



FACT SHEET

Summary of AMI and HF Changes for 10/1/09+ Discharges

All HF Measures and AMI-1, AMI-2, AMI-3, AMI-4, AMI-5, AMI-9, AMI-T1a, and AMI-T2:

- ▶ Added Discharge Status code “21” (discharge to prison/court/law enforcement) to the inclusions for all HF measures and those AMI measures listed above.

The National Uniform Billing Committee (NUBC) added this new code in their UB-04 update.

AMI-7, AMI-7a, AMI-8, and AMI-8a:

- ▶ Removed *Comfort Measures Only* as an exclusion. Patients with documented comfort measures only will now remain included in the measures.

False exclusions will be reduced. Only patients receiving treatment are included in these measures; comfort measures, therefore, do not apply. Patients receiving primary reperfusion therapy should receive it in a timely manner regardless of comfort measures only status. Additionally, this change was made to maintain consistency with the current ACC/AHA performance measures.

- ▶ Added “Balloon pump insertion” and “respiratory failure requiring intubation” to the list of examples noted in the denominator exclusions: Patients who did not receive fibrinolytic therapy/PCI within 30/90 minutes and had a reason for delay documented by a physician/APN/PA (e.g., social, religious, initial concern or refusal, cardiopulmonary arrest, balloon pump insertion, respiratory failure requiring intubation).

This change was made in response to Q&As and voiced concerns from the provider community. The revised data element guidelines no longer require that balloon pump insertion or intubation be specifically documented as the reason for a delay in PCI/fibrinolysis. Physician/APN/PA documentation that balloon pump insertion or intubation occurred within 30/90 minutes automatically counts as a reason for delay in fibrinolysis/PCI.

- ▶ Changed description sections in the measure information forms to align with measure descriptions used in the ACC/AHA measures.

This change was made to maintain consistency with the current ACC/AHA performance measures.

Table 1-1. Summary of new changes in abstraction and changes provided for clarification only.

Data Element or Table	New or Clarification	Change
Adult Smoking History	Clarification	<ul style="list-style-type: none"> Changed abstraction guidelines to clarify that to capture smoking history documentation as positive, it must be unquestionable. If there is no definitive documentation of current smoking or smoking within one year prior to arrival in any of the only acceptable sources, select “No” (e.g., “Smoked in last year: ?”).
Comfort Measures Only	New	<ul style="list-style-type: none"> Added abstraction guideline, which directs the abstractor to <i>no longer count</i> inclusion terms clearly written in the negative (e.g., “Not a hospice candidate”). Added exclusion terms: DNR-Comfort Care Arrest, DNR-CCA, DNRCC-A, DNRCC-Arrest, and DNRCCA
All medication prescribed at discharge data elements	Clarification	<ul style="list-style-type: none"> Changed abstraction guideline to clarify that contradictory documentation includes cases where one source shows a “hold” on a discharge medication and other documentation indicates the medication is not on hold at discharge. When there is contradictory documentation, credit cannot be taken.
Discharge Instructions Address Medications	New	<ul style="list-style-type: none"> Added exception to the abstraction guideline which directs the abstractor to disregard references to minerals (laxatives, antacids, vitamins, etc.) – Potassium should no longer be disregarded. Changed abstraction guideline to clarify that contradictory documentation includes cases where one source shows a “hold” on a discharge medication and other documentation indicates the medication is not on hold at discharge. Added abstraction guideline to clarify how to handle cases where there is only documentation of a plan to start/restart a medication after discharge (e.g., “Hold Lasix x 2 days,” “Start Plavix as outpatient”), and it is <i>not</i> listed as a discharge medication elsewhere (e.g., “Lasix,” “Plavix”).

