



Voluntary Reporting of the Hospital-Level THA/TKA PRO-Based Performance Measure

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Speakers

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Purpose

This presentation will provide participants with an overview of the Hospital-level Total Hip Arthroplasty/Total Knee Arthroplasty (THA/TKA) Patient-Reported Outcome-Based Performance Measure (PRO-PM) implementation, timeline, and data submission process.

Objectives

Participants will be able to understand the following:

- Measure overview
- Measure implementation timeline
- Measure data submission process
- Measure technical specifications and file format expectations
- Resources for voluntary reporting

Acronyms and Abbreviations

APU	annual payment update	HCAHPS	Hospital Consumer Assessment of Healthcare Providers and Systems	Pre-op	preoperative
ADMSN	admission	HLTH	health	Post-op	post operative
BMI	body mass index	HOOS	hip disability and osteoarthritis outcome score	PRO	Patient Reported Outcome
CCN	CMS Certification Number	HQR	Hospital Quality Reporting	PRO-PM	Patient-Reported Outcome Measurement Information System
CMS	Centers for Medicare & Medicaid Services	ID	identification	PROC	procedure
CSV	Comma-Separated Value	IQR	Inpatient Quality Reporting	PROM	Patient-reported Outcome Measure
DACA	Data Accuracy and Completeness Acknowledgement	JR	joint replacement	PROMIS	Patient-Reported Outcome Measures Information System
DOB	date of birth	KOOS	knee disability and osteoarthritis outcome score	SILS2	Single Item Literacy Screener
DT	date	MBI	Medicare Beneficiary Identifier	S-Type	Survey Type
eCQM	electronic clinical quality measure	MD	mode	THA	total hip arthroplasty
FFS	Fee for Service	N/A	not applicable	TKA	total knee arthroplasty
FY	fiscal year	OQR	Outpatient Quality Reporting	VR-12	Veterans Rand - 12
GEN	generic	N/A	not applicable	XML	Extensive Markup Language
HARP	Health Care Quality Information System Access	P-Type	Procedure Type		Back

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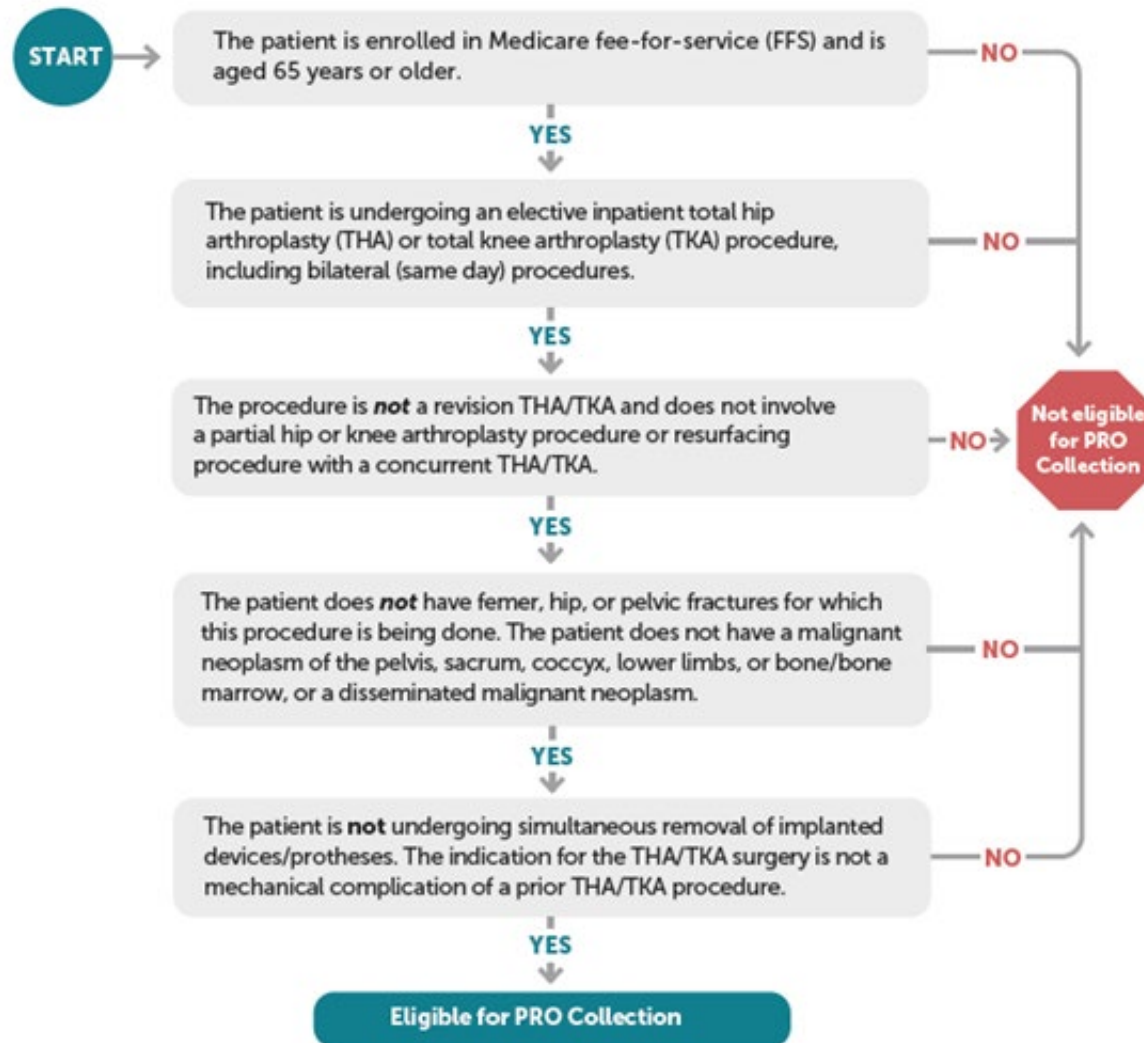
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Measure Overview




Measure Overview

- Goal: measure a patient's improvement after a THA/TKA procedure based on their self-assessment of pain and function
 - Promote collaboration and shared-decision making between patients and providers across the full spectrum of care
- THA/TKA procedures commonly performed in Medicare population
- First ever PRO-PM of its kind that incorporates the patient's self-assessment of their pain and function directly in the measure outcome
- Patient-centered measurement aligned with CMS's Meaningful Measures
- Hospitals can participate in two voluntary reporting periods prior to mandatory reporting

Which Patients Are In The Measure?



Which Data To Collect and Submit?

 Data Element Type	 Preoperative Data Elements	 Postoperative Data Elements
Patient-Reported Outcome Measures	THA patients: HOOS, JR TKA patients: KOOS, JR	THA patients: HOOS, JR TKA patients: KOOS, JR
Patient- or Provider-Reported Risk Variables	Mental Health Subscale items from either PROMIS-Global or VR-12 Health Literacy (SILS2) BMI or Height/Weight Use of Chronic Narcotics Total Painful Joint Count: Patient-Reported Pain in Non-Operative Lower Extremity Joint Quantified Spinal Pain: Patient-Reported Back Pain, Oswestry Index Question	N/A
Matching Variables	Medicare Provider Number MBI Date of Birth Date of Procedure Procedure Type Date of Admission	Medicare Provider Number MBI Date of Birth Date of Procedure Procedure Type Date of Admission
PROM-related Variables	Date of PRO Data Collection Mode of Collection Person Completing the Survey Generic PROM Version	Date of PRO Data Collection Mode of Collection Person Completing the Survey N/A

BMI: Body Mass Index; HOOS, JR: Hip Disability and Osteoarthritis Outcome Score, Joint Replacement; KOOS, JR: Knee Disability and Osteoarthritis Outcome Score, Joint Replacement; PROMIS-Global: Patient-Reported Outcomes Measurement Information System; SILS: Single Item Literacy Screener; VR-12: Veterans Rand-12; MBI: Medicare Beneficiary Identifier; PROM: Patient-reported Outcome Measure

When Are Data Collected?

