

2020 Recognition Data Submission 101

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TARGET: **BP**[™]



Disclosures

- None

Agenda

Welcome and Introductions

Overview of 2020 Recognition Programs

- Target: BP
- Check. Change. Control. Cholesterol
- ***NEW*** Target: Type 2 Diabetes

Data Platform Overview

Submitting Data in the Platform – Essentials and Tips

Additional Resources

Q & A: Questions taken from live ReadyTalk chat forum

Objectives

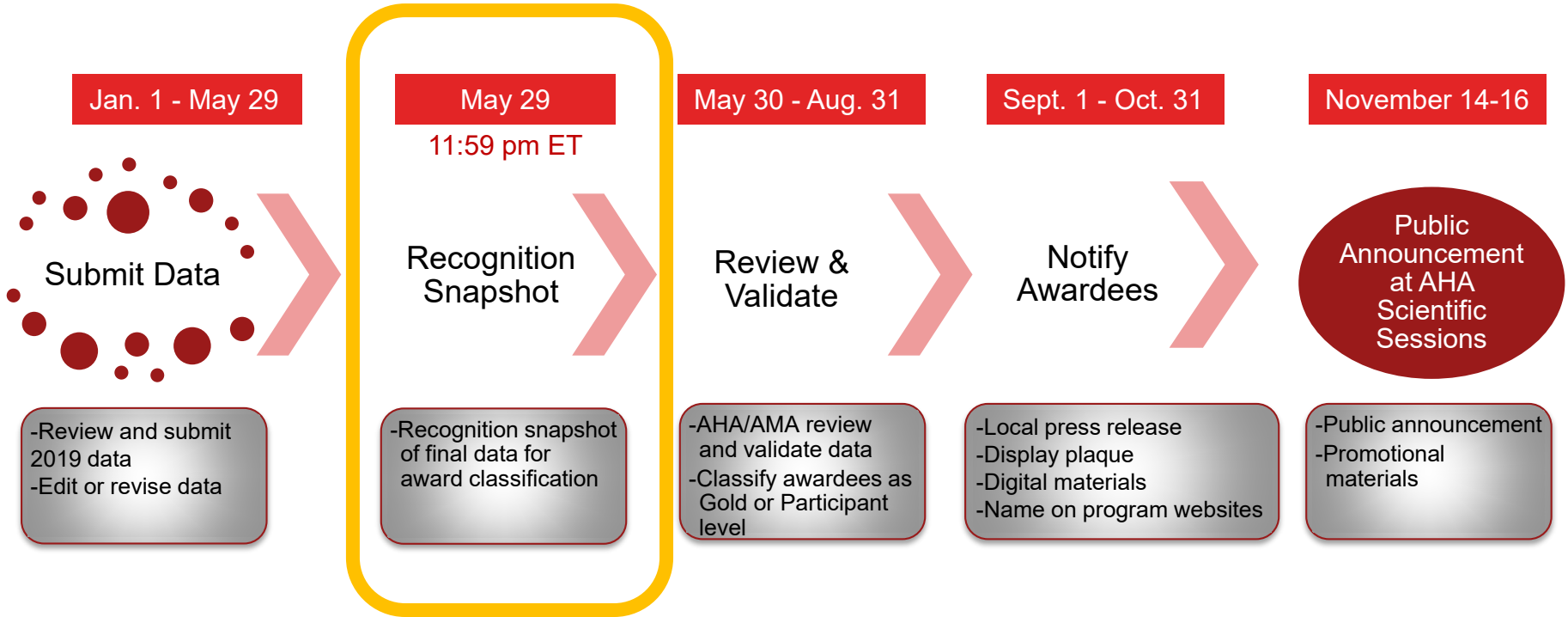
- **Brief overview of each ambulatory recognition program**
 - 2020 timeline for data submission
 - Recognition requirements and levels
 - Measure details (in brief)
- **Review essentials of data submission in the online data platform**
 - What's new in the platform
 - How to get started
 - Introductory walkthrough for submitting data
 - Site Characteristics Form and reporting
- **Outline where to find additional support**

2020 Data Submission *Timeline & Benefits*

TARGET: **BP**[™]



2020 Data Submission and Recognition Timeline



Benefits of Recognition

- ✓ Acknowledgement at annual meetings
- ✓ National recognition on program websites
- ✓ Display plaque with annual medallion or award certificate (as applicable)
- ✓ National press release
- ✓ Speaking opportunities to share success at program related events
- ✓ Digital Promotional Toolkit
 - ✓ Social media messages
 - ✓ Local press release template
 - ✓ Digital award icons – for use by practices on websites, emails, social media

Overview of Recognition Programs

TARGET: **BP**™



Target: BP

2020 Recognition Criteria and Levels

Awards will be announced in Fall 2020



Participant Status

- Recognizes practices that have **submitted data** and committed to reducing the number of adult patients with uncontrolled blood pressure



Gold Status

- Recognizes practices that **achieve >70%** of adult patients with diagnosis of hypertension whose blood pressure is adequately controlled (<140/90 mmHg)

Target: BP

Requirements for 2020 Data Submission

- **Recognition data (adult patients ages 18-85)**

1. Total adult patient population
2. Total number of patients with diagnosis of hypertension (based on NQF 0018 / MIPS #236)
3. Total number of patients with diagnosis of hypertension whose high blood pressure is controlled (based on NQF 0018 / MIPS #236)
4. Total number of providers (**now required**)
 - Providers are physicians, nurse practitioners, and physician assistants treating and managing patient hypertension (e.g., MD, NP)
5. Totals of adult patients' primary payor groups

Data submission should use data from the 2019 calendar year

- **Prevalence estimator data**

- Submit hypertension prevalence estimator tool data: total patient population by age, race/ethnicity and gender

Target: BP Measures

- Questions about the measure specifications for Target: BP?
 - See the ‘Appendix’ in this slide deck.
 - Review the [NQF 0018 / MIPS #236 specifications document](#).
 - Utilize the [Target: BP Data Collection Worksheet](#).





Find these resources and more at:

<https://targetbp.org/recognition-program/>

or

within the data platform under “Library”

TARGET:BP™ |  American Heart Association |  AMA

RECOGNITION PROGRAM DATA COLLECTION REQUIREMENTS

The following data are required for each health care organization seeking recognition. This worksheet can be used to prepare for the formal data submission process. The deadline to submit 2019 data for 2020 recognition is May 29, 2020, 11:59 p.m. ET.

INSTRUCTIONS

Enter your health care organization's adult (age 18-85) patient data for the previous calendar year. Use only numbers when entering data into the data submission platform. (No commas or decimals.)

NOTE: These data are based on NQF #0018, MIPS #236, PORS #236 or ACO #28, Controlling High Blood Pressure. For the latest on ongoing coordination of the 2017 Hypertension guidelines to the current quality measures, please reference the 2019 AHA/ACC Clinical Performance and Quality Measures for Adults with High Blood Pressure.*

ALL FIELDS ARE REQUIRED

The 2020 recognition cycle is based on the performance period of the 2019 calendar year (1/1/2019-12/31/2019).

1. **What is the total adult (18-85 years) patient population size for the health care organization?** Enter the total number of patients in your health care organization, age 18-85, who had at least one office visit in 2019. _____
2. **What is your total adult (18-85 years) patient population that has been diagnosed with hypertension?** _____
Hypertension is diagnosed if a patient has multiple visits with blood pressure \geq 140/90 mm Hg. Include patients with a diagnosis on or prior to 6/30/19 with at least one office visit in 2019. Exclude any patients with end-stage renal disease, dialysis, renal transplant before or during the measurement period, pregnancy during the measurement period, OR patients age 65 or older in Institutional Special Needs Plans (SNP) or long-term care.
3. **Of those who have been diagnosed with hypertension, what is the number of adult (18-85 years) patients under control, <140/90 mm Hg?** _____
Enter the number of adult patients in your health care organization who have a diagnosis of hypertension and a blood pressure <140/90 mm Hg at their most recent 2019 office visit. If a patient has multiple blood pressure readings from their office visit, use the lowest systolic and lowest diastolic blood pressure on that visit as the representative BP.
4. **How many providers are there for the health care organization?** Include all physicians, nurse practitioners, and physician assistants. _____
5. **How many of your total adult (18-85 years) patient population are primarily attributed to the following payer groups?** Sum must equal total patient count in question 1.
____ Medicare ____ Medicaid ____ Private Health Insurance
____ Other Public ____ Uninsured/Self-Pay ____ Other/Unknown

Check. Change. Control. Cholesterol 2020 Recognition Criteria and Levels

Awards will be announced in Fall 2020



Participant Status

- Recognizes practices that have **submitted data** and committed to improving ASCVD (Atherosclerotic Cardiovascular Disease) risk assessment and implementing ASCVD risk calculations into their clinical workflows.



Gold Status

- Recognizes practices that fulfilled the Participant criteria AND **have >70%** of their adult, at-risk ASCVD patient population appropriately managed with statin therapy based on MIPS measure #438

Check. Change. Control. Cholesterol Requirements for 2020 Data Submission

- **Participant Information (adult patients ages 21+)**

1. Total adult patient population
2. Number of patients that are a race other than white and/or identify as Latino or Hispanic ethnicity
3. Total number of providers (**now required**)
4. Totals of adult patients' primary payor groups
5. Do you calculate ASCVD (Atherosclerotic Cardiovascular Disease) Risk in your practice?
6. How do you document the ASCVD Risk Score in your practice?

Data submission should use data from the 2019 calendar year

- **MIPS #438 Measure Submission (adult patients ages 21+)**

1. Total number of patients eligible from 3 measure risk groups based on MIPS #438
2. Total number of patients who are actively using or who receive an order (prescription) for statin therapy at any point during the measurement period.

Check. Change. Control. Cholesterol Measures

- Questions about the measure specifications for CCC Cholesterol?
 - See the ‘Appendix’ in this slide deck.
 - Review QPP’s [MIPS #438 specifications document](#).
 - Utilize the [CCC Cholesterol Data Collection Worksheet](#).

Find these resources and more at:

<http://www.heart.org/changecholesterol>

or

within the data platform under “Library”



American Heart Association.
Check. Change. Control.
Cholesterol™

RECOGNITION PROGRAM DATA COLLECTION WORKSHEET

The following data are required for each health care organization seeking recognition. This worksheet can be used to prepare for the formal data submission process. The deadline to submit 2019 data for 2020 recognition is May 29, 2020, 11:59 p.m. ET.

INSTRUCTIONS

Enter your healthcare organization’s adult (≥ 21 years) patient data for the previous calendar year. Use only numbers when entering data into the data submission platform. (No commas or decimals.)

NOTE: These data are based on MIPS Measure #438: Statin Therapy for the Prevention and Treatment of Cardiovascular Disease. Also, the AHA/ASA advocates use of ASCVD Risk Estimation tools which enables healthcare providers and patients to estimate 10-year and Lifetime risk for atherosclerotic cardiovascular disease (ASCVD). You will need to provide information regarding your organization’s current use of ASCVD Risk Estimation.

ALL FIELDS ARE REQUIRED

The 2020 recognition cycle is based on the performance period of the 2019 calendar year (1/1/2019-12/31/2019).

1. What is the total adult (≥ 21 years) population for the health care organization? _____
2. How many of your patients (≥ 21 years) are a race other than White and/or identify as Latino or Hispanic ethnicity? _____
3. How many providers are in the health care organization? Include all physicians, nurse practitioners, and physician assistants. _____
4. How many of your total adult (≥ 21 years) patient population are primarily attributed to the following payor groups? Sum must equal total patient count in question 1.
____ Medicare ____ Medicaid ____ Private Health Insurance
____ Other Public ____ Uninsured/Self-Pay ____ Other/Unknown
5. Does your organization currently calculate ASCVD Risk? Yes No
If yes, where? Calculate in our EHR Clinicians calculate external to our EHR
6. Does your organization document the ASCVD Risk score? Yes No
If yes, where? Discrete field in our EHR Notes or non-discrete field in our EHR
7. My organization is committed to continuously improving use and data capture of ASCVD Risk Estimations into our workflows and EHR systems. A “yes” response to question 7 is required for award eligibility. Yes No

Target: Type 2 Diabetes

2020 Recognition Criteria and Levels

NEW PROGRAM



Participant Status

- Recognizes practices that have **submitted data** and committed to improving strategies for addressing CVD (Cardiovascular Disease) risk in patients with Type 2 diabetes

Awards will be announced in Fall 2020

Gold Status

- Recognizes practices that fulfilled the Participant criteria **AND**:
 - Have annual rate of $\leq 25\%$ for **HbA1c Poor Control (>9%)** amongst eligible patients based on NQF 0059

AND

- Have annual rate of $\geq 70\%$ for **appropriate statin therapy** amongst eligible patients based on MIPS #438

OR

- Have annual rate of $\geq 70\%$ for **blood pressure control** amongst eligible patients based on MIPS #236



Target: Type 2 Diabetes

NEW PROGRAM

Requirements for 2020 Data Submission

- **Participant Information (adult patients ages 18-75)**

Data submission should use data from the 2019 calendar year

1. Total adult patient population
2. Number of patients that are a race other than white and/or identify as Latino or Hispanic ethnicity
3. Total number of providers
4. Totals of adult patients' primary payor groups
5. Does your practice have a specific protocol to assess key characteristics of patients with Type 2 diabetes? If yes, what characteristics?
6. Does your practice operationalize a specific treatment plan for patients with Type 2 diabetes? If yes, how?

