2 measure flow.

2014 GPRO-HTN-2 (NQF 0018): Controlling High Blood Pressure

This flow applies to GPRO Web Interface

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

- 1. Start processing 2014 GPRO HTN-2 (NQF 0018) Flow for the patients that qualified for sample in the HTN-2 Patient Confirmation Flow.
- 2. Check to determine if the patient has a documented diagnosis of essential hypertension within the first six months of the measurement period or at any time prior to the measurement period but does not end before the start of the measurement period.
 - a. If no, the patient does not have a documented diagnosis of essential hypertension within the first six months of the measurement period or at any time prior to the measurement period but does not end before the start of 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 does a documented diagnosis of essential hypertension within the first six months of the measurement period or at any time prior to the measurement period but does not end before the start of the measurement period, continue processing.
- 3. Check to determine if the patient qualified for the module
 - a. If no, the patient did not qualify for the module select: denominator exclusion for patient disqualification. Mark appropriately for completion and stop processing. This removes the patient from the performance calculations. Stop processing.
 - b. If yes, the patient does qualify for the module, the patient will be included in the eligible denominator for performance rate calculations.
- 4. Check to determine if the patient qualified for the module
 - a. If no, the patient did not qualify for the module select: No Other CMS Approved Reason for patient disqualification. Mark appropriately for completion and stop processing. This removes the patient from the performance calculations. Stop processing.
 - b. If yes, the patient does qualify for the module, 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. 375 patients). Continue processing.
- 5. Check to determine if the patient's most recent blood pressure was documented during the measurement period.
 - a. If no, the patient's most recent blood pressure was not documented during the measurement period performance is not met and should not be included in the numerator.
 - b. If yes, the patient's most recent blood pressure was documented during the measurement period, continue processing.
- Check to determine if the patient's most recent blood pressure during the measurement period
 was greater than zero but less than 140 over 90 mmHg. Variable Names: SYSTOLIC_CODE=LN
 AND DIASTOLIC CODE=LN.

- a. If no, the patient's most recent blood pressure during the measurement period was not greater than zero, but less than 140 over 90 mmHg, performance is not met and should not be included in the numerator. Stop processing.
- b. If yes, the patient's most recent blood pressure during the measurement period was greater than zero, but less than 140 over 90 mmHg, 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. 310 patients). Stop processing.

Sample Calculation

Performance Rate Equals

Performance Met is category 'a' in the measure flow (310 patients)

Eligible Denominator is category 'd' in measure flow (375 patients)

310 (Performance Met) divided by 375 (Eligible Denominator) equals a performance rate of 82.67 percent Calculation May Change Pending Performance Met