



DATA COLLECTION TECHNICAL GUIDE

Direct Data Submission (DDS) Data Portal: Optimal Vascular Care

FINAL

2023 Measurement Year (01/01/2023 to 12/31/2023 Dates of Service)

Data Submission: 01/9/2024 to 02/9/2024

Version 1

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SUMMARY OF CHANGES

Measure Specifications

- | |
|--|
| <ul style="list-style-type: none">• Permanent nursing home resident exclusion has been discontinued. |
|--|

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TIMELINE**REGISTRATION**

November 1, 2023 – February 10, 2024

**PRE-SUBMISSION**

November 1, 2023 – January 8, 2024

**DATA SUBMISSION**

January 9, 2024 – February 9, 2024

**DATA VALIDATION**

January 2024 – April 2024

**FINAL RISK-ADJUSTED RATES**

Expected June 2024

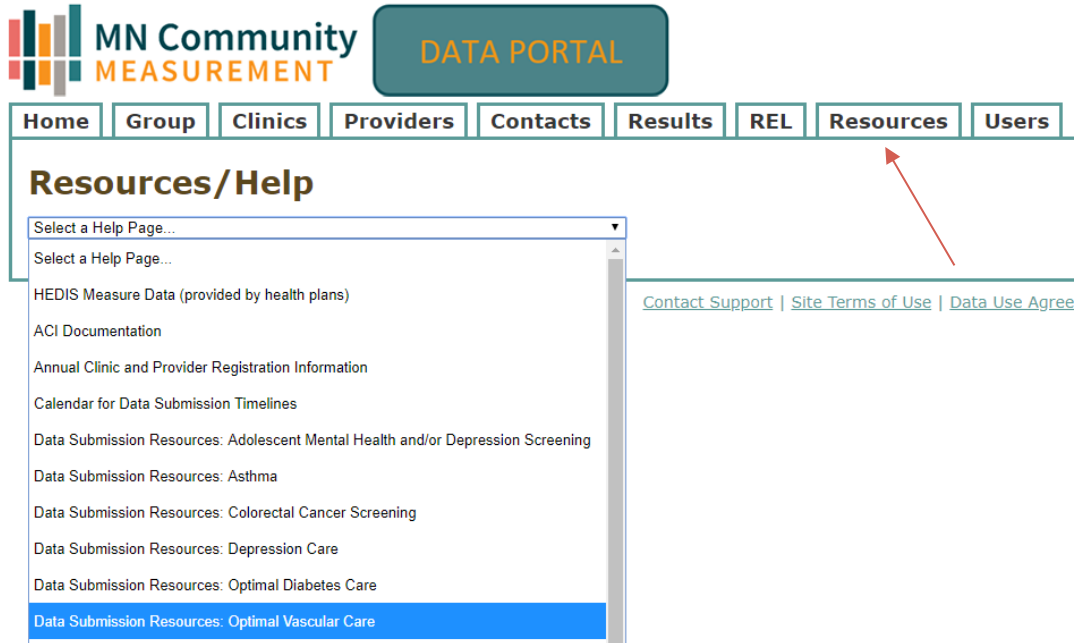
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DATA RESOURCES

The Optimal Vascular Care resource page on the MNCM DDS Data Portal contains documents needed for data collection and submission:


- Log in to the [MNCM DDS Data Portal](#)
- Click on the Resources tab
- Select “Data Submission Resources: Optimal Vascular Care” from the drop-down menu



DOCUMENTS TO DOWNLOAD

The following documents are found within the Resources tab for the Optimal Vascular Care measures:

- Data Collection Technical Guide: 2023 MY Optimal Vascular Care
- Data Submission Technical Guide: Optimal Asthma Control / Asthma Education and Self-Management; Optimal Diabetes Care; Optimal Vascular Care; Adolescent Mental Health and/or Depression Screening
- 2023 MY Optimal Vascular Care Value Set Dictionary
- 2023 MY Optimal Vascular Care Pre-Submission Data Certification Form
- 2023 MY Optimal Vascular Care Data Collection Spreadsheet Template



Sharing Data Files and Protected Health Information (PHI) Securely:

Email is **NOT** a secure mode of data transmission. Do **NOT** send any patient-specific information to MNCM via email.

For secure data transfer options, contact support@mncm.org.

