Measure Information Form and Instructions

Project Title: A Patient-Reported Outcome Performance Measure (PRO-PM) Related to Care Goal Achievement Following a Total Hip Arthroplasty (THA) and/or Total Knee Arthroplasty (TKA).

Date:

Information included is current on November 23, 2020.

Project Overview:

The Centers for Medicare & Medicaid Services (CMS) has contracted with Brigham and Women's Hospital's (BWH) Center for Patient Safety Research and Practice to develop a new patient reported outcome performance measure (PRO-PM) related to Care Goal Achievement following a total hip arthroplasty (THA) and/or total knee arthroplasty (TKA). The cooperative agreement name is Measuring Outcomes in Orthopedics Routinely (MOOR). The cooperative agreement number is: 1V1CMS331637-01-00.

1. Measure Name/Title (NQF Submission Form De.2.)

Care Goal Achievement Following a Total Hip Arthroplasty (THA) and/or Total Knee Arthroplasty (TKA).

2. Descriptive Information

2.1 Measure Type (NQF Submission Form De.1.)

- ☐ process
- ☐ process: appropriate use
- ☐ outcome
- ☒ outcome: PRO
- ☐ cost / resource use
- ☐ efficiency
- ☐ structure
- ☐ intermediate outcome
- ☐ composite

2.2 Brief Description of Measure (NQF Submission Form De.3.)

The percentage of adult patients 18 years and older who had an elective primary total hip arthroplasty (THA) and/or total knee arthroplasty (TKA) during the performance period AND who completed both a pre- and post-surgical care goal achievement survey that generated a care goal achievement score of "x" or higher.

"x" = to be determined following the quantitative and qualitative testing data/information and analysis.

The measure is derived from patient responses to a new instrument that will be developed related to care goal achievement following THA and/or TKA. The new surveys will assess the patient's main goals and expectations before surgery (i.e., pain, physical function and quality of life) and the degree to which the expectations were addressed after surgery.

Note: This is a preliminary description of the new measure. The measure description will be defined based on the quantitative and qualitative testing data/information and analysis and vetted with our technical expert panel (TEP) members and other stakeholders.

- The exact time frames to administer the survey (pre- and post-surgery) will be defined based on the quantitative and qualitative testing data/information and analysis.
- The 'care goal achievement score' and criteria will be defined based on the quantitative and qualitative testing data/information and analysis.
- The Inclusion Criteria and Exclusions Criteria will be defined based on the quantitative and qualitative testing data/information and analysis.

2.3 If Paired or Grouped (NQF Submission Form De.4.)

This measure is not paired or grouped with other measures and does not need to be reported with other measures.

3. Measure Specifications

3.1 Measure-Specific Webpage (NQF Submission Form S.1.)

The Measure-specific Web Page will be developed according to our implementation and testing plan. This Web Page will include specific information about the measure under development (e.g., code lists, risk model details, and supplemental materials).

Note: We will add the URL link once we have the needed information.

3.2 If this is an electronic clinical quality measure (eCQM) (NQF Submission Form S.2a.):

This measure is not an eCQM.

3.3 Data Dictionary, Code Table, or Value Sets (NQF Submission Form S.2b.)

The data dictionary and code table will be developed according to our implementation plan. Specifically, these will be developed and defined based on the quantitative and qualitative testing data/information and analysis and vetted with TEP members and other stakeholders.

3.4 For an instrument-based measure (NQF Submission Form S.2c and S2.d):

This is an instrument-based measure. The Care Goal Achievement Survey (pre- and post-surgery) documents are provided for your review and comment and are found in the Download section.

3.5 Updates since last submission (NQF Submission Form S.3.1 and S.3.2)

Not applicable because this is a new measure.

3.6 Numerator Statement (NQF Submission Form S.4.)

Total number of patients in the denominator who completed both a pre- and post-surgical care goal achievement survey that generated a care goal achievement score of "x" or higher.

"x" = to be determined following quantitative and qualitative testing data and analysis.

Note 1: The numerator statement will be further defined based on quantitative and qualitative testing data and analysis.

Note 2: The 'care goal achievement score' and criteria will be defined based on the quantitative and qualitative testing data and analysis.

3.7 Numerator Details (NQF Submission Form S.5.)

The numerator details will be defined based on quantitative and qualitative testing data and analysis.

3.8 Denominator Statement (NQF Submission Form S.6.)

Adult patients age 18 and older who undergo an elective, primary THA and/or TKA during the performance period AND who have a completed care goal achievement survey within 90 days prior to the date of surgery AND between 90-180 days after surgery.

Note 1: The denominator statement will be further defined based on the quantitative and qualitative testing data/information and analysis.

Note 2: The exact time frames to administer the survey (pre- and post-surgery) will be defined based on the quantitative and qualitative testing data/information and analysis.

3.9 Denominator Details (NQF Submission Form S.7.)

The denominator details will be defined based on testing. It will include specific THA and TKA procedure codes to identify the population, the dates of survey completion (pre- and post-surgery), the procedure dates, and other relevant information.

3.10 Denominator Exclusions (NQF Includes "Exception" in the "Exclusion" Field) (NQF Submission Form S.8.)

- Patients who had a revision THA and/or TKA
- Patients with a fracture of the hip or lower limb indicating trauma at time of the THA or TKA
- Patients with severe cognitive impairment that overlaps the data measurement collection period or THA and/or TKA procedure
- Patients who are/were in hospice care during the measurement period

Note: The denominator exclusions will be further defined based on the quantitative and qualitative testing data/information and analysis.

