



# PINNACLE Registry®

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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: <http://www.acc.org/guidelines/about-guidelines-and-clinical-documents>

## Program Measures and Metrics

### Coronary Artery Disease Measure Set

| PINNACLE ID | Measure Description  | NQF Measure Number |
|-------------|--|--------------------|
| PINN-14     | <b>Advance Care Plan:</b> Percentage of patients aged 65 years and older 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     | <b>Complete Lipid Profile:</b> 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     | <b>Statin Therapy:</b> Percentage of aged ≥ 18 years with a diagnosis of coronary artery disease with a prescription of a statin   | N/A                |
| PINN 102    | <b>Symptom and Activity Management:</b> 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    | <b>Symptom Management:</b> 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    | <b>Antiplatelet Therapy:</b> 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    | <b>Beta-Blocker Therapy – Prior Myocardial Infarction (MI) or Left Ventricular Systolic Dysfunction (LVEF &lt; 40%):</b> 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    | <b>Angiotensin-Converting Enzyme (ACE) Inhibitor or Angiotensin Receptor Blocker (ARB) Therapy - Diabetes or Left Ventricular Systolic Dysfunction (LVEF &lt;40%):</b> 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           |
| PINN 108    | <b>Cardiac Rehabilitation Patient Referral from an Outpatient Setting:</b> Percentage of patients evaluated in an outpatient setting who within the previous 12 months have experienced an acute myocardial infarction, coronary artery bypass graft   | NQF 0643           |



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|          | 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 |     |
| PINN 109 | <b>Treatment of Blood Cholesterol to Reduce Atherosclerotic Cardiovascular Risk:</b> 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    | <b>LVEF Assessment:</b> Percentage of patients aged $\geq 18$ 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    | <b>Symptom and Activity Assessment:</b> Percentage of patient visits for those patients aged $\geq 18$ 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    | <b>Symptom Management:</b> Percentage of patient visits for those patients aged $\geq 18$ 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    | <b>Patient Self Care Education:</b> 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    | <b>Beta-Blocker Therapy for Left Ventricular Systolic Dysfunction LVSD (EF &lt;40%):</b> Percentage of patients aged $\geq 18$ 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    | <b>Heart Failure: Angiotensin-Converting Enzyme (ACE) Inhibitor or Angiotensin Receptor Blocker (ARB) Therapy or Angiotensin Receptor-Nepriylsin Inhibitor (ARNI) therapy for Left Ventricular Systolic Dysfunction (LVSD):</b> 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    | <b>Counseling about ICD Implementation for LVSD:</b> Percentage of patients aged $\geq 18$ years with a diagnosis of HF with current LVEF $\geq 35\%$ 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                |



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| PINN 147 | <b>Etiology:</b> Percentage of patients aged $\geq 18$ years with a diagnosis of HF with qualitative etiology identified and documented  | N/A |
| PINN 151 | <b>Hydralazine and Isosorbide Dinitrate Therapy for African Americans with Left Ventricular Systolic Dysfunction:</b> Percentage of Black/African American patients aged $\geq 18$ y with a diagnosis of HF, a current or prior NYHA Class II or III, a LVEF $\leq 40\%$ (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    | <b>Blood Pressure Treatment and Control for High Risk Patients:</b> 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    | <b>Blood Pressure Treatment and Control for Stage 2 Hypertensive Patients:</b> Proportion of adults, $\geq 18$ years of age, with hypertension who were prescribed antihypertensive medications or who had adequately controlled blood pressure   | N/A                |
| PINN 123    | <b>Blood Pressure Control for Stage 1 or 2 Hypertensive Patients:</b> Proportion of adults, $\geq 18$ 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              | <b>Assessment of Thromboembolic Risk Factors:</b> Percentage of patients, age $\geq 18$ years, with nonvalvular AF or atrial flutter for whom a CHA2DS2-VASc risk score is documented              | N/A                |
| PINN 161 <sup>1</sup> | <b>Chronic Anticoagulation Therapy:</b> Percentage of patients, age $\geq 18$ years, who were prescribed warfarin or another FDA-approved anticoagulant drug for the prevention of thromboembolism | NQF 1525           |

## Peripheral Artery Disease Measure Set

| PINNACLE ID | Measure Description  | NQF Measure Number |
|-------------|--|--------------------|
| PINN 170    | <b>Treatment of Blood Cholesterol to Reduce Atherosclerotic Cardiovascular Risk:</b> Percentage of Patients 18-75 years of age with PAD who were offered moderate-to-high intensity statin | N/A                |



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## Preventive Care Measure Set

| PINNACLE ID | Measure Description  | NQF Measure Number |
|-------------|--|--------------------|
| PINN 104    | <b>Tobacco Use: Screening and Cessation Intervention:</b> 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 (highlighted blue) 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. 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. Providers must be able to report at least 10 of the metrics listed above to be eligible for participation in the PINNACLE Registry.

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TEST Metric developed by ACC are highlighted in blue

<sup>1</sup> This measure has been developed by NCQA/PCPI