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MEASURE SPECIFICATIONS											
Summary of Changes	<ul style="list-style-type: none"> • Permanent nursing home resident exclusion has been discontinued. 										
Description	<p>The percentage of patients 18-75 years of age who had a diagnosis of ischemic vascular disease (IVD) and whose IVD was optimally managed during the measurement period as defined by achieving ALL of the following:</p> <ul style="list-style-type: none"> • Blood pressure less than 140/90 mmHg • On a statin medication, unless allowed contraindications or exceptions are present • Non-tobacco user • On daily aspirin or anti-platelets, unless allowed contraindications or exceptions are present 										
Measurement Period	FINAL 2023 MY: January 1, 2023 through December 31, 2023										
Eligible Population	<table border="1"> <tr> <td>Eligible Specialties</td> <td>Family Medicine, Internal Medicine, Geriatric Medicine, Cardiology</td> </tr> <tr> <td>Eligible Providers</td> <td>Medical Doctor (MD), Doctor of Osteopathy (DO), Physician Assistant (PA), Advanced Practice Registered Nurses (APRN)</td> </tr> <tr> <td>Ages</td> <td>18 years or older at the start of the measurement period AND less than 76 years at the end of the measurement period.</td> </tr> <tr> <td>Diagnosis</td> <td> <p>Patient had a diagnosis of ischemic vascular disease (<i>Ischemic Vascular Disease</i> Value Set) with any contact during the current or prior measurement period OR had ischemic vascular disease (<i>Ischemic Vascular Disease</i> Value Set) present on an active problem list at any time during the measurement period.</p> <p>Both contacts AND the active problem list must be queried for diagnosis (<i>Ischemic Vascular Disease</i> Value Set).</p> </td> </tr> <tr> <td>Event</td> <td>At least one established patient office or telehealth visit (<i>Established Pt Diabetes & Vasc</i> Value Set) performed or supervised by an eligible provider in an eligible specialty for any reason during the measurement period</td> </tr> </table>	Eligible Specialties	Family Medicine, Internal Medicine, Geriatric Medicine, Cardiology	Eligible Providers	Medical Doctor (MD), Doctor of Osteopathy (DO), Physician Assistant (PA), Advanced Practice Registered Nurses (APRN)	Ages	18 years or older at the start of the measurement period AND less than 76 years at the end of the measurement period.	Diagnosis	<p>Patient had a diagnosis of ischemic vascular disease (<i>Ischemic Vascular Disease</i> Value Set) with any contact during the current or prior measurement period OR had ischemic vascular disease (<i>Ischemic Vascular Disease</i> Value Set) present on an active problem list at any time during the measurement period.</p> <p>Both contacts AND the active problem list must be queried for diagnosis (<i>Ischemic Vascular Disease</i> Value Set).</p>	Event	At least one established patient office or telehealth visit (<i>Established Pt Diabetes & Vasc</i> Value Set) performed or supervised by an eligible provider in an eligible specialty for any reason during the measurement period
	Eligible Specialties	Family Medicine, Internal Medicine, Geriatric Medicine, Cardiology									
	Eligible Providers	Medical Doctor (MD), Doctor of Osteopathy (DO), Physician Assistant (PA), Advanced Practice Registered Nurses (APRN)									
	Ages	18 years or older at the start of the measurement period AND less than 76 years at the end of the measurement period.									
Diagnosis	<p>Patient had a diagnosis of ischemic vascular disease (<i>Ischemic Vascular Disease</i> Value Set) with any contact during the current or prior measurement period OR had ischemic vascular disease (<i>Ischemic Vascular Disease</i> Value Set) present on an active problem list at any time during the measurement period.</p> <p>Both contacts AND the active problem list must be queried for diagnosis (<i>Ischemic Vascular Disease</i> Value Set).</p>										
Event	At least one established patient office or telehealth visit (<i>Established Pt Diabetes & Vasc</i> Value Set) performed or supervised by an eligible provider in an eligible specialty for any reason during the measurement period										
Denominator	The eligible population										

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Numerator	<p>The number of patients in the denominator whose IVD was optimally managed during the measurement period as defined by achieving ALL of the following:</p> <ul style="list-style-type: none"> • The most recent blood pressure in the measurement period has a systolic value of less than 140 mmHg AND a diastolic value of less than 90 mmHg • On a statin medication, unless allowed contraindications or exceptions are present • Patient is not a current tobacco user • On daily aspirin or anti-platelets, unless allowed contraindications or exceptions are present
Allowable Exclusions <i>(Optional)</i>	<p>The following exclusions are optional and may be applied to the eligible population:</p> <ul style="list-style-type: none"> • Patient was in hospice or receiving palliative care (<i>Palliative Care Value Set</i>) at any time prior to the end of the measurement period • Patient died any time prior to the end of the measurement period • Patient had only urgent care visits during the measurement period
Measure Scoring	Rate/Proportion
Interpretation of Score	Higher score indicates better quality
Measure Type	Intermediate Outcome, All-or-none Patient Level Composite