THA/TKA PRO-PM requires PRO data collection before and after surgery:

- Preoperative PRO data collection:
90–0 days before eligible THA/TKAs
- Postoperative PRO data collection:
300–425 days after surgery

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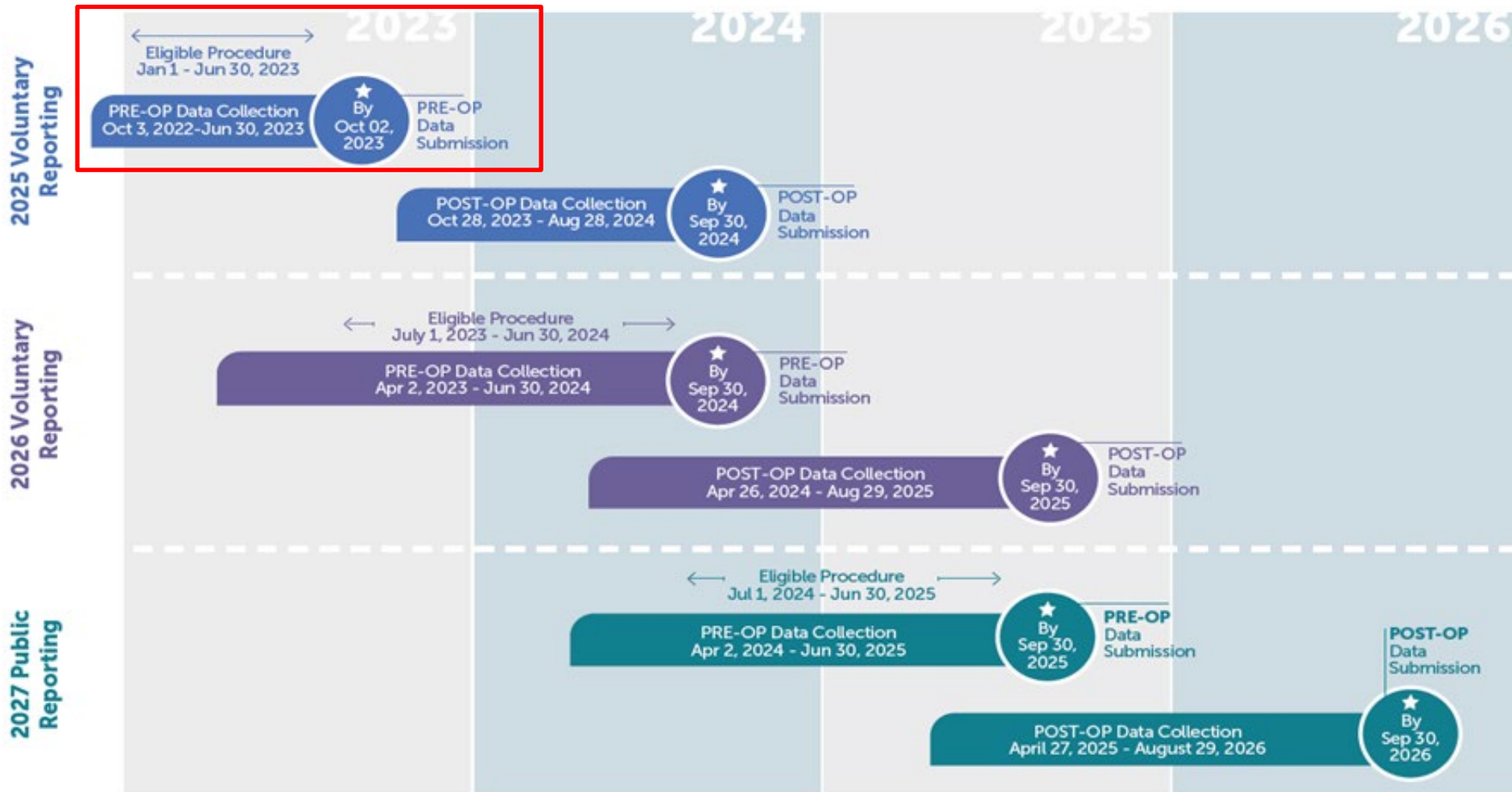
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Measure Implementation Timeline

Plans for Implementation

- In the fiscal year (FY) 2023 Inpatient Prospective Payment System final rule, CMS finalized a phased measure implementation approach based on stakeholder feedback
 - Two voluntary reporting periods were prior to mandatory reporting in the Hospital IQR Program, starting with FY 2028 payment determination.
- Hospital IQR Program minimum reporting requirement: Hospitals will need to submit complete preoperative PRO data and matched complete postoperative PRO data for at least 50% of their eligible inpatient THA/TKA procedures to receive their annual payment update (APU) in FY 2028.
- Hospitals will receive response rate and measure score information confidentially during voluntary reporting, as applicable.
- Hospital participation in voluntary reporting and/or response rates will be publicly reported during voluntary reporting.

Voluntary Reporting Timeline



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Measure Data Submission

Who Can Submit?

Hospitals have the flexibility to submit data through multiple approaches:

- Send data directly to CMS for measure calculation
- Use an external entity (vendor or registry)

What Data are Submitted?

Hospitals and external entities will use the Hospital Quality Reporting (HQR) system, which allows multiple submission options:

- Comma-Separated Value (CSV)
- Extensible Markup Language (XML)
- Manual data entry

CSV

The screenshot displays the Microsoft Excel ribbon with the following tabs: File, Home, Insert, Page Layout, Formulas, Data, Review, View, Automate, Developer, Help, and Acrobat. The Home tab is active, showing various toolbars for Clipboard, Font, Alignment, Number, Styles, Cells, Editing, Analysis, and Sensitivity. The formula bar shows 'A2' and the active cell contains a formula. The spreadsheet grid shows columns A through W and rows 1 through 7. The data in row 1 is as follows:

1	CCN	MBI	S_Type	P_TYPE	DOB	PROC_DT	COLLECTIC	ADMSN_D	GEN_PROI	COLLECTIC	RESPONDE	HLTH_LITE	BMI	HEIGHT	WEIGHT	NARCOTIC	OTHER_JC	BACK_PAII	HOOSJHQ	HOOSJHQ	HOOSJHQ	HOOSJHQ	HOOSJHQ	HC
2																								
3																								
4																								
5																								
6																								
7																								

