NQF # 1550 Hospital-level risk-standardized complication rate (RSCR) following elective primary total hip arthroplasty (THA) and/or total knee arthroplasty (TKA)

Measure Status

Endorsement Type: Endorsed

Endorsement Date: 1/31/2012 12:00:00 AM

Last Updated Date: Jan 25, 2017

Measure Under Review: Annual Update

Corresponding Measures:

Measure Type: Outcome

Measure Format measure

Measure Details

Measure Steward: Centers for Medicare & Medicaid Services

Measure Description: The measure estimates a hospital-level risk-standardized complication rate (RSCR) associated with elective primary THA and TKA in Medicare Fee-For-Service beneficiaries who are 65 years and older. The outcome (complication) is defined as any one of the specified complications occurring from the date of index admission to 90 days post date of the index admission (the admission included in the measure cohort). The target population is patients 18 and over. CMS annually reports the measure for patients who are 65 years or older, are enrolled in fee-for-service (FFS) Medicare, and hospitalized in non-federal acute-care hospitals.

Numerator Statement: The outcome for this measure is any complication occurring during the index admission (not coded present on arrival) to 90 days post-date of the index admission. Complications are counted in the measure only if they occur during the index hospital admission or during a readmission. The complication outcome is a dichotomous (yes/no) outcome. If a patient experiences one or more of these complications in the applicable time period, the complication outcome for that patient is counted in the measure as a “yes”.
**Denominator Statement:** The target population for the publically reported measure includes admissions for Medicare FFS beneficiaries who are at least 65 years of age undergoing elective primary THA and/or TKA procedures.

Additional details are provided in S.9 Denominator Details.

**Exclusions:** This measure excludes index admissions for patients:

1. Without at least 90 days post-discharge enrollment in FFS Medicare;
2. Who were discharged against medical advice (AMA); or,
3. Who had more than two THA/TKA procedure codes during the index hospitalization.

After applying these exclusion criteria, we randomly select one index admission for patients with multiple index admissions in a calendar year. We therefore exclude the other eligible index admissions in that year.

**Risk Adjustment:** Yes

**Harmonization Requested**

**Harmonization Action:**

**Measure(s) Considered in Harmonization Request:**

**Classification**

**Use in Federal Program:** Hospital Compare, Hospital Inpatient Quality Reporting, Hospital Value-Based Purchasing

**Condition:** Musculoskeletal: Joint Surgery, Musculoskeletal: Osteoporosis, Musculoskeletal: Rheumatoid Arthritis, Surgery

**Cross-Cutting Area:** Care Coordination, Safety, Safety: Complications, Safety: Overuse

**Care Setting:** Inpatient/Hospital
National Quality Strategy Priorities: Patient Safety

Actual/Planned Use: Public Reporting, Quality Improvement (external benchmarking to organizations)

Data Source: Claims, Other, Paper Medical Records

Level of Analysis: Facility

Target Population: Elderly, Populations at Risk

Measure Steward Contact Information

Organization Name: Centers for Medicare & Medicaid Services

Email Address: Lein.han@cms.hhs.gov

Website URL (general):

Measure Disclaimer

N/A

Measure Steward Copyright

N/A
**NQF Disclaimer:** Measures may be used for non-commercial implementation and/or reporting of performance data. Contact the Measure Steward if you wish to use the measure for another purpose. NQF is not responsible for the application or outcomes of measures.