

Complete one report for each measure

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Performance Measure Short Name:

*Numerator/denominator cases are not applicable for Continuous Variable Measures.
Report only measurement results in the form of a value.

Performance Measure Data Report # (--), cont.

PART II: Provide current information for this measure as follows:

Have any modifications been made to this measure since the Measure Information Form was submitted?	[] Yes	[] No
<p><u>If this measure has been modified:</u></p> <ul style="list-style-type: none"> <u>Describe the modifications and note when the change took place</u> <u>Describe what prompted the need for the change</u> <p>NOTE: If the measure has undergone significant reconstruction during the certification cycle, e.g., redefining of numerator and/or denominator, submit a revised Measurement Information Form. Please contact your Account Representative.</p>		
<p>PART III:</p> <p><u>Describe how data for this measure have been used to evaluate processes and/or patient outcomes of care.</u></p> 		
<p><u>Identify potential opportunities for improvement.</u></p> 		
<p><u>Describe any interventions and/or process modifications that may have been made based on measurement results and how the effectiveness of these changes were/will be measured.</u></p> 		
<p><u>Explain any significant variations occurring in the updated data submitted for this measure. This would include any interruption in continuous data collection or change in the normal pattern of the data, that is, those variations that may be attributable to a special cause.</u></p> 		