- **NQF 0059 / MIPS #001 - Measure Submission (adult patients ages 18-75)**

1. Total number of patients diagnosed with diabetes during the measurement period
2. Total number of patients diagnosed with diabetes whose most recent HbA1c level performed during measurement period is > 9.0%

Target: Type 2 Diabetes

NEW PROGRAM

Requirements for 2020 Data Submission

Choose Option 1 or 2 – submitting one option is required

Option 1

- **MIPS #438 Measure Submission (adult patients ages 21+)**
 1. Total number of patients eligible from 3 measure risk groups based on MIPS #438
 2. Total number of patients who are actively using or who receive an order (prescription) for statin therapy at any point during the measurement period.

Option 2

- **MIPS #236 Measure Submission (adult patients ages 18-85)**
 1. Total number of patients with diagnosis of hypertension (based on NQF 0018 / MIPS #236)
 2. Total number of patients with diagnosis of hypertension whose high blood pressure is controlled (based on NQF 0018 / MIPS #236)

Target: Type 2 Diabetes Measures

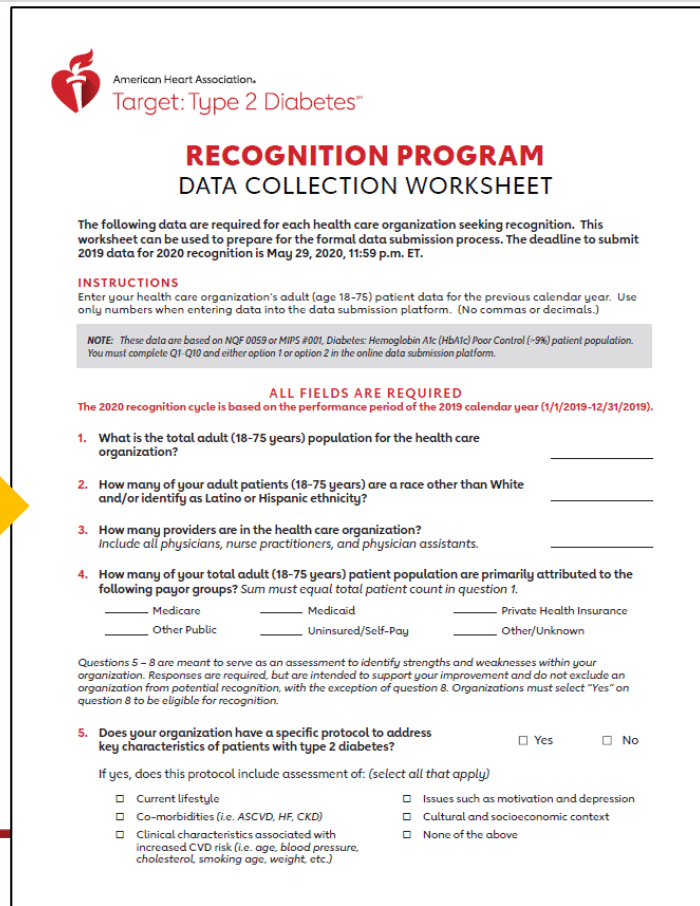
- Questions about the measure specifications for Target: Type 2 Diabetes?
 - See the ‘Appendix’ in this slide deck.
 - Review the following measure specifications documents:
 - [NQF 0059](#)
 - [MIPS #438](#)
 - [MIPS #236](#)
 - Utilize the [Target: Type 2 Diabetes Data Collection Worksheet](#).


Find these resources and more at:

<https://knowdiabetesbyheart.org/quality>

or

within the data platform under “Library”



 American Heart Association
Target: Type 2 Diabetes™

RECOGNITION PROGRAM DATA COLLECTION WORKSHEET

The following data are required for each health care organization seeking recognition. This worksheet can be used to prepare for the formal data submission process. The deadline to submit 2019 data for 2020 recognition is May 29, 2020, 11:59 p.m. ET.

INSTRUCTIONS
Enter your health care organization's adult (age 18-75) patient data for the previous calendar year. Use only numbers when entering data into the data submission platform. (No commas or decimals.)

NOTE: These data are based on NQF 0059 or MIPS #001, Diabetes: Hemoglobin A1c (HbA1c) Poor Control (-9%) patient population. You must complete Q1-Q10 and either option 1 or option 2 in the online data submission platform.

ALL FIELDS ARE REQUIRED
The 2020 recognition cycle is based on the performance period of the 2019 calendar year (1/1/2019-12/31/2019).

1. What is the total adult (18-75 years) population for the health care organization? _____
2. How many of your adult patients (18-75 years) are a race other than White and/or identify as Latino or Hispanic ethnicity? _____
3. How many providers are in the health care organization? Include all physicians, nurse practitioners, and physician assistants. _____
4. How many of your total adult (18-75 years) patient population are primarily attributed to the following payor groups? Sum must equal total patient count in question 1.
____ Medicare ____ Medicaid ____ Private Health Insurance
____ Other Public ____ Uninsured/Self-Pay ____ Other/Unknown

Questions 5 – 8 are meant to serve as an assessment to identify strengths and weaknesses within your organization. Responses are required, but are intended to support your improvement and do not exclude an organization from potential recognition, with the exception of question 8. Organizations must select “Yes” on question 8 to be eligible for recognition.

5. Does your organization have a specific protocol to address key characteristics of patients with type 2 diabetes? Yes No

If yes, does this protocol include assessment of: (select all that apply)

<input type="checkbox"/> Current lifestyle	<input type="checkbox"/> Issues such as motivation and depression
<input type="checkbox"/> Co-morbidities (i.e. ASCVD, HF, CKD)	<input type="checkbox"/> Cultural and socioeconomic context
<input type="checkbox"/> Clinical characteristics associated with increased CVD risk (i.e. age, blood pressure, cholesterol, smoking age, weight, etc.)	<input type="checkbox"/> None of the above

2020 Data Submission *Getting Started*

TARGET: **BP**[™]



Getting Started with Data Submission

New Participant?

- Sign up through the program registration form: https://americanheart.co1.qualtrics.com/jfe/form/SV_9RgQY2CIMboTBEF. Request Data Platform Access for your selected programs.
- New registrations are reviewed by staff and accounts are created in 24-72 hours of receipt.
- If your organization is registered, but you need a new **user account**, please contact us at bit.ly/AQContactUs.

Participated in 2019 or registered already?

- **No need to re-register!** Your organization's account is still active in the data platform.
- If you have not accessed your individual user account since submitting data last year, you will need to access your account using the temporary password emailed to you between Jan. 13-17, 2020, from 'AHA Support' at InfosarioOutcomeSupport@quintiles.com.

Getting Started:

- Visit <https://aha.infosarioregistry.com> using your username and password.
- You'll be asked to reset your password after logging in for the first time, or after a long absence.
- You'll be asked to accept the License and Use Agreement.
- Set up Password Challenge Questions in order to reset password in the future.

NEW!
Register for each program in ONE combined form – no separate forms.

Quick Start User Guide

- For a step-by-step guide for navigating the data platform and submitting data for each program, review the Quick Start User Guide: https://targetbp.org/tools_downloads/target-bp-data-user-guide/
 - NOTE: The guide contains instructions for all three programs.

RECOGNITION PROGRAMS

QUICK USER GUIDE – DATA SUBMISSION

Target: BP • Check, Change, Control, Cholesterol • Target: Type 2 Diabetes

This guide provides instructions for registering and submitting data for recognition in any of our three Ambulatory Quality Improvement programs:

- [Target: BP](#)
- [Check, Change, Control, Cholesterol](#)
- [Target: Type 2 Diabetes](#)

Table of Contents

Getting Started.....	1
Troubleshooting and Support	1
Navigating the Online Platform	2
Entering Data – Adding Your Program Forms	3
Entering Data – Target: BP	4
Entering Data – Check, Change, Control, Cholesterol	6
Entering Data – Target: Type 2 Diabetes	10

Getting Started

If your organization has NOT previously participated in any of the above programs	Navigate to the Ambulatory Quality Improvement registration form . Follow the instructions within the registration form to select the programs in which you would like to participate, and complete the form with your Health Care Organization's details.
If your organization has previously participated in any of the above programs, and is submitting data for the same program	Users with an existing account can navigate directly to the data submission platform at https://aha.infosarioregistry.com/login and log in. They will be immediately redirected to the Community Page for their organization. No need to re-register.
If your previously-registered organization wants to register for another program	Fully complete the Ambulatory Quality Improvement registration form and request access to that new program.
If your organization is registered, but you need a new user account	Submit a request in our Contact Us form, or contact the Help Desk . Please do not submit the registration form again to help us reduce duplicates.

Once registered, an account will be created in the data submission platform for new participants within 72 hours. Check your spam/junk filters for your log-in credentials. If you have no credentials after 72 hours, [contact us](#).

Troubleshooting and Support

- **Forgot your username or password?** Please follow the "Forgot password?" instructions at the log-in landing page. For additional help, see the [troubleshooting](#) page.

1

Getting Started




What's New This Year?

Across All Programs

- **All questions in “Facility/Participant Information” tabs are now required**
 - **Total number of providers** is now a required question
- **Data Entry Complete checkbox**
 - Checkbox indicates that all required data has been entered, and no errors are triggered.
 - Data can still be revised after checking this box.
 - Leaving the box unchecked does NOT exclude your practice from recognition.

Participant Information

Reporting Year 
YYYY

Once data entry is complete, please check the "Data Entry Complete" box and click the Save & Exit button above to complete your data submission

Data Entry Complete

What's New This Year?

Across All Programs

- **You will need to submit data on the primary payor group to which your adult patient population is attributed (age ranges vary per program).**
 - A brief guide to help determine which payors fall into the below payor groups will be included as the final page in each program's Data Collection Worksheet.

Q5. How many of your total adult (18-85 years) patient population are primarily attributed to the following payor groups:

All fields must contain a value. Please enter "0" where there are no patients.

Medicare: Total Patient Count	11759
Medicaid: Total Patient Count	9451
Private Health Insurance: Total Patient Count	12087
Other Public: Total Patient Count	1326
Uninsured / Self-Pay: Total Patient Count	2511
Other / Unknown: Total Patient Count	21
Summation: Total Patient Count	37155

What's New This Year?

Check. Change. Control. Cholesterol

- **Participant award status now requires measure data submission.**
 - Previously, practices received Participant status for registering and filling out the Participant Information tab only.
- **If your total patients in the MIPS #438 risk groups are less than 6% of your total adult patient population, additional required questions will appear.**
 - It will ask: Was the denominator determined based on a subset or sample of patients?
 - Depending on your answer (Yes/No), you will need to answer additional questions about your sampling method and/or patient population.

Q10. Was the denominator (Q8 above) determined based on a subset or sample of patients in your organization?

- Yes. Record sampling, or a specific subset of patients was used to determine measure compliance.
- No. The denominator is based on the measure logic applied to all patients in Q1.

Q11. Please briefly describe your sampling method and reason for sampling. (500-character)

Q10. Was the denominator (Q8 above) determined based on a subset or sample of patients in your organization?



- Yes. Record sampling, or a specific subset of patients was used to determine measure compliance.
- No. The denominator is based on the measure logic applied to all patients in Q1.

Q12. The denominator entered in Q8 may be considered low compared to your overall population in Q1. Please ensure measure logic is appropriately applied to all patients across all risk groups. If the measure has been appropriately applied, a low denominator may be due to a unique patient population or organizational characteristics. Please describe any unique characteristic of your patients or organization for consideration. (500-character)

Submitting Data – Logging In



Sign in to your account

	<input type="text" value="Username"/>
	<input type="password" value=""/>

[Forgot password?](#)

[Need help?](#) [Sign In](#)

<https://aha.infosarioregistry.com/login>

Submitting Data – Logging In



[Log out](#)

Your password has expired. Please choose a new password.

Current Password:

New Password:

Re-enter your new password

[Submit Change](#)

Password must meet the following criteria:

- ✔ Password must be between 8 and 31 characters long.
- ✔ Password must have three out of the following four characteristics:
 - Contain at least 1 upper case character
 - Contain at least 1 lower case character
 - Contain at least 1 numeric character
 - Contain at least 1 symbol
- ✔ Password cannot contain any whitespace characters.
- ✔ Password must not contain 4 consecutive characters from the user's first or last name.
- ✔ Password cannot be the same as any of your last 6 passwords.

Submitting Data – Logging In

Data Use and License Agreement: Ambulatory Quality Registry

License and Use Agreement

This License and Use Agreement (this "Agreement") is a legal agreement between Site Name, ("Licensee"), having an address of Site Address, on behalf of itself and its employees, and Outcome Sciences, LLC ("IQVIA") granting you certain rights to access and use elements of IQVIA's software products, in machine-readable form, together with any permitted copies thereof and any permitted modifications, enhancements or corrections thereto and the data processing capability, program storage capacity, use of the information services and any other services as provided by IQVIA under this Agreement (collectively, the "Platform") in connection with your participation in the Registry. "Registry" shall mean the applicable study, research project or quality improvement program in which you may participate by agreeing to the terms of this Agreement.

1. Operational Model IQVIA provides certain clinical registry services to its customers (the "Customer") through the Platform that allows users such as Licensee to participate in Customers' programs and registries. Use of the Platform by the Licensee is subject to the terms of this Agreement. In exchange for payment to IQVIA of the applicable fees by the Customer or by Licensee, as the case may be, IQVIA hereby agrees to provide Licensee with access to, and use of, the Platform to participate in the Registry. The Platform is proprietary to IQVIA and all right, title and interest thereto remains with IQVIA. All proprietary and intellectual property rights of any nature regarding the Platform and any and all parts, copies, modifications, enhancements, improvements and processes included therein, and derivative works created therefrom are owned by, and shall remain the property of, IQVIA.