XML

Sample XML of a preoperative PRO data submission

```
<SURVEY>
  <CCN>123456</CCN>
  <MBI>1AC0D12EF34</MBI>
  <S_TYPE>1</S_TYPE>
  <P_TYPE>1</P_TYPE>
  <DOB>01011970</DOB>
  <PROC_DT>01012023</PROC_DT>
  <COLLECTION_DT>10032023</COLLECTION_DT>
  <ADMSN_DT>01012023</ADMSN_DT>
  <GEN_PROM>1</GEN_PROM>
  <COLLECTION_MD>0</COLLECTION_MD>
  <RESPONDER>0</RESPONDER>
  <HLTH_LITERACY>0</HLTH_LITERACY>
  <BMI>40</BMI>
  <HEIGHT>170</HEIGHT>
  <WEIGHT>100</WEIGHT>
  <NARCOTIC_USE>0</NARCOTIC_USE>
  <OTHER_JOINT_PAIN>0</OTHER_JOINT_PAIN>
  <BACK_PAIN>1</BACK_PAIN>
  <HOOSJR>
    <HOOSJRQ1_STAIRS>0</HOOSJRQ1_STAIRS>
    <HOOSJRQ2_WALKING>1</HOOSJRQ2_WALKING>
    <HOOSJRQ3_RISING>2</HOOSJRQ3_RISING>
    <HOOSJRQ4_BEND>3</HOOSJRQ4_BEND>
    <HOOSJRQ5_LYINGINBED>4</HOOSJRQ5_LYINGINBED>
    <HOOSJRQ6_SITTING>0</HOOSJRQ6_SITTING>
  </HOOSJR>
  <VR_12>
    <VR_12Q4a_ACCOMPLISH>1</VR_12Q4a_ACCOMPLISH>
    <VR_12Q4b_CAREFUL>2</VR_12Q4b_CAREFUL>
    <VR_12Q6a_CALM>3</VR_12Q6a_CALM>
    <VR_12Q6b_ENERGY>4</VR_12Q6b_ENERGY>
    <VR_12Q6c_DOWN>5</VR_12Q6c_DOWN>
    <VR_12Q7_SOCLACT>1</VR_12Q7_SOCLACT>
  </VR_12>
</SURVEY>
```

Manual Entry

tal Quality Reporting # PLAZA SURGICAL M

GICAL MEDICAL CENTER

[< Back](#)

THA/TKA pre-operative patient survey

Patient Information

* Medicare Identification (MBI)
No dashes or spaces

Date of Birth

Date of Eligible Procedure

Date of Survey Collection

Date of Admission to Anchor Hospitalization

Mode of Collection



* Indicates required field

Pre-op submission period:
07/01/2023 - 10/01/2023

With respect to reporting period:
01/01/2023 - 06/01/2023

Last updated:
-

Preoperative PRO Data Elements to Submit

 Data Element Type	 Preoperative Data Elements
Patient-Reported Outcome Measures	THA patients: HOOS, JR TKA patients: KOOS, JR
Patient- or Provider-Reported Risk Variables	Mental Health Subscale items from either PROMIS-Global or VR-12 Health Literacy (SILS2) BMI or Height/Weight Use of Chronic Narcotics Total Painful Joint Count: Patient-Reported Pain in Non-Operative Lower Extremity Joint Quantified Spinal Pain: Patient-Reported Back Pain, Oswestry Index Question
Matching Variables	Medicare Provider Number MBI Date of Birth Date of Procedure Procedure Type Date of Admission
PROM-related Variables	Date of PRO Data Collection Mode of Collection Person Completing the Survey Generic PROM Version

BMI: Body Mass Index; HOOS, JR: Hip Disability and Osteoarthritis Outcome Score, Joint Replacement; KOOS, JR: Knee Disability and Osteoarthritis Outcome Score, Joint Replacement; PROMIS-Global: Patient-Reported Outcomes Measurement Information System; SILS: Single Item Literacy Screener; VR-12: Veterans Rand-12; MBI: Medicare Beneficiary Identifier; PROM: Patient-reported Outcome Measure

Common Scenarios

- Outpatient Procedures
- Bilateral Procedures
- Missing Data Elements




Outpatient Procedures

- THA/TKA procedures completed as an outpatient are not eligible for the measure cohort.
- Although the collection of PRO data for outpatient procedures is not required at this time for this measure, we acknowledge it may be easier for hospitals to collect PRO data on outpatient procedures given difficulty identifying outpatient vs inpatient procedures in advance.
- For the highest chances of meeting APU, when in doubt, collect and submit PRO-PMs for all THA/TKA patients.

Bilateral Procedures

- Bilateral procedures (performed on both hips or both knees on the same day) are included in the measure cohort.
- In the event of a bilateral THA/TKA, hospitals will only need to collect and submit one set of PRO data, including one response for the hip disability and osteoarthritis outcome score (HOOS, JR) or knee disability and osteoarthritis outcome score (KOOS, JR) for that patient preoperatively and postoperatively (entered in one row).

Missing Data Elements

 Complete Data	 Incomplete Data	 No Response
<ul style="list-style-type: none">• Included in measure cohort• Included in measure outcome• Included in non-response bias approach• Considered as complete data for IQR APU	<ul style="list-style-type: none">• Not included in measure cohort• Not included in measure outcome• Included in non-response bias approach• Does not qualify as complete data for IQR APU	<ul style="list-style-type: none">• Not included in measure cohort• Not included in measure outcome• Included in non-response bias approach• Does not qualify as complete data for IQR APU

For more calculation details, including the non-response bias approach, please see Section 2.7.1 of the Methodology Report on QualityNet: https://qualitynet.cms.gov/inpatient/measures/THA_TKA/methodology