3.11 Denominator Exclusion Details (NQF Includes "Exception" in the "Exclusion" Field) (NQF Submission Form S.9.)

The denominator exclusions will be further defined based on the quantitative and qualitative testing data/information and analysis. It will include specific codes/information to identify the population below:

- Patients who had a revision THA/TKA
- Patients with a fracture of the hip or lower limb indicating trauma at time of the THA or TKA
- Patients with severe cognitive impairment that overlaps the data measurement collection period or THA/TKA procedure

- Patients who are/were in hospice care during the measurement period

3.12 Stratification Details/Variables (NQF Submission Form S.10.)

Risk-adjusted analyses will be performed, but we do not anticipate that we will conduct stratification analyses.

Note: The final decision about stratification will be based on the quantitative and qualitative testing data/information and analysis and vetted with TEP members and other stakeholders.

3.13 Risk Adjustment Type (NQF Submission Form S.11.)

The decision about risk-adjusted type and risk stratification will be based on the quantitative and qualitative testing data/information and analysis and vetted with TEP members and other stakeholders. We will select the appropriate risk adjustment type below based on the quantitative and qualitative testing data/information and analysis.

☐ no risk adjustment or risk stratification
☐ stratification by risk category/subgroup
☒ statistical risk model
☐ other (S.13.a.)

3.14 Type of Score (NQF Submission Form S.12.):

☐ count
☒ rate/proportion
☐ ratio
☐ categorical (e.g., yes or no)
☐ continuous variable (CV) (e.g., an average)
☐ other (specify)

Note: The type of score will be further defined based on quantitative and qualitative testing data/information and analysis.

3.15 Interpretation of Score (NQF Submission Form S.13.)

The measure is anticipated to be specified as a proportion. A proportion of patients with care goal achievement score of "x" or higher after the surgery for a clinician or clinician group will be considered successful. A higher proportion indicates better results (i.e., better quality will be indicated by a higher score).

For example, if the outcome is dichotomous (1= if care goal achievement score of "x" or higher after the surgery, 0 if not), a proportion greater than 70% (of patient with care goal achievement score of "x" or higher after the surgery) for a clinician or clinician group will be considered successful.

Note: The interpretation of score will be further defined based on quantitative and qualitative testing data/information and analysis.

3.16 Calculation Algorithm/Measure Logic (NQF Submission Form S.14.)

The calculation algorithm/measure logic will be established based on the quantitative and qualitative testing data/information and analysis and vetted with TEP members and other stakeholders.

3.17 Sampling (NQF Submission Form S.15.)

The information and instructions regarding the sampling will be established based on the quantitative and qualitative testing data/information and analysis and vetted with TEP members and other stakeholders.

3.18 Survey/Patient-Reported Data (NQF Submission Form S.16.)

Instructions for data collection and guidance on minimum response rate will be provided once testing is underway and response rates are available. The calculation of response rates will be reported with performance measure results.

3.19 Data Source (NQF Submission Form S.17.)

The final decision about the data source will be based on the quantitative and qualitative testing data/information and analysis and vetted with TEP members and other stakeholders. We are currently using the data sources below for quantitative and qualitative testing data/information and analysis.

- ☐ administrative data
- ☐ claims data
- ☒ patient medical records (i.e., paper-based or electronic)
- ☒ electronic clinical data
- ☐ registries
- ☐ standardized patient assessments
- ☒ patient-reported data and surveys
- ☒ non-medical data
- ☐ other—describe in 3.20 (NQF Submission Form S.18.)

3.20 Data Source or Collection Instrument (NQF Submission Form S.18.)

The newly developed care goal achievement surveys will be used to collect data from patients meeting the inclusion/exclusion criteria.

Note: The specific standard methods, modes, and languages of administration will be further defined based on quantitative and qualitative testing data/information and analysis.

3.21 Data Source or Collection Instrument (Reference) (NQF Submission Form S.19.)

The Care Goal Achievement Survey (pre- and post-surgery surveys) documents are provided for your review and comment and is found in the Download section.

3.22 Level of Analysis (NQF Submission Form S.20.)

The measure is specified and tested for the following levels:

- ☒ clinician: individual
- ☒ clinician: group/practice
- ☐ facility
- ☐ health plan
- ☐ integrated delivery system
- ☐ population: community, county, or city
- ☐ population: regional and state

☐ other

3.23 Care Setting (NQF Submission Form S.21.)

The measure is specified and tested in the following settings:

☐ ambulatory surgery center
☒ clinician office/clinic
☐ outpatient rehabilitation
☐ urgent care – Ambulatory
☐ behavioral health: Inpatient
☐ behavioral health: Outpatient
☐ dialysis facility
☐ emergency medical services/ambulance
☐ emergency department
☐ home health
☐ hospice
☒ hospital
☐ hospital: critical care
☐ hospital: acute care facility
☐ imaging facility
☐ laboratory
☐ pharmacy
☐ nursing home / skilled nursing facility (SNF)
☐ inpatient rehabilitation facility (IRF)
☐ long-term acute care
☐ birthing center
☐ no applicable care setting
☐ other

3.24 Composite Performance Measure (NQF Submission Form S.22.)

This is not applicable as the measure under development is not a composite measure.