

Measure Name/Type	Measure Definition	Source of Measure	Measure Calculation (Numerator/Denominator)	Measure Exclusion	Data Source/Associated collection Tool	Measure Target Goal	Collection Frequency	Associated Questions
<p><b>REQUIRED</b></p> <p><b>Asthma Severity Documented</b></p> <p><b>PROCESS</b></p>	% of patients ages 2 - 21 with asthma whose asthma severity was documented at any visit related to asthma	NHLBI	<p><b>Targeted Population:</b> All children ages 2 – 21 with a diagnosis of asthma</p> <p><b>Numerator:</b> Number of patients 2 - 21 years with a diagnosis of asthma whose severity was documented during any visit related to asthma.</p> <p><b>Denominator:</b> Number of patients between the ages of 2 - 21 years who had a visit to the participating practice during any visit related to asthma and have a documented diagnosis of asthma</p>	None	<p><b>Database:</b> QIDA</p> <p>Patient Chart/Chart Review Tool</p>	80%	<p><b>Baseline:</b> Maximum of 30 consecutive charts or, if fewer, as many as are available in time frame (Sept – Dec 2017) enter by Feb 2018</p> <p><b>Intervention:</b> Frequency: Monthly</p> <p>Maximum of 10 consecutive charts or, if fewer, as many as are available in time frame (March – August 2018)</p> <p><b>Post Intervention:</b> Continue 10 monthly charts, or if fewer as many as are available until goal is obtained and then quarterly through December 2021</p>	<p>Was the asthma severity classified (today or previously) and documented today as:</p> <ul style="list-style-type: none"> <li>- intermittent</li> <li>- Mild Persistent</li> <li>- Moderate Persistent</li> <li>- Severe Persistent</li> </ul> <p>Yes No</p> <p>(2012 Asthma Quick Reference Guide page 5)</p>

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<p><b>REQUIRED</b></p> <p><b>Asthma Level of Control and Follow Up Documented</b></p> <p><b>PROCESS</b></p>	% of patients ages 2 - 21 with asthma whose asthma level of control was documented and appropriate follow up recorded during any visit related to asthma	NHLBI	<p><b>Targeted Population:</b> All children ages 2 – 21 with a diagnosis of asthma</p> <p><b>Numerator:</b> Number of patients 2 - 21 years with a diagnosis of asthma whose level of control was documented and appropriate follow up recorded during any visit related to asthma</p> <p><b>Denominator:</b> Number of patients between the ages of 2 - 21 years who had a visit to the participating practice during any visit related to asthma and have a documented diagnosis of asthma</p>	None	<p><b>Database:</b> QIDA</p> <p>Patient Chart/Chart Review Tool</p>	80%	<p><b>Baseline:</b> Maximum of 30 consecutive charts or, if fewer, as many as are available in time frame (Sept – Dec 2017) enter by Feb 2018</p> <p><b>Intervention:</b> Frequency: Monthly</p> <p>Maximum of 10 consecutive charts or, if fewer, as many as are available in time frame (March – August 2018)</p> <p><b>Post Intervention:</b> Continue 10 monthly charts, or if fewer as many as are available until goal is obtained and then quarterly through December 2021</p>	<p>Was level of control based on NHLBI Impairment/risk assessed and documented in the patient's chart as:</p> <ul style="list-style-type: none"> <li>- Well controlled</li> <li>- Not well controlled</li> <li>- Very poorly controlled</li> <li>- Not documented</li> </ul> <p>Yes No (2012 Asthma Quick Reference Guide, page 6)</p> <p>Was Follow up appropriate for level of control documented: Well controlled: 1-6 months Not Well/Very Poorly- 1-6 weeks</p> <p>Or was reason for variation documented (such as patient preference) Yes No</p> <p>(2012 Asthma Quick Reference Guide, page 6)</p>