Colleen Toby

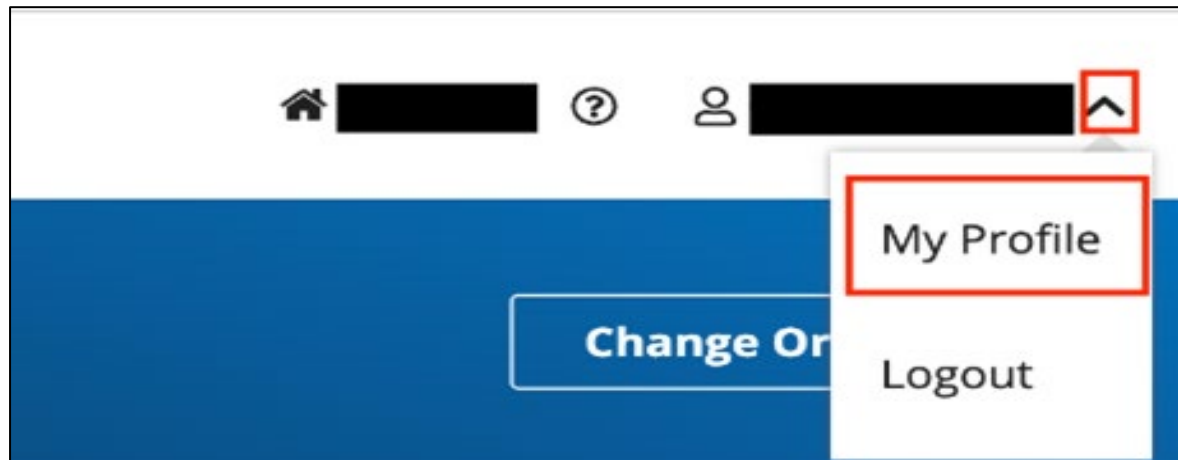
Product Manager, Access and Submissions

Hospital Quality Reporting Application Development Organization

Measure Data Submission in HQR

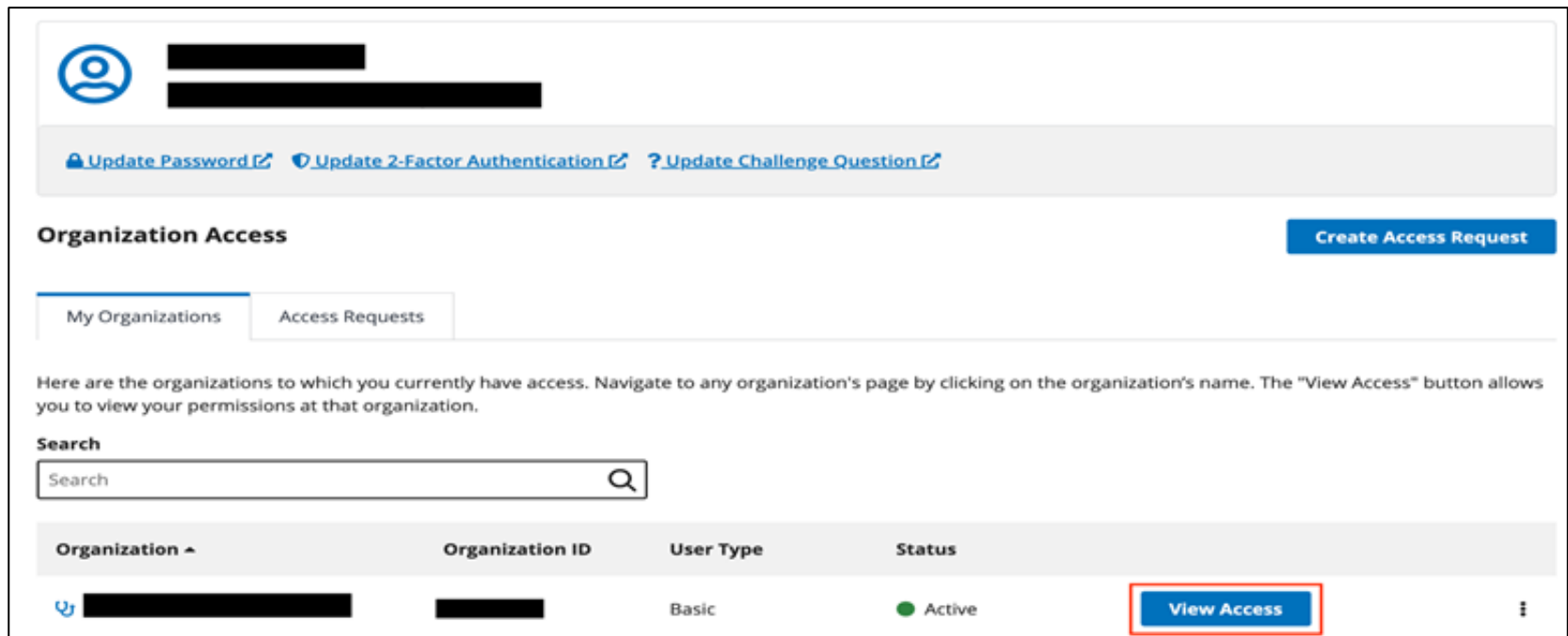
Verify User Permission

1. Log in to HQR via the Health Care Quality Information System Access Roles and Profiles (HARP) at <https://hqr.cms.gov>.
2. In the top right corner, click the arrow by your name and select My Profile.



Verify User Permission

3. Scroll down to your list of organizations and click View Access next to the organization for which you will be submitting THA/TKA data.



The screenshot shows a user profile page. At the top left is a user icon and name. Below it are links for 'Update Password', 'Update 2-Factor Authentication', and 'Update Challenge Question'. The 'Organization Access' section has a 'Create Access Request' button. Below this are tabs for 'My Organizations' and 'Access Requests'. A search bar is present. A table lists organizations with columns for Organization, Organization ID, User Type, and Status. The 'View Access' button for the first organization is highlighted with a red box.

Organization	Organization ID	User Type	Status	
[Redacted]	[Redacted]	Basic	Active	View Access

Verify User Permission

4. Scroll down to the Data Submissions section and look for the Patient-Reported Outcomes Performance Measure and ensure that IQR (Upload/Edit) is under Program Access.

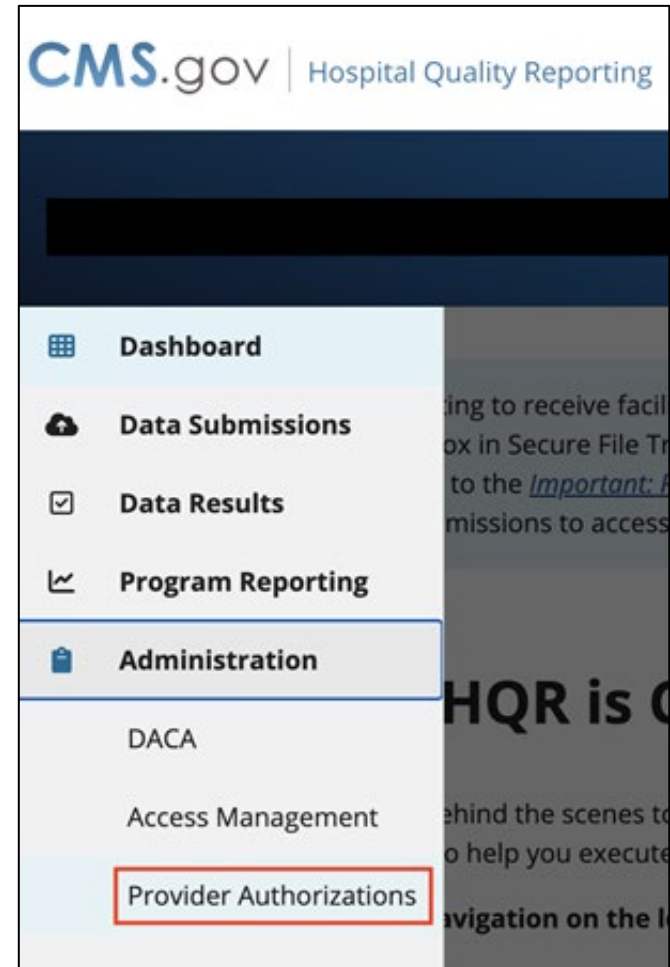
Permissions	
Data Submissions	Program Access

Patient-reported outcomes performance measure

IQR (View), IQR (Upload / Edit)

Verify User Permission

5. If you are a vendor or registry submitting on behalf of a provider, navigate to the Provider Authorizations page under Administration.



Verify Vendor Authorization

Select the provider in the Your Providers table to view the authorizations. In the Data Submissions section, look for the Patient-Reported Outcomes Performance Measure role and ensure that Inpatient Quality Reporting (IQR) has active Measure Access for THA/TKA.



The screenshot displays the 'Provider Authorizations' interface. At the top, there is a 'Your Providers' tab. Below the tab, there is a search bar and a 'Status' dropdown menu. The search bar contains the text 'Search' and a magnifying glass icon. The status dropdown is currently empty. Below the search and status controls, there is a light blue banner indicating '2377 Providers'. Underneath the banner is a table with the following columns: 'Name', 'Provider ID', and 'Status'. The 'Name' column has a checkbox and an upward-pointing arrow. The 'Status' column has a green dot and the text 'Active'. The first row of the table shows a checkbox, a redacted name, a redacted Provider ID, and the status 'Active'. A vertical ellipsis menu is visible at the end of the first row.

