	DHCS QUALITY INCENTIVE POOL (QIP) PROGRAM	
	PY4 Measure Set	Towns of Massacras
Income sing Health	Paralle .	Type of Measure
Improving Health		Driority
Q-IHE1	Improving Health Equity	Priority
Q-IHE2	Improving Health Equity	Elective
Primary Care Acce	ess and Preventative Care	
Q-BCS	Breast Cancer Screening (BCS) *i	Priority
Q-CCS	Cervical Cancer Screening (CCS) <sup>i</sup>	Priority
Q-WCV	Child and Adolescent Well Care Visits <sup>i</sup>	Priority
Q-CIS10	Childhood Immunization Status (CIS 10) <sup>i</sup>	Priority
Q-CHL	Chlamydia Screening in Women (CHL) <sup>i</sup>	Priority
Q-CMS130	Colorectal Cancer Screening <sup>i</sup>	Priority
Q-DEV	Developmental Screening in the First Three Years of Life	Priority
Q-CMS349	HIV Screening Measure <sup>i</sup>	Elective
Q-IMA	Immunizations for Adolescents <sup>i</sup>	Priority
Q-LSC	Lead Screening in Childreni	Elective
ζ 250	Preventive Care and Screening: Body Mass Index (BMI)	2.000.70
Q-CMS69	Screening and Follow-Up Plani	Elective
Q-CMS147	Preventive Care and Screening: Influenza Immunization	Priority
<u> </u>	Preventive Care and Screening: Screening for Depression and	,
Q-CDF	Follow-Up Plan (CDF) <sup>i</sup>	Priority
	Preventative Care and Screening: Tobacco Use - Screening and	,
Q-CMS138	Cessation Intervention	Priority
	Rate 1 (informational only)	•
	Rate 2	
	• Rate 3 <sup>i</sup>	
	Weight Assessment & Counseling for Nutrition and Physical	
Q-WCC	Activity for Children & Adolescents <sup>i</sup>	Elective
	• BMI	
	Counseling for Nutrition	
	Counseling for Physical Activity	
Q-W30	Well-Child Visits in the First 30 Months of Life (W30) <sup>i</sup>	Priority
	, , ,	·
Behavioral Health		
ال معد يا		
Q-COB ♥	Concurrent Use of Opioids and Benzodiazepines (COB-AD) *	Elective
	Depression Remission or Response for Adolescents and	<b>-</b> 1
Q-DRR	Adults (DRR-E)	Elective
	Follow-Up PHQ-9 (Adults)	
	Depression Remission (Adults)	
	Depression Response (Adults)	
	Follow-Up PHQ-9 (Adolescents) - informational only	

	Depression Remission (Adolescents) - informational only	
	Depression Despense (Adelescents) informational cult.	
	Depression Response (Adolescents) - informational only  Depression Response (Adolescents) - informational only	
0.5114	Follow-Up After Emergency Department Visit for Alcohol and	Election
Q-FUA	Other Drug Abuse or Dependencei	Elective
	• 30 Days	
	• 7 Days	
a aug M	Use of Opioids at High Dosage in Persons Without Cancer	-1
Q-OHD ♥	(OHD-AD) *	Elective
Care Coordination		
Care Coordination		
Q-TRC	Medication Reconciliation Post Discharge (MRP) *	Elective
Q-PCR ♥	Plan All-Cause Readmissions (PCR)	Elective
Q T CIT V	Train cause recommissions (Ferry	Licetive
Care of Acute and	Chronic ConditionsCardiovascular	
Q-CBP	Controlling High Blood Pressure (CBP)i	Priority
<u> </u>	constraints and a second constraints	
	Coronary Artery Disease (CAD): Angiotensin-Converting	
	Enzyme (ACE) or Angiotensin Receptor Blocker (ARB) Therapy	