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<p><b>REQUIRED</b></p> <p><b>Provide/ review current Asthma Action Plan</b></p> <p><b>PROCESS</b></p>	% of patients ages 2 – 21 who have a current written asthma action plan explained to them at any asthma visit	NHLBI	<p><b>Targeted Population:</b> All children ages 2 – 21 with a diagnosis of asthma</p> <p><b>Numerator:</b> Number of patients between the ages of 2 - 21 years with a diagnosis of asthma whose asthma action plan was updated at any asthma visit</p> <p><b>Denominator:</b> Number of patients between 2 - 21 years who had a visit to the participating practice during any asthma visit and have a documented diagnosis of asthma.</p>	None	<p><b>Database:</b> QIDA</p> <p>Patient Chart/Chart Review Tool</p>	80%	<p><b>Baseline:</b> Maximum of 30 consecutive charts or, if fewer, as many as are available in time frame (Sept – Dec 2017) enter by Feb 2018</p> <p><b>Intervention:</b> Frequency: Monthly</p> <p>Maximum of 10 consecutive charts or, if fewer, as many as are available in time frame (March – August 2018)</p> <p><b>Post Intervention:</b> Continue 10 monthly charts, or if fewer as many as are available until goal is obtained and then quarterly through December 2021</p>	<p>Does the patient have a written asthma action plan? Yes; No</p> <p>If yes, was the plan updated as needed and reviewed with the patient and/or family at the time of the visit? Yes; No</p>

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<p><b>REQUIRED</b></p> <p><b>Stepwise Approach</b></p> <p><b>PROCESS</b></p>	% of patients ages 2 – 21 in which the stepwise approach is used to identify treatment therapy and adjust or maintain therapy based on asthma control during any asthma visit	NHLBI	<p><b>Targeted Population:</b> All children ages 2 – 21 with a diagnosis of asthma</p> <p><b>Numerator:</b> the number of patients ages 2 to 21 in which the stepwise approach is used to identify treatment therapy and adjust or maintain therapy based on asthma control during any asthma visit</p> <p><b>Denominator:</b> Number of patients between the ages of 2 - 21 years who had a visit to the participating practice during any visit related to asthma and have a documented diagnosis of asthma</p>	None	<p><b>Database:</b> QIDA</p> <p>Patient Chart/Chart Review Tool</p>	80%	<p><b>Baseline:</b> Maximum of 30 consecutive charts or, if fewer, as many as are available in time frame (Sept – Dec 2017) enter by Feb 2018</p> <p><b>Intervention:</b> Frequency: Monthly</p> <p>Maximum of 10 consecutive charts or, if fewer, as many as are available in time frame (March – August 2018)</p> <p><b>Post Intervention:</b> Continue 10 monthly charts, or if fewer as many as are available until goal is obtained and then quarterly through December 2021</p>	<p>Was the age-appropriate NHLBI EPR-3 stepwise table used to identify treatment options or to adjust therapy based on asthma control?</p> <p><b>A- D must be accurate to select Yes.</b></p> <p>A. Determine step based on classification (Page 5)</p> <p>B. Determine need to step treatment up or down based on level of control (Page 6)</p> <p>C. Determine recommended medication dose based on age and Step (Page 7)</p> <p>D. Was correct medication and medication dose prescribed OR was reason for variation (such as patient preference) documented? (Pages 8-10)</p> <p>- Yes - No</p>

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<p><b>OPTIONAL</b></p> <p><b>Asthma Control Assessed with Validated Tool</b></p>	<p>% of patients ages 2 - 21 with asthma whose control has been assessed with a validated tool during any visit related to asthma</p>	<p>NHLBI</p>	<p><b>Targeted Population:</b> All children ages 2 – 21 with a diagnosis of asthma</p> <p><b>Numerator:</b> Number of patients between the ages of 4 - 21 years with a diagnosis of asthma who completed an ACT and/or patients 2 - 4 who completed the TRACK; patients 5 - 17 years who completed the Pediatric/Adolescent ATAQ; or patients <math>\geq</math>18 years who completed the Adult ATAQ during any visit related to asthma</p> <p><b>Denominator:</b> Number of patients between 2 - 21 years who had a visit to the participating practice during any visit related to asthma and have a documented diagnosis of asthma.</p>	<p>None</p>	<p><b>Database:</b> QIDA</p> <p>Patient Chart/Chart Review Tool</p>	<p>Recommended 80% for process</p>	<p><b>Baseline:</b> Maximum of 30 consecutive charts or, if fewer, as many as are available in time frame (Sept – Dec 2017) enter by Feb 2018</p> <p><b>Intervention:</b> Frequency: Monthly</p> <p>Maximum of 10 consecutive charts or, if fewer, as many as are available in time frame (March – August 2018)</p> <p><b>Post Intervention:</b> Continue 10 monthly charts, or if fewer as many as are available until goal is obtained and then quarterly through December 2021</p>	<p>Was a validated instrument used to determine the current level of asthma control? Yes; No</p>

