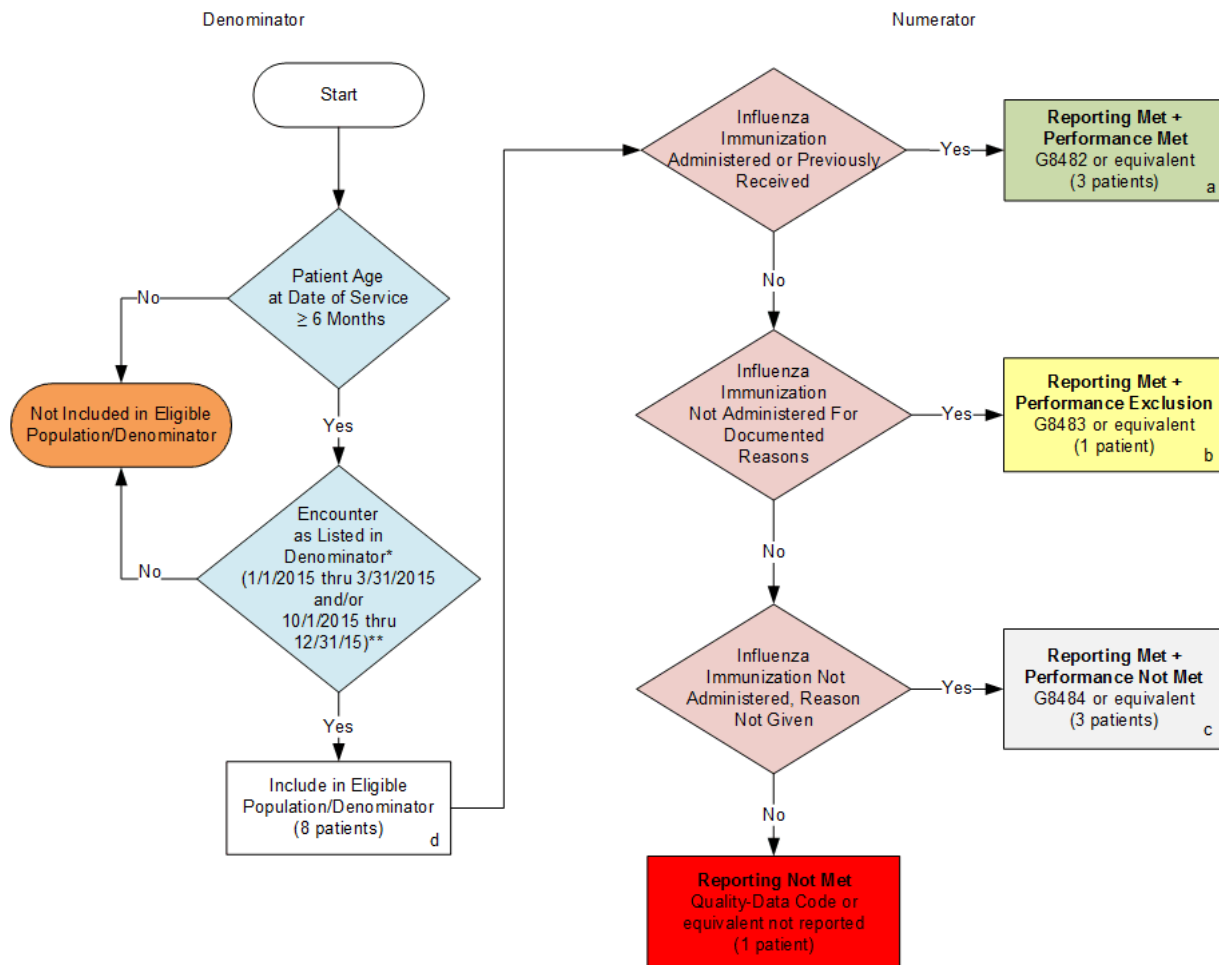


**2015 Claims/Registry Individual Measure Flow**  
**PQRS #110 NQF #0041: Preventive Care and Screening: Influenza Immunization**



**SAMPLE CALCULATIONS:**

**Reporting Rate=**

$$\frac{\text{Performance Met (a=3 patients)} + \text{Performance Exclusion (b=1 patients)} + \text{Performance Not Met (c=3 patients)}}{\text{Eligible Population / Denominator (d=8 patients)}} = \frac{7 \text{ patients}}{8 \text{ patients}} = 87.50\%$$

**Performance Rate=**

$$\frac{\text{Performance Met (a=3 patients)}}{\text{Reporting Numerator (7 patients) - Performance Exclusion (b=1 patients)}} = \frac{3 \text{ patients}}{6 \text{ patients}} = 50.00\%$$

\* See the posted Measure Specification for specific coding and instructions to report this measure.

