

## PTE 2008 Ischemic Vascular Disease Specifications

**Defining the Population:** Practices should report on patients aged 18-80 years old with an ischemic vascular disease (IVD) for at least 12 months. (See AHA/ASA/NCQA definitions for Ischemic Vascular Disease (IVD) at [www.ncqa.org/hsrp](http://www.ncqa.org/hsrp)) In addition, please adhere to the following criteria:

- 1) Include all patients regardless of payer (e.g. commercial, Medicare, Medicaid, self-pay, uninsured, etc.).
- 2) Include only patients who are active members of your practice. For example:
  - a) You are the assigned PCP (e.g. HMO, PPO, MaineCare, etc.) or
  - b) The patient has had 2 or more visits of any type to the practice within the past 2 years, and there is no other PCP
  - c) AND the patient has been continuously enrolled in your practice from 1/1/07 to 12/31/07.
- 3) Exclusions:
  - a) Patient has died.
  - b) Patient no longer receives care from the practice.
  - c) Patient receives their primary care predominantly from another practice (i.e. your practice only saw them for coverage of another practice).
- 4) May exclude:
  - a) Patients in hospice or comfort measures only
  - b) Patients with dementia
  - c) Patients in Nursing Home for whom you are no longer the PCP
  - d) Patients in Nursing Home with life expectation of less than 2-5 years
  - e) Patients with End Stage Renal Disease
- 5) Clinically verify that all the patients meet the definition for IVD.

**Note:**

- Participating practices must report measures on all patients with pertinent IVD ICD-9 codes and CPT codes as identified below and who were continuously enrolled in the practice from January 1, 2007 – December 31, 2007
- Practices may choose to report measures on patients receiving care in the practice for partial year **if they wish** to include these patients

### **Suggested steps to find all eligible patients in practice for IVD reporting:**

1. Use your billing system or Registry to find all patients who potentially have cardiovascular disease.
2. Find all patients with one or more office visits in past two years with billing ICD-9 codes of any of the following:
  - Acute MI: 410 and 411
  - 433.10 (CAD)
  - Coronary Heart Disease: 411, 414

Stable Angina:413

CVD otherwise Unspecified: 429

Peripheral Arterial Disease: 440, 444, 447

Ischemia, 435

Stroke: 433.1, 437, 438., or

Athero-embolism: 444, 445.

Additional detail of ICD-9 Codes:

410, 410.00-02, 410.0-.9, 410.10-.12, 410.20-.22, 410.30-.32, 410.40-.42,

410.50-.52, 410.60-62, 410.70-.72, 410.80-.82, 410.90-.92,

411, 411.0, 411.1, 411.81, 411.89411, 411.0, 411.1, 411.81, 411.89

414.0,414.00, 414.8, 414.9

429.2, 433.10

3. Also include patients with CPT procedures for
  - a. Percutaneous Coronary Interventions: 92980-92982, 92984- 92988, and
  - b. Coronary Artery Bypass Graft: 335100-19, 33521-23, 33533-36, 33542, 33545, 35500-35571, 35600-01,35606, 335612, 335616, 335621,335623,35626, 35631,35636, 35641, 35642, 35645-47, 35650-51, 35654, 35656, 35661, 35663, 35665-6, 35671-2

Reference: National Committee on Quality Assurance Heart Stroke Recognition

Program: <http://www.ncqa.org/hsrp/>

**For 2008, Depression and BMI indicators have been included in the metrics for Ischemic Vascular Disease.**

- Depression: Percent of patients for whom you have done a depression  
SCREENING: A commonly used screening tool is the first 2 questions of the PHQ-9. If you use equivalent tool please include the name of the tool in the comments space.
- Obesity/BMI Percent of patients with the diagnosis for whom you have a current BMI noted in the medical record or in the registry.

**For Practices With A Registry or EMR:**

Please fax a summary report which contains the required measures on the requested number of patients, WITHOUT PATIENT IDENTIFIERS, to the MHIC at 622-7086 attention Mindy Perkins. (This should only be one or a few pages.)

**For Practices without a Registry or EMR:**

A data collection worksheet is downloadable at [www.mhic.org](http://www.mhic.org) , click Pathways to Excellence