
CBE ID

0074

Title

Chronic Stable Coronary Artery Disease: Lipid Control

Endorsement Status

Endorsement Removed

Is Under Review

No

Previous Endorsement Cycle

Full Year 2016

Removal Date

Mon, 03/06/2017 - 19:00

Initial Endorsement

Sun, 08/09/2009 - 20:00

Steward

American College of Cardiology

1.0 New or Maintenance

Maintenance

1.1 Measure Structure

Single Measure

1.3 Electronic Clinical Quality Measure (eCQM)

No

1.6 Measure Description

Percentage of patients aged 18 years and older with a diagnosis of coronary artery disease seen within a 12 month period who have a LDL-C result <100 mg/dL OR patients who have a LDL-C result ≥100 mg/dL and have a documented plan of care to achieve LDL-C <100mg/dL, including at a minimum the prescription of a statin

1.7 Measure Type

Process

1.8 Level of Analysis

Clinician: Group/Practice

1.9 Care Setting

Ambulatory Care: Clinic, Ambulatory Care: Office, Nursing Home/Skilled Nursing Facility

1.14 Numerator

Patients who have a LDL-C result <100 mg/dL OR Patients who have a LDL-C result ≥ 100 mg/dL and have a documented plan of care¹ to achieve LDL-C <100 mg/dL, including at a minimum the prescription of a statin within a 12 month period

Definitions: *Documented plan of care may also include: documentation of discussion of lifestyle modifications (diet, exercise); scheduled re-assessment of LDL-C *Prescribed may include prescription given to the patient for a statin at one or more visits in the measurement period OR patient already taking a statin as documented in current medication list

Numerator Instructions: The first numerator option can be reported for patients who have a documented LDL-C < 100 mg/dL at any time during the measurement period.

1.15 Denominator

All patients aged 18 years and older with a diagnosis of coronary artery disease seen within a 12 month period

1.20 Types of Data Sources

Other

6.1.2 Current or Planned Use(s)

Public Reporting, Quality Improvement (Internal to the specific organization)

6.1.3 Current Use(s)

Public Reporting, Quality Improvement (Internal to the specific organization)

Exclusions

Documentation of medical reason(s) for not prescribing a statin (eg, allergy, intolerance to statin medication(s), other medical reasons)

Documentation of patient reason(s) for not prescribing a statin (eg, patient declined, other patient reasons)

Documentation of system reason(s) for not prescribing a statin (eg, financial reasons, other system reasons)

Planned Use

Public Reporting, Quality Improvement (Internal to the specific organization)

Risk Adjustment

No risk adjustment or risk stratification

Target Population

Elderly

Steward Organization

American College of Cardiology

Steward POC email

comment@acc.org