



## Telehealth

### Measures At A Glance

**Disclaimer:** URAC reserves the right to update its measures and measure sets to maintain measure relevancy and to remedy any unintended consequences that may arise during implementation. Further, URAC may add and/or align its measures with regulatory requirements of federal, state, and local governments.

**Updated:** 07/10/2017



### Mandatory Measures (11)

**Note:** Mandatory measures are those measures that are a requirement of accreditation and must be reported to URAC on an annual basis.

Measure #	Measure Name	Measure Steward	URAC Domain	Measure Description	Numerator	Denominator	Data Source
TH2017-01	Hypertension: Blood Pressure Control	Physician Consortium for Performance Improvement	Prevention & Treatment	Percentage of patients aged 18 years and older with a diagnosis of hypertension with a blood pressure <140/90 mm Hg OR patients with a blood pressure $\geq$ 140/90 mm Hg and prescribed 2 or more anti-hypertensive medications during the most recent office visit within a 12 month period.	Patients with a blood pressure <140/90 mm Hg OR Patients with a blood pressure $\geq$ 140/90 mm Hg and prescribed 2 or more anti-hypertensive medications during the most recent office visit within a 12-month period.	All visits for patients aged 18 years and older with a diagnosis of hypertension.	Claims, Electronic Health Record, Other, Paper Records, Registry
TH2017-03	Diabetic Retinopathy: Communication with the Physician Managing Ongoing Diabetes Care	Physician Consortium for Performance Improvement	Communication and Care Coordination	Percentage of patients aged 18 years and older with a diagnosis of diabetic retinopathy who had a dilated macular or fundus exam performed with documented communication to the physician who manages the ongoing care of the patient with diabetes mellitus regarding the findings of the macular or fundus exam at least once within 12 months.			Claims, EHR, Registry

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Measure #	Measure Name	Measure Steward	URAC Domain	Measure Description	Numerator	Denominator	Data Source
TH2017-04	Chronic Obstructive Pulmonary Disease (COPD): Spirometry Evaluation	American Thoracic Society	Effective Clinical Care	Percentage of patients aged 18 years and older with a diagnosis of COPD who had spirometry results documented.			Claims, Registry
TH2017-06	Evaluation or Interview for Risk of Opioid Misuse	American Academy of Neurology	Effective Clinical Care	All patients 18 and older prescribed opiates for longer than six weeks duration evaluated for risk of opioid misuse using a brief validated instrument (e.g., Opioid Risk Tool, SOAAP-R) or patient interview documented at least once during Opioid Therapy in the medical record.	Patients evaluated for risk of misuse of opiates by using a brief validated instrument (e.g., Opioid Risk Tool, SOAAP-R) or patient interview at least once during opioid therapy.	All patients 18 and older prescribed opiates for longer than six weeks duration.	Registry

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Measure #	Measure Name	Measure Steward	URAC Domain	Measure Description	Numerator	Denominator	Data Source
TH2017-08	Melanoma: Continuity of Care - Recall System	American Academy of Dermatology	Communication and Care Coordination	Percentage of patients, regardless of age, with a current diagnosis of melanoma or a history of melanoma whose information was entered, at least once within a 12 month period, into a recall system that includes: A target date for the next complete physical skin exam, AND A process to follow up with patients who either did not make an appointment within the specified timeframe or who missed a scheduled appointment			Registry

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Measure #	Measure Name	Measure Steward	URAC Domain	Measure Description	Numerator	Denominator	Data Source
TH2017-09	Child and Adolescent Major Depressive Disorder (MDD); Suicide Risk Assessment	Physician Consortium for Performance Improvement	Prevention & Treatment	Percentage of patient visits for those patients aged 6 through 17 years with a diagnosis of major depressive disorder with an assessment for suicide risk.	Patient visits with an assessment for suicide risk.	All patient visits for those patients aged 6 through 17 years with a diagnosis of major depressive disorder.	Electronic Health Record (EHR)
TH2017-10	Unhealthy Alcohol Use: Screening and Brief Counseling	American Medical Association/ Physician Consortium for Performance Improvement	Prevention & Treatment	Percentage of patients aged 18 years and older who were screened for unhealthy alcohol use using a systematic screening method at least once within the last 24 months AND who received brief counseling if identified as an unhealthy alcohol user.	Participants who were screened at least once during the measurement period for unhealthy alcohol use via a systematic screening method AND who received brief counseling, if identified as an unhealthy alcohol user.	Patients aged 18 years or older who were seen twice for any visits OR who had a least one preventive care visit during the measurement period.	Electronic Health Record (EHR), Registry

