

CHRONIC OBSTRUCTIVE PULMONARY DISEASE (COPD)		
CDM indicators	CDM-QIP Indicator description (Indication of optimal clinical practice)	What the payment system looks for in a 12-month period for each patient (Based on indicator data exported from flowsheets or entered into EHR viewer)
<b>Confirmed diagnosis of COPD</b>  FEV1 no longer an indicator but confirmation of COPD by spirometry/PFT recommended. This indicator reassessed annually to align with CPGs.	Assess and record spirometry confirmation of COPD diagnosis and/or reason why spirometry/PFT not done. This should be done at least once in 12 months.  (Spirometry/PFT confirmation of diagnosis is recommended unless patient too frail to perform this test)	Presence of Yes or No response to "spirometry confirmation of diagnosis" and 1 of the additional 4 response options: *Spirometry done FEV1/FVC < 0.7 *Confirmed by specialist/in hospital *Clinically suspected, patient too frail for spirometry *Spirometry not done, will refer
<b>Smoking status and smoking cessation advice</b>	Smoking status reviewed and recorded at least twice in 12 months; cessation advice provided to smokers at least twice in 12 months	Presence of smoking status on 2 separate dates and presence of smoking cessation advice for patients who are smokers
<b>Depression/psychosocial stress screening **</b>	Depression/psychosocial stress evaluation performed at least once in 12 months	Presence of depression screening date and response of "Yes" or "No" to "experiencing low mood/anhedonia/anxiety"
<b>Assessment of COPD functional status</b>	mMRC dyspnea scale assessed and recorded at least twice in 12 months	Presence of mMRC dyspnea scale value on 2 separate dates
<b>COPD exacerbations</b>	Record number of exacerbations and whether or not patient has an action plan at least once in 12 months	Presence of responses for both number of exacerbations and "patient has action plan"
<b>Oxygen saturation</b>	Oxygen saturation measured and recorded at least twice in 12 months	Presence of oxygen saturation value on 2 separate dates
<b>Obstructive sleep apnea (OSA) screening</b>	Screen for OSA at least once in 12 months	Presence of 1 of the OSA screening responses
<b>LABA therapy/use</b>	LABA therapy/use assessed and recorded at least once in 12 months	Presence of 1 of the responses for LABA therapy or LABA+LAMA therapy or ICS+LABA or ICS+LABA+LAMA therapy
<b>LAMA therapy/use</b>	LAMA therapy/use assessed and recorded at least once in 12 months	Presence of 1 of the responses for LAMA therapy or LABA+LAMA therapy or ICS+LABA+LAMA therapy
<b>Assessment of need for ICS (inhaled corticosteroid)</b>	Assess and record ongoing indication/clinical need for ICS at least once in 12 months	Presence of 1 of the responses for "review ongoing need for ICS"
<b>Optimal inhaler device and technique</b>	Inhaler device and technique reviewed and recorded at least once in 12 months	Presence of 1 of the optimal inhaler device/technique responses

\*\* Screening for depression/stress has been modified; HCP now responds to the question "Patient experiencing low mood/anhedonia/anxiety?" with "Yes" or "No". If response left blank or "Not asked" checked, the indicator will not be considered for QIP payment.