2. Rights and Obligations of the Parties Licensee agrees that it shall use the Platform only for lawful purposes, in compliance with all applicable laws and regulations, and in accordance with the user guide and associated documentation (the "Documentation") provided by IQVIA, as well as any agreements and guidance from the Customer, to the extent such agreements and guidance do not conflict with the Documentation. IQVIA will maintain administrative, physical and technical safeguards designed to protect the security, confidentiality and integrity of data transmitted to the Platform. Licensee agrees that it is responsible for maintaining all Licensee passwords necessary to access the Platform in a secure manner and to prevent any unauthorized or improper use. IQVIA may, in its sole discretion, suspend Licensee's access to the Platform in connection with Licensee's violation of applicable law or regulation, a material breach of this Agreement, including non-payment of any fees due and owing under this Agreement, or if Licensee (or one of its users) is listed on any exclusionary list published by the United States Government. Licensee's right to access and use the Platform is personal to Licensee and is not transferable or assignable to any other person or entity, without IQVIA's prior written authorization. All data transmitted to the Platform will be used and kept in confidence in accordance with IQVIA's privacy and data security policy, available at www.iqvia.com. Licensee shall, and bears sole responsibility to, ensure that it has all necessary authority, consent, and agreement to provide any data Licensee enters into the Platform. IQVIA has entered into an agreement containing sub-business associate terms and data use agreement terms with Customer, as applicable. Except as described in this Agreement, each party hereto will keep confidential any information obtained from the other party in connection with this Agreement, unless the disclosure of the information is required by applicable law. In addition to the limitations and restrictions set forth herein, Licensee may not: (a) decompile, disassemble or reverse engineer the Service or its components in whole or in part; (b) defeat, disable or circumvent any protection mechanism related to the Platform or its components, including any code which necessitates or solicits agreement to this Agreement before use of the Platform; or (c) export the Platform in violation of any law or regulation, including without limitation the U.S. Department of Commerce Export Administration regulations. Resale, transfer and/or sublicense of the Service to other individuals or organizations is prohibited. Any unauthorized use of the Platform by Licensee or any unauthorized use of the Platform allowed by Licensee shall constitute fraud, theft of the Platform and breach of this Agreement.

3. Additional Services From time to time IQVIA may provide certain implementation and consulting services to Licensee relating to the Platform, the scope and assumptions of which services shall be outlined in a separate written agreement, which agreement shall be governed by the terms and conditions of this Agreement.

4. Risk Allocation Dispute Resolution Licensee agrees to defend, indemnify and hold IQVIA, and its officers, directors employees and agents, harmless from and against any and all claims, actions, damages, demands, penalties, losses, liabilities, costs regulatory investigations settlements, fines, penalties and expenses (including attorneys' fees) arising out of or related to, Licensee's willful misconduct, negligence, and/or breach of its obligations under this Agreement, provided that IQVIA provides Licensee with prompt written notice of any such claim, reasonable assistance in defending such claim, and cedes to Licensee sole control of the defense and settlement of such claim, except that in no event shall Licensee agree to any defense or settlement that imposes any liability, damages, or admission of guilt or wrongdoing on IQVIA without IQVIA's prior written consent. The laws of the State of North Carolina shall govern this Agreement, without giving effect to the conflict of laws principles thereof, unless the law governing the formation of the Licensee forbids it from agreeing to be bound by those laws. The venue of any dispute arising under this Agreement shall be in the city of Raleigh, in the State of North Carolina, United States of America. EXCEPT AS OTHERWISE PROVIDED HEREIN, LICENSEE ACKNOWLEDGES AND AGREES THAT IQVIA PROVIDES THE PLATFORM AND ALL SERVICES ON AN

Submitting Data – Logging In

Log out

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3. Additional Services. From time to time IQVIA may provide certain implementation and consulting services to Licensee relating to the Platform, the scope and assumptions of which services shall be outlined in a separate written agreement, which agreement shall be governed by the terms and conditions of this Agreement.

4. Risk Allocation/Dispute Resolution. Licensee agrees to defend, indemnify and hold IQVIA, and its officers, directors employees and agents, harmless from and against any and all claims, actions, damages, demands, penalties, losses, liabilities, costs regulatory investigations settlements, fines, penalties and expenses (including attorneys' fees) arising out of or related to, Licensee's willful misconduct, negligence, and/or breach of its obligations under this Agreement, provided that IQVIA provides Licensee with prompt written notice of any such claim, reasonable assistance in defending such claim, and cedes to Licensee sole control of the defense and settlement of such claim, except that in no event shall Licensee agree to any defense or settlement that imposes any liability, damages, or admission of guilt or wrongdoing on IQVIA without IQVIA's prior written consent. The laws of the State of North Carolina shall govern this Agreement, without giving effect to the conflict of laws principles thereof, unless the law governing the formation of the Licensee forbids it from agreeing to be bound by those laws. The venue of any dispute arising under this Agreement shall be in the city of Raleigh, in the State of North Carolina, United States of America. EXCEPT AS OTHERWISE PROVIDED HEREIN, LICENSEE ACKNOWLEDGES AND AGREES THAT IQVIA PROVIDES THE PLATFORM AND ALL SERVICES ON AN "AS IS" BASIS WITH NO WARRANTY, REPRESENTATION, DUTY OR OBLIGATION OF ANY KIND WHATSOEVER, EXPRESS OR IMPLIED. IN NO EVENT SHALL EITHER PARTY BE LIABLE HEREUNDER FOR LOSS OF PROFITS, CONSEQUENTIAL, INCIDENTAL, INDIRECT, SPECIAL, PUNITIVE OR EXEMPLARY DAMAGES AND IN NO EVENT WILL IQVIA'S COLLECTIVE LIABILITY HEREUNDER (INCLUDING WITHOUT LIMITATION, CONTRACT, NEGLIGENCE AND TORT LIABILITY) EXCEED ONE THOUSAND DOLLARS (\$1,000) USD, PROVIDED HOWEVER THAT THE FOREGOING LIMITATION WILL NOT APPLY TO ANY INDEMNIFICATION OBLIGATIONS HEREUNDER.

5. Miscellaneous. No oral modification or waiver of any provisions of this Agreement shall be binding on either party hereto. Neither party will be liable for any failure or delay in performance due to acts of force majeure, including without limitation, any governmental acts, acts of God, war or civil unrest, acts or omissions of third parties, failure of the internet, equipment or power interruption, or other circumstance beyond that party's reasonable control. This Agreement may be executed by electronic means and in counterparts, each of which is deemed an original, but all of which together are deemed to be one and the same agreement. If any provision of this Agreement is invalid, illegal or unenforceable in any jurisdiction, such invalidity, illegality or unenforceability shall not affect any other term of this Agreement or invalidate or render unenforceable such term or provision in any other jurisdiction. This Agreement (and the documents referenced herein or documents otherwise agreed to by the parties as being incorporated into this Agreement) represents the entire understanding between the parties regarding Licensee's access and/or use of the Platform. It supersedes, and its terms govern, all prior proposals, agreements, or other communications between the parties, oral or written, regarding such subject matter. There are no intended third party beneficiaries to this Agreement. Without in any way limiting the foregoing, it is the parties' specific intent that nothing contained in this Agreement gives rise to any right or cause of action, contractual or otherwise, in or on behalf of any individuals whose Protected Health Information or Limited Data Set is Used or Disclosed pursuant to this Agreement.

By clicking "I Agree" below, Licensee hereby agrees to all of the above terms and conditions.

Disagree Agree

Contact Support

Target: BP Program Website
Check Change: Control Cholesterol Program Website



Submitting Data – Logging In



Log out

Select a view

Ambulatory Quality Registry

AQ Demo 1 -- AQDEMO1

AQ Demo 2 -- AQDEMO2

AQ Demo 3 -- AQDEMO3

AQ Demo 4 -- AQDEMO4

AQ Demo System -- AQ_System



**Set up your Password
Challenge Questions!**

**These enable you to reset your password in
the future without contacting the Help Desk.**

Submitting Data – Logging In

Ambulatory Quality Registry Katherine Overton
AQ Demo Facility 5

Welcome, Katherine Overton

Currently Viewing
Ambulatory Quality Registry
AQ Demo Facility 5 – AQDEMOS

Switch Current View

DASHBOARD

- Community Page

PLATFORM

- Program Forms
- Form Management
- Notifications 2

ANALYTICS

- Operational Reports

RESOURCES

- Library

ACCOUNT

- My Account
- Log out

Community Page

Get Started

	Program Forms	Reports	Library
Ambulatory Quality Registry			

Navigation Tips

1. Submit recognition data in "Program Forms"
2. View helpful user guides and resources in the "Library"
3. Identify your site's characteristics for benchmarking against peers in "Form Management"
4. Visualize results, historic trends, and benchmarks in "Operational Reports"

30

Submitting Data – Platform Navigation

Welcome,
Katherine Overton

Currently Viewing
Ambulatory Quality Registry
AQ Demo Facility 5 -- AQDEMOS

Switch Current View

DASHBOARD

Community Page

PLATFORM

Program Forms

Form Management

Notifications 2

ANALYTICS

Operational Reports

RESOURCES

Library

ACCOUNT

My Account

Log out

Community Page

Get Started

Ambulatory Quality Registry

Program Forms

Reports

Library

See tips on navigating here

Navigation Tips

1. Submit recognition data in "Program Forms"
2. View helpful user guides and resources in the "Library"
3. Identify your site's characteristics for benchmarking against peers in "Form Management"
4. Visualize results, historic trends, and benchmarks in "Operational Reports"

TARGET:BP™
American Heart Association. AMAA

American Heart Association.
Check. Change. Control.
Cholesterol™

American Heart Association.
Target: Type 2 Diabetes™

Submitting Data – Platform Navigation

Ambulatory Quality Registry | Katherine Overton
AQ Demo Facility 5

Welcome, Katherine Overton

Currently Viewing
Ambulatory Quality Registry
AQ Demo Facility 5 – AQDEMOS

Switch Current View

DASHBOARD

- Community Page

PLATFORM

- Program Forms
- Form Management
- Notifications 2

ANALYTICS

- Operational Reports

RESOURCES

- Library

ACCOUNT

- My Account
- Log out

Community Page

Get Started

	Program Forms	Reports	Library
Ambulatory Quality Registry			

Navigation Tips

1. Submit recognition data in "Program Forms"
2. View helpful user guides and resources in the "Library"
3. Identify your site's characteristics for benchmarking against peers in "Form Management"
4. Visualize results, historic trends, and benchmarks in "Operational Reports"

Submit data in "Program Forms"

TARGET:BP
American Heart Association
AMA

American Heart Association.
Check. Change. Control.
Cholesterol™

American Heart Association.
Target: Type 2 Diabetes™

Submitting Data – Platform Navigation

Ambulatory Quality Registry Katherine Overton
AQ Demo Facility 5

Welcome, Katherine Overton

Currently Viewing
Ambulatory Quality Registry
AQ Demo Facility 5 – AQDEMOS

Switch Current View

DASHBOARD

- Community Page

PLATFORM

- Program Forms
- Form Management
- Notifications

ANALYTICS

- Operational Reports

RESOURCES

- Library

ACCOUNT

- My Account
- Log out

Community Page

Get Started

	Program Forms	Reports	Library
Ambulatory Quality Registry			

Navigation Tips

1. Submit recognition data in "Program Forms"
2. View helpful user guides and resources in the "Library"
3. Identify your site's characteristics for benchmarking against peers in "Form Management"
4. Visualize results, historic trends, and benchmarks in "Operational Reports"

Add Site Characteristics for benchmarking in "Form Management"

TARGET:BP
American Heart Association. AMAA

American Heart Association. Check. Change. Control. Cholesterol™

American Heart Association. Target: Type 2 Diabetes™

Submitting Data – Platform Navigation

Ambulatory Quality Registry | Katherine Overton
AQ Demo Facility 5

Welcome, Katherine Overton

Currently Viewing
Ambulatory Quality Registry
AQ Demo Facility 5 -- AQDEMOS

Switch Current View

DASHBOARD

- Community Page

PLATFORM

- Program Forms
- Form Management
- Notifications 2

ANALYTICS

- Operational Reports

RESOURCES

- Library

ACCOUNT

- My Account
- Log out

Community Page

Get Started

	Program Forms	Reports	Library
Ambulatory Quality Registry			

Navigation Tips

1. Submit recognition data in "Program Forms"
2. View helpful user guides and resources in the "Library"
3. Identify your site's characteristics for benchmarking against peers in "Form Management"
4. Visualize results, historic trends, and benchmarks in "Operational Reports"

View reports in "Operational Reports"

Submitting Data – Platform Navigation

Welcome, Katherine Overton

Ambulatory Quality Registry
AQ Demo Facility 5 -- AQDEMOS

Switch Current View

DASHBOARD

Community Page

PLATFORM

Program Forms

Form Management

Notifications 2

ANALYTICS

Operational Reports

RESOURCES

Library

ACCOUNT

My Account

Log out

Community Page

Get Started

Ambulatory Quality Registry

Program Forms

Reports

Library

Navigation Tips

1. Submit recognition data in "Program Forms"
2. View helpful user guides and resources in the "Library"
3. Identify your site's characteristics for benchmarking against peers in "Form Management"
4. Visualize results, historic trends, and benchmarks in "Operational Reports"

TARGET:BP™

American Heart Association.
Check. Change. Control.
Cholesterol™

American Heart Association.
Target: Type 2 Diabetes™

Access data submission and measure guidance in the "Library"

Submitting Data – Program Forms

Ambulatory Quality Registry Katherine Overton
AQ Demo Facility 5

Welcome, Katherine Overton

Currently Viewing
Ambulatory Quality Registry
AQ Demo Facility 5 – AQDEMOS

Switch Current View

DASHBOARD

- Community Page

PLATFORM

- Program Forms
- Form Management
- Notifications 2

ANALYTICS

- Operational Reports

RESOURCES

- Library

ACCOUNT

- My Account
- Log out

Community Page

Get Started

	Program Forms	Reports	Library
Ambulatory Quality Registry			

Navigation Tips

1. Submit recognition data in "Program Forms"
2. View helpful user guides and resources in the "Library"
3. Identify your site's characteristics for benchmarking against peers in "Form Management"
4. Visualize results, historic trends, and benchmarks in "Operational Reports"

Submit data in "Program Forms"

Note: You will only see logos for the programs for which your organization is registered.