Data Element or Table	New or Clarification	Change
LVF Assessment	New	<ul style="list-style-type: none"> • Shortened and simplified abstraction guidelines to make abstraction clearer and easier. • Imported Inclusion lists from table 1.2, Appendix H, so that instructions for abstraction are all located in one place for the abstractor. • Added guideline which clarifies that if there is documentation of both a reason for not assessing LVSF <i>and</i> an LVSF assessment (or plan after discharge), select “Yes.” • Deleted “Other Test” Inclusion: Wall motion study • Modified LVSF Inclusions: Akinesia, Dyskinesia, and Hypokinesia need to be described as left ventricular
LVSD	Clarification	<ul style="list-style-type: none"> • Changed abstraction guidelines to clarify that “Interpretation” and “Final Diagnosis” sections of test reports should be considered synonymous with “Impression”/“Conclusion” sections. • Modified Inclusion lists to address “systolic failure” terminology. • Made minor rewording changes to further clarify methodology.
Pre-Arrival Lipid-Lowering Agent	New	<ul style="list-style-type: none"> • Deleted abstraction guideline which directed the abstractor to look at the patient’s medication regimen “prior to acute care treatment.” If a patient was started on a lipid-lowering medication at a transferring acute care hospital, the abstractor will now select “Yes.”
Reason for Delay in Fibrinolysis AND Reason for Delay in PCI	New	<ul style="list-style-type: none"> • Changed guidelines to no longer require that a balloon pump insertion or intubation be specifically documented as the reason for a delay in PCI/fibrinolysis. Physician/APN/PA documentation of balloon pump insertion or intubation occurring within 30/90 minutes automatically counts as an acceptable reason for delay.

Data Element or Table	New or Clarification	Change
Reason for No ACEI and No ARB at Discharge	New	<ul style="list-style-type: none"> Added abstraction guideline which allows for nurse notation of a hold due to a blood pressure falling outside parameters set in a physician order (e.g., “Hold perindopril for SBP < 100”) to <i>count</i> as a reason for not prescribing, consistent with SCIP’s <i>Reason for Not Administering Beta-Blocker - Perioperative</i>.
Reason for No Beta-Blocker at Discharge	New	<ul style="list-style-type: none"> “Bradycardia (HR < 60) on day of or day prior to discharge while not on a beta-blocker” is no longer an automatic contraindication. The physician/APN/PA must now make the <i>linkage</i> (e.g., “HR running in 50s. Hold off on beta-blocker therapy.”). Added abstraction guideline which allows for nurse notation of a hold due to a blood pressure or heart rate falling outside parameters set in a physician order (e.g., “Hold atenolol for HR < 60”) to <i>count</i> as a reason for not prescribing, consistent with SCIP’s <i>Reason for Not Administering Beta-Blocker – Perioperative</i>.
Left Ventricular Assistive Device (LVAD) and Heart Transplant Table 2.2 (appendix A)	New	<ul style="list-style-type: none"> Deletion: 37.64, Removal of external heart assist system(s) or device(s). (HF measures are discharge measures. Need to include these patients, as they would not have an LVAD device present at the time of discharge.)
Aspirin and Aspirin-Containing Medications Table 1.1 (appendix C)	Clarification	<ul style="list-style-type: none"> Deletions: Aspirin/Pravachol, Aspirin/pravastatin, Pravigard, Pravigard PAC (removed from the US market)
Warfarin Table 1.4 (appendix C)	Clarification	<ul style="list-style-type: none"> Changed name: Barr Warfarin Sodium to Warfarin Sodium (consistency with other measure sets) Deletions: Dicumarol, Panwarfin (not on US market)

Data Element or Table	New or Clarification	Change
Lipid-Lowering Medications Table 1.6 (appendix C)	Clarification	<ul style="list-style-type: none"> • Add: Atoprev, Fluvastatin XL, Lovastatin/niacin, Simvastatin/niacin (consistency with other measure sets). • Add: Fenofibric Acid, Trilipix (newly approved fibrate) • Deletions: Pravachol/aspirin, Pravastatin/aspirin, Pravigard, Pravigard PAC (removed from the US market)
LVSF Assessment Inclusion Table 1.2 (appendix H)	Clarification	<ul style="list-style-type: none"> • Deleted. Moved Inclusion lists into <i>LVF Assessment</i> definition.

For a complete list of changes please see the “Release Notes” located in the Specifications Manual for National Hospital Quality Measures for discharges 10/1/2009. The manual can be found at

<http://www.qualitynet.org/dcs/ContentServer?c=Page&pagename=QnetPublic%2FPage%2FQnetTier4&cid=1228695698425>

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