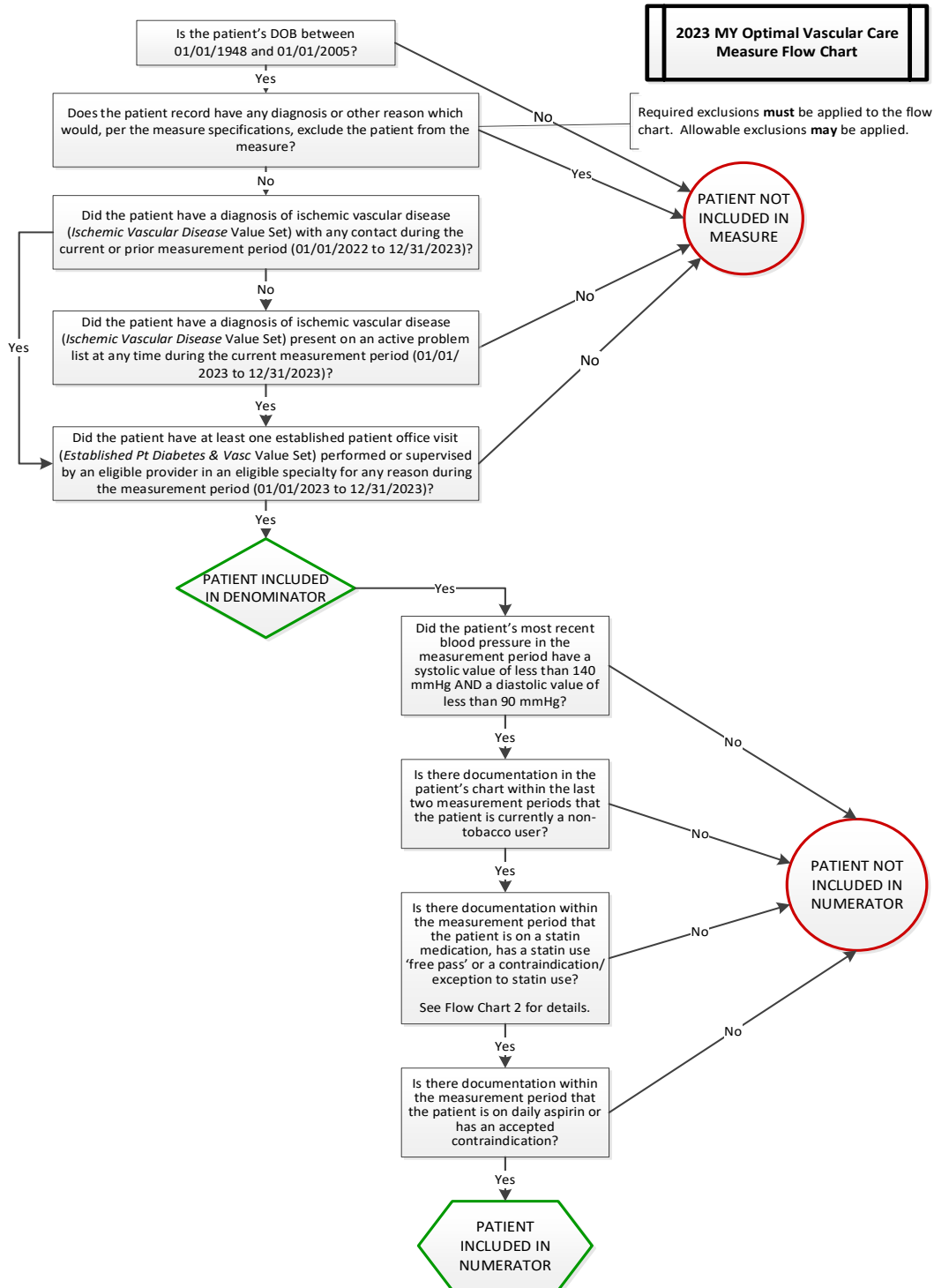
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MEASURE LOGIC/FLOW CHARTS

