

## Ischemic Vascular Disease (IVD): Blood Pressure Management (NQF 0073)

<b>EMeasure Name</b>	Ischemic Vascular Disease (IVD): Blood Pressure Management	<b>EMeasure Id</b>	Pending
<b>Version Number</b>	1	<b>Set Id</b>	Pending
<b>Available Date</b>	No information	<b>Measurement Period</b>	January 1, 20xx through December 31, 20xx
<b>Measure Steward</b>	National Committee for Quality Assurance		
<b>Endorsed by</b>	National Quality Forum		
<b>Description</b>	The percentage of patients 18 years of age and older who were discharged alive for acute myocardial infarction (AMI), coronary artery bypass graft (CABG) or percutaneous transluminal coronary angioplasty (PTCA) from January 1–November 1 of the year prior to the measurement year, or who had a diagnosis of ischemic vascular disease (IVD) during the measurement year and the year prior to the measurement year and whose most recent blood pressure is in control (<140/90 mmHg).		
<b>Measure scoring</b>	Proportion		
<b>Measure type</b>	Process		
<b>Rationale</b>	<p>This measure evaluates the percentage of patients in a specific age demographic who had a diagnosis of IVD and demonstrated adequate blood pressure management. IVD and related conditions had an estimated cost burden of \$393.5 billion in 2005 (AHA 2005). Hypertension is a risk factor for IVD and cerebrovascular disease (CVD). Fifty million or more Americans have high blood pressure that warrants treatment, according to the NHANES survey (JNC-7, 2003). Additionally, high blood pressure and its complications cost the U.S. economy more than \$100 billion each year (NHLBI, 2004). The USPSTF recommends that clinicians screen adults 18 and older for high blood pressure (2007). Better control of blood pressure has been shown to result in a significant reduction of the probability of undesirable and costly outcomes. This measure facilitates the long-term management of blood pressure levels for patients with IVD.</p>		
<b>Clinical Recommendation Statement</b>	JNC-7: Treating SBP and DBP to targets that are <140/90 mmHg is associated with a decrease in CVD complications.		
<b>References</b>	<p>U.S. Preventive Services Task Force. Screening for high blood pressure: U.S. Preventive Services Task Force reaffirmation recommendation statement. Ann Intern Med 2007 Dec 4;147(11):783-6.</p> <p>Prevention, Detection, Evaluation, and Treatment of High Blood Pressure The Seventh Report of the Joint National Committee on Prevention, Detection, Evaluation, and Treatment of High Blood Pressure NIH Publication No. 035233 December 2003.</p>		
<b>Definitions</b>			

- Population criteria
- Data criteria (QDS Data Elements)
- Summary calculation

*Please refer to the spreadsheet for this measure for detail regarding data criteria and code lists.*

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### **Population criteria**

- **Initial Patient Population =**
  - AND: "Patient characteristic: birth date" (age) > = 17 years to capture all patients who will reach the age of 18 during the "measurement period";
- **Denominator =**
  - OR: "Procedure performed: PTCA" (Percutaneous Transluminal Cardiac Angioplasty) 14 to 24 months before the "measurement end date";
  - OR:
    - AND: "Encounter: encounter acute inpt" 14 to 24 months before the "measurement end date";
    - AND: "Diagnosis active: acute myocardial infarction" during "Encounter: Encounter acute inpt";
  - OR:
    - AND: "Encounter: Encounter acute inpt" 14 to 24 months before the "measurement end date";
    - AND: "Procedure performed: CABG" (Coronary Artery Bypass Graft) 14 to 24 months before the "measurement end date";
  - OR:
    - AND: "Encounter: Encounter acute inpt and outpt" <=2 years before "measurement end date";
    - AND: "Diagnosis active: ischemic vascular disease" during "Encounter: Encounter acute inpt and outpt";
- **Numerator =**
  - AND: "Physical exam finding: diastolic blood pressure", MINIMUM value < 90 mmHg during MOST RECENT "Encounter: encounter acute inpt and outpt";
  - AND: "Physical exam finding: systolic blood pressure", MINIMUM value < 140 mmHg during MOST RECENT "Encounter: encounter acute inpt and outpt";
- **Exclusions =**
  - None;

### **Data criteria (QDS Data Elements)**

- **Initial Patient Population =**
  - "Patient characteristic: birth date" using "birth date code list" before the beginning of the "measurement period";

- **Denominator =**
  - “Encounter: encounter acute inpt” using “encounter acute inpt code list” before the “measurement end date”;
  - “Encounter: encounter acute inpt and outpt” using “encounter acute inpt and outpt code list grouping” before “measurement end date”;
  - “Diagnosis active: acute myocardial infarction” using “acute myocardial infarction code list grouping” before the “measurement end date”;
  - “Diagnosis active: ischemic vascular disease” using “ischemic vascular disease code list grouping” before the “measurement end date”;
  - “Procedure performed: PTCA” (Percutaneous Transluminal Cardiac Angioplasty) using “PTCA code list grouping” before the “measurement end date”;
  - “Procedure performed: CABG” (Coronary Artery Bypass Graft) using “CABG code list grouping” before the “measurement end date”;
- **Numerator =**
  - “Physical exam finding: diastolic blood pressure” using “diastolic blood pressure code list” before the “measurement end date”;
  - “Physical exam finding: systolic blood pressure” using “systolic blood pressure code list” before the “measurement end date”;
- **Exclusions =**
  - None;

**Summary calculation**

Calculation is generic to all measures:

- Calculate the final denominator by adding all that meet denominator criteria.
- Subtract from the final denominator all that do not meet numerator criteria yet also meet exclusion criteria. Note some measures do not have exclusion criteria.
- The performance calculation is the number meeting numerator criteria divided by the final denominator.
- For measures with multiple patient populations, repeat this process for each patient population and report each result separately.
- For measures with multiple numerators, calculate each numerator separately within each population using the paired exclusion.

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<b>Measure set</b>	CLINICAL QUALITY MEASURE SET 2011-2012
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