

Cardiac Rehabilitation (CRE)

By working together, we can improve health outcomes for your patients, our members. The Healthcare Effectiveness Data and Information Set (HEDIS®) helps us measure many aspects of performance. This tip sheet provides key details of the HEDIS measure for cardiac rehabilitation (CRE).

What Is the Measure?

The percentage of members 18 years and older who attended cardiac rehabilitation following a qualifying cardiac event, including myocardial infarction (MI), percutaneous coronary intervention (PCI), coronary artery bypass grafting (CABG), heart and heart/lung transplantation or heart valve repair/replacement. Four rates are reported:

- **Initiation.** The percentage of members who attended two or more sessions of cardiac rehabilitation within 30 days after a qualifying event.
- **Engagement 1.** The percentage of members who attended 12 or more sessions of cardiac rehabilitation within 90 days after a qualifying event.
- **Engagement 2.** The percentage of members who attended 24 or more sessions of cardiac rehabilitation within 180 days after a qualifying event.
- **Achievement.** The percentage of members who attended 36 or more sessions of cardiac rehabilitation within 180 days after a qualifying event.

Exclusions

- Discharged from an inpatient setting with any of the following on the discharge claim during the 180 days after the episode date:
 - MI
 - CABG
 - Heart or heart/lung transplant
 - Heart valve repair or replacement
- To identify discharges:
 - Identify all acute and nonacute inpatient stays.
 - Identify the discharge date for the stay.
- Members who had PCI, in any setting, during the 180 days after the episode date.
- Members who use hospice services or elect to use a hospice benefit any time during the measurement year.
- Members who die any time during the measurement year.
- Members receiving palliative care through the end of the measurement year.
- Members who had an encounter for palliative care any time during the intake period through the end of the measurement year. Do not include laboratory claims.
- Members 66–80 years of age as of December 31 of the measurement year (all product lines) with frailty and advanced illness. Members must meet both frailty and advanced illness criteria to be excluded:

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- 1) **Frailty.** At least two indications of frailty with different dates of service during the intake period through the end of the measurement year. Do not include laboratory claims.
 - 2) **Advanced Illness.** Either of the following during the measurement year or the year prior to the measurement year:
 - Advanced illness on at least two different dates of service.
 - Dispensed dementia medication
- Members 81 years of age and older as of December 31 of the measurement year (all product lines) with at least two indications of frailty with different dates of service any time during the intake period through the end of the measurement year. Do not include laboratory claims.

Denominator

Eligible Population: Members 18 years and older as of the episode date.

Numerator

<i>Initiation</i>	At least two sessions of cardiac rehabilitation on the episode date through 30 days after the episode date (31 total days) (on the same or different dates of service).
<i>Engagement 1</i>	At least 12 sessions of cardiac rehabilitation on the episode date through 90 days after the episode date (91 total days) (on the same or different dates of service).
<i>Engagement 2</i>	At least 24 sessions of cardiac rehabilitation on the episode date through 180 days after the episode date (181 total days) (on the same or different dates of service).
<i>Achievement</i>	At least 36 sessions of cardiac rehabilitation on the episode date through 180 days after the episode date (181 total days) (on the same or different dates of service).

Note: Count multiple cardiac rehabilitation sessions on the same date of service as multiple sessions. For example, if a member has two different codes for cardiac rehabilitation on the same date of service (or one code billed as two units), count this as two sessions of cardiac rehabilitation.

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