<input type="checkbox"/> Name ^	Provider ID	Status
<input type="checkbox"/> [Redacted Name]	[Redacted Provider ID]	● Active

Verify Vendor Authorization

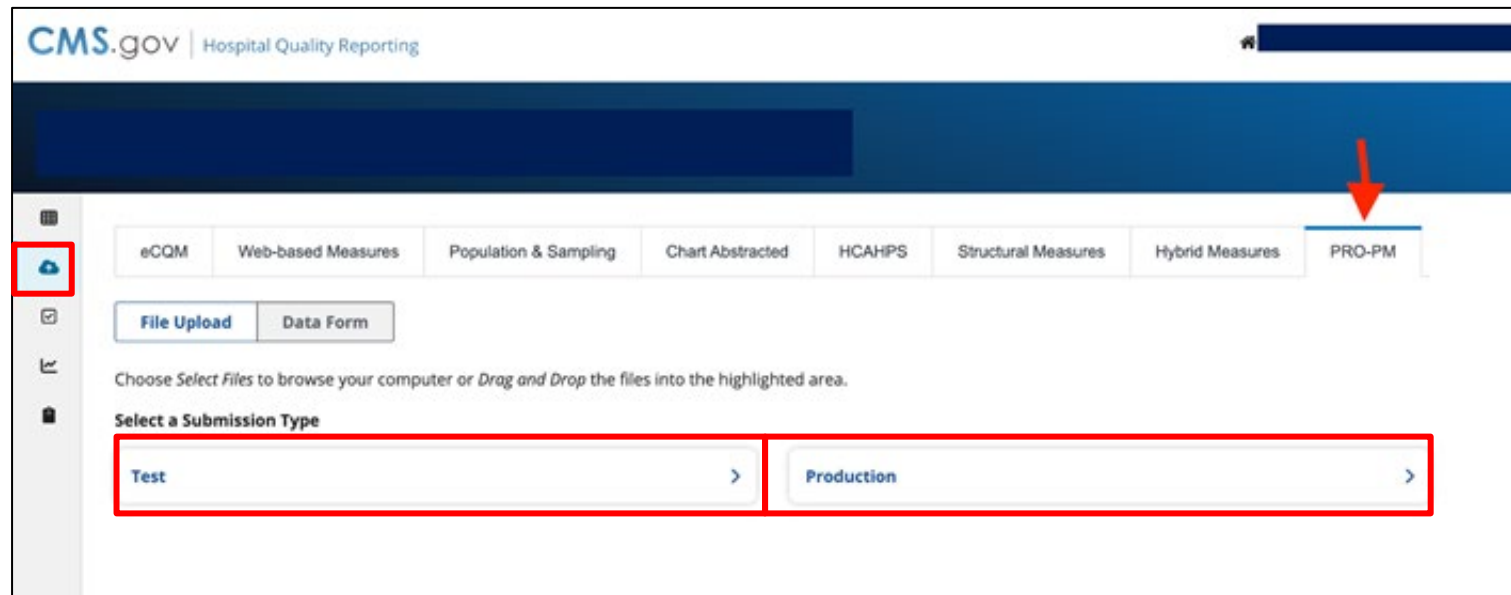
Permissions	
Data Submissions	
Chart Abstracted	Measure Access
Inpatient Quality Reporting (IQR)	None
Outpatient Quality Reporting (OQR)	None
DACA	Measure Access
Inpatient Quality Reporting (IQR)	None
eCQM	Measure Access
Inpatient Quality Reporting (IQR)	None
HCAHPS (File Upload)	Measure Access
Inpatient Quality Reporting (IQR)	None
Patient-reported outcomes performance measure	Measure Access
Inpatient Quality Reporting (IQR)	THA/TKA (Edit/Upload)

File Upload Submission Steps

1. Login to HQR via HARP at <https://hqr.cms.gov>
2. In the left-hand navigation panel, select Data Submissions

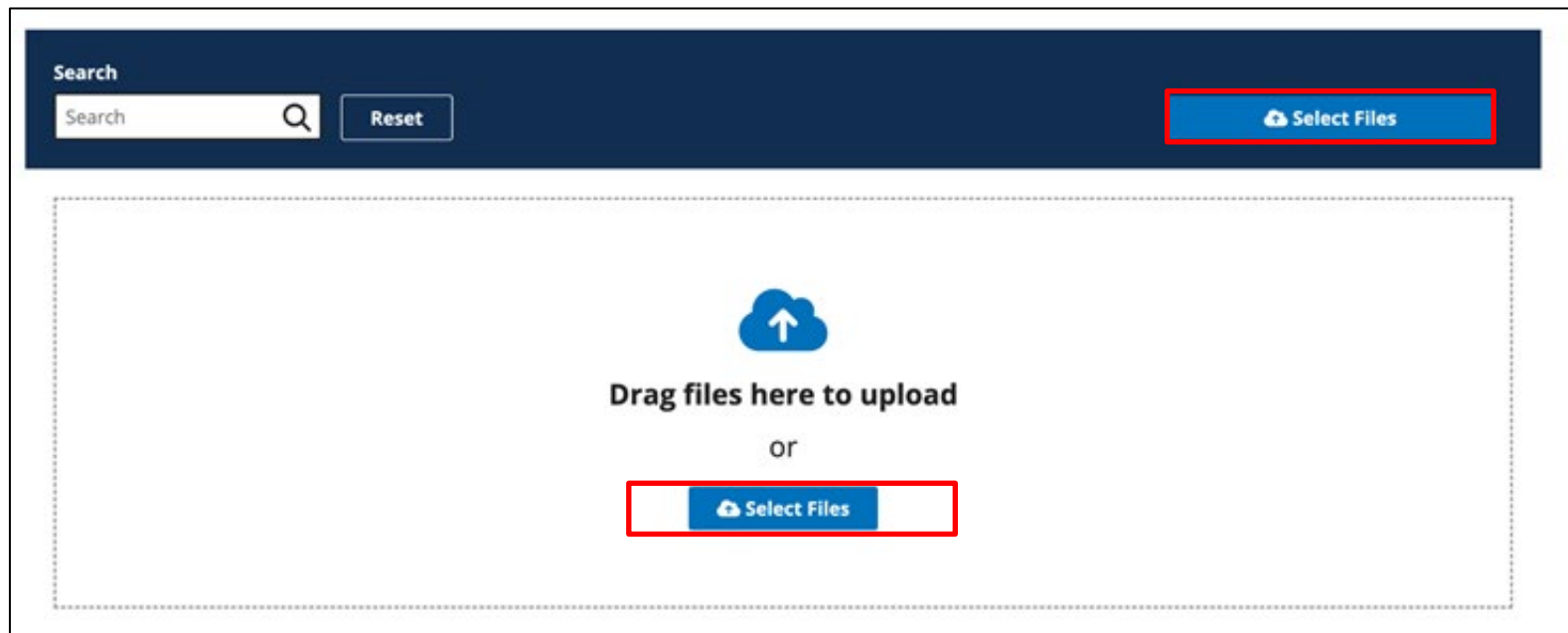
File Upload Submission Steps

3. If you have the Data Submissions Patient-Reported Outcomes Performance measure role, you will be able to see and select the PRO-PM tab.
4. Select Test or Production file upload.



