

Measure Title	Measure Number			Measure Description	Comment	NQS Domain	Measure Type	Measure Developer/Steward			Reporting Method(s)					Measure Group(s)	Crosscutting Measures	Use in Other Reporting Program(s)					Where to find the measure specification:					
	CMS	NQF	PQRS					#1	#2	#3	Claims	CSV	EHR	GFPO (Web Interface)	Measure Groups			Registry	ACO	AQA	Meaningful Use I	Meaningful Use II	Million Hearts	Measure Specification Documents Link	Page #			
Anti-Depressant Medication Management	128v3	0105	009	Percentage of patients 18 years of age and older who were diagnosed with major depression and treated with antidepressant medication, and who remained on antidepressant medication treatment. Two rates are reported: a. Percentage of patients who remained on an antidepressant medication for at least 84 days (12 weeks). b. Percentage of patients who remained on an antidepressant medication for at least 180 days (6 months).		Effective Clinical Care	Process	NQQA	-	-	-	-	-	X	-	-	-	-	-	-	-	-	-	-	-	Measure Specification Manuals	-	
Adult Major Depressive Disorder (MDD): Suicide Risk Assessment	161v3	0104	107	Percentage of patients aged 18 years and older with a diagnosis of major depressive disorder (MDD) with a suicide risk assessment completed during the visit in which a new diagnosis or recurrent episode was identified.		Effective Clinical Care	Process	AMA-PCP	-	-	-	-	-	X	-	-	-	-	-	-	-	-	-	X	-	-	Measure Specification Manuals	-
Preventive Care and Screening: Screening for Clinical Depression and Follow-Up Plan *Already recommended by full QC*	2v4	0418	134	Percentage of patients aged 12 years and older screened for clinical depression on the date of the encounter using an age appropriate standardized depression screening tool AND if positive, a follow-up plan is documented on the date of the positive screen.		Community/Population Health	Process	CMS	QIP	-	X	-	X	X	X	X	X	X	X	X	X	X	X	X	X	X	Measure Specification Manuals	212
Preventive Care and Screening: Unhealthy Alcohol Use – Screening	N/A	N/A	173	Percentage of patients aged 18 years and older who were screened for unhealthy alcohol use at least once within 24 months using a systematic screening method**	Recommend reducing age to comport with NQF 0004	Community/Population Health	Process	AMA-PCP	-	-	-	-	-	-	X	X	-	-	-	-	X	-	-	-	-	-	Measure Specification Manuals	270
Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention *Already recommended by full QC*	138v3	0028	226	Percentage of patients aged 18 years and older who were screened for tobacco use one or more times within 24 months AND who received cessation counseling intervention if identified as a tobacco user.		Community/Population Health	Process	AMA-PCP	-	-	X	-	X	X	X	X	X	X	X	X	X	X	X	X	X	X	Measure Specification Manuals	353
Initiation and Engagement of Alcohol and Other Drug Dependence Treatment	137v3	0004	305	Percentage of patients 13 years of age and older with a new episode of alcohol and other drug (AOD) dependence who received the following. Two rates are reported: a. Percentage of patients who initiated treatment within 14 days of the diagnosis. b. Percentage of patients who initiated treatment and who had two or more additional services with an AOD diagnosis within 30 days of the initiation visit.		Effective Clinical Care	Process	NQQA	-	-	-	-	-	X	-	-	-	-	-	-	-	-	-	-	X	-	Measure Specification Manuals	-
Adult Major Depressive Disorder (MDD): Coordination of Care of Patients with Specific Comorbid Conditions	N/A	N/A	325	Percentage of medical records of patients aged 18 years and older with a diagnosis of major depressive disorder (MDD) and a specific diagnosed comorbid condition (diabetes, coronary artery disease, ischemic stroke, intracranial hemorrhage, chronic kidney disease [stages 4 or 5], End Stage Renal Disease [ESRD] or congestive heart failure) being treated by another clinician with communication to the clinician treating the comorbid condition.	The BHDG recognizes that many BH clinicians do not have electronic health records or that BH clinicians are reluctant to communicate with medical practitioners. Establishing this performance measure will create an incentive for the primary care community to work with their key BH collaborators to address these barriers.	Communication and Care Coordination	Process	APA	-	-	-	-	-	-	-	-	X	-	-	-	-	-	-	-	-	Measure Specification Manuals	444	
