Measure #260: Rate of Carotid Endarterectomy (CEA) for Asymptomatic Patients, without Major Complications (Discharged to Home by Post-Operative Day #2) – National Quality Strategy Domain: Patient Safety

2016 PQRS OPTIONS FOR INDIVIDUAL MEASURES: REGISTRY ONLY

DESCRIPTION:
Percent of asymptomatic patients undergoing CEA who are discharged to home no later than post-operative day #2

INSTRUCTIONS:
This measure is to be reported each time a CEA is performed during the reporting period. It is anticipated that clinicians who provide services of CEA, as described in the measure, based on the services provided and the measure-specific denominator coding will report this measure. This measure may be reported by clinicians who perform the quality actions described in the measure based on the services provided and the measure-specific denominator coding.

Measure Reporting via Registry:
CPT codes, CPT Category II codes and patient demographics are used to identify patients who are included in the measure’s denominator. The listed numerator options are used to report the numerator of the measure.

The quality-data codes listed do not need to be submitted for registry-based submissions; however, these codes may be submitted for those registries that utilize claims data. There are no allowable performance exclusions for this measure.

DENOMINATOR:
All carotid endarterectomy procedures

Denominator Criteria (Eligible Cases):
Patients aged ≥ 18 years on date of encounter
AND
Patient encounter during the reporting period (CPT): 35301
AND NOT
Symptomatic carotid stenosis: Ipsilateral carotid territory TIA or stroke less than 120 days prior to procedure: 9006F
OR
Other carotid stenosis: Ipsilateral TIA or stroke 120 days or greater prior to procedure or any prior contralateral carotid territory or vertebrobasilar TIA or stroke: 9007F

NUMERATOR:
Patients that are asymptomatic neurologically who were discharged alive, to home no later than post-operative day #2 following CEA

Definition:
Home – For purposes of reporting this measure, home is the point of origin prior to hospital admission for procedure of CEA. For example, if the patient comes from a skilled facility and returns to the skilled facility post CEA, this would meet criteria for discharged to home.

Numerator Options:
Performance Met: Patient discharged to home no later than post-operative day #2 following CEA (G8834)
OR

Performance Not Met: Patient not discharged to home by post-operative day #2 following CEA (G8838)

RATIONALE:
Surgeons performing CEA on asymptomatic patients must select patients at low risk for morbidity and perform the procedure with a very low complication rate in order to achieve benefit. Discharge to home within two days of the procedure is an indicator of patients who were not frail prior to the procedure and who did not experience a major complication (e.g., disabling stroke, myocardial infarction). The proposed measure will therefore serve as an indicator of both appropriateness and overall outcome.

CLINICAL RECOMMENDATION STATEMENTS:

Neurologically asymptomatic patients with ≥ 60% diameter stenosis should be considered for CEA for reduction of long-term risk of stroke, provided the patient has a 3- to 5-year life expectancy and perioperative stroke/death rates can be ≤ 3% (GRADE 1, Level of Evidence A).

COPYRIGHT:
This measure is owned by the Society for Vascular Surgery - SVS.
2016 Registry Individual Measure Flow
PQRS #260 Rate of Carotid Endarterectomy (CEA) for Asymptomatic Patients, without Major Complications (Discharged to Home by Post-Operative Day #2)

Start

Denominator

Patient Age at Date of Service ≥18 Years

Yes

No

Encounter as Listed in Denominator (1/1/2016 thru 12/31/2016)*

Not Included in Eligible Population/Denominator

Yes

No

Symptomatic Carotid Stenosis: ipsilateral Carotid Territory TIA or Stroke Less Than 120 Days Prior to Procedure: 9006F

Yes

Not Included in Eligible Population/Denominator

No

Other Carotid Stenosis: ipsilateral TIA or Stroke 120 Days or Greater Prior to Procedure or Any Prior Contralateral Carotid Territory or Vertebralbasilar TIA or Stroke: 9007F

Yes

No

Patient Discharged to Home no Later Than Post-Operative Day #2 Following CEA

Yes

Reporting Met + Performance Met G8634 or equivalent (5 procedures) a

No

Patient Not Discharged to Home by Post-Operative Day #2 Following CEA

Yes

Reporting Met + Performance Not Met G8638 or equivalent (2 procedures) c

No

Include in Eligible Population/Denominator (6 procedures) d

SAMPLE CALCULATIONS:

Reporting Rate=
Performance Met (a=5 procedures) + Performance Not Met (c=2 procedures) = 7 procedures
Eligible Population / Denominator (d=8 procedures) = 8 procedures

