

MUC2024-084 Quality of life outcome for patients with neurologic conditions

AAFP comments

Recommendation: Do not support

The American Academy of Family Physicians (AAFP) appreciates the intent of this measure, and we support the measurement of patient outcomes in general. In our new position paper, [Performance Measurement in Value-based Payment Models for Primary Care](#), we acknowledge the growing focus and importance of outcome measures and patient-reported outcome measures in value-based payment models. “...As the value movement matures, so does the evolution of performance measurement, moving beyond simple process metrics to increasingly prioritizing the measurement and rewarding of outcomes, including PROMs. Despite these advances, **accurately measuring outcomes remains challenging**, and there is room for continued improvement.³⁴”

We understand that measurement is one way to push toward quality, outcome, and system improvement. However, we do not support the addition of this measure for use in the CMS MIPS program at this time. We would like to note the following concerns:

- As currently specified, the measure does not meet the criteria for “meaningfulness.”
- As clinicians on the TEP noted, there is concern about being held responsible for the quality of life of patients with neurodegenerative disorders with the consideration stated that, more often than not, neurology patients’ health and quality of life gets worse over time due to the disease course, regardless of treatments.
 - Therefore, a physician may be unfairly penalized if they treat a larger percentage of patients with chronic degenerative diseases, despite providing high-quality, evidence-based care.
- The measure developer did not report any performance scores for this new measure. Therefore, we request performance data, including the identification of whether there is a performance gap.
- Additional assessment of empiric validity or face validity in a sample more representative of the CMS program population could strengthen the scientific acceptability of this measure.
- As currently specified, this measure does not meet reliability thresholds. In fact, the developer did not even perform reliability testing.
- As currently specified, this measure does not have external validity. It was not tested in populations generalizable to the proposed CMS program population.
- There seems to be a lack of evidence of possible interventions or process improvements to improve performance of the measure.
- Although provider workflows may not need to be modified, practice workflows likely will. Implementation of a new questionnaire is often expensive and resource intensive.
 - The developer did not comment on the fact that PROMIS measures are copyrighted. It is often very difficult to get an adequate number of responses to achieve statistical significance. Working to increase response rates is often resource intensive.
- There was no evaluation of empiric validity, which is important for minimizing potential bias and overall credibility and trustworthiness.

- As currently specified, the measure does not risk adjust. We encourage re-specification that considers risk adjustment for factors such as comorbidities, cognitive impairments, trauma exposure, resource utilization, duration of neurological disease, polypharmacy, physical function, use of an interpreter, etc.
- The measure, as currently written, has no external validity.
- Appropriateness of scale: This measure could have a very different impact in different populations. Consider patients that speak different languages and/or have different cultural interpretations of quality-of-life questions. It may also lead to different performance rates in populations with unique social barriers to care.

[Can Patient-Reported Outcome Measures Improve Clinical Management and Patient Care? | AAFP](#)

34. National Academies of Sciences, Engineering and Medicine (NASEM). Implementing High-Quality Primary Care: Rebuilding the Foundation of Health care. 2021. Accessed November 9, 2023. <https://nap.nationalacademies.org/catalog/25983/implementing-high-quality-primary-care-rebuilding-the-foundation-of-health>