Submitting Data – Program Forms

☰

Ambulatory Quality Registry Katherine Overton
AQ Demo Facility 5 AQ DEMOS

Welcome,
Katherine Overton

Currently Viewing
Ambulatory Quality Registry
AQ Demo Facility 5 – AQDEMOS

Switch Current View

DASHBOARD
Community Page

PLATFORM
Program Forms
Form Management
Notifications 2

ANALYTICS
Operational Reports

RESOURCES
Library

ACCOUNT
My Account
Log out

Program Forms

Add Forms

Check. Change. Control. Cholesterol	Add New
Target: BP	Add New
Target: Type 2 Diabetes	Add New

Edit Forms



Target: BP - 2018	View Audit Report
-----------------------------------	-----------------------------------

“Add New” next to the desired program to start your 2019 data submission

NOTE: You will only be able to see forms for programs for which your organization is registered.


Submitting Data – Program Forms

The screenshot displays the Ambulatory Quality Registry interface for Katherine Overton at AQ Demo Facility 5. The left sidebar contains navigation options: Welcome, Currently Viewing, DASHBOARD, PLATFORM (with Program Forms selected), ANALYTICS, and RESOURCES. The main content area features a 'Reporting Year' field with a calendar icon and a 'Submit' button. A red callout box points to the reporting year field, and another red callout box points to the submit button.

Reporting Year  

Type "2019" into the Reporting Year field

2020 Recognition = 2019 Reporting Year



Hit "Submit"

Ambulatory Quality Registry
AQ Demo Facility 5

Katherine Overton

Welcome,
Katherine Overton

Currently Viewing
Ambulatory Quality Registry
AQ Demo Facility 5 – AQDEMOS

Switch Current View

DASHBOARD

Community Page

PLATFORM

Program Forms

Form Management

Notifications 2

ANALYTICS

Operational Reports

RESOURCES

Library

ACCOUNT

My Account

Log out

Submitting Data – Form Entry

The screenshot shows the Ambulatory Quality Registry interface for Facility 5. The top right corner displays the user name 'Katherine Overton'. The left sidebar contains navigation options: 'Welcome, Katherine Overton', 'Currently Viewing: Ambulatory Quality Registry AQ Demo Facility 5 -- AQDEMO5', 'Switch Current View', 'DASHBOARD', 'Community Page', 'PLATFORM', 'Program Forms', 'Form Management', 'Notifications (2)', 'ANALYTICS', 'Operational Reports', 'RESOURCES', 'Library', and 'ACCOUNT' (My Account, Log out).

The main content area is titled 'Facility Information' and includes a 'Save your work' callout with an arrow pointing to 'Save' and 'Save & Exit' buttons. Below this is a 'Data Entry Complete' checkbox, with a callout stating: 'Once data entry is complete, please check the "Data Entry Complete" box and click the Save & Exit button above to complete your data submission'. A 'Target: BP Data Submission' section provides instructions for data entry, including a note: 'Once your data is finalized, the "Data Entry Complete" checkbox is available. Check it and hit "Save & Exit" to finish.'

The 'Measure Components' section describes the 'Controlling High Blood Pressure (NQF18/MIPS#236)' measure. The 'DENOMINATOR' is defined as 'Patients 18-85 years of age who had a diagnosis of essential hypertension within the first six months of the measurement period or any time prior to the measurement period.' The 'NUMERATOR' is defined as 'Patients whose blood pressure at the most recent visit is adequately controlled (systolic blood pressure <140 mmHg and diastolic blood pressure <90 mmHg) during the measurement period.'

At the bottom, there are form fields for questions Q1, Q2, Q3, and Q4. A callout 'Enter data in the form fields' with an arrow points to the input boxes. The values entered are: Q1: 37155, Q2: 23991, Q3: 17455.

On the right, a 'Tabs' panel shows 'Facility Information' selected, with a list of age groups: 'Patients 18-44 years of age', 'Patients 45-64 years of age', 'Patients 65-74 years of age', and 'Patients 75-85 years of age'.

Submitting Data – Form Entry

Ambulatory Quality Registry Katherine Overton
AQ Demo Facility 5

Program Forms
Form Management
Notifications
ANALYTICS
Operational Reports
RESOURCES
Library
ACCOUNT
My Account
Log out

Save Save & Exit

Percentage of patients 18-85 years of age who had a diagnosis of hypertension and whose blood pressure was adequately controlled (systolic blood pressure <140 mmHg and diastolic blood pressure <90 mmHg) during the measurement period.

DENOMINATOR: Patients 18-85 years of age who had a diagnosis of essential hypertension within the first six months of the measurement period or any time prior to the measurement period.

NUMERATOR: Patients whose blood pressure at the most recent visit is adequately controlled (systolic blood pressure <140 mmHg and diastolic blood pressure <90 mmHg) during the measurement period.

Q1. What is the total adult (18-85 years) patient population size for the Healthcare Organization? 37155

Q2. What is your total adult (18-85 years) patient population that has been diagnosed with hypertension? 23991

Q3. Of those who have been diagnosed with hypertension (from question above) what is the number of adults (18-85 years) patients under control, BP < 140/90 mmHg? 17455

Q4. How many providers are there for the Healthcare Organization? 42

Q5. How many of your total adult (18-85 years) patient population are primarily attributed to the following payor groups:

All fields must contain a value. Please enter "0" where there are no patients.

Medicare: Total Patient Count	11759
Medicaid: Total Patient Count	9451
Private Health Insurance: Total Patient Count	12087
Other Public: Total Patient Count	1326
Uninsured / Self-Pay: Total Patient Count	2511
Other / Unknown: Total Patient Count	21
Summation: Total Patient Count	37155

Note:
*Prevalence Estimator data entry is required for award eligibility.
*Prevalence Estimator tabs are located in the top right panel.
*To expand the panel, click the blue icon with 4 lines in the top right of the data submission window.

Facility Information
Patients 18-44 years of age
Patients 45-64 years of age
Patients 65-74 years of age
Patients 75-85 years of age

All programs contain a similar question asking for a patient breakdown by payor group.

40

Submitting Data – Avoiding Errors

Ambulatory Quality Registry
AQ Demo Facility 5
Katherine Overton

Program Forms
Form Management
Notifications
ANALYTICS
Operational Reports
RESOURCES
Library
ACCOUNT
My Account
Log out

Percentage of patients 18-85 years of age who had a diagnosis of hypertension and whose blood pressure was adequately controlled (systolic blood pressure <140 mmHg and diastolic blood pressure <90 mmHg) during the measurement period.

DENOMINATOR: Patients 18-85 years of age who had a diagnosis of essential hypertension within the first six months of the measurement period or any time prior to the measurement period.

NUMERATOR: Patients whose blood pressure at the most recent visit is adequately controlled (systolic blood pressure <140 mmHg and diastolic blood pressure <90 mmHg) during the measurement period.

Q1. What is the total adult (18-85 years) patient population size for the Healthcare Organization? 37155

Q2. What is your total adult (18-85 years) patient population that has been diagnosed with hypertension? 23991

Q3. Of those who have been diagnosed with hypertension (from question above) what is the number of adults (18-85 years) patients under control, BP < 140/90 mmHg? 17455

Q4. How many providers are there for the Healthcare Organization? 42

Q5. How many of your total adult (18-85 years) patient population are primarily attributed to the following payor groups:

All fields must contain a value. Please enter "0" where there are no patients.

Medicare: Total Patient Count	11759
Medicaid: Total Patient Count	9451
Private Health Insurance: Total Patient Count	12087
Other Public: Total Patient Count	1326
Uninsured / Self-Pay: Total Patient Count	2511
Other / Unknown: Total Patient Count	21
Summation: Total Patient Count	37155

Note:
*Prevalence Estimator data entry is required for award eligibility.
*Prevalence Estimator tabs are located in the top right panel.
*To expand the panel, click the blue icon with 4 lines in the top right of the data submission window.

Save Save & Exit

Facility Information
Patients 18-44 years of age
Patients 45-64 years of age
Patients 65-74 years of age
Patients 75-85 years of age

The summation of total patients by payor group must equal your total adult population size.

Submitting Data – Avoiding Errors

Ambulatory Quality Registry Katherine Overton
AQ Demo Facility 5

Program Forms
Form Management
Notifications 2
ANALYTICS
Operational Reports
RESOURCES
Library
ACCOUNT
My Account
Log out

Save Save & Exit

Saved Successfully

DENOMINATOR:Patients 18-85 years of age who had a diagnosis of essential hypertension within the first six months of the measurement period or any time prior to the measurement period.

NUMERATOR:Patients whose blood pressure at the most recent visit is adequately controlled (systolic blood pressure <140 mmHg and diastolic blood pressure <90 mmHg) during the measurement period.

Q1. What is the total adult (18-85 years) patient population size for the Healthcare Organization? 37155

Q2. What is your total adult (18-85 years) patient population that has been diagnosed with hypertension? 23991

Q3. Of those who have been diagnosed with hypertension (from question above) what is the number of adults (18-85 years) patients under control, BP < 140/90 mmHg? 17455

Q4. How many providers are there for the Healthcare Organization? 42

Q5. How many of your total adult (18-85 years) patient population are primarily attributed to the following payor groups?

All fields must contain a value. Please enter "0" where there are no patients.

Medicare: Total Patient Count	11759
Medicaid: Total Patient Count	9100
Private Health Insurance: Total Patient Count	12087
Other Public: Total Patient Count	1326
Uninsured / Self-Pay: Total Patient Count	2511
Other / Unknown: Total Patient Count	21
Summation: Total Patient Count	36804

Note:
*Prevalence Estimator data entry is required for award eligibility.
*Prevalence Estimator tabs are located in the top right panel.

My Tasks

Overall Total 18-85 years

✘ Overall Total 18-85 years of age is blank. Please ensure data is entered in the Prevalence Estimator tabs located in the top right panel. To expand the tabs, click the blue icon with 4 lines at the top right of the data entry window.
Qfac_targetbp026

Total adult patient population size

✘ The total adult patient population count for the Healthcare Organization is not matching with the sum of the total patient count. Please review.
Qfac_targetbp028

If the summation of patients by payor group does NOT equal the total adult patient population, you will get an error message.

42

Submitting Data – Avoiding Errors

Ambulatory Quality Registry Katherine Overton
AQ Demo Facility 5

Notifications 2

ANALYTICS

Operational Reports

RESOURCES

Library

ACCOUNT

My Account

Log out

Save Save & Exit

Resolve all Critical Alerts prior to saving.

NUMERATOR: Patients whose blood pressure at the most recent visit is adequately controlled (systolic blood pressure <140 mmHg and diastolic blood pressure <90 mmHg) during the measurement period.

Q1. What is the total adult (18-85 years) patient population size for the Healthcare Organization? 37155

The total adult patient population count for the Healthcare Organization is not matching with the sum of the total patient count. Please review.

Q2. What is your total adult (18-85 years) patient population that has been diagnosed with hypertension? 23991

Q3. Of those who have been diagnosed with hypertension (from question above) what is the number of adults (18-85 years) patients under control, BP < 140/90 mmHg? 17455

Q4. How many providers are there for the Healthcare Organization?

Q5. How many of your total adult (18-85 years) patient population are primarily attributed to:

All fields must contain a value. Please enter "0" where there are no patients.

Medicare: Total Patient Count	11759
Medicaid: Total Patient Count	9451
Private Health Insurance: Total Patient Count	12087
Other Public: Total Patient Count	1326
Uninsured / Self-Pay: Total Patient Count	2511
Other / Unknown: Total Patient Count	0
Summation: Total Patient Count	37134

My Tasks

Overall Total 18-85 years

Overall Total 18-85 years of age is blank. Please ensure data is entered in the Prevalence Estimator tabs located in the top right panel. To expand the tabs, click the blue icon with 4 lines at the top right of the data entry window.

