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| eMeasure Title | Disease Activity Measurement for Patients with RA | | |
| eMeasure Identifier(Measure Authoring Tool) | 214 | eMeasure Version number | 0 |
| NQF Number | Not Applicable | GUID | 2731ead9-8437-4fd0-9135-1c71c48b4ef4 |
| Measurement Period | January 1, 20xx through December 31, 20xx | | |
| Measure Steward | American College of Rheumatology | | |
| Measure Developer | American College of Rheumatology | | |
| Endorsed By | None | | |
| Description | If a patient has rheumatoid arthritis, then disease activity using a standardized measurement tool should be assessed at >=50% of encounters for RA. | | |
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| Measure Scoring | Proportion | | |
| Measure Type | Process | | |
| Stratification | None | | |
| Risk Adjustment | None | | |
| Rate Aggregation | None | | |
| Rationale | Target low disease activity or remission. The panel recommends targeting either low disease activity (Table 3) or remission (Table 2) in all patients with early RA (Figure 1; level of evidence C) and established RA (Figure 2; level of evidence C) receiving any DMARD or biologic agent. (2012 guideline, page 631)  The goal for each RA patient should be low disease activity or remission. In ideal circumstances, RA remission should be the target of therapy, but in others, low disease activity may be an acceptable target. But for other patients, the decision about what the target should be for each patient is appropriately left to the clinician caring for each RA patient, in the context of patient preferences, comorbidities, and other individual considerations. Therefore, this article does not recommend a specific target for  all patients. (2012 RA guideline, page 637) | | |
| Clinical Recommendation Statement | In 2008, the American Medical Association’s Physician Consortium for Performance Improvement (AMA PCPI), the National Committee for Quality Assurance (NCQA) and the American College of Rheumatology (ACR) collaborated to develop a rheumatoid arthritis (RA) quality measure set for the Physical Quality Reporting System (PQRS), including a measure related to disease activity assessment. The measure assessed whether disease activity was assessed at least once per year and categorized as remission, low, moderate or high. The ACR subsequently developed a national registry platform, the Rheumatology Clinical Registry (RCR), to aid rheumatologists in reporting this PQRS measure. In 2012, performance on the measure was 54% among participating rheumatologists. Feedback from the rheumatology community and experts suggested potential ways to improve the measure (Desai S and Yazdany J. Arthritis Rheum. 2011 Dec;63(12):3649-60). The current e-measure builds on the experience of the last 6 years to add specificity and greater validity to disease activity assessment in RA (only validated and feasible measures are listed as acceptable, and the requirement for performing assessments has been increased to ≥50% or more of all RA encounters). These changes more closely align with ACR guidelines for measuring disease activity and “treating to target” in RA (Singh J, Arthritis Care Res. 2012 May;64(5):625-39) and Anderson J, Arthritis Care Res (Hoboken). 2012 May;64(5):640-7). | | |
| Improvement Notation | Higher score indicates better quality | | |
| Reference | Recommendation 1A in 2012 ACR RA guideline (Singh et al. AC&R, 2012) | | |
| Definition | For purposes of this measure, “Rheumatoid Arthritis Disease Activity Measurement Tools” include the following instruments:  -Clinical Disease Activity Index (CDAI)  -Disease Activity Score with 28-joint counts (erythrocyte sedimentation rate or C-reactive protein) (DAS-28)  -Patient Activity Scale (PAS)  -Patient Activity Score-II (PAS-II)  -Routine Assessment of Patient Index Data with 3 measures (RAPID 3)  -Simplified Disease Activity Index (SDAI)  A result of any kind qualifies for meeting numerator performance. | | |
| Guidance | One of the requirements for a patient to be included in the Initial Patient Population is that the patient has a minimum of 2 RA encounters with the same provider, all occurring during the measurement period.  If the patient qualifies for the Initial Patient Population, then every encounter for RA should be evaluated to determine whether disease activity using a standardized measurement tool was assessed.  The logic represented in this measure will determine if the patient had a disease activity assessment performed at each visit during the measurement period (ie, Occurrence A of Encounter, Performed).  The measure requires all of the eligible encounters to be analyzed in order to determine if the patient’s disease activity was assessed at >=50% of encounters for RA.  Once it has been determined if the patient meets >=50% threshold, all patient data across a single physician should be aggregated to determine the performance rate. | | |
| Transmission Format | TBD | | |
| Initial Patient Population | Patients 18 years and older with a diagnosis of rheumatoid arthritis seen for two or more face-to-face encounters for RA with the same clinician during the measurement period | | |
| Denominator | Equals Initial Patient Population | | |
| Denominator Exclusions | None | | |
| Numerator | # of patients with >=50% of total number of outpatient RA encounters in the measurement year with assessment of disease activity using a standardized measure. | | |
| Numerator Exclusions | Not Applicable | | |
| Denominator Exceptions | None | | |
| Measure Population | Not Applicable | | |
| Measure Observations | Not Applicable | | |
| Supplemental Data Elements | For every patient evaluated by this measure also identify payer, race, ethnicity and sex. | | |

