Quality Measures Fact Sheet

> ## Therapy with Aspirin, P2Y$_{12}$ Inhibitor, and Statin at Discharge Following Percutaneous Coronary Intervention in Eligible Patients (NQF #0964)
> ### National Quality Strategy Domain: Prevention and Treatment

> _Quality Measures Set: Alternate_   _Data Source: Registry_

BPCI Advanced and Quality

The Center for Medicare & Medicaid Innovation's (the CMS Innovation Center's) BPCI Advanced Model rewards health care providers for delivering services more efficiently, supports enhanced care coordination, and recognizes high quality care. Hospitals and clinicians should work collaboratively to achieve these goals, which have the potential to improve the BPCI Advanced Beneficiary experience and align to the CMS Quality Strategy goals of promoting effective communication and care coordination, highlighting best practices, and making care safer and more affordable. A goal of the BPCI Advanced Model is to promote seamless, patient-centered care throughout each Clinical Episode, regardless of who is responsible for a specific element of that care.

Background on Discharge Medications After Percutaneous Coronary Intervention

Percutaneous Coronary Intervention (PCI) is a catheter-based procedure that opens up narrowed or blocked coronary arteries to improve blood flow to the heart. Evidence-based guidelines support the use of several medications to prevent sudden closure of the treated area and to prevent future blockages in other sections of the coronary arteries.[70] Unless there is a specific contraindication, health care teams should discharge patients undergoing PCI on an aspirin, a statin, and a P2Y$_{12}$ receptor inhibitor.[71]

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[70] Weintraub, W. S., Mandel, L., & Weiss, S. A. (2013). Antiplatelet therapy in patients undergoing percutaneous coronary intervention. _Pharmacoeconomics, 31_(11), 959-970. Retrieved from https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4816975.

[71] Levine, G. N., Bates, E. R., Blankenship, J. C., Bailey, S. R., Bitti, J. A., Cercek, B., & Ting, H. H. (2011). 2011 ACCF/AHA/SCAI guideline for percutaneous coronary intervention: a report of the American College of Cardiology Foundation/American Heart Association Task Force on Practice Guidelines and the Society for Cardiovascular Angiography and Interventions. _Journal of the American College of Cardiology, 58_(24), e44–e122. Retrieved from https://www.ahajournals.org/doi/pdf/10.1161/CIR.0b013e31823ba622.

CMS Innovation Center Rationale for Including the Therapy with Aspirin, P2Y$_{12}$ Inhibitor, and Statin at Discharge Following PCI in Eligible Patients Measure in BPCI Advanced

Extensive evidence demonstrates that several classes of post-discharge medications improve outcomes for patients who undergo PCI.[72] The CMS Innovation Center has added the Therapy with Aspirin, P2Y$_{12}$ Inhibitor, and Statin at Discharge Following PCI in Eligible Patients measure to the BPCI Advanced Model to track the rate of prescriptions at discharge. This tracking allows the CMS Innovation Center to see whether providers are following established clinical guidelines and taking steps to optimize patient outcomes. The Therapy with Aspirin, P2Y$_{12}$ Inhibitor, and Statin at Discharge Following PCI in Eligible Patients measure is a composite of all three medications.

Applicable Clinical Episodes

The Therapy with Aspirin, P2Y$_{12}$ Inhibitor, and Statin at Discharge Following PCI in Eligible Patients measure is included in the Alternate Quality Measures Set and applies to the following inpatient and outpatient Clinical Episodes[73]:

- PCI (Inpatient): Medicare Severity–Diagnosis-Related Groups (MS-DRGs) 246, 247, 248, 249, 250, and 251
- PCI (Outpatient): Healthcare Common Procedure Coding System (HCPCS) 92920, 92924, 92928, 92933, 92937, 92943, C9600, C9602, C9604, and C9607

Measure Specifications

The Therapy with Aspirin, P2Y$_{12}$ Inhibitor, and Statin at Discharge Following PCI in Eligible Patients measure selected for BPCI Advanced follows National Quality Forum (NQF) #0964 measure specifications. The registry will calculate Acute Care Hospital (ACH) level performance for all patients included in the denominator. The term "patients" refers to people 18 years and older who undergo a procedure at the hospital associated with the Clinical Episodes from the "Applicable Clinical Episodes" section, not limited to Medicare beneficiaries or BPCI Advanced Beneficiaries. For Physician Group Practices (PGPs), the registry will calculate the measure as specified at individual hospitals, then the CMS Innovation Center will weight measure performance based on PGP Clinical Episode volume for each ACH where a PGP triggers an episode.