Qfac_targetbp026

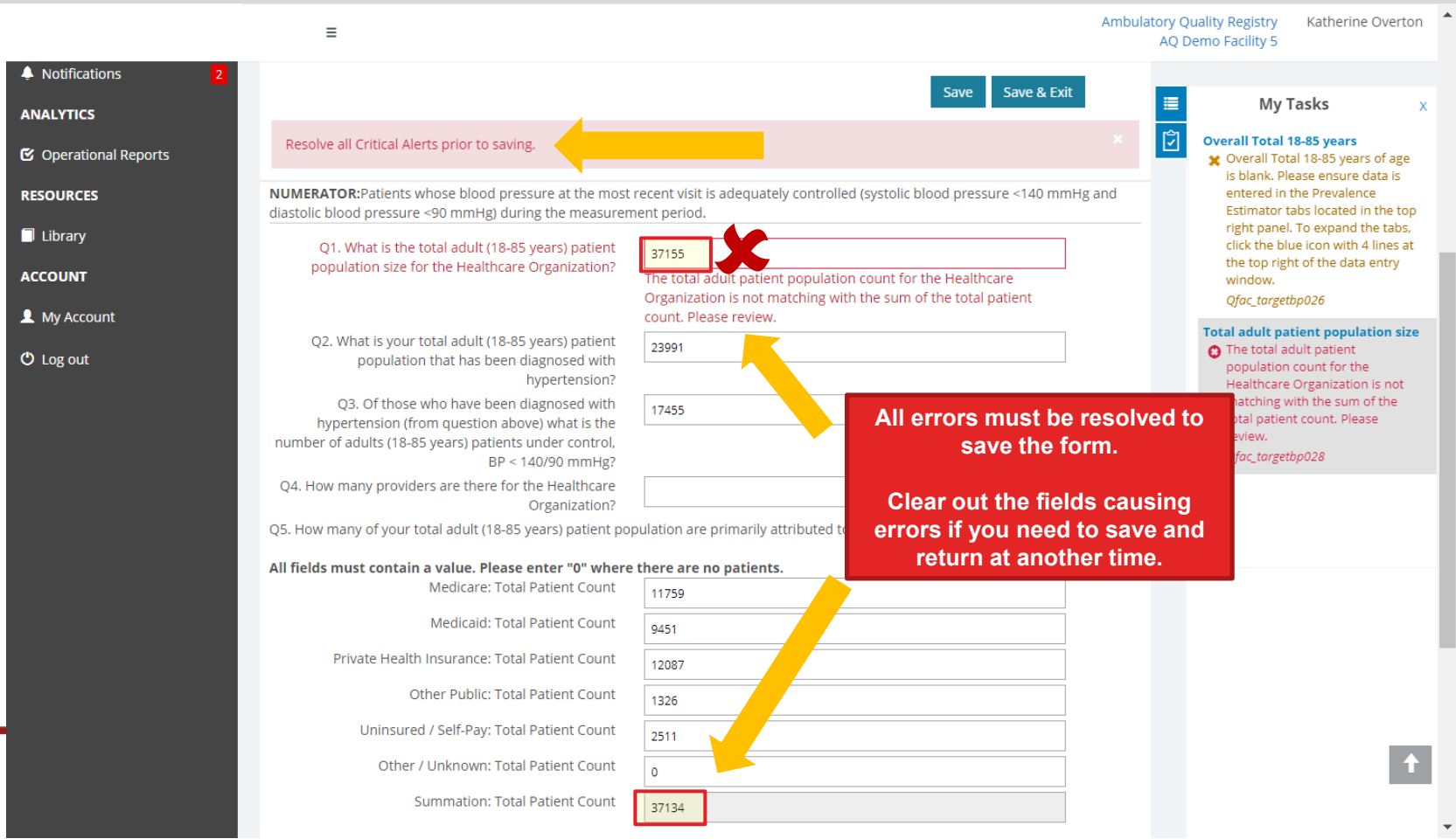
Total adult patient population size

The total adult patient population count for the Healthcare Organization is not matching with the sum of the total patient count. Please review.

Qfac_targetbp028

All errors must be resolved to save the form.

Clear out the fields causing errors if you need to save and return at another time.



The screenshot shows a data entry interface for an Ambulatory Quality Registry. A sidebar on the left contains navigation options like 'Notifications', 'ANALYTICS', 'Operational Reports', 'RESOURCES', 'Library', 'ACCOUNT', 'My Account', and 'Log out'. The main area displays a form with several questions (Q1-Q5) and a table of patient counts. A red banner at the top says 'Resolve all Critical Alerts prior to saving.' with a yellow arrow pointing to it. A red box with a white 'X' highlights the value '37155' in the Q1 field, with a yellow arrow pointing to it. Another red box with a white 'X' highlights the value '37134' in the 'Summation' row of the table, with a yellow arrow pointing to it. A large red callout box in the center contains the text: 'All errors must be resolved to save the form. Clear out the fields causing errors if you need to save and return at another time.' On the right, a 'My Tasks' panel shows two tasks related to the 'Overall Total 18-85 years' population size, both with error messages. The top right corner shows the user's name 'Katherine Overton' and the facility 'AQ Demo Facility 5'. The bottom right corner has a red line graph icon and the number '43'.

Submitting Data – Avoiding Errors

- Notifications 2
- ANALYTICS
- Operational Reports
- RESOURCES
- Library
- ACCOUNT
- My Account
- Log out

Saved Successfully

Save Save & Exit

NUMERATOR: Patients whose blood pressure at the most recent visit is adequately controlled (systolic blood pressure <140 mmHg and diastolic blood pressure <90 mmHg) during the measurement period.

Q1. What is the total adult (18-85 years) patient population size for the Healthcare Organization?

Q2. What is your total adult (18-85 years) patient population that has been diagnosed with hypertension?

Q3. Of those who have been diagnosed with hypertension (from question above) what is the number of adults (18-85 years) patients under control, BP < 140/90 mmHg?

Q4. How many providers are there for the Healthcare Organization?

Q5. How many of your total adult (18-85 years) patient population are primarily attributed to:

All fields must contain a value. Please enter "0" where there are no patients.

Medicare: Total Patient Count	<input type="text" value=""/>
Medicaid: Total Patient Count	<input type="text" value="9451"/>
Private Health Insurance: Total Patient Count	<input type="text" value="12087"/>
Other Public: Total Patient Count	<input type="text" value="1326"/>
Uninsured / Self-Pay: Total Patient Count	<input type="text" value="2511"/>
Other / Unknown: Total Patient Count	<input type="text" value="21"/>
Summation: Total Patient Count	<input type="text" value=""/>

After we cleared out the field that starts the auto-sum, we can Save normally.

Facility Information

- Patients 18-44 years of age
- Patients 45-64 years of age
- Patients 65-74 years of age
- Patients 75-85 years of age

Note:



Submitting Data – Tab Navigation

Welcome, Katherine Overton

Currently Viewing
Ambulatory Quality Registry
AQ Demo Facility 5 – AQDEMO5

Switch Current View

DASHBOARD

- Community Page

PLATFORM

- Program Forms
- Form Management
- Notifications 2

ANALYTICS

- Operational Reports

RESOURCES

- Library

ACCOUNT

- My Account
- Log out

Ambulatory Quality Registry
AQ Demo Facility 5
Katherine Overton

Save your work → Save Save & Exit

Click on different Tabs to enter all required data →

Facility Information

Overall Total 18-85 years of age

Reporting Year 2019

Once data entry is complete, please check the "Data Entry Complete" box and click the Save & Exit button

Data Entry Complete

Target: BP Data Submission

Instructions for Data Submission:
Please enter data on all tabs, located in the top right panel, and in questions 1 – 5 (Q1-Q5) below to ensure award eligibility. Prevalence Estimator data in the tabs labeled "Patients X-Y years of age" must be completed. The summation of all Prevalence Estimator data must match the entered value of "Q1. What is the total adult (18-85 years) patient population size for the Healthcare Organization?" for data to be saved. The tabs panel can be expanded for viewing by clicking the blue icon with 4 lines in the top right of the data submission window.

Q2 and Q3 align with the (NQF18/MIPS#236) – Controlling High Blood Pressure measure. These questions represent the denominator and numerator of (NQF18/MIPS#236), respectively. This measure is endorsed by the National Quality Forum (NQF) and is widely implemented in various Center for Medicaid and Medicare Services (CMS) and private pay and reporting programs.

Measure Components:
Measure Description: [Controlling High Blood Pressure \(NQF18/MIPS#236\)](#)
Percentage of patients 18-85 years of age who had a diagnosis of hypertension and whose blood pressure was adequately controlled (<140/90 mmHg) during the measurement period.

DENOMINATOR: Patients 18-85 years of age who had a diagnosis of essential hypertension within the first six months of the measurement period or any time prior to the measurement period.

NUMERATOR: Patients whose blood pressure at the most recent visit is adequately controlled (systolic blood pressure <140 mmHg and diastolic blood pressure <90 mmHg) during the measurement period.

Q1. What is the total adult (18-85 years) patient population size for the Healthcare Organization?

Q2. What is your total adult (18-85 years) patient population that has been diagnosed with hypertension?

Q3. Of those who have been diagnosed with hypertension (from question above) what is the number of adults (18-85 years) patients under control, BP < 140/90 mmHg?

Q4. How many providers are there for the Healthcare Organization?

Save your work → Save Save & Exit

Click on different Tabs to enter all required data →

Facility Information

Patients 18-44 years of age

Patients 45-64 years of age

Patients 65-74 years of age

Patients 75-85 years of age

Submitting Data – Hypertension Prevalence Estimator

Welcome,
Katherine Overton

Currently Viewing
Ambulatory Quality Registry
AQ Demo Facility 5 – AQDEMOS

Switch Current View

DASHBOARD

Community Page

PLATFORM

Program Forms

Form Management

Notifications 2

ANALYTICS

Operational Reports

RESOURCES

Library

ACCOUNT

My Account

Log out

Ambulatory Quality Registry Katherine Overton
AQ Demo Facility 5

Save Save & Exit

Patients 18-44 years of age
Target: BP Data Submission

Instructions for the Prevalence Estimator:
The [Million Hearts Hypertension Prevalence Estimator](#) calculates the expected number of patients with hypertension. This is calculated by applying national population hypertension prevalence rates from the National Health and Nutrition Examination Survey to the age, gender and race/ethnicity data of your patients.

Please enter data for the following age categories (on this page and the next 3 tabs)
18-44
45-64
65-74
75-85

The number for the total adult patient population entered by the participant (Facility Information-Q1) must equal the overall sum of patient demographic fields entered into the Million Hearts Hypertension Prevalence Estimator tool. Prevalence Estimator data entry is required for award eligibility. The Prevalence Estimator requires a "0" to be entered in fields where there are no patients attributed to the demographic grouping. Blank fields are not permitted.

After completing the Prevalence Estimator tabs, the 95% confidence interval measure results information is displayed in the "Operational Reports" section of the platform.

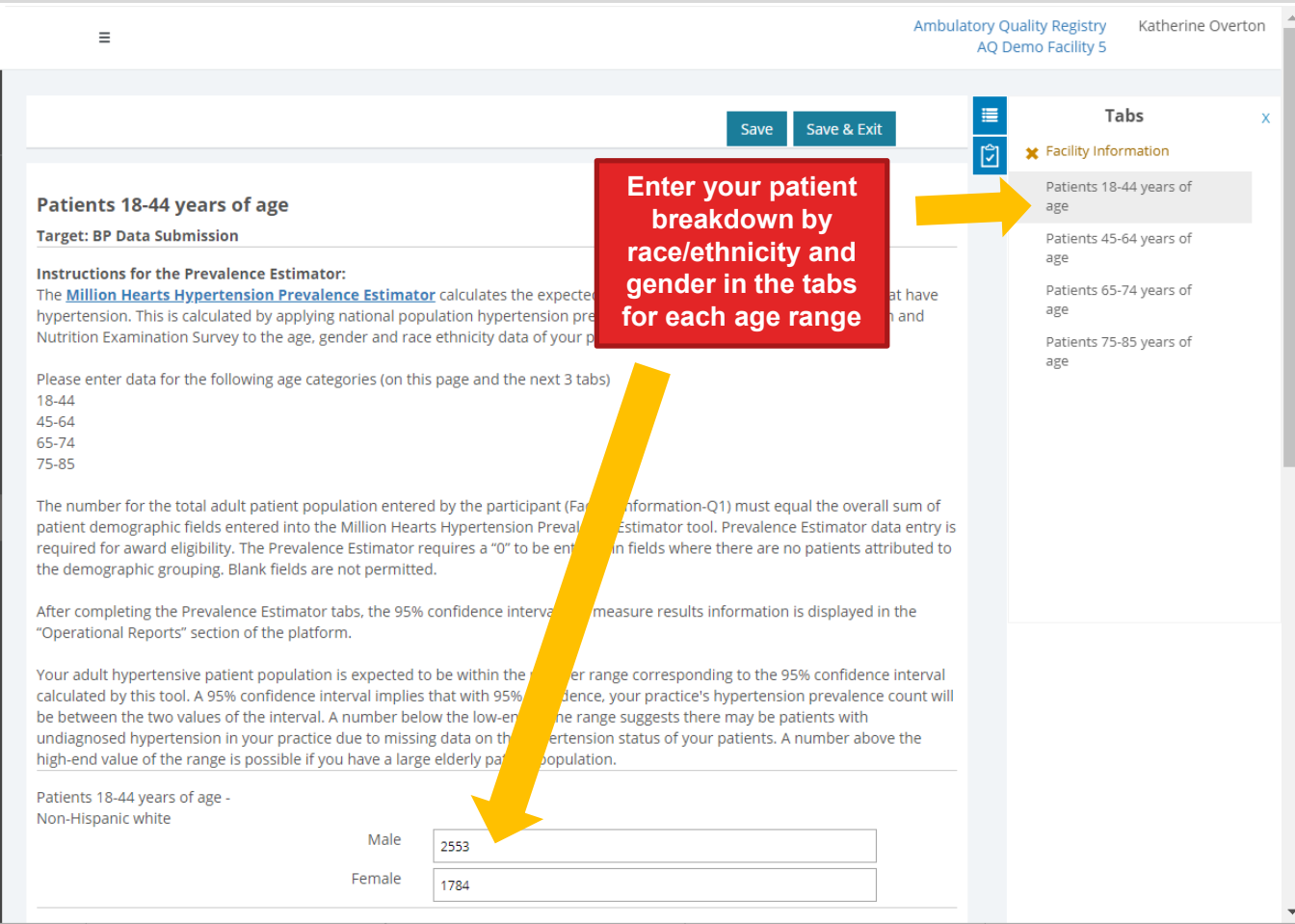
Your adult hypertensive patient population is expected to be within the number range corresponding to the 95% confidence interval calculated by this tool. A 95% confidence interval implies that with 95% confidence, your practice's hypertension prevalence count will be between the two values of the interval. A number below the low-end of the range suggests there may be patients with undiagnosed hypertension in your practice due to missing data on the hypertension status of your patients. A number above the high-end value of the range is possible if you have a large elderly patient population.

