

November 26, 2024

Partnership for Quality Measurement
Measure Set Review Committee
Re: 00453-01-C-HOQR

To the Partnership for Quality Measurement Measure Set Review Committee:

On behalf of over 39,000 orthopaedic surgeons and residents represented by the American Association of Orthopaedic Surgeons (AAOS), we appreciate that the Center for Medicare & Medicaid Services (CMS) and the Partnership for Quality Measurement's Measure Set Review Committee (MSR Committee) have aligned in their decision to remove 00453-01-C-HOQR "MRI Lumbar Spine for Low Back Pain" from the Hospital Outpatient Quality Reporting (HOQR) Program. This measure calculates the percentage of MRI studies of the lumbar spine for Medicare fee-for-service (FFS) beneficiaries with a diagnosis of low back pain on the imaging claim for which the patient did not have claims-based evidence of antecedent conservative therapy prior to undergoing the index imaging. Per the measure specifications, antecedent conservative therapy may include claim(s) for physical therapy in the 60 days preceding the lumbar spine MRI, claim(s) for chiropractic evaluation and manipulative treatment in the 60 days preceding the lumbar spine MRI, or claim(s) for evaluation and management (E&M) (e.g., office visits) in the period >28 days and <60 days preceding the lumbar spine MRI.

The PQM MSR Committee considered the measure in the HOQR Program, noting both the measure's importance in reducing unnecessary MRI usage and the issue of the extensive denominator exclusions potentially driving improvements in the measure rather than true patient care improvements and the limited reliability. Thus, the committee voted overwhelmingly to recommend discontinued use of the measure in the HOQR Program, aligning with the measure's proposed removal in CMS rulemaking. The committee further encouraged ongoing evaluation of MRI use for low back pain and potential adjustments to the measure.

Similarly, CMS's assessment in the CY 2025 Outpatient Prospective Payment System proposed rule determined that the measure meets criteria for removal from the Hospital Outpatient Quality Reporting program based on Factor 2: performance or improvement on a measure does not result in better patient outcomes. The subsequent decision to finalize removal for the CY 2025 reporting period/CY 2027 payment determination aligns with the PQM MSR Committee's decision. **However, we are concerned that this was finalized in the HOQR program prior to the measure being recommended for removal in the PQM MSR process. To ensure maximum efficiency and clarity**

for our members, we respectfully request that the timelines for these two review processes remain aligned in future review cycles.

Should you have questions, please do not hesitate to contact Lori Shoaf, JD, MA, AAOS Office of Government Relations at shoaf@aaos.org.

Sincerely,

A handwritten signature in black ink, appearing to read 'A. Bruggeman', with a stylized flourish at the end.

Adam Bruggeman, MD, MHA, FAAOS, FAOA
Chair, AAOS Advocacy Council