**PHAB Measure Review**

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| **Measure #** |  |
| **Person(s) Responsible** |  |
| **Domain Team Review Completed** |  |
| **Document Review Team Completed** |  |

**\*Date Guidelines**

5 years - cutoff 03/2011

3 years - cutoff 03/2013

2 years- cutoff 03/2014

14 months - cutoff 01/2015

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| **Measure Narrative** |
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| **Questions** |
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