

Standardized Performance Measures for Advanced Certification Heart Failure

Joint Commission Quality Measures for Disease-Specific Care Certification

Mandatory Measures for Advanced Certification Heart Failure Effective 01/01/2025		
Measure ID	Measure Name	Measure Description
ACHF-02	Post-Discharge Appointment for Heart Failure Patients	Patients for whom a follow-up appointment for an office or home health visit for management of heart failure was scheduled within 7 days post-discharge and documented including location, date, and time.
ACHF-03	Care Transition Record Transmitted	A care transition record is transmitted to a next level of care provider within 7 days of discharge containing ALL of the following: • Reason for hospitalization • Procedures performed during this hospitalization • Treatment(s)/Service(s) provided during this hospitalization • Discharge medications, including dosage and indication for use • Follow-up treatment and services needed (e.g., post-discharge therapy, oxygen therapy, durable medical equipment)
ACHF-04	Discussion of Advance Directives/Advance Care Planning	Patients who have documentation in the medical record of a one-time discussion of advance directives/advance care planning with a healthcare provider.
ACHF-05	Advance Directive Executed	Patients who have documentation in the medical record that an advance directive was executed.
ACHF-06	Post-Discharge Evaluation for Heart Failure Patients	Patients who receive a re-evaluation for symptoms worsening and treatment compliance by a program team member within 72 hours after inpatient discharge.
AHAHF106	Defect-free Care for Quadruple Therapy Medication for Patients with HFReF	Please refer to <i>Get With The Guidelines- Heart Failure</i> registry for complete measure specifications or contact your AHA Quality Improvement Program Consultant at gwtgsupport@heart.org .
AHAHF94	SGLT-2 Inhibitor at Discharge for Patients with HFpEF/HFmrEF	Please refer to <i>Get With The Guidelines- Heart Failure</i> registry for complete measure specifications or contact your AHA Quality Improvement Program Consultant at gwtgsupport@heart.org .