Flow Chart 1: Optimal Vascular Care Measure Flow Chart

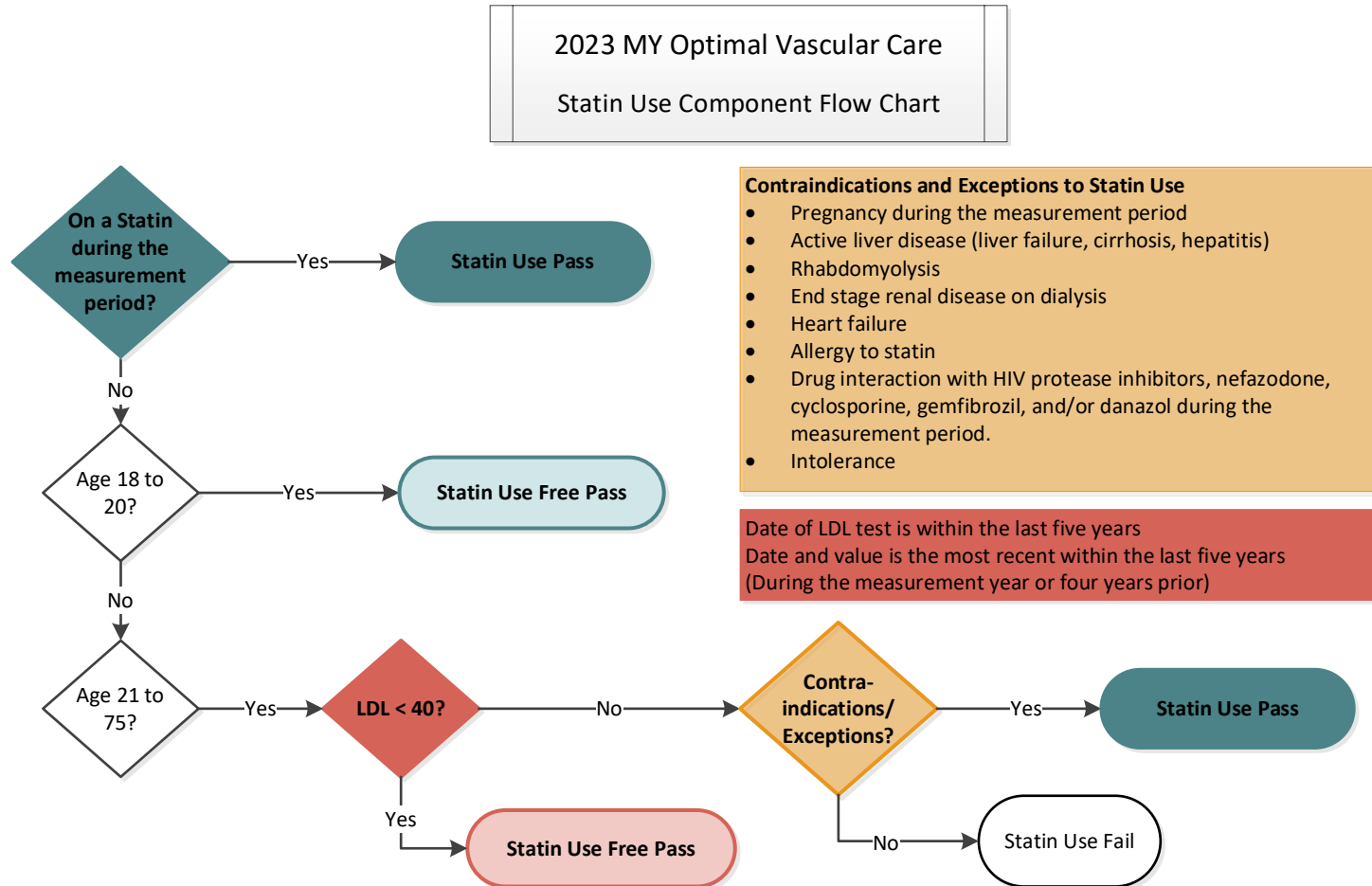


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Flow Chart 2: Statin Use Component Flow Chart



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DATA COLLECTION



PRE-SUBMISSION DATA CERTIFICATION

Prior to data collection, MNCM must review medical groups' query source code and/or methodology for identifying the correct data for submission. The responsibility of identifying the correct eligible population and clinical data elements needed for measure calculation rests with the medical group.

Completing Pre-Submission Data Certification:

- Login** to the [MNCM DDS Data Portal](#). Under the Resources tab, select the applicable measure from the drop-down menu.
- Download** the *Pre-Submission Data Certification Form*.
- Complete and save** the form.
- Login** to the [MNCM DDS Data Portal](#) and from the Home page click on *Denominator Certification* under the applicable measure.
- Upload** the saved form to the MNCM DDS Data Portal.

MNCM will review the information and will either (1) contact the medical group if more clarification is needed or (2) certify the methodology. An automatic e-mail will notify the medical group when the method is certified.

ELIGIBLE POPULATION IDENTIFICATION

After pre-submission/data certification is complete, medical groups identify the eligible population. Medical groups must identify the eligible population regardless of whether the group plans to submit total population or a sample of eligible patients. Save all original queries, spreadsheets and other documentation of the process used to identify the eligible population. During validation, MNCM may request this information.



Preparing the eligible population list:

- Query** applicable systems to identify the eligible population (patient contacts AND problem list[s]).
- If using allowable exclusions**, remove patients who meet the criteria for these exclusions
- De-duplicate** the list – ensure only one record for each patient (see De-Duplication Tip for guidance)
- Review** the number of patients in the population and consider whether the number is accurate. If not, correct the methodology and/or query.

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PATIENT ATTRIBUTION

To appropriately attribute patients to a provider/clinic, follow these steps in order:

STEP 1: Attribute patient to provider and clinic within the medical group that are assigned to the patient.

- If patient does not have an assigned provider/clinic within the medical group, then;

STEP 2: Attribute the patient to the provider/clinic with the most encounters with the patient during the measurement period.

- If multiple providers had an equal number of encounters with the patient, then;

STEP 3: Attribute patient to the provider/clinic that had the most recent encounter with the patient during the measurement period.

NOTE: Eligible patients attributed to a provider that has left the clinic/medical group must still be included in the data file.



DE-DUPLICATION TIP

When a patient is listed more than once within a clinic/medical group:

Determine the provider/clinic to which the patient will be attributed and delete the other records/rows within the data file.

For organizations with more than one registered medical group:

Report patients in each registered medical group where they meet eligibility criteria. In this scenario, duplication of patients across the organization is possible and expected.

TOTAL POPULATION VS. SAMPLE POPULATION



Total Population (recommended)

Per the EMR Reporting Rule established by the Minnesota Department of Health (MDH), clinics that have had an Electronic Medical Record (EMR) or Electronic Health Record (EHR) in place, at any stage of implementation, for the last two measurement periods are required to submit data on their total population.



Sample Population

Submission of a sample population for this measure is allowed for clinics that do not have an EMR or have had an EMR in place for less than two years. **See the Sampling Methodology Tip Sheet for instructions on identifying a random sample of patients.**

A sample size of at least 60 records per clinic is required. Clinics with 60 or less eligible patients must submit data for all patients.

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DATA ELEMENTS AND FIELD SPECIFICATIONS

Use this section to build your data file for submission.