File Upload Submission Steps

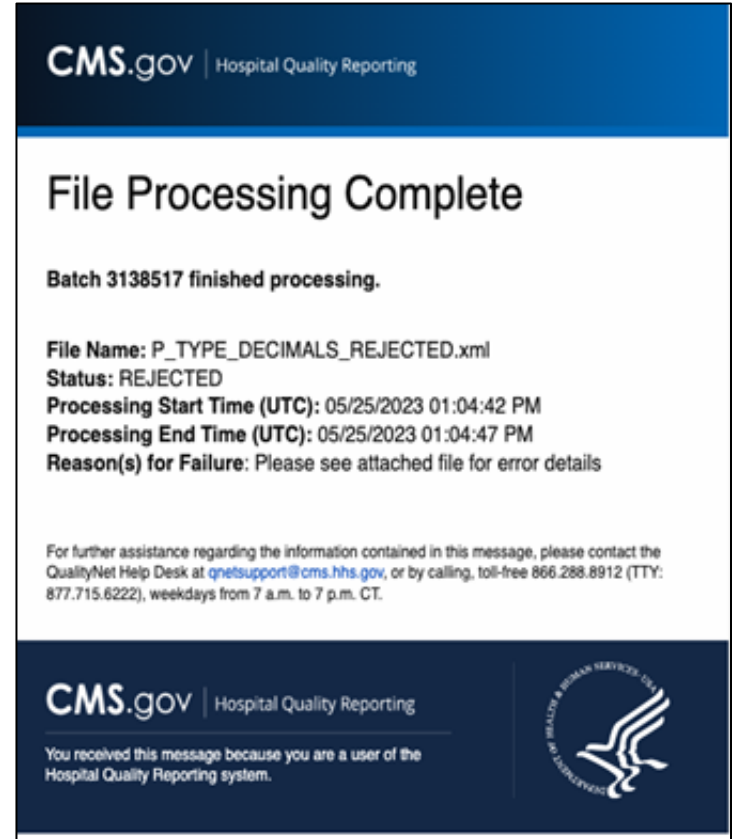
5. Drag and drop your ZIP, CSV, or XML file or click Select Files to browse your machine's files and select your ZIP, CSV, or XML file to upload to HQR.



File Upload Submission Steps

When file processing completes, you will receive an email.

The email will contain an attachment of any informational messages or errors regarding your files.



The screenshot shows an email notification from CMS.gov. The header includes the CMS.gov logo and 'Hospital Quality Reporting'. The main subject is 'File Processing Complete'. The body text states: 'Batch 3138517 finished processing.' It then lists details for a rejected file: 'File Name: P_TYPE_DECIMALS_REJECTED.xml', 'Status: REJECTED', 'Processing Start Time (UTC): 05/25/2023 01:04:42 PM', 'Processing End Time (UTC): 05/25/2023 01:04:47 PM', and 'Reason(s) for Failure: Please see attached file for error details'. A footer section provides contact information for the QualityNet Help Desk and includes the CMS.gov logo and 'Hospital Quality Reporting' text. At the bottom right, there is a logo for 'CENTERS FOR MEDICARE & MEDICAID SERVICES'.

CMS.gov | Hospital Quality Reporting

File Processing Complete


Batch 3138517 finished processing.

File Name: P_TYPE_DECIMALS_REJECTED.xml
Status: REJECTED
Processing Start Time (UTC): 05/25/2023 01:04:42 PM
Processing End Time (UTC): 05/25/2023 01:04:47 PM
Reason(s) for Failure: Please see attached file for error details

For further assistance regarding the information contained in this message, please contact the QualityNet Help Desk at qnetsupport@cms.hhs.gov, or by calling, toll-free 866.288.8912 (TTY: 877.715.6222), weekdays from 7 a.m. to 7 p.m. CT.

CMS.gov | Hospital Quality Reporting

You received this message because you are a user of the Hospital Quality Reporting system.



File Upload Submission Steps

You can also download a file accuracy report from the File Upload table. Click the Download link in the last column in the file table next to each file uploaded.

Choose *Select Files* to browse your computer or *Drag and Drop* the files into the highlighted area.

Search

Search

Batch File Name	Batch ID	File Size	Upload Date	Uploaded By	Status	Errors
MBI_CONTAI...	3138519	1189 bytes	5/26/2023	[REDACTED]	Accepted	Download
P_TYPE_DECI...	3138517	1191 bytes	5/25/2023	[REDACTED]	Rejected	Download

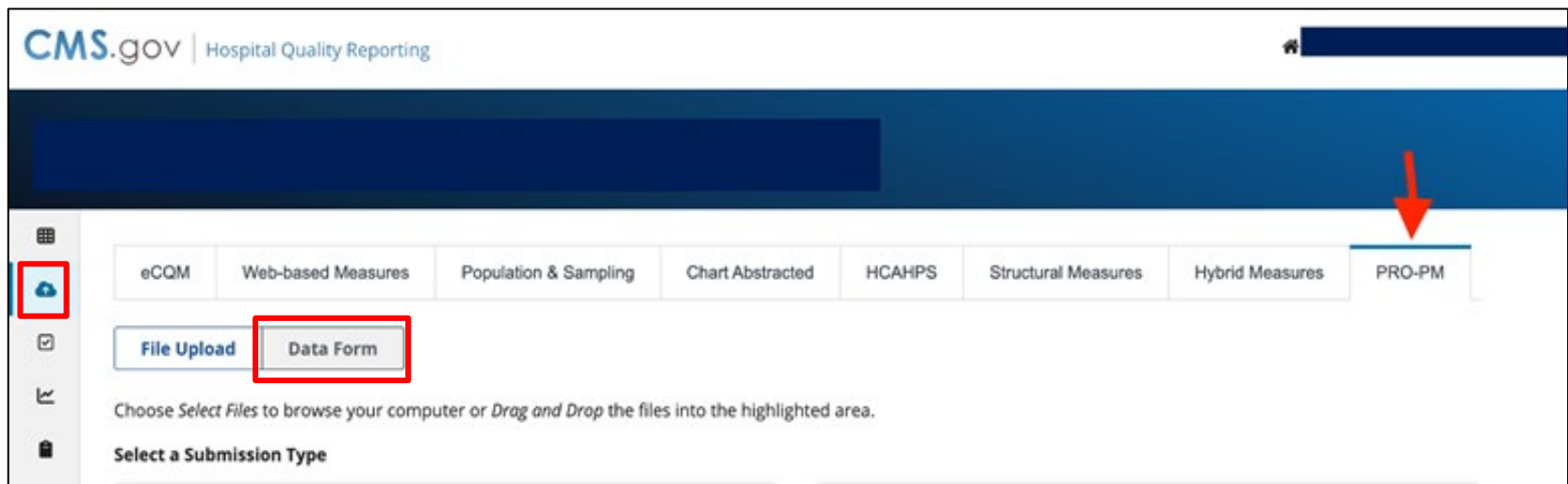
File Upload Submission Steps

If any critical error messages are on the report and you have a status other than Accepted, your file was rejected from HQR. You will need to correct your file(s) and submit again until you get a status of Accepted.

FileName	CCN	BatchID	UploadDate	UploadedBy	Status	ErrorDetails
THA_TKA_Pre_FY25.xml	XXXXXX	1111111	07/01/2023	TESTProvider	REJECTED	Missing Medicare Beneficiary Identifier (MBI) Enter 11-digit MBI.

Manual Data Form Submission Steps

1. In left hand navigation panel, select Data Submissions.
2. If you have the Data Submissions Patient-Reported Outcomes Performance measure role, you will be able to see and select the PRO-PM tab
3. Click Data Form.