ADHD: Follow-Up Care for Children Prescribed Attention-Deficit/Hyperactivity Disorder (ADHD) Medication *Already recommended as part of pediatric group outcomes*	136v4	0108	366	Percentage of children 6-12 years of age and newly dispensed a medication for attention-deficit/hyperactivity disorder (ADHD) who had appropriate follow-up care. Two rates are reported: a. Percentage of children who had one follow-up visit with a practitioner with prescribing authority during the 30-Day Initiation Phase. b. Percentage of children who remained on ADHD medication for at least 210 days and who, in addition to the visit in the Initiation Phase, had at least two additional follow-up visits with a practitioner within 270 days (9 months) after the Initiation Phase ended.		Effective Clinical Care	Process	NQQA	-	-	-	-	-	X	-	-	-	-	-	-	-	-	-	-	X	-	Measure Specification Manuals	-
Bipolar Disorder and Major Depression: Appraisal for Alcohol or Chemical Substance Use	169v3	N/A	367	Percentage of patients with depression or bipolar disorder with evidence of an initial assessment that includes an appraisal for alcohol or chemical substance use.		Effective Clinical Care	Process	CQAIMH	-	-	-	-	-	X	-	-	-	-	-	-	-	-	-	X	-	Measure Specification Manuals	-	
Depression Remission at Twelve Months	159v3	0710	370	Adult patients age 18 and older with major depression or dysthymia and an initial PHQ-9 score > 9 who demonstrate remission at twelve months defined as PHQ-9 score less than 5. This measure applies to both patients with newly diagnosed and existing depression whose current PHQ-9 score indicates a need for treatment.		Effective Clinical Care	Intermediate Outcome	MNMC	-	-	-	-	X	X	-	-	-	-	-	-	-	-	-	X	-	Measure Specification Manuals	-	
Depression Utilization of the PHQ-9 Tool	160v3	0712	371	Adult patients age 18 and older with the diagnosis of major depression or dysthymia who have a PHQ-9 tool administered at least once during a 4 month period in which there was a qualifying visit.		Effective Clinical Care	Process	MNMC	-	-	-	-	X	-	-	-	-	-	-	-	-	-	-	X	-	Measure Specification Manuals	-	
Maternal Depression Screening *Already recommended as part of pediatric group outcomes*	82v2	N/A	372	The percentage of children who turned 6 months of age during the measurement year, who had a face-to-face visit between the clinician and the child during child's first 6 months, and who had a maternal depression screening for the mother at least once between 0 and 6 months of life.		Community/Population Health	Process	NQQA	-	-	-	-	-	X	-	-	-	-	-	-	-	-	-	-	X	-	Measure Specification Manuals	-
Child and Adolescent Major Depressive Disorder (MDD): Suicide Risk Assessment	177v3	1365	382	Percentage of patient visits for those patients aged 6 through 17 years with a diagnosis of major depressive disorder with an assessment for suicide risk.		Patient Safety	Process	AMA-PCP	-	-	-	-	-	X	-	-	-	-	-	-	-	-	-	-	X	-	Measure Specification Manuals	-
Adherence to Antipsychotic Medications for Individuals with Schizophrenia	N/A	1879	383	The percentage of individuals 18 years of age or greater as of the beginning of the measurement period with schizophrenia or schizoaffective disorder who are prescribed an antipsychotic medication, with adherence to the antipsychotic medication (defined as a Proportion of Days Covered [PDC]) of at least 0.8 during the measurement period (12 consecutive months).		Patient Safety	Intermediate Outcome	CMS	FMQAI	-	-	-	-	-	-	-	-	X	-	-	-	-	-	-	-	Measure Specification Manuals	511	
Follow-up After Hospitalization for Mental Illness (FIH)	N/A	N/A	391	The percentage of discharges for patients 6 years of age and older who were hospitalized for treatment of selected mental illness diagnoses and who had an outpatient visit, an intensive outpatient encounter or partial hospitalization with a mental health practitioner. Two rates are reported: - The percentage of discharges for which the patient received follow-up within 30 days of discharge. - The percentage of discharges for which the patient received		Communication and Care Coordination	Process	NQQA	-	-	-	-	-	-	-	-	X	-	-	-	-	-	-	-	-	Measure Specification Manuals	537	
Tobacco Use and Help with Quitting Among Adolescents	N/A	N/A	402	The percentage of adolescents 12 to 20 years of age with a primary care visit during the measurement year for whom tobacco use status was documented and received help with quitting if identified as a tobacco user.		Community/Population Health	Process	NQQA	NCIQM	-	-	-	-	-	-	-	X	X	-	-	-	-	-	-	-	-	Measure Specification Manuals	571