



AUG 1 2002

7500 Security Boulevard
Baltimore, MD 21244-1850

NOTE TO: Medicare+Choice Organizations' Providers

SUBJECT: Requests by Medicare+Choice Organizations for Quality Indicator Information on Congestive Heart Failure (CHF) Enrollees

The purpose of this note is to inform you that Medicare+Choice (M+C) organizations with which you contract may request quality indicator information for the care of their enrollees with a prior inpatient discharge diagnosis of congestive heart failure (CHF). This request may come as part of the M+C organizations' participation in an optional activity designed to demonstrate for successful outpatient management of CHF. The Centers for Medicare & Medicaid Services (CMS) established this activity in 2000, which provides additional payments in 2002 and 2003 to M+C organizations that have met established criteria for management of CHF.

In order to qualify for extra payment, M+C organizations must demonstrate success on two quality indicators for their eligible populations which consists of enrollees with a CHF principal inpatient hospital discharge diagnosis between July 1, 1999 and June 30, 2002:

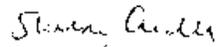
- **Quality Indicator Extra Payment 1:** Proportion of eligible population who has evaluation of left ventricular function (LVEF) anytime prior to October 1, 2002;
- **Quality Indicator Extra Payment 2:** Proportion of eligible population with left ventricular systolic dysfunction (LVSD) who:
 1. are prescribed angiotensin converting enzyme inhibitors (ACEI) anytime in the 12 months prior to October 1, 2002;
OR
 2. have a documented reason for not being prescribed ACEI.

To establish that they have met these two quality indicators, M+C organizations may contact hospitals, outpatient facilities or physicians, requesting inpatient or outpatient records to verify the presence of these indicators. For example, the M+C organization may request documentation of a LVEF test anytime in the past, or documentation of a recently prescribed ACE Inhibitor for those with left ventricular systolic dysfunction (LVSD). While some of these data may be found in M+C organization administrative data, much of it may be contained in physician or other outpatient or inpatient medical records.

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CMS is requesting your cooperation in assisting these M+C organizations in obtaining medical information necessary to fulfill the requirements of this CIIF quality activity. Note that you should not send these data to CMS but to the requesting M+C organization. Thank you in advance for your cooperation in this quality activity. If you have questions about the information contained in this letter, please contact Jane Andrews at CMS at (410) 786-3133 or jandrews@cms.hhs.gov.

Sincerely,



^{for}
Sidney Trieger

Director

Demonstration and Data Analysis Group
Center for Beneficiary Choices