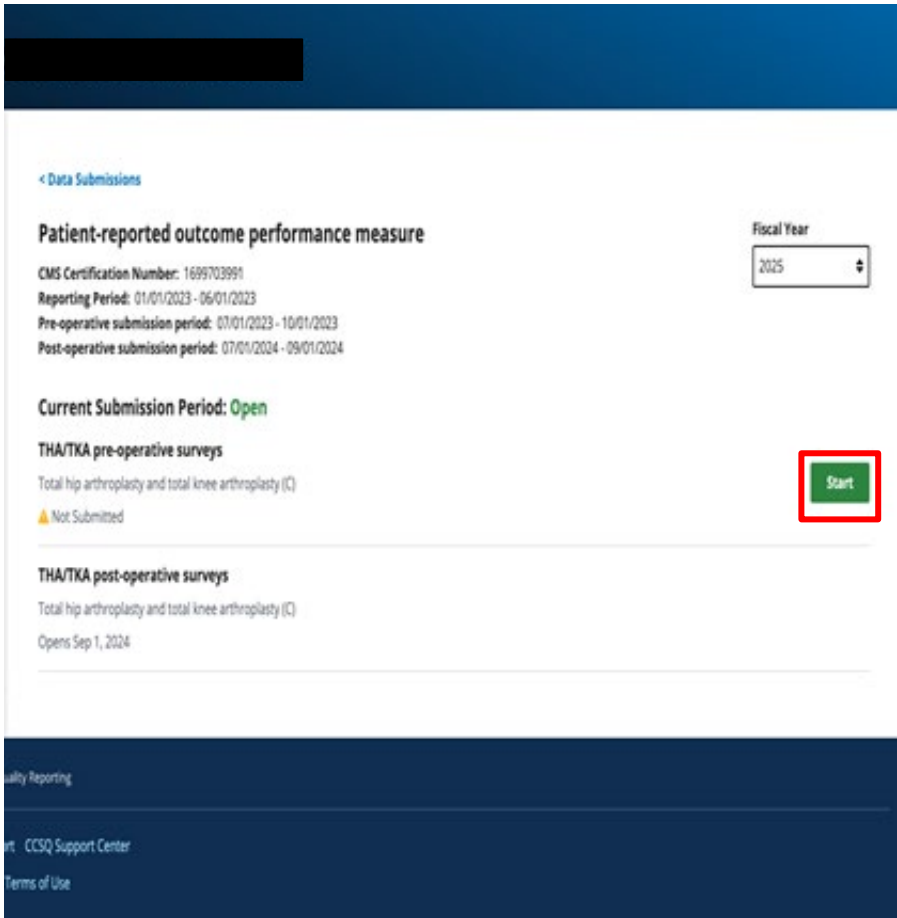
Manual Data Form Submission Steps

4. Click: THA/TKA Surveys Launch Data Form

The screenshot displays a web application interface for data submission. At the top, there is a horizontal menu with tabs for 'eQIM', 'Web-based Measures', 'Population & Sampling', 'Chart Abstracted', 'HCAHPS', 'Structural Measures', 'Hybrid Measures', and 'PRO-PM'. Below this menu, there are two buttons: 'File Upload' and 'Data Form'. A message states: 'You have selected Data Form submission. You can choose a different method at any time.' Underneath, the section is titled 'Select the Data Form'. There are two buttons in this section: 'THA/TKA surveys' and 'Launch Data Form' with a right-pointing arrow. The 'Launch Data Form' button is highlighted with a red rectangular border.

Manual Data Form Submission Steps

5. Click the Start button next to THA/TKA pre-operative surveys.



Manual Data Form Submission Steps

- 6. Complete one data form at a time per patient survey. Address any errors while filling out the form and click Submit.

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THA/TKA pre-operative patient survey

Patient Information

*** Medicare Identification (MBI)**
No dashes or spaces

Date of Birth
mm/dd/yyyy

Date of Eligible Procedure
mm/dd/yyyy

Date of Survey Collection
mm/dd/yyyy

Date of Admission to Anchor Hospitalization
mm/dd/yyyy

During the past 4 weeks, did you not do work or other activities as car emotional problems (such as feeling depressed or anxious)?

2 - Yes, a little of the time

How much of the time during the past 4 weeks have you felt calm and

5 - None of the time

How much of the time during the past 4 weeks have you had a lot of e

4 - Some of the time

How much of the time during the past 4 weeks have you felt downhea

3 - A good bit of the time

During the past 4 weeks, how much of the time has your physical heal with your social activities (like visiting with friends, relatives, etc.)?

2 - Most of the time

Submit **Cancel**

Manual Data Form Submission Steps

7. After submitting one survey, you will see the survey table. This table lists all the surveys submitted for this provider thus far. Each one can be viewed, edited, or deleted during the open submission period from this table.

The screenshot shows a web interface for managing THA/TKA pre-operative surveys. At the top, there is a navigation link '< PRO-PM index page' and a title 'THA/TKA pre-operative surveys'. Below the title is a search bar with the placeholder text 'Search' and a search icon. The search bar contains the text 'MBI, procedure type, procedure date, and missing responses'. To the right of the search bar is a 'Reset' button. Below the search bar is a blue bar with the text '12 patient surveys' and an 'Add patient survey' button. The main content is a table with the following columns: 'MBI', 'Procedure Type', 'Procedure Date', 'Missing Responses', and 'Updated'. The table contains 12 rows of data, each with a checkbox in the 'MBI' column and a vertical ellipsis in the 'Updated' column. The data is as follows:

MBI	Procedure Type	Procedure Date	Missing Responses	Updated
<input type="checkbox"/> 100000	1 - Left Hip Replacement	02/28/2022	Yes	09/01/22 12:00 AM
<input type="checkbox"/> 100000	2 - Right Hip Replacement	02/28/2022	No	09/01/22 12:00 AM
<input type="checkbox"/> 100002	3 - Left Knee Replacement	02/28/2022	Yes	09/01/22 12:00 AM
<input type="checkbox"/> 100004	4 - Right Knee Replacement	02/28/2022	No	09/01/22 12:00 AM
<input type="checkbox"/> 100000	1 - Left Hip Replacement	02/28/2022	Yes	09/01/22 12:00 AM
<input type="checkbox"/> 100000	2 - Right Hip Replacement	02/28/2022	No	09/01/22 12:00 AM
<input type="checkbox"/> 100002	3 - Left Knee Replacement	02/28/2022	Yes	09/01/22 12:00 AM
<input type="checkbox"/> 100004	4 - Right Knee Replacement	02/28/2022	No	09/01/22 12:00 AM
<input type="checkbox"/> 100000	1 - Left Hip Replacement	02/28/2022	Yes	09/01/22 12:00 AM
<input type="checkbox"/> 100000	2 - Right Hip Replacement	02/28/2022	No	09/01/22 12:00 AM

At the bottom of the table, there is a pagination control with the text '< Previous 1 2 Next >'. The number '1' is highlighted in a blue box, indicating the current page.

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Resources

Resources on QualityNet

The screenshot displays the QualityNet website interface. At the top, there is a search bar labeled "Search QualityNet" with a magnifying glass icon. Below the search bar, the breadcrumb path "Home / Hospitals - Inpatient /" is visible. The main heading is "Hospital Inpatient Measures". A navigation menu includes "Overview", "Measures", "Public Reporting", "Data Management", "Resources", and "Notifications". The section "Hospital Inpatient Measure Sets" lists several categories, each with a "Learn more" button:

- Electronic Clinical Quality Measures (eCQM)
- Healthcare-Associated Infections (HAI)
- Hospital Consumer Assessment (HCAHPS)
- Hybrid Measure
- Payment Standardization
- THA/TKA PRO-PM

A red arrow points to the "THA/TKA PRO-PM" entry, which is also circled in red.