Denominator

The denominator for the Therapy with Aspirin, P2Y$_{12}$ Inhibitor, and Statin at Discharge Following PCI in Eligible Patients measure includes all patients 18 years and older, discharged alive from a US hospital following PCI who are eligible to receive one or more of the following three medication classes:

- aspirin (ASA): Patients undergoing PCI with or without stenting

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[72] Weintraub, W. S., Mandel, L., & Weiss, S. A. (2013). Antiplatelet therapy in patients undergoing percutaneous coronary intervention. *Pharmacoeconomics, 31*(11), 959-970. Retrieved from https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4816975.

[73] MS-DRGs are up to date as of Model Year 3 (2020) and will be updated for Model Year 4 as needed.

- P2Y$_{12}$ inhibitor (clopidogrel, prasugrel, ticlopidine, or ticagrelor): Patients undergoing PCI with stenting
- statin therapy: Patients undergoing PCI with or without stenting

This measure is not limited to Medicare beneficiaries or BPCI Advanced Beneficiaries.

All MS-DRG triggers apply, but this measure only applies to patients with PCI.

The exclusions for this measure include patients:

- with comfort measures only
- with a discharge status of deceased
- with a discharge location of "other acute hospital, hospice, or against medical advice"

The exceptions for this measure include patients:

- who did not receive a prescription for any of the medications (i.e., aspirin, statin, and P2Y12) and had a documented patient reason or medical reason for not receiving each drug that they are eligible for
- who are not prescribed an Aspirin but are discharged home on any one P2Y12 and Coumadin or a non-vitamin K dependent oral anticoagulant (Apixaban, Dabigatran, Edoxaban, or Rivaroxaban)

Numerator

The numerator includes individuals in the previously defined denominator who receive all the medications for which they are eligible:

- patients with a stent placed whose physician prescribed aspirin, statin, and a P2Y$_{12}$ inhibitor at discharge, or;
- patients without a stent placed whose physician prescribed aspirin and statin at discharge

Patients with a medical or patient reason for not prescribing a medication will still meet the numerator requirements if their physician prescribed all other medication(s) for which they were eligible.

Measure Submission

BPCI Advanced Participants may submit this measure through the American College of Cardiology (ACC) National Cardiovascular Data Registry (NCDR®) CathPCI Registry®.

Revisions to the Published Specifications

This registry measure specification reflects the NQF published specifications (e.g., exceptions) as well as annual updates provided to NQF by the measure steward to maintain endorsement status.

Composite Quality Score

The Therapy with Aspirin, P2Y12 Inhibitor, and Statin at Discharge Following PCI in Eligible Patients measure is one component of the BPCI Advanced Composite Quality Score (CQS) calculation. The CMS Innovation Center uses the CQS to adjust a portion of any Positive Total Reconciliation Amount and any Negative Total Reconciliation Amount. The CQS adjustment will not adjust the Positive Total Reconciliation Amount down by more than 10 percent, nor will it adjust the Negative Total

Reconciliation Amount up by more than 10 percent. More information is available at the BPCI Advanced website provided below.

Other Resources

Organization/Resource	Website Address
NQF #0964 specifications	http://www.qualityforum.org/QPS/964
BPCI Advanced	https://innovation.cms.gov/initiatives/bpci-advanced
ACC NCDR® CathPCI Registry® Data Coder's Data Dictionary v5.0	https://www.ncdr.com/WebNCDR/docs/default-source/cathpci-v5.0-documents/cathpci_v5_codersdatadictionary.pdf?sfvrsn=3eafde9f_7
ACC Data Quality Checklist	https://cvquality.acc.org/docs/default-source/public-reporting-toolkit/b15229_public_reporting_toolikit_checklist_v5a.pdf?sfvrsn=ae418fbf_2
ACC NCDR® BPCI Advanced	https://cvquality.acc.org/BPCIAdvanced
For a current list of participating hospitals; Find Your Heart a Home	https://www.cardiosmart.org/Resources/For-Hospitals