Notes








Quality Checks

Column	Field Name	Details	Excel Format	Error Causes
A	Clinic ID	<p>Enter the MNCM Clinic ID of the clinic attributed to the patient based on the methodology detailed in the Patient Attribution section.</p> <ul style="list-style-type: none"> MNCM assigns clinic IDs at the time of registration. The MNMCM DDS Data Portal contains a list of Clinic IDs on the Clinics tab. Do NOT use the medical group ID. <p>Verify that the ID in each cell matches the clinic ID in the MNMCM DDS Data Portal.</p>	Text	<ul style="list-style-type: none"> Blank fields Values not attributed to a clinic within the medical group
B	Patient ID	<p>Enter a unique patient ID to identify each patient.</p> <ul style="list-style-type: none"> The patient's medical record number may be used. Medical groups or clinics that choose not to use the medical record number should: <ul style="list-style-type: none"> NOT use the patient's Social Security Number Maintain a crosswalk between the patient ID and the medical record number or patient name and date of birth (DOB) Medical groups or clinics that do not have an EHR should also maintain a crosswalk between patient ID and patient name and DOB as a tool to locate records during audit. <p>Verify that there are not any duplicate patients. If a patient has multiple records (rows), determine which clinic to which the patient should be attributed and delete the duplicate record(s). If submitting a sample population, you will need to replace the duplicate record with the next patient listed in the random sample.</p>	Text	<ul style="list-style-type: none"> Blank fields Duplicate IDs
C	Patient Date of Birth	<p>Enter the patient's date of birth (DOB).</p> <p>The DOB range for this age group is 01/01/1948 to 01/01/2005.</p> <p>Verify that the DOB in each cell is within the accepted range.</p>	Date (mm/dd/yyyy or m/d/yyyy)	<ul style="list-style-type: none"> Blank fields Values outside allowable range

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Column	Field Name	Details	Excel Format	Error Causes
D	Patient Sex	<p>Enter the patient's sex:</p> <p style="text-align: center;">F = Female M = Male U = Unknown/Undefined</p> <p> Verify that each cell has one of the accepted codes.</p>	Text	<ul style="list-style-type: none"> • Blank fields • Values outside allowable range
E	Zip Code_Primary Residence	<p>Enter the zip code of the patient's primary residence at the most recent encounter on or prior to the end of the measurement period.</p> <p> If extraction results in a nine-digit zip code, all nine digits may be submitted.</p> <p> Verify that the zip code is at least five digits and that each cell has a value.</p>	Text	<ul style="list-style-type: none"> • Blank fields • Values less than five digits
F - J	Race/Ethnicity1 – Race/Ethnicity5	<p>Please refer to a separate document entitled <i>RELC Data Elements, Field Specifications & Codes</i> for Column F-N field definitions and specifications. This document can be found in the MNCM DDS Data Portal under the Resources tab in the Race/Ethnicity/Language Data (RELC) section, or in the Knowledge Base.</p> <p> For more information about collecting RELC data from patients, refer to the Handbook on the Collection of Race Ethnicity and Language Data.</p> <p> Verify that each cell has one of the accepted codes. Blank cells (if data is not available) are acceptable.</p>	Number	Values outside allowable range
K	Country of Origin Code		Number	Values outside allowable range
L	Country of Origin Other Description		Text	Blank field if Column K = 999
M	Preferred Language Code		Number	Values outside allowable range
N	Preferred Language Other Description		Text	Blank field if Column M = 99

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Column	Field Name	Details	Excel Format	Error Causes
O	Provider NPI	<p>Enter the 10-digit National Provider Identifier (NPI) of the provider attributed to the patient based on the methodology detailed in the Patient Attribution section.</p> <p> If the provider does not have an NPI, enter the provider ID as registered in the MNCM DDS Data Portal.</p> <p> Verify that each cell has data.</p>	Text 1234567891	Blank fields
P	Provider Specialty Code	<p>Enter the specialty code of the physician. If the provider is not a physician, enter the specialty code of the supervising physician.</p> <p>1 = Family Medicine 2 = Internal Medicine 5 = Geriatric Medicine 6 = Cardiology</p> <p> Verify that each cell has an accepted code.</p>	Number	<ul style="list-style-type: none"> • Blank fields • Values outside allowable range
Q	Insurance Coverage Code	<p>Please refer to a separate document entitled Insurance Coverage Data Elements, Field Specifications & Codes for these field specifications. This document can be found in the MNCM DDS Data Portal under the Resources tab in the Insurance Coverage Field Specs & Codes for DDS section, or in the Knowledge Base.</p> <p> • Enter codes corresponding to the patient’s most recent insurance on or prior to the end of the measurement period.</p> <p> • Verify that each cell has an accepted code and that all 99 codes have a name entered in Column R.</p> <ul style="list-style-type: none"> • Verify names entered in Column R do not have an available accepted code. • Verify NO Social Security Numbers were included. 	Number	<ul style="list-style-type: none"> • Blank fields • Values outside allowable range
R	Insurance Coverage Other Description		Text	Blank field if Column Q = 999
S	Insurance Plan Member ID		Text	Blank fields <i>unless</i> Column Q = 16, 29 or 37

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Column	Field Name	Details	Excel Format	Error Causes
T	Patient Has Diabetes <i>OPTIONAL</i>	<p>Enter the code that corresponds to whether the patient has diabetes.</p> <p style="text-align: center;">1 = Yes 0 = No</p> <p> The <i>Diabetes Value Set</i> may be utilized but is not the only allowed method for data collection. Any documentation of a new or existing diagnosis of diabetes during the measurement period or year prior is acceptable.</p> <p> Verify that each cell has an accepted code.</p>	Number	Values outside allowable range
U	Patient Has Depression <i>OPTIONAL</i>	<p>Enter the code that corresponds to whether the patient had a diagnosis of depression during the measurement period.</p> <p style="text-align: center;">1 = Yes 0 = No</p> <p> The <i>Major Depression or Dysthymia (DEP-01) Value Set</i> may be utilized but is not the only allowed method for data collection. Any documentation of a new or existing diagnosis of depression during the measurement period is acceptable.</p> <p> Verify that each cell has an accepted code if data is entered.</p>	Number	Values outside allowable range
V	LDL Date	<p>Enter the date of the most recent LDL test result between 01/01/2019 and 12/31/2023.</p> <p> </p> <ul style="list-style-type: none"> • A test result from a provider outside of the reporting medical group is allowed if the result is documented in the reporting medical group's patient record and is the most recent test result within the allowable time period. • If the LDL result is too high to calculate, still enter the LDL test date if it is the most recent test result within the allowable time period. • LDL values within the last five years will be used to calculate potential exceptions to being on a statin medication. • Leave BLANK if an LDL test was not performed between 01/01/2019 and 12/31/2023. <p> Verify that entered dates are during the allowable time period.</p>	Date (mm/dd/yyyy or m/d/yyyy)	