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<p><b>OPTIONAL</b></p> <p><b>Inhaled Corticosteroid Prescribed</b></p> <p><b>PROCESS</b></p>	<p>% of patients ages 2 - 21 with persistent asthma that were prescribed inhaled corticosteroids (ICSs) during any visit related to asthma. Include prescriptions from elsewhere (e.g. ED).</p>	<p>NHLBI HEDIS MU</p>	<p><b>Targeted Population:</b> All children ages 2 – 21 with a diagnosis of asthma</p> <p><b>Numerator:</b> Number of patients between the ages of 2 - 21 years with a diagnosis of persistent asthma who were prescribed ICSs during any visit related to asthma</p> <p><b>Denominator:</b> Number of patients between the ages of 2 - 21 years who had a visit to the participating practice during any visit related to asthma and have a documented diagnosis of persistent asthma</p>	<p>Patients with intermittent asthma</p>	<p><b>Database:</b> QIDA</p> <p>Patient Chart/Chart Review Tool</p>	<p>Recommended 80% for process</p>	<p><b>Baseline:</b> Maximum of 30 consecutive charts or, if fewer, as many as are available in time frame (Sept – Dec 2017) enter by Feb 2018</p> <p><b>Intervention:</b> Frequency: Monthly</p> <p>Maximum of 10 consecutive charts or, if fewer, as many as are available in time frame (March – August 2018)</p> <p><b>Post Intervention:</b> Continue 10 monthly charts, or if fewer as many as are available until goal is obtained and then quarterly through December 2021</p>	<p>Was the patient with persistent asthma prescribed inhaled corticosteroids (ICSs) during any visit related to asthma? Include prescriptions from elsewhere (e.g. ED)? Yes; No</p>

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<p><b>OPTIONAL</b></p> <p><b>Flu Shot Received</b></p> <p><b>OUTCOME</b></p>	<p>% of children with asthma between 2 - 21 years of age who have had influenza (flu) vaccine</p> <p>% of patients with asthma ages 6 months and older who have received a flu shot or flu shot recommendation within the past 12 months other contraindications, or vaccine unavailable is the denominator (y).</p>	HEDIS & CHIPRA	<p><b>Numerator:</b> Number of patients between 2 - 21 years with a diagnosis of asthma who received a flu vaccine.</p> <p><b>Denominator:</b> Number of patients between 2 - 21 years who had a visit to the participating practice during any visit related to asthma and have a documented diagnosis of asthma.</p>	Patient with contraindications, or vaccine unavailable	<p><b>Database:</b> QIDA</p> <p>Patient Chart/Chart Review Tool</p>	Recommended 80% for process	<p><b>Baseline:</b> Maximum of 30 consecutive charts or, if fewer, as many as are available in time frame (Sept – Dec 2017) enter by Feb 2018</p> <p><b>Intervention:</b> Frequency: Monthly</p> <p>Maximum of 10 consecutive charts or, if fewer, as many as are available in time frame (March – August 2018)</p> <p><b>Post Intervention:</b> Continue 10 monthly charts, or if fewer as many as are available until goal is obtained and then quarterly through December 2021</p>	<p>Has a flu shot been administered within the past 12 months?</p> <p>Yes No</p> <p>Patient younger than 6 months, other contraindications, or vaccine unavailable</p>