Reporting Rate = 87.56%

Performance Rate=
Performance Met (a =5 procedures) = 5 procedures
Reporting Numerator (7 procedures) = 7 procedures

Performance Rate = 71.43%

*See the posted Measure Specification for specific coding and instructions to report this measure.
NOTE: Reporting Frequency - Procedure

CPT only copyright 2015 American Medical Association. All rights reserved.
The measure diagrams were developed by CMS as a supplemental resource to be used in conjunction with the measure specifications. They should not be used alone or as a substitution for the measure specification.
2016 Registry Individual Measure Flow
PQRS #260 Rate of Carotid Endarterectomy (CEA) for Asymptomatic Patients, without Major Complications (Discharged to Home by Post-Operative Day #2)

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

1. Start with Denominator

2. Check Patient Age:
   a. If the Age is greater than or equal to 18 years of age on Date of Service and equals No during the measurement period, do not include in Eligible Patient Population. Stop Processing.
   b. If the Age is greater than or equal to 18 years of age on Date of Service and equals Yes during the measurement period, proceed to check Encounter Performed.

3. Check Encounter Performed:
   a. If Encounter as Listed in the Denominator equals No, do not include in Eligible Patient Population. Stop Processing.
   b. If Encounter as Listed in the Denominator equals Yes, proceed to Check Patient Diagnosis.

4. Check Symptomatic carotid stenosis: Ipsilateral carotid territory TIA or stroke less than 120 days prior to procedure:
   a. If Diagnosis of Symptomatic Carotid Stenosis as Listed in the Denominator equals Yes, do not include in Eligible Patient Population. Stop Processing.
   b. If Symptomatic carotid stenosis: Ipsilateral carotid territory TIA or stroke less than 120 days prior to procedure equals No, proceed to check Patient Diagnosis.

5. Check Other carotid stenosis: Ipsilateral TIA or stroke 120 days or greater prior to procedure or any prior contralateral carotid territory or vertebrobasilar TIA or stroke:
   a. If Other carotid stenosis: Ipsilateral TIA or stroke 120 days or greater prior to procedure or any prior contralateral carotid territory or vertebrobasilar TIA or stroke equals Yes, do not include in Eligible Patient Population. Stop Processing.
   b. If Other carotid stenosis: Ipsilateral TIA or stroke 120 days or greater prior to procedure or any prior contralateral carotid territory or vertebrobasilar TIA or stroke equals No, proceed to Denominator Population.

6. Denominator Population:
   a. Denominator population is all Eligible Patients in the denominator. Denominator is represented as Denominator in the Sample Calculation listed at the end of this document. Letter d equals 8 procedures in the sample calculation.

7. Start Numerator
8. Check Patient Discharged to Home no Later than Post-Operative Day #2 Following CEA:
   a. If Patient Discharged to Home no Later than Post-Operative Day #2 Following CEA equals Yes, include in Reporting Met and Performance Met.
   b. Reporting Met and Performance Met letter is represented in the Reporting Rate and Performance Rate in the Sample Calculation listed at the end of this document. Letter a equals 5 procedures in Sample Calculation.
   c. If Patient Discharged to Home no Later than Post-Operative Day #2 Following CEA equals No, proceed to Patient Not Discharged to Home By Post-Operative Day #2 Following CEA.

9. Check Patient Not Discharged to Home By Post-Operative Day #2 Following CEA:
   a. If Patient Not Discharged to Home By Post-Operative Day #2 Following CEA equals Yes, include in Reporting Met and Performance Not Met.
   b. Reporting Met and Performance Not Met letter is represented in the Reporting Rate in the Sample Calculation listed at the end of this document. Letter c equals 2 procedures in the Sample Calculation.
   c. If Patient Not Discharged to Home By Post-Operative Day #2 Following CEA equals No, proceed to Reporting Not Met.

10. Check Reporting Not Met
    a. If Reporting Not Met equals No, Quality Data Code or equivalent not reported. 1 procedure has been subtracted from the reporting numerator in sample calculation.

SAMPLE CALCULATIONS:

<table>
<thead>
<tr>
<th>Reporting Rate =</th>
<th>Performance Met (a = 5 procedures) + Performance Not Met (c = 2 procedures)</th>
<th>Eligible Population / Denominator (d = 8 procedures)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>7 procedures = 87.50%</td>
<td>8 procedures</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Performance Rate =</th>
<th>Performance Met (a = 5 procedures)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Reporting Numerator (7 procedures)</td>
</tr>
<tr>
<td></td>
<td>6 procedures = 71.43%</td>
</tr>
</tbody>
</table>