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### [Population criteria](" \l "toc)

* **Initial Patient Population =**
  + AND:
    - AND: "Patient Characteristic Birthdate: birth date" >= 18 year(s) starts before start of "Measurement Period”
    - AND: Count >= 2 of:
      * OR: "Encounter, Performed: Office Visit (reason: ‘Rheumatoid Arthritis’)"
      * OR: “Encounter, Performed: Outpatient Consultation (reason: ‘Rheumatoid Arthritis’)”
      * OR: “Encounter, Performed: Face-to-Face Interaction (reason: ‘Rheumatoid Arthritis’)”
      * OR: "Encounter, Performed: Nursing Facility Visit (reason: ‘Rheumatoid Arthritis’)"
      * OR: "Encounter, Performed: Care Services in Long-Term Residential Facility (reason: ‘Rheumatoid Arthritis’)"
      * OR: "Encounter, Performed: Home Healthcare Services (reason: ‘Rheumatoid Arthritis’)"
      * during "Measurement Period"
    - AND:
      * OR: “Occurrence A of Encounter, Performed: Office Visit (reason: ‘Rheumatoid Arthritis’)”
      * OR: “Occurrence A of Encounter, Performed: Outpatient Consultation (reason: ‘Rheumatoid Arthritis’)”
      * OR: “Occurrence A of Encounter, Performed: Face-to-Face Interaction (reason: ‘Rheumatoid Arthritis’)”
      * OR: "Occurrence A of Encounter, Performed: Nursing Facility Visit (reason: ‘Rheumatoid Arthritis’)"
      * OR: "Occurrence A of Encounter, Performed: Care Services in Long-Term Residential Facility (reason: ‘Rheumatoid Arthritis’)"
      * OR: "Occurrence A of Encounter, Performed: Home Healthcare Services (reason: ‘Rheumatoid Arthritis’)"
      * during “Measurement Period”
* **Denominator =**
  + AND: "Initial Patient Population"
* **Denominator Exclusions =**
  + None
* **Numerator =**
  + AND: "Risk Category Assessment: Rheumatoid Arthritis Disease Activity Measurement Tools (result)" during
    - OR: “Occurrence A of Encounter, Performed: Office Visit”
    - OR: “Occurrence A of Encounter, Performed: Outpatient Consultation”
    - OR: “Occurrence A of Encounter, Performed: Face-to-Face Interaction”
    - OR: "Occurrence A of Encounter, Performed: Nursing Facility Visit"
    - OR: "Occurrence A of Encounter, Performed: Care Services in Long-Term Residential Facility”
    - OR: "Occurrence A of Encounter, Performed: Home Healthcare Services"
* **Denominator Exceptions =**
  + None

### [Data criteria (QDM Data Elements)](" \l "toc)

* XXXX
* XXXX
* XXXX
* XXXX

### [Reporting Stratification](" \l "toc)

* None

### [Supplemental Data Elements](" \l "toc)

* "Patient Characteristic Ethnicity: Ethnicity" using "Ethnicity CDC Value Set (2.16.840.1.114222.4.11.837)"
* "Patient Characteristic Payer: Payer" using "Payer Source of Payment Typology Value Set (2.16.840.1.114222.4.11.3591)"
* "Patient Characteristic Race: Race" using "Race CDC Value Set (2.16.840.1.114222.4.11.836)"
* "Patient Characteristic Sex: ONC Administrative Sex" using "ONC Administrative Sex Administrative Sex Value Set (2.16.840.1.113762.1.4.1)"

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| Measure Set | American College of Rheumatology RA measure set |