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<p><b>OPTIONAL</b></p> <p><b>Asthma Patients Receive Education (Self-Management Support)</b></p> <p><b>PROCESS</b></p>	% of patients ages 2 – 21 and caregivers of those patients with asthma that were provided education about their asthma (e.g. information about asthma triggers and self-management).	NHLBI	<p><b>Targeted Population:</b> All children ages 2 – 21 with a diagnosis of asthma</p> <p><b>Numerator:</b> The number of patients who have self-management education materials (other than or in addition to the asthma action plan) provided and explained to them at any visit related to asthma</p> <p><b>Denominator:</b> Number of patients between the ages of 2 - 21 years who had a visit to the participating practice during any visit related to asthma and have a documented diagnosis of asthma</p>	None	<p><b>Database:</b> QIDA</p> <p>Patient Chart/Chart Review Tool</p>	Recommended 80% for process	<p><b>Baseline:</b> Maximum of 30 consecutive charts or, if fewer, as many as are available in time frame (Sept – Dec 2017) enter by Feb 2018</p> <p><b>Intervention:</b> Frequency: Monthly</p> <p>Maximum of 10 consecutive charts or, if fewer, as many as are available in time frame (March – August 2018)</p> <p><b>Post Intervention:</b> Continue 10 monthly charts, or if fewer as many as are available until goal is obtained and then quarterly through December 2021</p>	Were asthma self-management education and materials (other than or in addition to the asthma action plan) provided and explained to the patient and family at any visit? (Examples include correct medication techniques, avoiding environmental triggers, and getting help to quit smoking? Yes ; No



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<p><b>OPTIONAL</b></p> <p><b>Smoke Exposure Assessed</b></p> <p><b>PROCESS</b></p>	% of children with asthma between 2 - 21 years of age who have been assessed for exposure to tobacco or use of tobacco.	Bridges to Excellence	<p><b>Targeted Population:</b> All children ages 2 – 21 with a diagnosis of asthma</p> <p><b>Numerator:</b> Number of patients: a) ages 2 - 21 years with a documentation assessment of tobacco exposure<sup>10</sup> and; b) ages 10 - 21 years assessed for tobacco use within the last 12 months.</p> <p><b>Denominator:</b> Number of patients between 2 - 21 years who had a visit to the participating practice during any visit related to asthma and have a documented diagnosis of asthma.</p>	None	<p><b>Database:</b> QIDA</p> <p>Patient Chart/Chart Review Tool</p>	Recommended 80% for process	<p><b>Baseline:</b> Maximum of 30 consecutive charts or, if fewer, as many as are available in time frame (Sept – Dec 2017) enter by Feb 2018</p> <p><b>Intervention:</b> Frequency: Monthly</p> <p>Maximum of 10 consecutive charts or, if fewer, as many as are available in time frame (March – August 2018)</p> <p><b>Post Intervention:</b> Continue 10 monthly charts, or if fewer as many as are available until goal is obtained and then quarterly through December 2021</p>	<p>Where the following questions asked and documented:</p> <p>For patient 11-21 years of age: “Do you currently use tobacco products?”</p> <ul style="list-style-type: none"> <li>- Yes</li> <li>- No</li> </ul> <p>Under 11 years of age: “Does anyone who lives in the home or cares for the child smoke?”</p> <ul style="list-style-type: none"> <li>- Yes</li> <li>- No</li> </ul>

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<p><b>OPTIONAL</b></p> <p><b>Spirometry Test Completed</b></p> <p><b>PROCESS</b></p>	<p>% of patients ages 5 and older where spirometry is scheduled to be tested or results have been obtained within the last 1-2 years</p> <p>Percentage of children with asthma that completed a spirometry test at least once within the last 24 months.</p>	NHLBI	<p><b>Targeted Population:</b> All children ages 5– 21 with a diagnosis of asthma</p> <p><b>Numerator:</b> Number of patients 5 - 21 years with a diagnosis of asthma who received a spirometry test at least once during the last 24 months.</p> <p><b>Denominator:</b> Number of patients between 5 - 21 years who had a visit to the participating practice during any visit related to asthma and have a documented diagnosis of asthma. OR All patients seen with asthma MINUS, Age inappropriate, younger than 5 years is the denominator (y).</p>	None	<p>Database: QIDA</p> <p>Patient Chart/Chart Review Tool</p>	80%	<p><b>Baseline:</b> Maximum of 30 consecutive charts or, if fewer, as many as are available in time frame (Sept – Dec 2017) enter by Feb 2018</p> <p><b>Intervention:</b> Frequency: Monthly</p> <p>Maximum of 10 consecutive charts or, if fewer, as many as are available in time frame (March – August 2018)</p> <p><b>Post Intervention:</b> Continue 10 monthly charts, or if fewer as many as are available until goal is obtained and then quarterly through December 2021</p>	<p>Is spirometry currently scheduled to be tested, or have results been obtained within the last 1 or 2 years?</p> <p>- Yes - No</p>