Quality ID #353: Total Knee Replacement: Identification of Implanted Prosthesis in Operative Report

- National Quality Strategy Domain: Patient Safety
- Meaningful Measure Area: Transfer of Health Information and Interoperability

2019 COLLECTION TYPE:

MIPS CLINICAL QUALITY MEASURES (CQMS)

MEASURE TYPE:

Process – High Priority

DESCRIPTION:

Percentage of patients regardless of age undergoing a total knee replacement whose operative report identifies the prosthetic implant specifications including the prosthetic implant manufacturer, the brand name of the prosthetic implant and the size of each prosthetic implant

INSTRUCTIONS:

This measure is to be submitted <u>each time</u> a procedure for total knee replacement is performed during the performance period. There is no diagnosis associated with this measure. This measure may be submitted by Meritbased Incentive Payment System (MIPS) eligible clinicians who perform the quality actions described in the measure based on the services provided and the measure-specific denominator coding.

Measure Submission Type:

Measure data may be submitted by individual MIPS eligible clinicians, groups, or third party intermediaries. The listed denominator criteria are used to identify the intended patient population. The numerator options included in this specification are used to submit the quality actions as allowed by the measure. The quality-data codes listed do not need to be submitted by MIPS eligible clinicians, groups, or third party intermediaries that utilize this modality for submissions; however, these codes may be submitted for those third party intermediaries that utilize Medicare Part B claims data. For more information regarding Application Programming Interface (API), please refer to the Quality Payment Program (QPP) website.

DENOMINATOR:

All patients regardless of age undergoing a total knee replacement

Denominator Criteria (Eligible Cases):

All patients, regardless of age

<u>AND</u>

Patient procedure during the performance period (CPT): 27438, 27442, 27445, 27446, 27447

NUMERATOR:

Patients whose operative report identifies the prosthetic implant specifications including the prosthetic implant manufacturer, the brand name of the prosthetic implant and the size of each prosthetic implant

Numerator Options:	N	lumei	ator	0	pti	ons:
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Performance Met:

Operative report identifies the prosthetic implant specifications including the prosthetic implant manufacturer, the brand name of the prosthetic implant and the size of each prosthetic implant (**G9304**)

OR

Performance Not Met:

Operative report does not identify the prosthetic implant specifications including the prosthetic implant manufacturer, the brand name of the prosthetic

implant and the size of each prosthetic implant, reason not given (**G9303**)

RATIONALE:

It is important to capture the type of prosthesis used. The rates of prosthesis failure which will require a revision increases from 10 percent at 10 years to approximately 20 percent at 20 years following surgery. (National Institutes of Health, 2003) The FDA requires appropriate tracking of the device but this information may not be readily available to the surgeon performing the revision. The surgeon performing a future revision needs to be able to identify the prosthesis and size of the prosthesis that were used in the initial surgery, to determine if a complete revision is required or if a partial revision could be performed. The initial operative report should contain the necessary information which will ultimately help the future treating physician who performs the revision surgery.

This measure is designed for use by physicians and eligible health care professionals managing ongoing care for all patients undergoing a total knee replacement. This measure addresses the immediate postoperative period.

CLINICAL RECOMMENDATION STATEMENT:

Medical Device Tracking Requirements 2008 (Federal Register, 2008)

Effective tracking of devices from the manufacturing facility, through the distributor network (including distributors, retailers, rental firms and other commercial enterprises, device user facilities, and licensed practitioners) and ultimately, to the patient is necessary for the effectiveness of remedies prescribed by the act, such as patient notification (section 518 (a) of the act) or device recall (section 518 (e) of the act). 21 CFR 821.1 (b)

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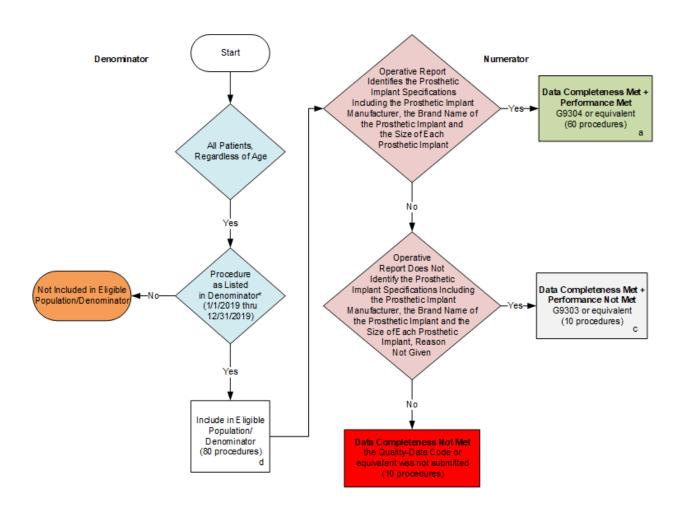
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2019 Clinical Quality Measure Flow for Quality ID #353: Total Knee Replacement: Identification of Implanted Prosthesis in Operative Report



