



## Cost and Efficiency Orthopedic Surgery Technical Expert Panel Web Meeting

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The National Quality Forum (NQF) convened a public call for the Cost and Efficiency Orthopedic Surgery Technical Expert Panel (TEP) on January 11, 2019.

### Welcome, Introductions, Disclosure of Interest, and Review of Web Meeting Objectives

Poonam Bal, NQF Senior Project Manager, welcomed the Orthopedic Surgery TEP members to the meeting. Ms. Bal provided opening remarks and reviewed the following meeting objective:

- Review the clinical aspects of measure 3474 *Hospital-Level, Risk-Standardized Payment Associated with a 90-Day Episode of Care for Elective Primary Total Hip and/or Total Knee Arthroplasty (THA/TKA)*

Ashlie Wilbon, NQF Senior Director, conducted roll call and asked TEP members to verbally announce any disclosures of interest. None of the TEP members had any disclosures that prohibited them from participating.

### Consideration of Candidate Measure

The measure stewards and developers from the Centers for Medicare & Medicaid Services and Yale New Haven Health Services Corporation/Center for Outcomes Research and Evaluation (YNHHSC/CORE) provided an overview of measure 3474 for the Orthopedic Surgery TEP members. Prior to the meeting, the TEP completed a TEP evaluation form that focused on the three main clinical areas of the measure. Ms. Wilbon facilitated a discussion on the TEP's responses. The TEP discussed the following issues:

- TEP members expressed concern about the age limit of 65 for the measure which excludes younger Medicare members who are enrolled based on disability or end-stage renal disease. The developer responded that because this measure focuses on elective hip and knee procedures, including populations under the age of 65 who a priori are high risk would make calibrating risk adjustment more difficult.
- TEP members also questioned the inclusion of post-acute care and facilities in the cost of the episode to determine whether all costs associated with care within that setting were included in the measure. The developer clarified that although the measure does capture costs from various post-acute settings, only sequelae or complications related to the procedure are included.
- The TEP sought clarity on how pathological fractures were handled in order to determine whether the patient should be excluded from the measure or if the fracture was related to the current episode. The developer clarified that present on admission code modifiers are used to discern whether the fracture was acquired before or during admission. There was some discussion as to whether this modifier is consistently used and can be relied upon as an accurate method for identifying these patients, but the TEP ultimately deemed it satisfactory.

- Overall, the TEP agreed that the exclusions listed in the measure were appropriate and any additional exclusions or inclusions might complicate the measure.
- Overall, the TEP agreed that the measure was appropriately risk adjusted.

### **Public Comment**

Hiral Dudhwala, NQF Project Manager, opened the web meeting to allow for public comment. No public comments were offered.

### **Next Steps**

The TEP's feedback will be shared with the Cost and Efficiency Standing Committee on the Measure Evaluation Web Meetings on February 12-13, 2019.