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Column	Field Name	Details	Excel Format	Error Causes
W	LDL Value	<p>Enter the value of the most recent LDL test result between 01/01/2019 and 12/31/2023.</p> <p> Leave BLANK if an LDL test was not performed during the allowable time period, or if the most recent test result was too high to calculate.</p> <p> Verify that completed cells have valid LDL values.</p>	Number	
X	BP Date	<p>Enter the date of the most recent blood pressure result during the measurement period.</p> <p> <ul style="list-style-type: none"> • A test result from a provider outside of the reporting medical group is allowed if the result is documented in the reporting medical group’s patient record and is the most recent test result during the measurement period. • Blood pressures that are taken by the patient on a digital device in the context of a virtual (online or telephone) visit are acceptable. <ul style="list-style-type: none"> ○ Values from a digital device can be transferred to EMR electronically or documented in the EMR by the provider. • Do not include BP readings: <ul style="list-style-type: none"> ○ Taken during an acute inpatient stay or an ED visit. ○ Taken during an outpatient visit which was for the sole purpose of having a diagnostic test or surgical procedure performed. ○ Obtained the same day as a major diagnostic or surgical procedure. • Leave BLANK if a blood pressure was not obtained during the measurement period. <p>Additional information about acceptable blood pressure readings can be found in the Knowledge Base.</p> <p> Verify that dates are during the measurement period.</p> </p>	Date (mm/dd/yyyy or m/d/yyyy)	Values outside the allowable range.

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Column	Field Name	Details	Excel Format	Error Causes
Y	BP Systolic	<p>Enter the value of the most recent (as defined in Column X) systolic blood pressure result during the measurement period.</p> <ul style="list-style-type: none">  If more than one value is recorded on the most recent date, the lowest value may be submitted. It does NOT need to be from the same reading submitted in Column Z (BP Diastolic). NOTE: The systolic blood pressure is the upper number in the recorded fraction. For example, the systolic value for a blood pressure of 124/72 mmHg is 124. Leave BLANK if a blood pressure was not obtained during the measurement period. <p> Verify that completed cells have valid systolic values.</p>	Number	
Z	BP Diastolic	<p>Enter the value of the most recent (as defined in Column X) diastolic blood pressure result during the measurement period.</p> <ul style="list-style-type: none">  If more than one value is recorded on the most recent date, the lowest value may be submitted. It does NOT need to be from the same reading as submitted in Column Y (BP Systolic). NOTE: The diastolic blood pressure is the lower number in the recorded fraction. For example, the diastolic value for a blood pressure of 124/72 mmHg is 72. Leave BLANK if a blood pressure was not obtained during the measurement period. <p> Verify that completed cells have valid diastolic values.</p>	Number	

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Column	Field Name	Details	Excel Format	Error Causes
AA	Statin Medication	<p>Enter the code that corresponds to whether the patient was prescribed a statin medication or if a statin medication was active on the patient’s medication list during the measurement period.</p> <p><i>Please see Appendix A for a list of statin medications.</i></p> <p>1 = Yes, patient was prescribed a statin medication, or a statin medication was indicated as active on the patient’s medication list during the measurement period.</p> <p>2 = No, patient was not prescribed a statin medication and a statin medication was not indicated as active on the patient’s medication list during the measurement period.</p> <ul style="list-style-type: none">  • The following exceptions to statin medication use will be identified by the Data Portal based on the submitted LDL values (Column W): <ul style="list-style-type: none"> ○ Patients with ischemic vascular disease aged 21 to 75 years and an LDL result less than 40 mg/dL <p> Verify that each cell has an accepted code.</p>	Number	<ul style="list-style-type: none"> • Blank fields • Values outside allowable range
AB	Statin Medication Date	<p>Enter the date of the most recent statin prescription, order or review on an active medications list that included a statin during the measurement period.</p> <p> If a statin was not prescribed, ordered, or reviewed as an active medication during the measurement period (Column AA = 2), leave BLANK.</p> <p> Verify that dates are during the measurement period.</p>	Date (mm/dd/yyyy or m/d/yyyy)	Values outside the allowable range.

