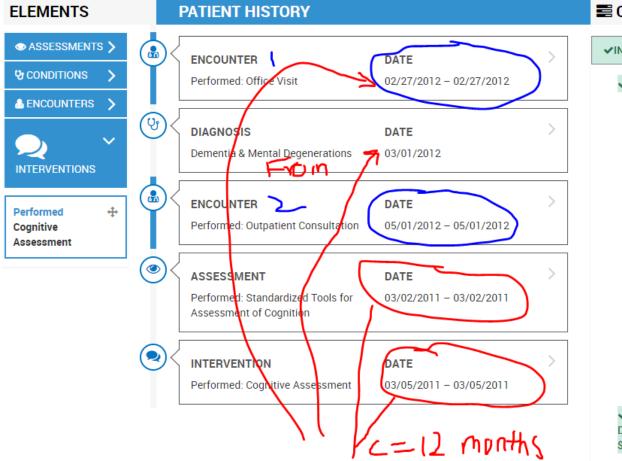
Screenshot 1:



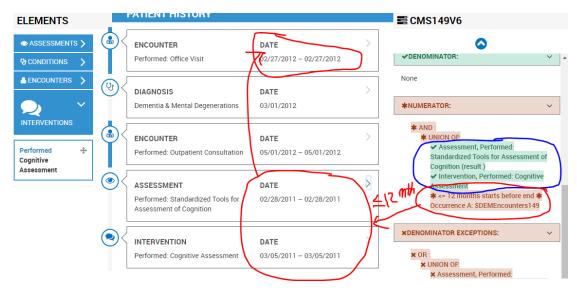
ECMS149V6



Documentation Requirement IPP: (Expected Result: Pass, Actual Result: Pass) – Refer to Screenshot 1

Patient is meeting IPP based on encounter 1 which is on 2/27/2012 and encounter 2 which is on 5/1/2012 and diagnosis onset date of 3/1/2012. In this scenario patient's diagnosis is overlapping 5/1/2012 encounter

Screenshot 2:



Numerator Documentation requirement: (Expected: Numerator Pass, Actual: Numerator Fail) - Refer to Screenshot 2

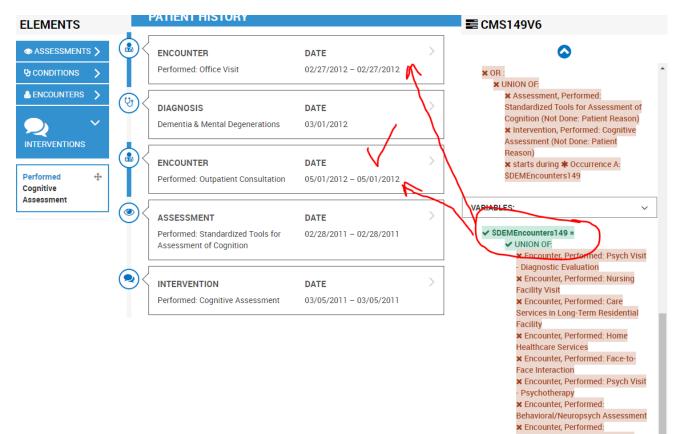
According to CMS specification for this measure, documentation of either the intervention or risk category MUST BE performed within <= 12 months starts before end of occurrence A of \$DementiaEncounter149.

As per CMS specs, \$DementiaEncounter149 is defined as encounters being performed during the measurement period.

In our scenario, Risk category assessment was done twice. First one on 2/28/2011 which is exactly at the border line of <= 12 months from encounter on 2/27/2012. Futhermore, second risk category assessment is also performed on 3/5/2011 which is also within <= 12 months criteria from eligible \$DEMEncounter149 (2/27/2012). Patient is meeting \$DEMEncounters149 condition as you can see in the next screenshot (Screenshot 3), and still not getting credit for numerator in bonnie tool.

However, when I add another Intervention/Assessment (See Screenshot 4) for numerator on 5/6/2011 which is within <=12 months from 5/1/2012 encounter (Dx overlapping encounter), then only I am getting numerator compliant. Ideally nowhere in the measure specification it mentiones that in order to meet numerator criteria we only have to look back <= 12 months from the encounter which overlaps the diagnosis. Hence, we need guidance as to how we should proceed with this situation.

Screenshot 3:



Encounter, Performed: Office Visit
Encounter, Performed: Outpatient

during "Measurement Period"

Consultation

Screenshot 4:

