

QI 01

Example for Hypertension  
Measures

# Step 1: Collect the clinical quality measure percentage for C: Chronic/acute care clinical measures

1. Gather the quality measure percentages for hypertension control
  1. Either by report
  2. Manual chart audit

Example measure for HTN Control: 60%

- **HEDIS & NQF 0018 measure description:**
  - *“% of patients 18 to 85 years of age who had a diagnosis of hypertension and whose blood pressure was adequately controlled during the measurement year/period”*
- **Links to measure information:**
  - <http://www.qualityforum.org/QPS/MeasureDetails.aspx?standardID=1236&print=0&entityTypeID=1>
  - <https://www.ncqa.org/hedis/measures/controlling-high-blood-pressure/>

QI 01 (Core) Clinical Quality Measures: Monitors at least five clinical quality measures across the four categories (must monitor at least one measure of each type): A. Immunization measures. B. Other preventive care measures. C. Chronic or acute care clinical measures. D. Behavioral health measures.	
GUIDANCE	EVIDENCE
Measuring and reporting clinical quality measures helps practices deliver safe, effective, patient-centered and timely care. The practice shows that it monitors at least five clinical quality measures, including at least: <ul style="list-style-type: none"> <li>• One immunization measure.</li> <li>• One preventive care measure (not including immunizations).               <ul style="list-style-type: none"> <li>– A measure on oral health counts as a preventive clinical quality measure.</li> </ul> </li> <li>• One chronic or acute care clinical measure.</li> <li>• One behavioral health measure.</li> </ul> The data must include the measurement period, the number of patients represented by the data, the rate and the measure source (e.g. HEDIS, NQF #, measure guidance).	<ul style="list-style-type: none"> <li>• Report</li> </ul>

# Step 2: Set a goal and create a plan to improve the quality measure hypertension.

1. The purpose is to set an achievable goal that your practice/providers can reach.
2. This does not have to be a large goal.
3. If you achieve that goal you will then get credits in another criteria. (QI12)
4. You will also need to identify the patients whose BP is not in control.

1. Example: "We aim to improve our hypertension control rates by 10%.
2. Our plans include: Partnering with Southeastern Idaho Public Health in their blood pressure cuff program. In this program we will provide electronic home blood pressure monitors, educate patients on how to use the monitor and document their readings, and educate patients on how to control blood pressure through stress reduction, exercise, and a low sodium diet."

QI 08 (Core) Goals and Actions to Improve Clinical Quality Measures: Sets goals and acts to improve upon at least three measures across at least three of the four categories:

- A. Immunization measures.
- B. Other preventive care measures.
- C. Chronic or acute care clinical measures.
- D. Behavioral health measures.

# Step 3: Achieve your goal!

- If you demonstrate improved performance that you will get credit for QI12
- *Please note in order to get credit you have to improve on **two different measures** from QI08, QI09, or QI11.*

QI 12 (2 Credits) Improved Performance: Achieves improved performance on at least two performance measures.	
GUIDANCE	EVIDENCE
The practice demonstrates that it has improved performance on at least two measures. Demonstration of improvement is determined by the goals set in QI 08, QI 09 or QI 11.	• Report <i>OR</i> • Quality Improvement Worksheet