

PINNACLE Registry Program Measures and Metrics

Coronary Artery Disease Measure Set

PINNACLE ID	Measure Description	NQF Measure Number
PINN-14	Advance Care Plan: Percentage of patients aged 65 years and older with documented heart failure who have an advance care plan or surrogate decision marker documented in the medical record or documentation in the medical record that an advance care plan was discussed but the patient did not wish or was not able to name a surrogate decision maker or provide an advance care plan	N/A
PINN-33	Complete Lipid Profile: Percentage of patient aged ≥18 years with a diagnosis of coronary artery disease who received at least one lipid profile (ALL four numerical component values documented) within a 12-month period	N/A
PINN-36	Statin Therapy: Percentage of aged \geq 18 years with a diagnosis of coronary artery disease with a prescription of a statin	N/A
PINN 102	Symptom and Activity Management: Percentage of patients aged ≥18 years with a diagnosis of coronary artery disease seen within a 12-month period for whom there are documented results of an evaluation of level of activity AND an evaluation of presence or absence of angina symptoms in the medical record	N/A
PINN 103	Symptom Management: Percentage of patients aged ≥18 years with a diagnosis of coronary artery disease seen within a 12- month period and with results of an evaluation of level of activity, AND with an evaluation of presence or absence of anginal symptoms, with appropriate management of anginal symptoms (evaluation of level of activity and symptoms includes no report of anginal symptoms, OR evaluation of level of activity and symptoms includes report of anginal symptoms AND a plan of care is documented to achieve control of anginal symptoms)	N/A
PINN 105	Antiplatelet Therapy: Percentage of patients aged ≥18 years with a diagnosis of coronary artery disease seen within a 12-month period who were prescribed aspirin or clopidogrel	NQF 0067
PINN 106	Beta-Blocker Therapy - Prior Myocardial Infarction (MI) or Left Ventricular Systolic Dysfunction (LVEF < 40%): Percentage of patients aged ≥18 years with a diagnosis of coronary artery disease seen within a 12-month period who also have prior myocardial infarction or a current or prior LVEF <40% who were prescribed beta-blocker therapy	NQF 0070
PINN 107	Angiotensin-Converting Enzyme (ACE) Inhibitor or Angiotensin Receptor Blocker (ARB) Therapy - Diabetes or Left Ventricular Systolic Dysfunction (LVEF <40%): Percentage of patients aged 18 years and older with a diagnosis of coronary artery disease seen within a 12-month period who also have diabetes or a current or prior LVEF <40% who were prescribed ACE inhibitor or ARB therapy	NQF 0066

PINNACLE ID	Measure Description	NQF Measure Number
	Cardiac Rehabilitation Patient Referral from an Outpatient Setting: Percentage of patients evaluated in an outpatient setting who within the previous 12 months have experienced an acute myocardial infarction, coronary artery bypass graft surgery, PCI, cardiac valve surgery, or cardiac transplantation, or who have chronic stable angina and have not already participated in an early outpatient CR or secondary prevention program for the qualifying event/diagnosis and are referred to such a program	NQF 0643
	Treatment of Blood Cholesterol to Reduce Atherosclerotic Cardiovascular Risk: Percentage of Patients 18-75 with CAD who were offered moderate-to-high intensity statin	N/A

Heart Failure Measure Set

PINNACLE ID	Measure Description	NQF Measure Number
PINN 140	LVEF Assessment: Percentage of patients aged ≥ 18 years with a diagnosis of heart failure for whom the quantitative or qualitative results of a recent or prior (any time in the past) left ventricular ejection fraction assessment is documented within a 12-month period	NQF 0079
PINN 141	Symptom and Activity Assessment: Percentage of patient visits for those patients aged ≥18 y with a diagnosis of HF with quantitative results of an evaluation of both current level of activity and clinical symptoms documented.	NQF 2450
PINN 142	Symptom Management: Percentage of patient visits for those patients aged ≥18 y with a diagnosis of HF and with quantitative results of an evaluation of both level of activity AND clinical symptoms documented in which patient symptoms have improved or remained consistent with treatment goals since last assessment OR patient symptoms have demonstrated clinically important deterioration since last assessment with a documented plan of care	N/A
PINN 143	Patient Self Care Education : Percentage of patients aged \geq 18 years with a diagnosis of heart failure who were provided with self-care education on \geq 3 elements of education during \geq 1 visit within a 12-month period	NQF 0082
PINN 144	Beta-Blocker Therapy for Left Ventricular Systolic Dysfunction LVSD (EF <40%): Percentage of patients aged ≥18 y with a diagnosis of HF with a current or prior LVEF of <40% who were prescribed beta-blocker therapy with bisoprolol, carvedilol, or sustained-release metoprolol succinate either within a 12-month period when seen in the outpatient setting or at hospital discharge	NQF 0083
PINN 145	Heart Failure: Angiotensin-Converting Enzyme (ACE) Inhibitor or Angiotensin Receptor Blocker (ARB) Therapy or Anginotensin Receptor-Neprilysin Inhibitor (ARNI) therapy for Left Ventricular Systolic Dysfunction (LVSD): Percentage of patients aged 18 years and older with a diagnosis of heart failure (HF) with a current or prior left ventricular ejection fraction (LVEF) < 40% who were prescribed ACE inhibitor or ARB or ARNI therapy either within a 12-month period when seen in the outpatient setting OR at each hospital discharge	NQF 0081
PINN 146	Counseling about ICD Implementation for LVSD: Percentage of patients aged ≥18 years with a diagnosis of HF with current LVEF ≥ 35% despite ACE inhibitor/ARB and beta-blocker therapy for at least 3 months who were counseled about ICD implantation as a treatment option for the prophylaxis of sudden death	N/A
PINN 147	HF Etiology: Percentage of patients aged \geq 18 years with a diagnosis of HF with qualitative etiology identified and documented	N/A