Q-QPP118	Diabetes or Left Ventricular Systolic Dysfunction (LVSD < 40%)	Elective
Q-QPP6	Coronary Artery Disease (CAD): Antiplatelet Therapy	Elective
4 4110	Heart Failure (HF): Angiotensin-Converting Enzyme (ACE)	LICCUVC
	Inhibitor or Angiotensin Receptor Blocker (ARB) or Angiotensin	
	Receptor-Neprilysin Inhibitor (ARNI) Therapy for Left	
Q-CMS135	Ventricular Systolic Dyfunction (LVSD) *	Elective
Q-CIVI3133	Statin Therapy for the Prevention and Treatment of	Liective
Q-CMS347	Cardiovascular Disease <sup>i</sup>	Elective
Q-CIVI3347	Cardiovasculai Disease	Liective
Care of Acute and	Chronic ConditionsDiabetes	
care of Acate and	Comprehensive Diabetes Care: HbA1c Poor Control (>9.0%)	
Q-CDC-H9 <b>↓</b>	(CDC-H9) *i	Priority
Q-CDC-E	Comprehensive Diabetes Care: Eye Exam (CDC-E) <sup>i</sup>	Priority
Q CDC L	Comprehensive Diabetes Care: Medical Attention for	THOTICY
Q-CDC-N	Nephropathy (CDC-MN) <sup>i</sup>	Elective
Q CDC IV	reprincipating (edic wing)	LICCUVC
Care of Acute and	Chronic ConditionsHIV	
Q-HVL	HIV Viral Suppression (HVL-AD)	Priority
		,
Care of Acute and	Chronic ConditionsRespiratory	
Q-AMR	Asthma Medication Ratio (AMR) *i	Priority
-		1
Q-PCE	Pharmacotherapy Management of COPD Exacerbation (PCE) *i	Elective
-	1, 5	

	Systemic Corticosteroid	
	Bronchodilator	
	Bioticinoanacoi	
Overuse/Appropr	riateness	
i i i i i i i i i i i i i i i i i i i		
Q-URI	Appropriate Treatment for Upper Respiratory Infection (URI) <sup>i</sup>	Elective
	Avoidance of Antibiotic Treatment for Acute	
Q-AAB	Bronchitis/Bronchiolitis (AAB) <sup>i</sup>	Elective
	Emergency Medicine: Emergency Department Utilization of CT	
	for Minor Blunt Head Trauma for Patients Aged 18 Years and	
Q-QPP415	Older	Elective
Q-LBP	Use of Imaging Studies for Low Back Pain (LBP)i	Elective
Maternal and Per	inatal Health	
Q-PC02 🖖	Cesarean Birth (PC02-CH)	Elective
Q-CCW	Contraceptive Care – All Women Ages 15-44	Elective
Q-PC05	Exclusive Breast Milk Feeding (PC-05)	Elective
Q-PPC-PST	Prenatal and Postpartum Care: Postpartum Care (PPC-PST) *i	Priority
	Prenatal and Postpartum Care: Timeliness of Prenatal Care	
Q-PPC-PRE	(PPC-PRE) *i	Priority
<b>Experience of Car</b>	e	
Q-QPP47	Advance Care Plan	Elective
Patient Safety		
Q-STK-2	Discharged on Antithrombotic Therapy	Elective
	Perioperative Care: Venous Thromboembolism (VTE)	
Q-QPP23	Prophylaxis (When Indicated in ALL Patients)	Elective
	Prevention of Central Venous Catheter (CVC) – Related	
Q-QPP76	Bloodstream Infections	Elective
_		
Q-CDI ♥	Reduction in Hospital Acquired Clostridium Difficile Infections	Elective
Q-SSI ♥	Surgical Site Infection (SSI)	Elective
Ψ	A lower rate indicates better performance	
	Measures eligible for use of approved community partner's	
,	data (DMPHs only)	
**	* All benchmarks are subject to change. Please note that QIP	
	PY4 is currently pending CMS approval.	
	Expected to have updated (and final) MY2020 benchmarks	
	i released in Fall 2021	