



# Quality of Care Measures

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## Heart Failure Project\*

### Discharge Instructions

#### Description

Heart failure patients discharged home with written discharge instructions or educational material given to patient or caregiver at discharge or during the hospital stay addressing **all** of the following: activity level, diet, discharge medications, follow-up appointment, weight monitoring, and what to do if symptoms worsen.

#### Rationale

Patient non-compliance with diet and medications is an important reason for changes in clinical status. Health care professionals should ensure that patients and their families understand their dietary restrictions, activity recommendations, prescribed medication regimen, and the signs and symptoms of worsening heart failure. National guidelines strongly support the role of patient education (Hunt, 2001). Despite this recommendation, comprehensive discharge instructions are rarely provided to older patients hospitalized with heart failure (CMS National Heart Failure Project baseline data).

#### Selected References

- Agency for Healthcare Research and Quality. Heart Failure: Evaluation and Care of Patients with Left Ventricular Systolic Dysfunction. U.S. Department of Health and Human Services. Clinical Practice Guidelines, Number 11. No 94-0612, June 1994.
- Hunt SA, Baker DW, Chin, MH, Cinquegrani MP, Feldman AM, Francis GS, Ganiats TG, Goldstein S, Gregoratos G, Jessup ML, Noble RJ, Packer M, Silver MA, Stevenson LW. ACC/AHA Guidelines for the Evaluation and Management of Chronic Heart Failure in the Adult: A Report of the American College of Cardiology/American Heart Association Task Force on Practice Guidelines (Committee to Revise the 1995 Guidelines for the Evaluation and Management of Heart Failure). 2001 American College of Cardiology Web site. Available at: [http://www.acc.org/clinical/guidelines/failure/pdfs/hf\\_fulltext.pdf](http://www.acc.org/clinical/guidelines/failure/pdfs/hf_fulltext.pdf).

\* **CMS National Measurement Specifications: HF Quality of Care Measures**,  
Released 01/17/03

Go to: [www.qnetexchange.org](http://www.qnetexchange.org). Click “CART,” “Related Resources,” “Topic-Specific Resources,” “Heart Failure zip file,” “HF 7th SOW Quality of Care Measures011703.”

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## LVF Assessment

### Description

Heart failure patients with documentation in the hospital record that left ventricular function (LVF) was assessed before arrival, during hospitalization, or is planned for after discharge.

### Rationale

Appropriate selection of medications to reduce morbidity and mortality in heart failure requires the identification of patients with impaired left ventricular systolic function. National guidelines advocate the assessment of left ventricular systolic function as the single most important diagnostic test in the management of all patients with heart failure (Hunt, 2001). Despite these recommendations, left ventricular function is not assessed in a substantial proportion of patients hospitalized with heart failure (Jencks, 2000).

### Selected References

- Agency for Healthcare Research and Quality. Heart Failure: Evaluation and Care of Patients with Left Ventricular Systolic Dysfunction. U.S. Department of Health and Human Services. Clinical Practice Guidelines, Number 11. No 94-0612, June 1994.
- Hunt SA, Baker DW, Chin, MH, Cinquegrani MP, Feldman AM, Francis GS, Ganiats TG, Goldstein S, Gregoratos G, Jessup ML, Noble RJ, Packer M, Silver MA, Stevenson LW. ACC/AHA Guidelines for the Evaluation and Management of Chronic Heart Failure in the Adult: A Report of the American College of Cardiology/American Heart Association Task Force on Practice Guidelines (Committee to Revise the 1995 Guidelines for the Evaluation and Management of Heart Failure). 2001 American College of Cardiology Web site. Available at: [http://www.acc.org/clinical/guidelines/failure/pdfs/hf\\_fulltext.pdf](http://www.acc.org/clinical/guidelines/failure/pdfs/hf_fulltext.pdf).
- Jencks SJ, Cuerdon T, Burwen DR, Fleming B, Houck PM, Kussmaul AE, Nilasena DS, Ordin DL, Arday DR. Quality of medical care delivered to Medicare beneficiaries: A profile at state and national levels. *JAMA*. 2000;284:1670–1676.



# Quality of Care Measures

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## ACEI for LVSD

### Description

Heart failure patients with left ventricular systolic dysfunction (LVSD) and without angiotensin converting enzyme inhibitor (ACEI) contraindications who are prescribed an ACEI at hospital discharge. For purposes of this measure, LVSD is defined as chart documentation of a left ventricular ejection fraction (LVEF) less than 40 percent or a narrative description of left ventricular function (LVF) consistent with moderate or severe systolic dysfunction.

### Rationale

ACEI therapy reduces mortality and morbidity in patients with heart failure and left ventricular systolic dysfunction (the SOLVD Investigators, 1991 and CONSENSUS Trial Study Group, 1987). National guidelines strongly recommend ACEIs for patients hospitalized with heart failure (Hunt, 2001 and HFSA, 1999). Despite these recommendations, ACEIs remain underutilized in older patients hospitalized with heart failure (Jencks, 2000).