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Column	Field Name	Details	Excel Format	Error Causes
AC	Statin Medication Exception	<p>If the patient was NOT prescribed or did not have a statin medication active on their medication list during the measurement period (Column AA = 2), enter the value that corresponds to any of the following contraindications or exceptions:</p> <ul style="list-style-type: none"> 1 = Pregnancy at any time during the measurement period 2 = Active liver disease (liver failure, cirrhosis, hepatitis) 3 = Rhabdomyolysis 4 = End stage renal disease on dialysis 5 = Heart failure 8 = Allergy to statin 9 = Drug interaction with a listed medication taken during the measurement period (valid drug-drug interactions include HIV protease inhibitors, nefazodone, cyclosporine, gemfibrozil, and danazol). 10 = Intolerance using <i>Intolerance</i> (CHOL-06) or <i>Myopathy and Myositis</i> (CHOL-05) Value Sets to document intolerance to statins. <ul style="list-style-type: none">  If none of the above contraindications or exceptions are documented, leave BLANK.  NOTE: Items 1 – 5 above can be defined by diagnosis codes that may be used in data collection. Value Sets include: <i>Pregnancy V/Z Codes</i> (PREG-01), <i>Pregnancy Diagnosis Codes</i> (PREG-02), <i>Liver Disease</i> (CHOL-01), <i>Rhabdomyolysis</i> (CHOL-02), <i>ESRD on Dialysis</i> (CHOL-03), and <i>Heart Failure</i> (CHOL-04) <p> Verify that completed cells have an accepted code.</p>	Number	Values outside the allowable range
AD	Statin Medication Exception Date	<p>If the patient has a documented contraindication or exception (Column AC = 1 – 10) enter the date of the contraindication or exception.</p> <ul style="list-style-type: none">  If only the month and year are known, enter the first day of the month. <p> Verify that completed cells have a valid date prior to the end of the measurement period.</p>	Date (mm/dd/yyyy or m/d/yyyy)	Values outside of the allowable range

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Column	Field Name	Details	Excel Format	Error Causes
AE	Aspirin or Anti-platelet Medication	<p>For patients with Ischemic Vascular Disease (IVD), enter the code that corresponds to whether the patient is prescribed a daily aspirin product or antiplatelet medication or if an aspirin product or anti-platelet medication was active on the patient’s medication list during the measurement period.</p> <p><i>Please see Appendix B for methods to identify appropriate aspirin products or antiplatelet medications.</i></p> <p>1 = Yes, patient was prescribed a daily aspirin product or antiplatelet medication, or one was indicated as active on the patient’s medication list during the measurement period.</p> <p>2 = No, patient was not prescribed a daily aspirin product or antiplatelet medication and one was not indicated as active on the patient’s medication list during the measurement period.</p> <p> Aspirin/narcotic combination medications do not qualify as a daily aspirin product.</p> <p> Verify that each cell has an accepted code.</p>	Number	Values outside of the allowable range
AF	Aspirin or Anti-platelet Medication Date	<p>For patients with IVD, enter the date of the most recent daily aspirin product or anti-platelet medication prescription, order or review of an active medication list that included a daily aspirin product or anti-platelet medication during the measurement period.</p> <p> If a daily aspirin product or anti-platelet medication was not prescribed, ordered, or reviewed as an active medication during the measurement period (Column AE = 2), leave blank</p> <p> Verify that entered dates are during the measurement period.</p>	Date (mm/dd/yyyy or m/d/yyyy)	Values outside of the allowable range

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Column	Field Name	Details	Excel Format	Error Causes
AG	Aspirin or Anti-platelet Medication Exception	<p>For patients with IVD who were not prescribed or taking a daily aspirin product or anti-platelet medication during the measurement period (Column AE = 2), enter the code that corresponds to any of the following contraindications or exceptions:</p> <ul style="list-style-type: none"> 1 = Prescribed oral anti-coagulant medication during the measurement period (see Appendix B for more information) 2 = History of gastrointestinal bleeding 3 = History of intracranial bleeding 4 = Bleeding disorder 5 = Allergy to aspirin or anti-platelets <p> • If none of the above contraindications or exceptions are documented, leave BLANK</p> <p>• NOTE: Items 2, 3, and 4 above can be defined by diagnosis codes that <u>may</u> be used in data collection. Value Sets include <i>GI Bleed (ASA-01)</i>, <i>Intracranial Bleed (ASA-02)</i>, and <i>Bleeding Disorders (ASA-03)</i>.</p> <p> Verify that completed cells have an accepted code.</p>	Number	Values outside of the allowable range
AH	Aspirin or Anti-platelet Medication Exception Date	<p>If the patient has a documented contraindication or exception (Column AG = 1 - 9) enter the date of the contraindication or exception.</p> <p> If only the month and year are known, enter the first day of the month.</p> <p> Verify that completed cells have a valid date prior to the end of the measurement period.</p>	Date (mm/dd/yyyy or m/d/yyyy)	Values outside of the allowable range
AI	Tobacco Status Documentation Date	<p>Enter the <u>most recent</u> date that the patient's tobacco status was documented during the measurement period or year prior.</p> <p> If the patient's tobacco status is not documented or the date of the documentation cannot be determined, leave BLANK.</p> <p> Verify that entered dates are within the measurement period or year prior.</p>	Date (mm/dd/yyyy or m/d/yyyy)	Values outside of the allowable range

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Column	Field Name	Details	Excel Format	Error Causes
AJ	Tobacco Status	<p>Enter the code that corresponds to the patient's <u>most recent</u> tobacco status during the measurement period or year prior.</p> <p>1 = Tobacco free (patient does not use tobacco; patient was a former user and is not a current user) 2 = No documentation 3 = Current tobacco user (tobacco includes any number of cigarettes, cigars, pipes, or smokeless tobacco)</p> <ul style="list-style-type: none">  • If the date of the tobacco status documentation is not documented in the patient record, enter 2.  • E-cigarettes are not considered tobacco products. <p>Verify that each cell has an accepted code.</p>	Number	<ul style="list-style-type: none"> • Blank fields • Values outside allowable range

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DATA QUALITY CHECKS



MNCM recommends that medical groups complete several quality checks of the data prior to file upload. Quality checks improve data accuracy, reduce the likelihood of errors, and ensure that the data can be successfully validated upon audit.