SAMPLE CALCULATIONS: Data Completeness= Performance Met (a=60 procedures) + Performance Not Met (c=10 procedures) = 70 procedures = 87.50% Eligible Population / Denominator (d=80 procedures) = 80 procedures Performance Rate= Performance Met (a=60 procedures) = 60 procedures = 85.71% Data Completeness Numerator (70 procedures) = 70 procedures

*See the posted Measure Specification for specific coding and instructions to submit this measure. NOTE: Submission Frequency: Procedure

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2019 Clinical Quality Measure Flow for Quality ID#353: Total Knee Replacement: Identification of Implanted Prosthesis in Operative Report

Please refer to the specific section of the specification to identify the denominator and numerator information for use in submitting this Individual Specification.

- 1. Start with Denominator
- 2. All Patients, Regardless of Age
- Check Procedure Performed:
 - a. If Procedure as Listed in the Denominator equals No, do not include in Eligible Population. Stop Processing.
 - b. If Procedure as Listed in the Denominator equals Yes, include in Eligible Population.
- 4. Denominator Population:
 - a. Eligible Population is all Eligible Procedures in the Denominator. Denominator is represented as Denominator in the Sample Calculation listed at the end of this document. Letter d equals 80 procedures in the Sample Calculation.
- Start Numerator
- 6. Check Operative Report Identifies the Prosthetic Implant Specifications Including the Prosthetic Implant Manufacturer, the Brand Name of the Prosthetic Implant and the Size of Each Prosthetic Implant:
 - a. If Operative Report Identifies the Prosthetic Implant Specifications Including the Prosthetic Implant Manufacturer, the Brand Name of the Prosthetic Implant and the Size of Each Prosthetic Implant equals Yes, include in Data Completeness Met and Performance Met.
 - b. Data Completeness Met and Performance Met letter is represented in the Data Completeness and Performance Rate in the Sample Calculation listed at the end of this document. Letter a equals 60 procedures in the Sample Calculation.
 - c. If Operative Report Identifies the Prosthetic Implant Specifications Including the Prosthetic Implant Manufacturer, the Brand Name of the Prosthetic Implant and the Size of Each Prosthetic Implant equals No, proceed to check Operative Report Does Not Identify the Prosthetic Implant Specifications Including the Prosthetic Implant Manufacturer, the Brand Name of the Prosthetic Implant and the Size of Each Prosthetic Implant, Reason Not Given.
- 7. Check Operative Report Does Not Identify the Prosthetic Implant Specifications Including the Prosthetic Implant Manufacturer, the Brand Name of the Prosthetic Implant and the Size of Each Prosthetic Implant, Reason Not Given:
 - a. If Operative Report Does Not Identify the Prosthetic Implant Specifications Including the Prosthetic
 Implant Manufacturer, the Brand Name of the Prosthetic Implant and the Size of Each Prosthetic
 Implant, Reason Not Given equals Yes, include in Data Completeness Met and Performance Not Met.
 - b. Data Completeness Met and Performance Not Met letter is represented in the Data Completeness in the Sample Calculation listed at the end of this document. Letter c equals 10 procedures in the Sample Calculation.

- c. If Operative Report Does Not Identify the Prosthetic Implant Specifications Including the Prosthetic Implant Manufacturer, the Brand Name of the Prosthetic Implant and the Size of Each Prosthetic Implant, Reason Not Given equals No, proceed to check Data Completeness Not Met.
- 8. Check Data Completeness Not Met:
 - a. If Data Completeness Not Met, the Quality Data Code or equivalent was not submitted. 10 procedures have been subtracted from the Data Completeness Numerator in the Sample Calculation.

SAMPLE CALCULATIONS: Data Completeness= Performance Met (a=60 procedures) + Performance Not Met (c=10 procedures) = 70 procedures = 87.50% Eligible Population / Denominator (d=80 procedures) = 80 procedures Performance Rate= Performance Met (a=60 procedures) = 60 procedures = 85.71% Data Completeness Numerator (70 procedures) = 70 procedures