PINNACLE ID	Measure Description	NQF Measure Number
	Hydralazine and Isosorbide Dinitrate Therapy for African Americans with Left Ventricular Systolic Dysfunction: Percentage of Black/African American patients aged ≥18 y with a diagnosis of HF, a current or prior NYHA Class II or III, a LVEF <= 40% (moderate/severe dysfunction), and who have been taking ACE inhibitors and Beta blockers for at least 3 months who were prescribed ARNI therapy	N/A

Hypertension Measure Set

PINNACLE ID	Measure Description	NQF Measure Number
PINN 121	Blood Pressure Treatment and Control for High Risk Patients : Proportion of adults, \geq 18 years of age, with both hypertension and a \geq 10% CVD risk OR high-risk diagnosis (i.e. ASCVD, chronic kidney disease, diabetes) who were prescribed antihypertensive medication or who had adequately controlled blood pressure	N/A
PINN 122	Blood Pressure Treatment and Control for Stage 2 Hypertensive Patients: Proportion of adults, ≥ 18 years of age, with hypertension who were prescribed antihypertensive medications or who had adequately controlled blood pressure	N/A
PINN 123	Blood Pressure Control for Stage 1 or 2 Hypertensive Patients: Proportion of adults, ≥ 18 years of age, with a diagnosis of hypertension who had adequately controlled blood pressure	N/A

Atrial Fibrillation Measure Set

PINNACLE ID	Measure Description	NQF Measure Number
PINN 160	Assessment of Thromboembolic Risk Factors: Percentage of patients, age \geq 18 years, with nonvalvular AF or atrial flutter for	N/A
	whom a CHA2DS2-VASc risk score is documented	
PINN 161	Chronic Anticoagulation Therapy: Percentage of patients, age \geq 18 years, who were prescribed warfarin or another FDA-	NQF 1525
	approved anticoagulant drug for the prevention of thromboembolism (NCQA/PCPI)	

Peripheral Artery Disease Measure Set

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FINNACI	Measure Description	Measure
		Number

Preventive Care Measure Set

PINNACLE ID	Measure Description	NQF Measure Number
	Tobacco Use: Screening and Cessation Intervention: Percentage of patients aged 18 years and older who were screened for tobacco use one or more times within 24 months AND who received cessation counseling intervention if identified as a tobacco user	NQF 0028

The ACC/AHA Task Force on Performance Measures distinguishes quality measures from performance measures. Quality measures are metrics that may be useful for local quality improvement but are not yet appropriate for public reporting or pay-for-performance programs (i.e., contexts in which performance measures are used). New measures are initially evaluated for potential inclusion as performance measures.

Unless indicated, the PINNACLE Registry[®] measures are endorsed by the American College of Cardiology Foundation and the American Heart Association and may be used for purposes of health care insurance payer programs or other forms of accountability. For additional information related to the metrics, refer to this website: <u>http://www.acc.org/guidelines/about-guidelines-and-clinical-documents</u>

In some cases, a measure is insufficiently supported by the guidelines. In other instances, when the guidelines support a measure, the writing committee may decide it is necessary to have the measure tested to identify the consequences of measure implementation. Quality measures may then be promoted to the status of performance measures as supporting evidence becomes available. TEST Metric developed by ACC are highlighted.

Providers must be able to report at least 10 of the metrics listed above to be eligible for participation in the PINNACLE Registry.

The PINNACLE Registry[®] and Diabetes Collaborative Registry[®] are operated in association with the American College of Cardiology



N/A

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