### Selected References

- Agency for Healthcare Research and Quality. Heart Failure: Evaluation and Care of Patients with Left Ventricular Systolic Dysfunction. U.S. Department of Health and Human Services. Clinical Practice Guidelines, Number 11. No 94-0612, June 1994.
- Effects of enalapril on mortality in severe congestive heart failure. Results of the Cooperative North Scandinavian Enalapril Survival Study (CONSENSUS). The CONSENSUS Trial Study Group. *N Engl J Med.* 1987;316:1429–1435.
- Heart Failure Society of America (HFSA). HFSA guidelines for management of patients with heart failure caused by left ventricular systolic dysfunction-pharmacological approaches. *J Card Fail.* 1999 Dec;5(4):357–82.
- Hunt SA, Baker DW, Chin, MH, Cinquegrani MP, Feldman AM, Francis GS, Ganiats TG, Goldstein S, Gregoratos G, Jessup ML, Noble RJ, Packer M, Silver MA, Stevenson LW. ACC/AHA Guidelines for the Evaluation and Management of Chronic Heart Failure in the Adult: A Report of the American College of Cardiology/American Heart Association Task Force on Practice Guidelines (Committee to Revise the 1995 Guidelines for the Evaluation and Management of Heart Failure). 2001 American College of Cardiology Web site. Available at: [http://www.acc.org/clinical/guidelines/failure/pdfs/hf\\_fulltext.pdf](http://www.acc.org/clinical/guidelines/failure/pdfs/hf_fulltext.pdf)
- Jencks SJ, Cuerdon T, Burwen DR, Fleming B, Houck PM, Kussmaul AE, Nilasena DS, Ordin DL, Arday DR. Quality of medical care delivered to Medicare beneficiaries: A profile at state and national levels. *JAMA.* 2000;284:1670–1676.
- The SOLVD Investigators. Effect of enalapril on survival in patients with reduced left ventricular ejection fractions and congestive heart failure. *N Engl J Med.* 1991;325:293–302.

# Quality of Care Measures



## Adult Smoking Cessation Advice/Counseling

### Description

Heart failure patients with a history of smoking cigarettes who are given smoking cessation advice or counseling during hospital stay. For purposes of this measure, a smoker is defined as someone who has smoked cigarettes anytime during the year prior to hospital arrival.

### Rationale

Smoking cessation reduces mortality and morbidity in all populations. Patients who receive even brief smoking-cessation advice from their physicians are more likely to quit. National guidelines strongly recommend smoking cessation counseling for smokers with cardiovascular disease, including heart failure. (Braunwald, 2000, Ryan, 1999 and Hunt, 2001). Despite this recommendation, smoking cessation counseling is rarely provided to older patients hospitalized with heart failure (CMS National Heart Failure Project baseline data).

### Selected References

- Braunwald E, Antman EM, Beasley JW, Califf RM, Cheitlin MD, Hochman JS, Jones RH, Kereiakes D, Kupersmith J, Levin TN, Pepine CJ, Schaeffer JW, Smith EE III, Steward DE, Theroux P. ACC/AHA guidelines for the management of patients with unstable angina and non-ST-segment elevation myocardial infarction: A report of the American College of Cardiology/American Heart Association Task Force on Practice Guidelines (Committee on the Management of Patients with Unstable Angina). *J Am Coll Cardiol* 2000;36:970–1062. Available at <http://www.acc.org> and <http://www.americanheart.org>.
- Fiore MC, Bailey WC, Cohen SJ, et al. Treating Tobacco Use and Dependence. Clinical Practice Guideline. Rockville, MD: U.S. Department of Health and Human Services. Public Health Service. June 2000.
- Hunt SA, Baker DW, Chin, MH, Cinquegrani MP, Feldman AM, Francis GS, Ganiats TG, Goldstein S, Gregoratos G, Jessup ML, Noble RJ, Packer M, Silver MA, Stevenson LW. ACC/AHA Guidelines for the Evaluation and Management of Chronic Heart Failure in the Adult: A Report of the American College of Cardiology/American Heart Association Task Force on Practice Guidelines (Committee to Revise the 1995 Guidelines for the Evaluation and Management of Heart Failure). 2001 American College of Cardiology Web site. Available at: [http://www.acc.org/clinical/guidelines/failure/pdfs/hf\\_fulltext.pdf](http://www.acc.org/clinical/guidelines/failure/pdfs/hf_fulltext.pdf).
- Ryan TJ, Antman EM, Brooks NH, Califf RM, Hillis LD, Hiratzka LF, Rapaport E, Riegel B, Russell RO, Smith EE III, Weaver WD. 1999 update: ACC/AHA guidelines for the management of patients with acute myocardial infarction: A report of the American College of Cardiology/American Heart Association Task Force on Practice Guidelines (Committee on Management of Acute Myocardial Infarction). *J Am Coll Cardiol* 1999;34:890–911. Available at <http://www.acc.org> and <http://www.americanheart.org>.
- Ryan, TJ, Anderson, JL, Antman, EM, Braniff, BA, Brooks NH, Califf, RM, Hillis LD, Hiratzka L F, Rapaport E, Riegel BJ, Russell RO, Smith EE III, Weaver WD. ACC/AHA guidelines for the management of patients with acute myocardial infarction: A report of the American College of Cardiology/American Heart Association Task Force on Practice Guidelines (Committee on Management of Acute Myocardial Infarction). *J Am Coll Cardiol* 1996;28:1328–1428. Available at <http://www.acc.org> and <http://www.americanheart.org>.