Patients 18-44 years of age -
Non-Hispanic white

Male	<input type="text" value="2553"/>
Female	<input type="text" value="1784"/>

Facility Information
Patients 18-44 years of age
Patients 45-64 years of age
Patients 65-74 years of age
Patients 75-85 years of age

Enter your patient breakdown by race/ethnicity and gender in the tabs for each age range



Submitting Data – Hypertension Prevalence Estimator

Amblulatory Quality Registry | Katherine Overton
AQ Demo Facility 5

Welcome, Katherine Overton

Currently Viewing
Amblulatory Quality Registry
AQ Demo Facility 5 – AQDEMOS

Switch Current View

DASHBOARD

Community Page

PLATFORM

Program Forms

Form Management

Notifications 2

ANALYTICS

Operational Reports

RESOURCES

Library

ACCOUNT

My Account

Log out

Save Save & Exit

Target: BP Data Submission

Patients 65-74 years of age - Non-Hispanic white	Male	1148
	Female	1214
Patients 65-74 years of age - Non-Hispanic black	Male	448
	Female	545
Patients 65-74 years of age - Hispanic	Male	838
	Female	946
Patients 65-74 years of age - American Indian or Alaska Native, Asian, Native Hawaiian or Other Pacific Islander, and all others	Male	41
	Female	20
Patients 65-74 years of age - Unknown	Male	0
	Female	0
Patients 65-74 years of age - Subtotal		5200
Overall Total 18-85 years of age		

Save **Save & Exit**

Tabs

- Facility Information
 - Patients 18-44 years of age
 - Patients 45-64 years of age
 - Patients 65-74 years of age
 - Patients 75-85 years of age

An automatic subtotal of that tab's patients will populate at the bottom.

Submitting Data – Hypertension Prevalence Estimator

Ambulatory Quality Registry Katherine Overton
AQ Demo Facility 5

Save Save & Exit

Target: BP Data Submission

Patients 75-85 years of age - Non-Hispanic white

Male	<input type="text" value="422"/>
Female	<input type="text" value="303"/>

Patients 75-85 years of age - Non-Hispanic black

Male	<input type="text" value="426"/>
Female	<input type="text" value="191"/>

Patients 75-85 years of age - Hispanic

Male	<input type="text" value="34"/>
Female	<input type="text" value="11"/>

Patients 75-85 years of age - American Indian or Alaska Native, Asian, Native Hawaiian or Other Pacific Islander, and all others

Male	<input type="text" value="9"/>
Female	<input type="text" value="12"/>

Patients 75-85 years of age - Unknown

Male	<input type="text"/>
Female	<input type="text"/>

Patients 75-85 years of age - Subtotal

Overall Total 18-85 years of age

Facility Information

- Patients 18-44 years of age
- Patients 45-64 years of age
- Patients 65-74 years of age
- Patients 75-85 years of age**

Blanks in any fields will cause the Facility Information tab to have a yellow X. Data is NOT complete.

Submitting Data – Hypertension Prevalence Estimator

Amblulatory Quality Registry
AQ Demo Facility 5

Katherine Overton

Save Save & Exit

Target: BP Data Submission




Patients 75-85 years of age - Non-Hispanic white	Male	422
	Female	303
Patients 75-85 years of age - Non-Hispanic black	Male	426
	Female	191
Patients 75-85 years of age - Hispanic	Male	
	Female	
Patients 75-85 years of age - American Indian or Alaska Native, Asian or Pacific Islander, and all others	Male	
	Female	
Patients 75-85 years of age - Unknown	Male	0
	Female	0
Patients 75-85 years of age - Subtotal		1408
Overall Total 18-85 years of age		37155

Facility Information

- Patients 18-44 years of age
- Patients 45-64 years of age
- Patients 65-74 years of age
- Patients 75-85 years of age

Add zeroes where you have no patients.

✓



Submitting Data – Hypertension Prevalence Estimator

Welcome, Katherine Overton

Currently Viewing
Ambulatory Quality Registry
AQ Demo Facility 5 – AQDEMOS

Switch Current View

DASHBOARD
Community Page

PLATFORM
Program Forms

Form Management

Notifications 2

ANALYTICS
Operational Reports

RESOURCES
Library

ACCOUNT
My Account
Log out

Save Save & Exit

Target: BP Data Submission

Patients 75-85 years of age - Non-Hispanic white	
Male	422
Female	303
Patients 75-85 years of age - Non-Hispanic black	
Male	426
Female	191
Patients 75-85 years of age - Hispanic	
Male	34
Female	11
Patients 75-85 years of age - American Indian or Alaska Native, Asian, Native Hawaiian or Other Pacific Islander, and all others	
Male	9
Female	12
Patients 75-85 years of age - Unknown	
Male	0
Female	0
Patients 75-85 years of age - Subtotal	
	1408
Overall Total 18-85 years of age	
	37135


When all tabs are complete, an auto-subtotal will sum all the Patient tabs.

Patients 75-85 years of age - Subtotal 1408

Overall Total 18-85 years of age 37135

Tabs
x

- Facility Information
- Patients 18-44 years of age
- Patients 45-64 years of age
- Patients 65-74 years of age
- Patients 75-85 years of age



Submitting Data – Hypertension Prevalence Estimator

Notifications 2	Patients 75-85 years of age - American Indian or Alaska Native, Asian, Native Hawaiian or Other Pacific Islander, and all others	
	Male	<input type="text" value="9"/>
	Female	<input type="text" value="12"/>
	Patients 75-85 years of age - Unknown	
	Male	<input type="text" value="0"/>
	Female	<input type="text" value="0"/>
	Patients 75-85 years of age - Subtotal	<input type="text" value="1408"/>
	Overall Total 18-85 years of age	<input type="text" value="37155"/>

Question 1

DENOMINATOR:Patients 18-85 years of age who had a diagnosis of essential hypertension within the first measurement period.

NUMERATOR:Patients whose blood pressure at the most recent visit is adequately controlled (systolic blood pressure < 140 mmHg) during the measurement period.

Q1. What is the total adult (18-85 years) patient population size for the Healthcare Organization?	<input type="text" value="37155"/>
--	------------------------------------

The auto-summed “Overall Total of 18-85 years of age” must MATCH your answer to Question 1

Submitting Data – Data Entry Complete

The screenshot displays the Ambulatory Quality Registry interface for Katherine Overton at AQ Demo Facility 5. The left sidebar contains navigation options: Welcome, Katherine Overton; Currently Viewing: Ambulatory Quality Registry AQ Demo Facility 5 – AQDEMOS; Switch Current View; DASHBOARD; Community Page; PLATFORM; Program Forms; Form Management; Notifications (2); ANALYTICS; Operational Reports; RESOURCES; Library; ACCOUNT; My Account; Log out.

The main content area shows the "Facility Information" section with the following data:

- Overall Total 18-85 years of age: 37155
- Reporting Year: 2019
- Data Entry Complete:

A red banner at the top of the form area reads "Save & Exit" with a yellow arrow pointing to the "Save & Exit" button in the top right corner. Another yellow arrow points to the "Data Entry Complete" checkbox.

Below the form, a red box contains the text: "When all fields are entered (no blanks) + no error messages, the Data Entry Complete checkbox can be clicked."

Instructions for Data Submission: Please enter data on all tabs, located in the top right panel, and in questions 1 – 5 (Q1-5). Prevalence Estimator data in the tabs labeled "Patients X-Y years of age" must be complete. The total adult (18-85 years of age) data must match the entered value of "Q1. What is the total adult (18-85 years of age) in your Organization?" for data to be saved. The tabs panel can be expanded for viewing by clicking on the "Facility Information" tab in the top right panel.

Measure Components:
Measure Description: Controlling High Blood Pressure (NQF18/MIPS#236)
Percentage of patients 18-85 years of age who had a diagnosis of hypertension and whose blood pressure was adequately controlled (<140/90 mmHg) during the measurement period.

DENOMINATOR: Patients 18-85 years of age who had a diagnosis of essential hypertension within the first six months of the measurement period or any time prior to the measurement period.

NUMERATOR: Patients whose blood pressure at the most recent visit is adequately controlled (systolic blood pressure <140 mmHg and diastolic blood pressure <90 mmHg) during the measurement period.

Data Entry Tips – All Programs


- Type “0” in fields with no patients – leaving fields blank will trigger an error.
- Save often.
- You must resolve critical errors (marked with **red text**) before you can Save. Clear out the field(s) causing the errors to Save and return later.
- **Gray boxes = automatic sum of patients entered**
 - In the Target: BP Hypertension Prevalence Estimator, the **auto-summed total of patients entered in each age-range tab MUST equal** your Q1. Total Adult (18-85 years) Patient Population for your HCO.
- When finished, check the “Data Entry Complete” checkbox, then Save & Exit.

Data Entry Tips – CCC Cholesterol & TT2D

- **Answering “Yes”** to Question 7 in CCC Cholesterol and Question 8 in Target: Type 2 Diabetes is required to be eligible for recognition.


- **CCC Cholesterol:** “My organization is committed to continuously improving data use and data capture of ASCVD Risk Estimations in our workflows and EHR Systems.”

Q7. My organization is committed to continuously improving use and data capture of ASCVD Risk Estimations into our workflows and EHR systems. Yes No



- **Target: Type 2 Diabetes:** “My organization is committed to continuously improving strategies for addressing CVD risk in patients with Type 2 diabetes.”

Q8. My organization is committed to continuously improving strategies for addressing CVD risk in patients with type 2 diabetes. Yes No



Site Characteristics Form

Amb

- Make sure to fill out your **Site Characteristics form**.
 - This provides additional benchmarking functionality in reports.

Welcome, Katherine Overton

Currently Viewing
Ambulatory Quality Registry
AQ Demo Facility 5 -- AQDEM05

Switch Current View

DASHBOARD

Community Page

PLATFORM

Program Forms

Form Management

Notifications 2

ANALYTICS

Operational Reports

RESOURCES

Library

ACCOUNT

My Account

Log out

Community Page

Get Started

Program Forms

Reports

Library

Ambulatory Quality Registry

Click on "Form Management" to enter details about your organization for benchmarking purposes.

TARGET:BP

American Heart Association
Check. Change. Control.
Cholesterol™

American Heart Association
Target: Type 2 Diabetes™

Site Characteristics Form

The screenshot displays the Ambulatory Quality Registry interface for Katherine Overton at AQ Demo Facility 5. The top right corner shows the user's name and the facility name. The main content area is titled "Form Management" and contains a link for "Facility Forms". A yellow arrow points to this link, and a red callout box with the text "Click on 'Facility Forms'" is positioned next to it. The left sidebar contains a navigation menu with sections for Welcome, Currently Viewing, DASHBOARD, PLATFORM, ANALYTICS, RESOURCES, and ACCOUNT. The "Form Management" item in the PLATFORM section is highlighted with an orange bar. A red notification badge with the number "2" is visible next to the "Notifications" item. A red line graphic is present at the bottom right of the page.

Welcome,
Katherine Overton

Currently Viewing
Ambulatory Quality Registry
AQ Demo Facility 5 – AQDEMOS

Switch Current View

DASHBOARD

Community Page

PLATFORM

Program Forms

Form Management

Notifications 2

ANALYTICS

Operational Reports

RESOURCES

Library

ACCOUNT

My Account

Log out

Ambulatory Quality Registry
AQ Demo Facility 5

Katherine Overton

Form Management

[Facility Forms](#)

Click on "Facility Forms"

56

Site Characteristics Form

The screenshot displays the 'Form Management' interface for the 'Ambulatory Quality Registry' at 'AQ Demo Facility 5'. The user is identified as 'Katherine Overton'. The sidebar on the left contains the following navigation items:

- Welcome, Katherine Overton
- Currently Viewing: Ambulatory Quality Registry, AQ Demo Facility 5 – AQDEMO5
- Switch Current View
- DASHBOARD
- Community Page
- PLATFORM
- Program Forms
- Form Management**
- Notifications (2)
- ANALYTICS
- Operational Reports
- RESOURCES
- Library
- ACCOUNT
- My Account
- Log out

The main content area is titled 'Form Management' and includes a 'Facility Forms' section. Under the 'Add Forms' sub-section, there is a row for 'Add New Site Characteristics' with an 'Add New' link. A yellow arrow points from a red callout box to this link. The callout box contains the text: 'Add new Site Characteristics here.'

Under the 'Edit Forms' sub-section, there is an empty table structure.