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Measure #	Measure Name	Measure Steward	URAC Domain	Measure Description	Numerator	Denominator	Data Source
TH2017-11	Functional Outcome Assessment	Centers for Medicare & Medicaid Services	Communication and Care Coordination	Percentage of visits for patients aged 18 years and older with documentation of a current functional outcome assessment using a standardized functional outcome assessment tool on the date of the encounter AND documentation of a care plan based on identified functional outcome deficiencies on the date of the identified deficiencies.			Claims,Registry

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Measure #	Measure Name	Measure Steward	URAC Domain	Measure Description	Numerator	Denominator	Data Source
TH2017-12	Thirty-day all-cause unplanned readmission following psychiatric hospitalization in an inpatient psychiatric facility (IPF)	Centers for Medicare & Medicaid Services	Care Coordination	This facility-level measure estimates an all-cause, unplanned, 30-day, risk-standardized readmission rate for adult Medicare fee-for-service (FFS) patients with a principal discharge diagnosis of a psychiatric disorder or dementia/Alzheimer's disease. The performance period for the measure is 24 months.	The measure estimates the incidence of unplanned, all-cause readmissions to IPFs or short-stay acute care hospitals following discharge from an eligible IPF index admission. We defined readmission as any admission that occurs on or between Days 3 and 30 post-discharge, except those considered planned.	The target population for this measure is Medicare FFS beneficiaries aged 18 years and older discharged from an inpatient psychiatric facility with a principal diagnosis of a psychiatric disorder. Eligible index admissions require enrollment in Medicare Parts A and B for 12 months prior to the index admission, the month of admission, and at least 30 days post discharge. Patients must be discharged alive to a non-acute setting (not transferred). A readmission within 30 days is eligible as an index admission, if it meets all other eligibility criteria.	Claims (only)

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Measure #	Measure Name	Measure Steward	URAC Domain	Measure Description	Numerator	Denominator	Data Source
TH2017-13	Preventive Care and Screening: Screening for Clinical Depression and Follow-Up Plan	Centers for Medicare & Medicaid Services	Prevention & Treatment	Percentage of patients aged 12 years and older screened for clinical depression using an age appropriate standardized tool AND follow-up plan documented.	Patient's screening for clinical depression using an age appropriate standardized tool AND follow up plan is documented.	All patients aged 12 years and older.	Claims, EHR, Registry, Paper Records
TH2017-14	Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention	Physician Consortium for Performance Improvement	Community/ Population Health	Percentage of patients aged 18 years and older who were screened for tobacco use one or more times within 24 months AND who received cessation counseling intervention if identified as a tobacco user.			Claims, CMS Web Interface, EHR, Registry

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### Exploratory Measures (3)

**Note:** Exploratory measures are those measures “on the cutting edge”, meaning that either the industry has not come to consensus on how to measure a particular concept or the measure is experimental or in development. In the case of an exploratory measure, the organization has the option to report.

Measure #	Measure Name	Measure Steward	URAC Domain	Measure Description	Numerator	Denominator	Data Source
TH2017-02	Coronary Artery Disease (CAD): Angiotensin-Converting Enzyme (ACE) Inhibitor or Angiotensin Receptor Blocker (ARB) Therapy - Diabetes or Left Ventricular Systolic Dysfunction (LVEF < 40%)	American Heart Association	Effective Clinical Care	Percentage of patients aged 18 years and older with a diagnosis of coronary artery disease seen within a 12 month period who also have diabetes OR a current or prior Left Ventricular Ejection Fraction (LVEF) < 40% who were prescribed ACE inhibitor or ARB therapy.			Registry
TH2017-05	Chronic Obstructive Pulmonary Disease (COPD): Long-Acting Inhaled Bronchodilator Therapy	American Thoracic Society	Effective Clinical Care	Percentage of patients aged 18 years and older with a diagnosis of COPD (FEV1/FVC < 70%) and who have an FEV1 less than 60% predicted and have symptoms who were prescribed a long-acting inhaled bronchodilator			Claims, Registry

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Measure #	Measure Name	Measure Steward	URAC Domain	Measure Description	Numerator	Denominator	Data Source
TH2017-07	Functional Status Change for Patients with General Orthopaedic Impairments	Focus on Therapeutic Outcomes, Inc.	Communication and Care Coordination	A self-report outcome measure of functional status (FS) for patients 14 years+ with general orthopaedic impairments (neck, cranium, mandible, thoracic spine, ribs or other general orthopaedic impairment). The change in FS assessed using FOTO (general orthopaedic) PROM (patient reported outcomes measure) is adjusted to patient characteristics known to be associated with FS outcomes (risk adjusted) and used as a performance measure at the patient level, at the individual clinician, and at the clinic level by to assess quality.			Registry

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