

Coronary Artery Disease

Beta-blocker Therapy for Coronary Artery Disease Patients with Prior Myocardial Infarction (MI)

PQRI Data Collection Sheet

Patient's Name	Practice Medical Record Number (MRN)	Birth Date (mm/dd/yyyy)	<input type="checkbox"/> Male <input type="checkbox"/> Female
National Provider Identifier (NPI)		Date of Service	

Clinical Information

Billing Information

Step 1 Is patient eligible for this measure?

	Yes	No	Code Required on Claim Form
Patient is aged 18 years and older.	<input type="checkbox"/>	<input type="checkbox"/>	Verify date of birth on claim form.
Patient has a diagnosis of coronary artery disease and prior myocardial infarction (MI).	<input type="checkbox"/>	<input type="checkbox"/>	Refer to coding specifications document for list of applicable codes.
There is a CPT E/M Service Code for this visit.	<input type="checkbox"/>	<input type="checkbox"/>	
If No is checked for any of the above, STOP. Do not report a CPT category II code.			

Step 2 Does patient meet or have an acceptable reason for not meeting the measure?

Beta-blocker Therapy	Yes	No	Code to be Reported on Line 24D of Paper Claim Form, if Yes (or Service Line 24 of Electronic Claim Form)
Prescribed ¹	<input type="checkbox"/>	<input type="checkbox"/>	4006F
Not prescribed for one of the following reasons:			
• Medical (eg, not indicated, contraindicated, other medical reason)	<input type="checkbox"/>	<input type="checkbox"/>	4006F-1P
• Patient (eg, patient declined, economic, social, religious, other patient reason)	<input type="checkbox"/>	<input type="checkbox"/>	4006F-2P
• System (eg, resources to perform the services not available, other reason attributable to healthcare delivery system)	<input type="checkbox"/>	<input type="checkbox"/>	4006F-3P
Document reason here and in medical chart. _____ _____			If No is checked for all of the above, report 4006F-8P (Beta-blocker therapy was not prescribed, reason not otherwise specified.)

¹“Prescribed” includes patients who are currently receiving medication(s) that follow the treatment plan recommended at an encounter during the reporting period, even if the prescription for that medication was ordered prior to the encounter.