Site Characteristics Form

Ambulatory Quality Registry Katherine Overton
AQ Demo Facility 5

Welcome, Katherine Overton

Currently Viewing
Ambulatory Quality Registry
AQ Demo Facility 5 – AQDEMOS

Switch Current View

DASHBOARD
Community Page

PLATFORM
Program Forms
Form Management

Notifications 2

ANALYTICS
Operational Reports

RESOURCES
Library

ACCOUNT
My Account

Save Save & Exit

Clinical Setting (check all that apply)

- Federally Qualified Health Center and Look-Alikes
- Community Health Center, Non-FQHC
- Specialty
- Multi-specialty
- Primary Care
- Residency Practice

Geographical Setting (check all that apply to your location(s))


- Rural
- Suburban
- Urban

Healthcare Organization Size (adult patients)

Hypertensive Population (adult patients)

Set your Site Characteristics here for additional benchmarking capability.

Highly encouraged



Operational Reports

Ambulatory Quality Registry | Katherine Overton
AQ Demo Facility 5

Welcome, Katherine Overton

Currently Viewing
Ambulatory Quality Registry
AQ Demo Facility 5 -- AQDEMOS

Switch Current View

DASHBOARD

- Community Page

PLATFORM

- Program Forms
- Form Management
- Notifications 2

ANALYTICS

- Operational Reports

RESOURCES

- Library

ACCOUNT

- My Account
- Log out

Community Page

Get Started

Ambulatory Quality Registry

Program Forms Reports Library

Navigation Tips

1. Submit recognition data in "Program Forms"
2. View helpful user guides and resources in the "Library"
3. Identify your site's characteristics for benchmarking against peers in "Form Management"
4. Visualize results, historic trends, and benchmarks in "Operational Reports"

View reports in "Operational Reports"

Operational Reports

- You can access reports in the platform that visually show:
 - % of patients meeting the measure criteria
 - Your year-over-year data (if prior years' data are entered)
 - How your HCO compares to all HCOs who entered data
 - How your HCO compares to similar HCOs*
 - *This requires filling out your Site Characteristics first
- Reports take 2 hours to refresh after data is updated.

Operational Reports

Site Level Reports ▼

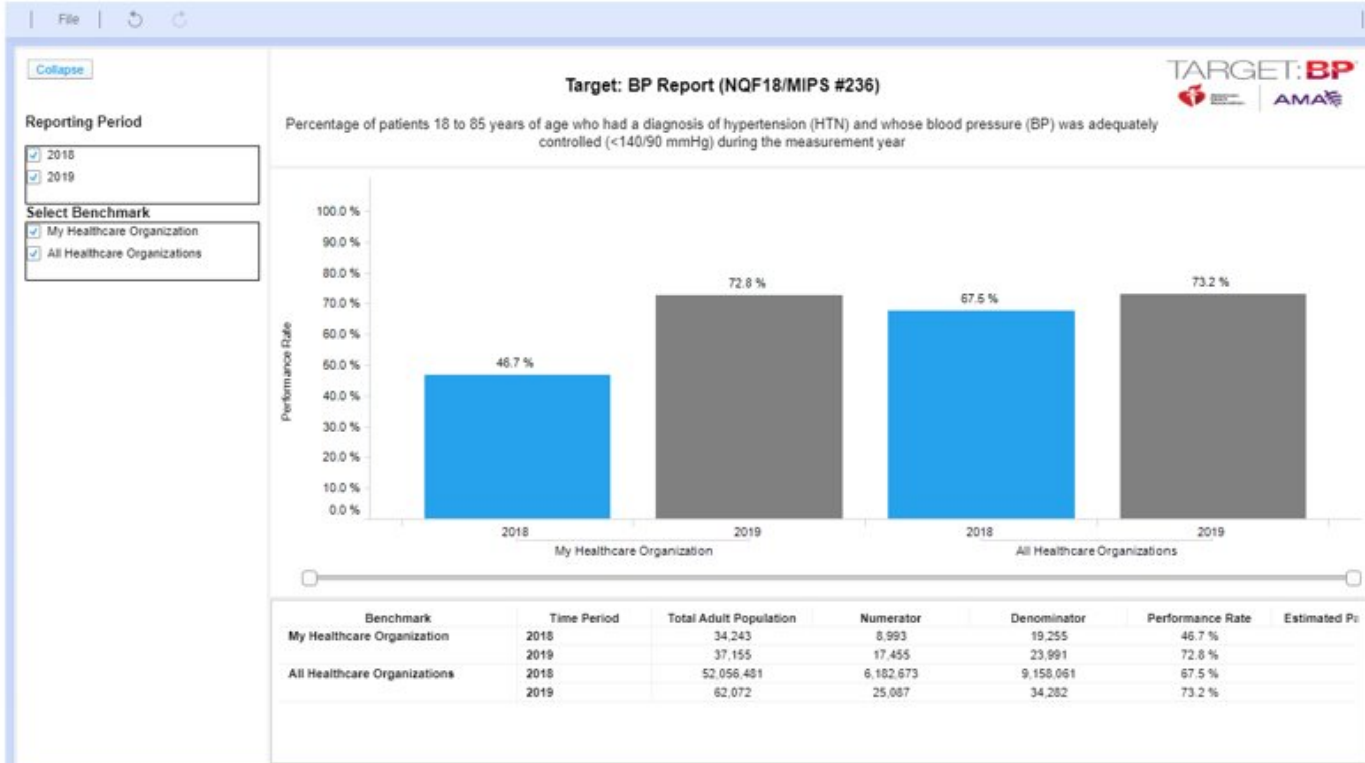
[Target: BP Report \(NQF18/MIPS#236\)](#)
This report displays the percentage of patients 18 to 85 years of age who had a diagnosis of hypertension (HTN) and whose blood pressure (BP) was adequately controlled (<140/90 mmHg) during the measurement year.

[Check. Change. Control. Cholesterol Report \(MIPS#438\)](#)
This report displays the percentage of patients with appropriate Statin Therapy for the Prevention and Treatment of Cardiovascular Disease.

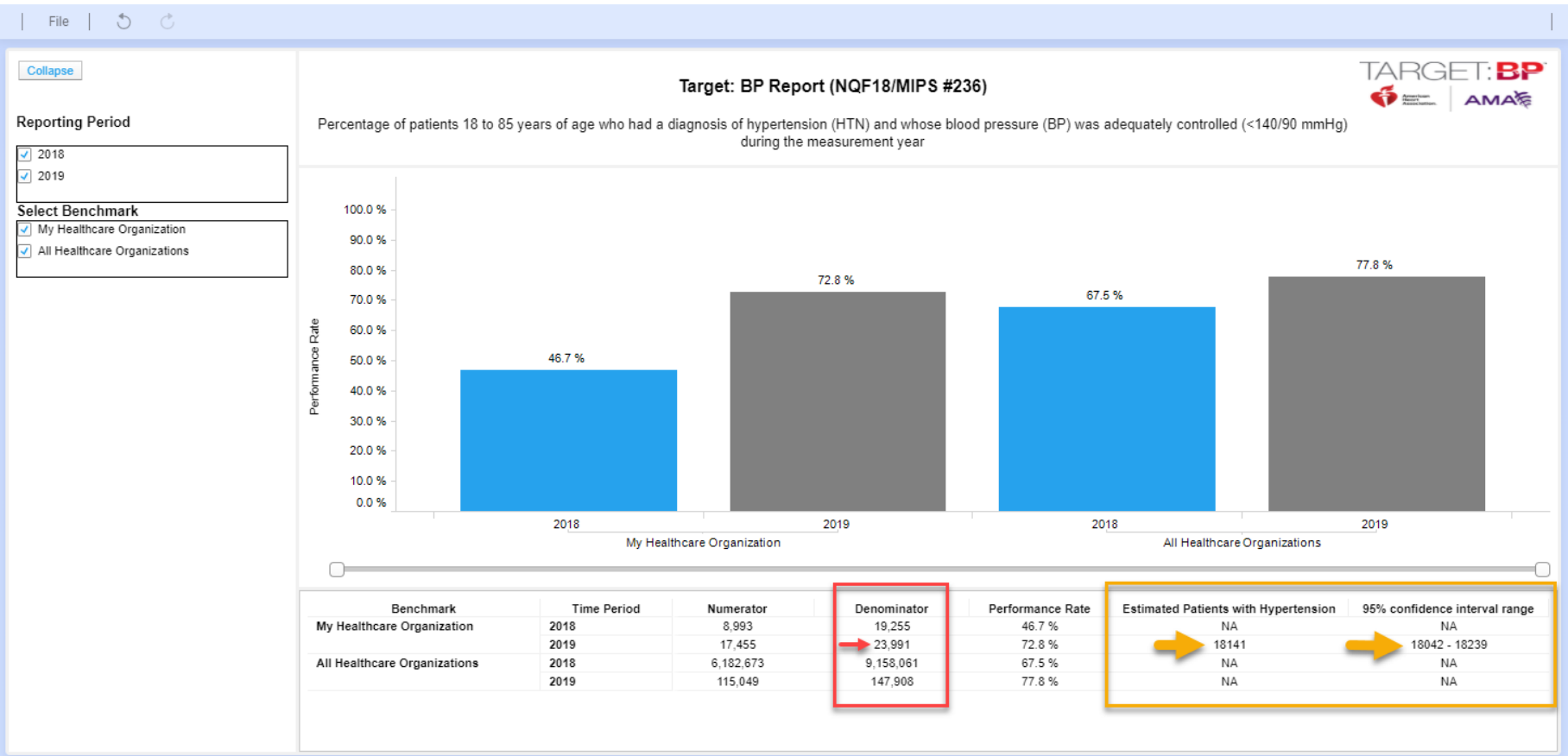
[Target: Type 2 Diabetes Report](#)
This report displays measures relevant to participation in Target: Type 2 Diabetes including Diabetes Poor Control (NQF 0059/MIPS #001), controlling High Blood Pressure (NQF 0018/MIPS #239), and/or Statin Therapy (MIPS #428).

Operational Reports – Example (Target: BP)

Configurable Report Predefined Report



Operational Reports - Example (Target: BP)



Submitting Data – Resources

Ambulatory Quality Registry
AQ Demo Facility 5

Katherine Overton

Welcome, Katherine Overton

Currently Viewing
Ambulatory Quality Registry
AQ Demo Facility 5 – AQDEMOS

Switch Current View

DASHBOARD

- Community Page

PLATFORM

- Program Forms
- Form Management
- Notifications 2

ANALYTICS

- Operational Reports

RESOURCES

- Library

ACCOUNT

- My Account

Community Page

Get Started

	Program Forms	Reports	Library
Ambulatory Quality Registry			

Navigation Tips

1. Submit recognition data in "Program Forms"
2. View helpful user guides and resources in the "Library"
3. Identify your site's characteristics for benchmarking against peers in "Form Management"
4. Visualize results, historic trends, and benchmarks in "Operational Reports"

Additional guides and resources are located in the "Library"

Submitting Data - Resources



Welcome,
Katherine Overton

Currently Viewing

Ambulatory Quality Registry
AQ Demo Facility 5 -- AQDEMOS

Switch Current View

DASHBOARD

Community Page

PLATFORM

Program Forms

Form Management

Notifications 2

ANALYTICS

Operational Reports

RESOURCES

Library

ACCOUNT

My Account

Library

[Target: BP Program Overview](#)

[Target: BP Recognition Fact Sheet](#)

[Target: BP Quick Start User Guide](#)

[Target: BP Data Collection Worksheet](#)

[Target: BP FAQ](#)

[BP Measure Specification - NQF 0018 / MIPS 236](#)

[CCC Cholesterol Recognition Fact Sheet](#)

[CCCC Quick Start User Guide](#)

[CCC Cholesterol Data Collection Worksheet](#)

[CCC Cholesterol FAQ](#)

[Statin Therapy Measure Specification - MIPS 438](#)

[Target: Type 2 Diabetes Recognition Fact Sheet](#)

[Target: Type 2 Diabetes Quick Start User Guide](#)

[Target: Type 2 Diabetes Data Collection Worksheet](#)

[Target: Type 2 Diabetes FAQ](#)

[Diabetes Measure Specification - NQF 0059](#)

[Data Platform User Manual](#)

View additional resources such as:

- Data Collection Worksheets
- Quick User Guides
- FAQs
- Measure Specifications



2020 Data Submission *Conclusion*

TARGET: **BP**[™]



Top Takeaways for 2020 Recognition

1. All award data must be entered and finalized by May 29th, 2020 at 11:59 PM ET to be captured in the recognition “snapshot”.
 - **Data can be edited an any time, but only what is captured on May 29th will be used for award status.**
2. Register for additional programs in the combined registration form:
https://americanheart.co1.qualtrics.com/jfe/form/SV_9RgQY2CIMboTBEF
3. Fill out your Site Characteristics Form for additional benchmarking functionality.
4. To help prepare for data submission, utilize the tools found at:
 - <https://targetbp.org/recognition-program/>
 - <http://www.heart.org/changecholesterol>
 - <https://knowdiabetesbyheart.org/quality>
 - The data platform “Library”
5. Rely on your local AHA/AMA directors for resources, recognition submission, system and benchmark setup, and improvement support. We’re here to help!

