	Strong Recommendation	Moderate Recommendation	
	CMS Hospital Process Measures:	CMS Hospital Process Measures:	
	AMI-3: ACEI or ARB for LVSD	AMI-1: ASA arrival	R
	AMI-7a: Fibrinolytic tx w/in 30 minutes of arrival	AMI-2: ASA discharge	ec
	AMI-8a: PCI w/in 90 minutes of arrival	AMI-4: smoking cessation	om o
	AMI-10: Statin prescribed at discharge	AMI-5: beta-blocker at discharge	me v
	HF-1: Discharge instructions	HF-2: LV function	Recommendation category are variable or are high pe
	PN-2: Pneumococcal vaccination	HF-3: ACEI or ARB for LVSD	ati
	PN-7: Influenza vaccination	HF-4: Smoking cessation	endation category are either insu variable or are high performance
	SCIP-Inf-4: Controlled postoperative blood glucose	PN-3b: Blood cultures in ED	cat
	SCIP-Inf-9: Urinary catheter removed	PN-4: Smoking cessation	re
	SCIP-Card-2: Beta-blocker therapy	PN-5c: Antibiotic w/in 6 hours PN-6: Antibiotic selection for CAP	big
	HCAHPS:	SCIP-Inf-1a: Antibiotic w/in hour to incision	h p
	All HCAHPS Measures	SCIP-Inf-2a: Antibiotic selection	e e
	7 1 . G . 1 . C . G . G . G . G . G . G . G . G . G	SCIP-Inf-3a: Antibiotics d/c 24 hours after surgery	og it
	HEDIS:	SCIP-Inf-6: Hair removal	either insufficiently erformance
	Breast CA screening	SCIP-Inf-10: Perioperative temperature management	nce
	Colorectal CA screening	SCIP-VTE-1: VTE prophylaxis ordered	" \$
	DM: LDL screening	SCIP-VTE-2: VTE prophylaxis received	cie
	DM: nephropathy screening		nt,
	DM: Hemoglobin A1c testing	HEDIS:	~
	Antidepressant med	Cholesterol management	
	Annual monitoring for med management	Controlling high blood pressure	
	Spirometry in COPD	DM: HbA1c control	claims data in an accurate
	Cervical CA screening	DM: LDL control	ims
	Chlamydia screening in women	DM: Foot exam	d d
	Appropriate tx for URI	DM: Blood Pressure Management Adult BMI Assessment	χtα
	Use of imaging studies for LBP Children with pharyngitis	Weight assessment children	in `
	Comprehensive back pain care	Childhood immunization	an
	Appropriate meds for adults with asthma	Adolescent immunization	п асси
	Follow-up care for ADHD med	Lead screening in children	cur
	Well-child visits 3-6	Use of high-risk meds in elderly	ate
	Adolescent well-care visits	Care for older adults	
	Antidepressant med management	Tx in adults with acute bronchitis	ate manner. m
		Comprehensive IVD	
	ACES:	Comprehensive adult DM care	
	MD-Patient Interactions: Communication	Appropriate meds for children with asthma	ch immuniz
	MD-Patient Interactions: Integration of care	Drug-disease interactions in elderly	מממ
	MD-Patient Interactions: Knowledge of patient	Med reconciliation post-discharge	For example, uch immunizc
	MD-Patient Interactions: Health promotion Features of Care: Organizational access		
	Features of Care: Visit-based continuity	Prenatal and postpartum care	imi
	Features of Care: Clinical team	Initiation and engagement of alcohol and drug tx	immunization tion is provide
	Willingness to Recommend Doctor	Frequency of ongoing prenatal care	niz pr
		Well-child visits in first 15 months	nmunizatio on is provid
		Anti-rheumatic tx in RA	
		Osteoporosis management	
		Beta-blocker tx after heart attack	٠٠
		DM: Retinal eye exam	fro _l
		Glaucoma screening in older adults	m clain charge
		Flu shots for older adults	claims arge.
		Pheumonia vaccination for older adults	., 32
		Follow-up after hospitalization for mental illness	is
		Tx of COPD exacerbation	701
		HPV for Female Adolescents	ori
		Med Management for People with Asthma	ou
		Fall Risk Management	sly
		Management of Urinary Incontinence Osteoporosis Testing in Older Women	ina
			1001
		Physical Activity in Older Adults Aspirin Use and Discussion	notoriously inaccurate
		Flu Shots for Adults Ages 50–64	ite
		Smoking and Tobacco Use Cessation	in
		Children with Chronic Conditions	urate in that
		Plan All-Cause Readmission	4
	4		
		Supplemental items for CAHPS (4.0)	
ak	All mandated measures were found to have suffice	Supplemental items for CAHPS (4.0) cient validity, therefore there are no "Weak Recomme	andatio