CBE ID

1800

Title

Asthma Medication Ratio

Endorsement Status

Endorsed

Is Under Review

No

Next Maintenance Cycle

Spring 2026

Previous Endorsement Cycle

Fall 2019

Initial Endorsement

Tue, 07/31/2012 - 09:53

Steward

National Committee for Quality Assurance

1.0 New or Maintenance

Maintenance

1.1 Measure Structure

Single Measure

1.3 Electronic Clinical Quality Measure (eCQM)

No

1.6 Measure Description

The percentage of patients 5–64 years of age who were identified as having persistent asthma and had a ratio of controller medications to total asthma medications of 0.50 or greater during the measurement year.

1.7 Measure Type

Process

1.8 Level of Analysis

Health Plan

1.14 Numerator

The number of patients with persistent asthma who have a ratio of controller medications to total asthma medications of 0.50 or greater during the measurement year.

1.15 Denominator

All patients 5–64 years of age as of December 31 of the measurement year who have persistent asthma by meeting at least one of the following criteria during both the measurement year and the year prior to the measurement year:• At least one emergency department visit with asthma as the principal diagnosis • At least one acute inpatient encounter or discharge with asthma as the principal diagnosis • At least four outpatient visits, observation visits, telephone visits, or online assessments on different dates of service, with any diagnosis of asthma AND at least two asthma medication dispensing events for any controller or reliever medication. Visit type need not be the same for the four visits.• At least four asthma medication dispensing events for any controller medication or reliever medication

1.20 Types of Data Sources

Claims Data

6.1.2 Current or Planned Use(s)

Public Reporting, Payment Program, Regulatory and Accreditation Programs, Quality Improvement with Benchmarking (external benchmarking to multiple organizations)

6.1.3 Current Use(s)

Public Reporting, Payment Program, Regulatory and Accreditation Programs, Quality Improvement with Benchmarking (external benchmarking to multiple organizations)

Exclusions

1) Exclude patients who had any of the following diagnoses any time during the patient’s history through the end of the measurement year (i.e., December 31):
-COPD
-Emphysema
-Obstructive Chronic Bronchitis
-Chronic Respiratory Conditions Due To Fumes/Vapors
-Cystic Fibrosis
-Acute Respiratory Failure

2) Exclude any patients who had no asthma medications (controller or reliever) dispensed during the measurement year.

3) Exclude patients in hospice.

Measure Disclaimer

This HEDIS® performance measure is not a clinical guideline and does not establish a standard of medical care and has not been tested for all potential applications.

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Risk Adjustment

No risk adjustment or risk stratification

Target Population

Individuals with multiple chronic conditions, Populations at Risk

The measure developer is different from the measure steward

No

Steward Organization

National Committee for Quality Assurance

Steward POC email

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