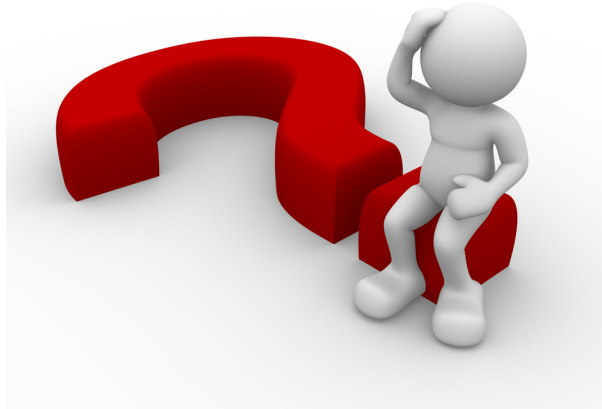
Questions?

General questions: bit.ly/AQContactUs

Password resets, new user accounts, etc. @ IQVIA Support Help Desk

- InfosarioOutcomeSupport@quintiles.com
- 888-526-6700

QUESTIONS?



Please provide your feedback via:
<https://tinyurl.com/u6sgukc>

THANK YOU!

Together, we can reduce the number of Americans who have heart attacks and strokes.

TARGET: **BP**[™]

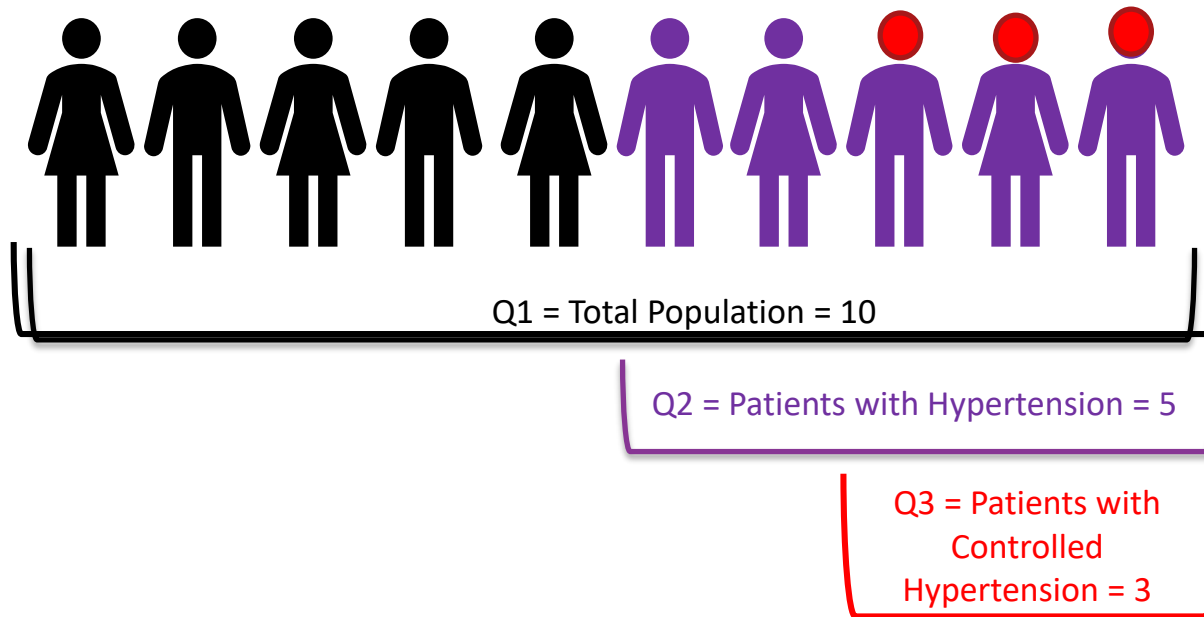


APPENDIX

TARGET: **BP**™



Questions 1-3



Controlling High BP Measure (NQF 0018 / MIPS #236)

Percentage of patients 18 - 85 years of age who had a diagnosis of hypertension and whose blood pressure was adequately controlled (< 140/90) mmHg during the measurement period

Key Inclusion Criteria

- Enter total adult patient population (ages 18-85): includes only those patients with an office visit in 2019
- Enter total hypertensive population: *limited to patients with a diagnosis on or prior to 6/30/19 with at least one office visit in 2019*
 - Exclude any patients with end-stage renal disease, dialysis, renal transplant before or during the measurement period, or pregnancy during the measurement period OR patients age 65 or older in Institutional Special Needs Plans (SNP) or long-term care

Controlling High BP Measure (NQF 0018 / MIPS #236)

Key Inclusion Criteria (continued)

- Enter controlled hypertensive population: patients with a blood pressure <140/90 mmHg at their most recent 2019 office visit
 - If multiple blood pressures were taken on the same visit, use the lowest systolic and lowest diastolic BP on that date as the representative BP.

Hypertension Prevalence Estimator

Developed by Million Hearts®, the prevalence estimator tool estimates the expected hypertensive patient population based on an organization's adult patient population, stratified by age, race/ethnicity and gender for four age groups: 18-44; 45-64; 65-74; 75-85

Age Group	Race/Ethnicity	Number of Patients	
		Men	Women
18-44	Non-Hispanic White		
18-44	Non-Hispanic Black		
18-44	Hispanic		
18-44	American Indian or Alaska Native, Asian, and Native Hawaiian or Other Pacific Islander, and all others		
18-44	Unknown		

Repeat for:
45-64
65-74
75-85

*If some, or all of your patient population does not fit into the defined race/ethnicity categories, please place these patients in the "Unknown" category for each age group and gender.

Hypertension Prevalence Estimator (cont.)

The prevalence estimator is a nationally represented distribution of patients with expected hypertension, therefore your results may not align with the expected numbers.

Prevalence Estimator Results	
Results	Total
Number of patients	13450
Expected patients with hypertension	2730
95% confidence interval range	2696 - 2764
Q2) Total adult (18-85 years) patient population that has been <u>diagnosed with hypertension</u> \geq 140/90	1500

If your rate of HTN is lower than the expected patients with HTN, then you may be missing patients at risk, missing data documenting their condition, or have other causes requiring further study

If your rate of HTN is higher than the expected patients with HTN, you may have a different patient mix than the national distribution (eg, older population)

MIPS #438 Risk Groups

- 1. Patients aged ≥ 21 years at the beginning of the measurement period with clinical ASCVD diagnosis

OR

- 2. Patients aged ≥ 21 years at the beginning of the measurement period who have ever had a fasting or direct laboratory result of LDL-C ≥ 190 mg/dL or were previously diagnosed with or currently have an active diagnosis of familial or pure hypercholesterolemia

OR

- 3. Patients aged 40 to 75 years at the beginning of the measurement period with Type 1 or Type 2 diabetes and with an LDL-C result of 70–189 mg/dL recorded as the highest fasting or direct laboratory test result in the measurement year or during the two years prior to the beginning of the measurement period.



NQF 0059 Diabetes HbA1c Poor Control <9%

- Patients 18-75 years of age with diabetes (diagnosed during the measurement period) who had hemoglobin A1c > 9.0% during the measurement period
 - **NOTE:** This measure tracks negative results. Unlike other measures, you want a low percentage of your patients with diabetes to meet this measure's criteria.
- **DENOMINATOR:** Enter patients 18-75 years of age who had an office visit in 2019 and have been diagnosed during the measurement period.
 - Exclude patients who have been provided hospice services in 2019
- **NUMERATOR:** Enter patients whose most recent HbA1c level (performed in 2019) is >9.0%



Advanced Reporting (By Request)

Regional Benchmarks:

- Creates 1 bar in the report with aggregate of all data for those within the group
- There is no listing of who is included in the cohort (blinded, aggregate)
- Must have at least 3 sites to display.

Uses:

- Those who need an aggregate benchmark for sites in a specific group or cohort
- collaborative, region, etc.

System Level Reports:

- Creates special report with all sites side-by-side within the system.
- Unblinded bar for each facility
- Also creates an overall system level benchmark

Uses:

- Health Systems with 1 data submitter for multiple sites who ALSO want side by side reports of all sites
- Collaboratives of sites that share data or may want to bulk upload many data points

Advanced Reporting Example (By Request)

Operational Reports

Target: BP Report (NQF18/MIPS #236)

Configurable Report **Predefined Report**

Reporting Period

- 2016
- 2017
- 2018

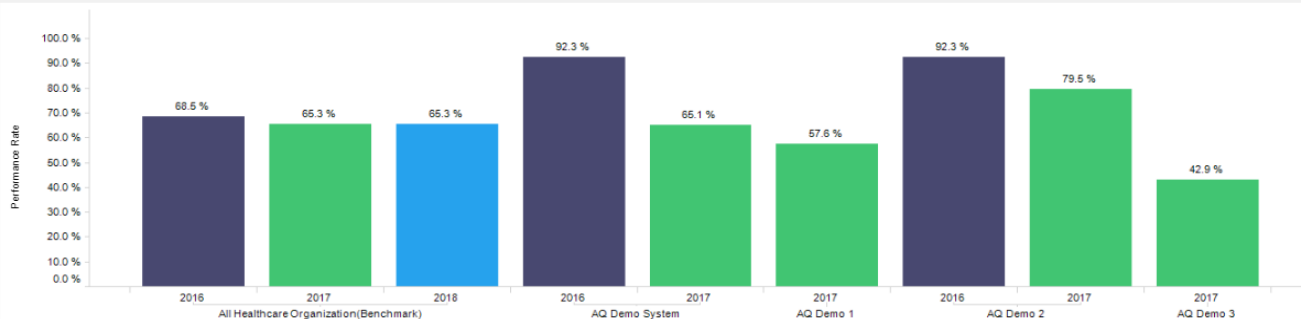
Select Health System/Benchmark

Type to search in list

- (All) 5 values
- All Healthcare Organization(Benchmark)
- AQ Demo System
- AQ Demo 1
- AQ Demo 2
- AQ Demo 3

Target: BP Report (NQF18/MIPS #236)

Percentage of patients 18 to 85 years of age who had a diagnosis of hypertension (HTN) and whose blood pressure (BP) was adequately controlled (<140/90 mmHg) during the measurement year



Health System	Facility	Time Period	Total Adult Population	Numerator	Denominator	Performance Rate	Expected patients with hypertension
All Healthcare Organizations	All Healthcare Organization(Benchmark)	2016	14,247,565	2,278,470	3,326,448	68.5 %	NA
		2017	36,182,936	5,758,152	8,823,139	65.3 %	NA
		2018	21,234,158	6,482	9,900	65.3 %	NA
AQ Demo System	AQ Demo System	2016	23,035	14,665	15,885	92.3 %	NA
		2017	57,709	31,632	48,589	55.1 %	NA
		2018	30,000	17,000	29,537	57.6 %	3198
	AQ Demo 1	2016	23,035	14,665	15,885	92.3 %	10851
		2017	25,209	14,032	17,652	79.5 %	10879
	AQ Demo 3	2017	2,500	600	1,400	42.9 %	277

System Reporting (By Request)

[Collapse](#)

Reporting Period

2016
 2017
 2018

Select Health System/Benchmark

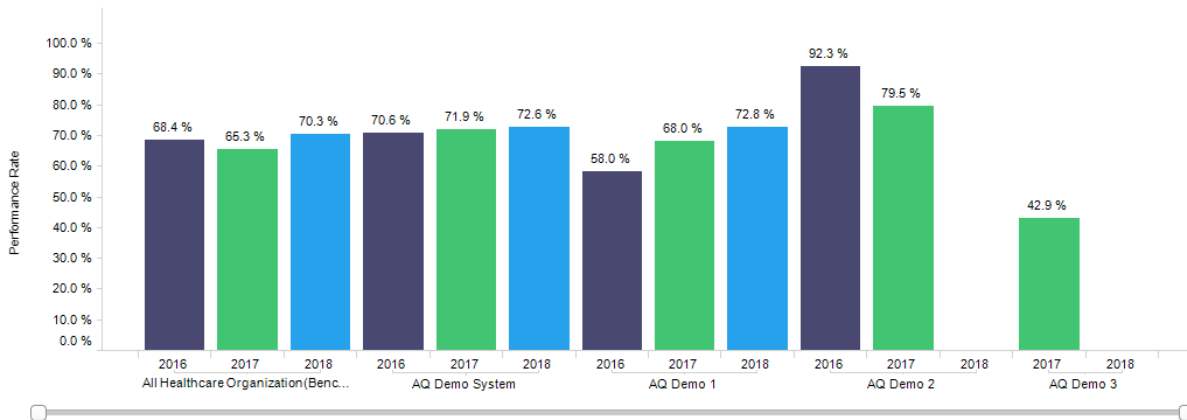
Type to search in list

(All) 5 values
 All Healthcare Organization(Benchmark)
 AQ Demo System
 AQ Demo 1
 AQ Demo 2
 AQ Demo 3

Target: BP Report (NQF18/MIPS #236)



Percentage of patients 18 to 85 years of age who had a diagnosis of hypertension (HTN) and whose blood pressure (BP) was adequately controlled (<140/90 mmHg) during the measurement year



Health System	Facility	Time Period	Total Adult Population	Numerator	Denominator	Performance Rate
All Healthcare Organizations	All Healthcare Organization(Benchmark)	2016	14,297,125	2,299,329	3,360,799	68.4 %
		2017	36,222,953	5,766,485	8,828,214	65.3 %
		2018	25,973,941	973,334	1,384,055	70.3 %
AQ Demo System	AQ Demo System	2016	55,792	30,556	43,284	70.6 %
		2017	62,780	30,821	42,859	71.9 %
		2018	38,155	17,555	24,191	72.6 %
	AQ Demo 1	2016	32,757	15,891	27,399	58.0 %
		2017	35,011	16,189	23,807	68.0 %
		2018	37,155	17,455	23,991	72.6 %