1. FILE CHECKS

Correct any of the following as appropriate:

- Entry errors
- Values found to be out of range (e.g., lab values, date of birth)
- Missing data

2. VERIFY CLINICAL DATA

- Review 8-10 randomly selected records and compare with documentation within the patients' medical record.
- Correct any errors identified in records sampled.
- Determine if errors identified are isolated or indicative of a larger data collection issue.

3. GENERAL CHECKS

- Review quality checks listed in the Details section of each data element in the Data Elements and Field Specifications table (✔ symbol).
- Verify exclusions are accurate and removed from the data file.
- Verify fields intended to be blank are blank. Do not enter hyphens, zeros, or periods.
- Remove blank rows at bottom of the spreadsheet.

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APPENDICES

Appendix A: Statin Medications

This list is provided for guidance and may not be inclusive of all medications within this therapeutic class; especially new drugs that have recent FDA approval. Questions about statin medications can be directed to support@mncm.org.

Table 1: Statin Medications

Generic Name	Brand / Trade Name
amlodipine besylate and atorvastatin	Caduet®
atorvastatin	Lipitor®
ezetimibe and simvastatin	Vytorin®
ezetimibe and rosuvastatin	Roszet®
ezetimibe and atorvastatin	Lypqozet®
fluvastatin	Lescol XL® or Lescol®^
lovastatin	Mevacor®^, Altacor™ or Altoprev®
pitavastatin	Livalo®, Zypitamag™, Nikita®^
pravastatin	Pravachol®
rosuvastatin	Crestor®, Ezallor™
simvastatin	Zocor®, FloLipid

^ Discontinued. Note: some branded drugs have been discontinued, but generic equivalent still available.

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Appendix B: Aspirin, Anti-Platelet and Anticoagulant Medications

The intent of the daily aspirin/anti-platelet component of this measure is to reduce cardiovascular risk for patients with diabetes who have Ischemic Vascular Disease (IVD). Unless contraindicated, taking daily aspirin or an anti-platelet medication can prevent the formation of clots by reducing platelet adhesion and reduce the risk of heart attack, stroke, or other vascular events.

Aspirin and Aspirin Containing Products

Products containing solely aspirin, any dosage, can be counted as meeting the daily aspirin use measure component. The following are a few combination products that are also acceptable for the intent of daily aspirin use:

- Aspirin AND stomach acid reducer (buffered or with proton pump inhibitor)
- Aspirin AND nitrate (chest pain)
- Aspirin AND statin

However, not all products containing an aspirin derivative can be assumed to meet the intent of daily aspirin use. Most of these combination products would not be taken on a daily basis and should not be considered daily aspirin use. Many of the combination products are intended to be used on an as needed basis for control of pain or cold/ flu symptoms. Combination products containing aspirin AND any of the following are NOT acceptable as meeting the intent of daily aspirin use:

- Acetaminophen
- Caffeine
- Narcotics
- Muscle relaxants
- Decongestants
- Antihistamines

Aspirin products are most frequently obtained over the counter, therefore prescribed is defined by any of the following: daily aspirin product indicated in the medical record, aspirin product is ordered, aspirin product is active on the medication list, or aspirin product prescription is given to the patient.

Oral Anti-Platelet Medications

Anti-platelet medications may also be used to meet the intent of daily aspirin use. Like aspirin products, these medications can prevent the formation of clots by reducing platelet adhesion. This list is provided for guidance and may not be inclusive of all medications within these therapeutic classes; especially new drugs that have recent FDA approval. Questions about aspirin, anti-platelet and anticoagulant medications can be directed to support@mncm.org.

Table 2: Oral Anti-Platelet Medications

Generic Name	Brand / Trade Name
aspirin and dipyridamole	Aggrenox®
prasugrel	Effient®
cilostazol	Pletal®
clopidogrel	Plavix®
ticagrelor	Brilinta®
dipyridamole	Persantine®
vorapaxar	Zontivity®

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Oral Anti-Coagulant Medications

Anti-coagulant medications, also known as blood-thinners, can frequently be a contraindication to taking daily aspirin or anti-platelet medication. This, however, is not an absolute contraindication as some patients on lower doses of warfarin can also safely take daily aspirin. If the patient is indeed taking daily aspirin in addition to an anti-coagulant, it is acceptable to submit as taking daily aspirin and not indicate a contraindication/exception. Also, temporary injectable administration of an anti-coagulant medication (e.g., Heparin via IV in the hospital) does not count as an exception. This list is provided for guidance and may not be inclusive of all medications within this therapeutic class; especially new drugs that have recent FDA approval. Questions about aspirin, anti-platelet and anticoagulant medications can be directed to support@mncm.org.

Table 3: Oral Anti-coagulant Medications

Generic Name	Brand / Trade Name
apixaban	Eliquis®
Betrixaban [^]	Bevyxxa® [^]
dabigatran etexilate	Pradaxa®
edoxaban	Savaysa®
rivaroxaban	Xarelto®
warfarin sodium	Coumadin®, Jantoven®

[^] discontinued