
CBE ID

3559

Title

Hospital-Level, Risk-Standardized Patient-Reported Outcomes Following Elective Primary Total Hip and/or Total Knee Arthroplasty (THA/TKA)

Endorsement Status

Endorsed

Is Under Review

No

Next Maintenance Cycle

Spring 2027

Previous Endorsement Cycle

Spring 2020

Initial Endorsement

Fri, 11/20/2020 - 11:03

Steward

Centers for Medicare & Medicaid Services

1.0 New or Maintenance

Maintenance

1.1 Measure Structure

Single Measure

1.3 Electronic Clinical Quality Measure (eCQM)

No

1.6 Measure Description

This patient-reported outcome-based performance measure will estimate a hospital-level, risk-standardized improvement rate (RSIR) following elective primary THA/TKA for Medicare fee-for-service (FFS) patients 65 years of age and older. Improvement will be calculated with patient-reported outcome data collected prior to and following the elective procedure. The preoperative data collection timeframe will be 90 to 0 days before surgery and the postoperative data collection timeframe will be 270 to 365 days following surgery.

1.7 Measure Type

Patient-reported Outcome Performance Measure (PRO-PM)

1.8 Level of Analysis

Facility

1.14 Numerator

The numerator is the risk-standardized proportion of patients undergoing an elective primary THA or TKA who meet or exceed an a priori, patient-defined substantial clinical benefit (SCB) threshold of improvement between preoperative and postoperative assessments on joint-specific patient-reported outcome measure (PROM) surveys. SCB improvement is defined as follows: - For THA patients, an increase of 22 points or more on the Hip dysfunction and Osteoarthritis Outcome Score for Joint Replacement (HOOS, JR); and- For TKA patients, an increase of 20 points or more on the Knee injury and Osteoarthritis Outcome Score for Joint Replacement (KOOS, JR).SCB thresholds were defined using published literature (Lyman and Lee, 2018) and vetted by our Patient Working Group, Technical Expert Panel (TEP) and Technical Advisory Group.References:Lyman S and Lee YY. (2018). What are the minimal and substantial improvements in the HOOS and KOOS and JR versions after total joint replacement? Clin Orthop Relat Res, 467(12):2432-2441.

1.15 Denominator

The cohort (target population) includes, Medicare fee-for-service (FFS) patients 65 years of age and older undergoing elective primary THA/TKA procedures, excluding patients with hip fractures, pelvic fractures and revision THAs/TKAs.

1.20 Types of Data Sources

Claims Data

6.1.2 Current or Planned Use(s)

Payment Program, Quality Improvement (Internal to the specific organization)

6.1.3 Current Use(s)

Payment Program, Quality Improvement (Internal to the specific organization), Not in use

Exclusions

Patients with staged procedures, defined as more than one elective primary THA or TKA performed on the same patient during distinct hospitalizations during the measurement period, are excluded. All THA/TKA procedures for patients with staged procedures during the measurement period are removed.

Planned Use

Payment Program

Risk Adjustment

Statistical risk model

Steward Organization

Centers for Medicare & Medicaid Services

Steward POC email

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