\*\* This measure is only to be reported a minimum of once for visits occurring between January 1, 2015 and March 31, 2015 for the 2014-2015 influenza season AND a minimum of once for visits occurring between October 1, 2015 and December 31, 2015 for the 2015-2016 influenza season for patients seen during the reporting period.

NOTE: Reporting Frequency: Patient-Periodic

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**2015 Claims/Registry Individual Measure Flow**  
**PQRS #110 NQF #0041: Preventive Care and Screening: Influenza Immunization**

Please refer to the specific section of the Measure Specification to identify the denominator and numerator information for use in reporting this Individual Measure.

1. Start with Denominator
2. Check Patient Age:
  - a. If the Age is greater than or equal to 6 months of age on Date of Service and equals No during the measurement period, do not include in Eligible Patient Population. Stop Processing.
  - b. If the Age is greater than or equal to 6 months of age on Date of Service and equals Yes during the measurement period, proceed to check Patient Encounter.
3. Check Encounter Performed:
  - a. If Encounter as Listed in the Denominator equals No, do not include in Eligible Patient Population. Stop Processing.
  - b. If Encounter as Listed in the Denominator equals Yes, include in the Eligible population.
4. Denominator Population:
  - a. Denominator population is all Eligible Patients in the denominator. Denominator is represented as Denominator in the Sample Calculation listed at the end of this document. Letter d equals 8 patients in the sample calculation.
5. Start Numerator
6. Check Influenza Immunization Administered or Previously Received:
  - a. If Influenza Immunization Administered or Previously Received equals Yes, include in Reporting Met and Performance Met.
  - b. Reporting Met and Performance Met letter is represented in the Reporting Rate and Performance Rate in the Sample Calculation listed at the end of this document. Letter a equals 3 patients in Sample Calculation.
  - c. If Influenza Immunization Administered or Previously Received equals No, proceed to Influenza Immunization Not Administered for Documented Reasons.
7. Check Influenza Immunization Not Administered for Documented Reasons:
  - a. If Influenza Immunization Not Administered for Documented Reasons equals Yes, include in Reporting Met and Performance Exclusion.
  - b. Reporting Met and Performance Exclusion letter is represented in the Reporting Rate and Performance Rate in the Sample Calculation listed at the end of this document. Letter b equals 1 patient in the Sample Calculation.
  - c. If Influenza Immunization Not Administered for Documented Reasons equals No, proceed to Influenza Immunization was Not Administered, Reason Not Given.
8. Check Influenza Immunization Not Administered, Reason Not Given:
  - a. If Influenza Immunization Not Administered, Reason Not Given equals Yes, include in the Reporting Met and Performance Not Met.
  - b. Reporting Met and Performance Not Met letter is represented in the Reporting Rate in the Sample Calculation listed at the end of this document. Letter c equals 3 patients in the Sample Calculation.

- c. If Influenza Immunization Not Administered, Reason Not Given equals No, proceed to Reporting Not Met.

9. Check Reporting Not Met:

- a. If Reporting Not Met equals No, Quality Data Code or equivalent not reported. 1 patient has been subtracted from the reporting numerator in the sample calculation.

**SAMPLE CALCULATIONS:**

**Reporting Rate=**

$$\frac{\text{Performance MeT (a=3 patients)} + \text{Performance Exclusion (b=1 patients)} + \text{Performance Not Met (c=3 patients)}}{\text{Eligible Population / Denominator (d=8 patients)}} = \frac{7 \text{ patients}}{8 \text{ patients}} = 87.50\%$$

**Performance Rate=**

$$\frac{\text{Performance MeT (a=3 patients)}}{\text{Reporting Numerator (7 patients) - Performance Exclusion (b=1 patients)}} = \frac{3 \text{ patients}}{6 \text{ patients}} = 50.00\%$$