PRO-PM Resources

PRO Data Collection Fact Sheets

Total Hip Arthroplasty/Total Knee Arthroplasty Patient-Reported Outcome-Based Performance Measure (THA/TKA PRO-PM) Voluntary Reporting: Key Information and Resources

Overview:

- The goal of the Hospital-level Total Hip Arthroplasty (THA) and Total Knee Arthroplasty (TKA) Patient-Reported Outcome-Based Performance Measure (PRO-PM) is to improve patient-reported outcome (PRO) data collection and reporting across all hospitals.
- The Hospital-level Total Hip Arthroplasty (THA) and Total Knee Arthroplasty (TKA) Patient-Reported Outcome-Based Performance Measure (PRO-PM) is a voluntary reporting measure that allows hospitals to report on their performance on this measure.
- Eligible hospitals are those that are currently reporting on the Hospital-level Total Hip Arthroplasty (THA) and Total Knee Arthroplasty (TKA) Patient-Reported Outcome-Based Performance Measure (PRO-PM) in 2023 and 2024.
- PRO-PM data collection for the first round of voluntary reporting for the measure will begin in Fall 2023 and continue through the end of the reporting period in Spring 2024.
- Voluntary reporting in 2023 is required for all hospitals that are currently reporting on the Hospital-level Total Hip Arthroplasty (THA) and Total Knee Arthroplasty (TKA) Patient-Reported Outcome-Based Performance Measure (PRO-PM) in 2023 and 2024.

Benefits of Participating in Voluntary Reporting

- Improve patient-reported outcome (PRO) data collection and reporting across all hospitals.
- Improve patient-reported outcome (PRO) data collection and reporting across all hospitals.
- Improve patient-reported outcome (PRO) data collection and reporting across all hospitals.

Who Do I Collect PRO Data on?

The Hospital-level Total Hip Arthroplasty (THA) and Total Knee Arthroplasty (TKA) Patient-Reported Outcome-Based Performance Measure (PRO-PM) is a voluntary reporting measure that allows hospitals to report on their performance on this measure. This fact sheet provides information on who to collect PRO data on for the measure.

Who to Collect PRO Data On:

- Patients who are scheduled for a total hip arthroplasty (THA) or total knee arthroplasty (TKA) procedure at the hospital.
- Patients who are currently inpatient at the hospital and have had a THA or TKA procedure.
- Patients who are currently inpatient at the hospital and have had a THA or TKA procedure within the last 90 days.
- Patients who are currently inpatient at the hospital and have had a THA or TKA procedure within the last 90 days and are currently inpatient at the hospital.

What is the PRO-PM Timeline?

The timeline below highlights important dates for data collection and submission associated with the Hospital-level Total Hip Arthroplasty (THA) and Total Knee Arthroplasty (TKA) Patient-Reported Outcome-Based Performance Measure (PRO-PM).

2023 Key Dates:

- September 1, 2023: Reporting begins for 2023.
- October 1, 2023: Reporting begins for 2024.
- December 31, 2023: Reporting ends for 2023.

2024 Key Dates:

- September 1, 2024: Reporting begins for 2024.
- October 1, 2024: Reporting begins for 2025.
- December 31, 2024: Reporting ends for 2024.

What Data Should I Collect?

The Hospital-level Total Hip Arthroplasty (THA) and Total Knee Arthroplasty (TKA) Patient-Reported Outcome-Based Performance Measure (PRO-PM) is a voluntary reporting measure that allows hospitals to report on their performance on this measure. This fact sheet provides information on what data to collect for the measure.

Data to Collect:

- Number of patients who are scheduled for a THA or TKA procedure.
- Number of patients who are currently inpatient at the hospital and have had a THA or TKA procedure.
- Number of patients who are currently inpatient at the hospital and have had a THA or TKA procedure within the last 90 days.
- Number of patients who are currently inpatient at the hospital and have had a THA or TKA procedure within the last 90 days and are currently inpatient at the hospital.

How and When Can Patient-Reported Outcome (PRO) Data be Collected?

The Hospital-level Total Hip Arthroplasty (THA) and Total Knee Arthroplasty (TKA) Patient-Reported Outcome-Based Performance Measure (PRO-PM) is a voluntary reporting measure that allows hospitals to report on their performance on this measure. This fact sheet provides information on how and when to collect PRO data for the measure.

How and When to Collect PRO Data:

- PRO data can be collected at any time during the patient's hospital stay.
- PRO data can be collected at the time of the patient's discharge.
- PRO data can be collected at the time of the patient's follow-up visit.

Methodology Report

The American people, patients, and providers. These data are used to develop the Hospital-level Total Hip Arthroplasty (THA) and Total Knee Arthroplasty (TKA) Patient-Reported Outcome-Based Performance Measure (PRO-PM).

Methodology Report:

This report describes the methodology used to develop the Hospital-level Total Hip Arthroplasty (THA) and Total Knee Arthroplasty (TKA) Patient-Reported Outcome-Based Performance Measure (PRO-PM). It includes information on the data sources, the data collection process, and the data analysis process.

Data Sources:

- Survey data from patients who are scheduled for a THA or TKA procedure.
- Survey data from patients who are currently inpatient at the hospital and have had a THA or TKA procedure.
- Survey data from patients who are currently inpatient at the hospital and have had a THA or TKA procedure within the last 90 days.
- Survey data from patients who are currently inpatient at the hospital and have had a THA or TKA procedure within the last 90 days and are currently inpatient at the hospital.

Measure Fact Sheet

Hospital-level Total Hip Arthroplasty/ Total Knee Arthroplasty Patient-Reported Outcome-Based Performance Measure (THA/TKA PRO-PM) Fact Sheet

The Hospital-level Total Hip Arthroplasty (THA) and Total Knee Arthroplasty (TKA) Patient-Reported Outcome-Based Performance Measure (PRO-PM) is a voluntary reporting measure that allows hospitals to report on their performance on this measure. This fact sheet provides information on the measure and how to report on it.

Measure Description:

The Hospital-level Total Hip Arthroplasty (THA) and Total Knee Arthroplasty (TKA) Patient-Reported Outcome-Based Performance Measure (PRO-PM) is a voluntary reporting measure that allows hospitals to report on their performance on this measure. It is based on patient-reported outcome (PRO) data.

Reporting Requirements:

- Reporting begins in September 2023 for 2023 data and in September 2024 for 2024 data.
- Reporting ends in December 31 of each year.
- Reporting is required for all hospitals that are currently reporting on the Hospital-level Total Hip Arthroplasty (THA) and Total Knee Arthroplasty (TKA) Patient-Reported Outcome-Based Performance Measure (PRO-PM) in 2023 and 2024.

Patient Brochure

Patient Guide: Total Hip Arthroplasty and Total Knee Arthroplasty Patient-Reported Outcome-Based Performance Measure (THA/TKA PRO-PM)

Learn about how you, as a patient, can help improve the quality of Total Hip and Total Knee Arthroplasty procedures at **(insert hospital name)** and across the nation.

PRO Data Submission Resources

XML file template

Sample XML of a preoperative PRO data submission

```

<SURVEY>
  <CCN>123456</CCN>
  <MBI>1AC0012EF34</MBI>
  <S_TYPE>1</S_TYPE>
  <P_TYPE>1</P_TYPE>
  <DOB>01011970</DOB>
  <PROC_DT>01012023</PROC_DT>
  <COLLECTION_DT>10032023</COLLECTION_DT>
  <ADMSN_DT>01012023</ADMSN_DT>
  <GEN_PROM>1</GEN_PROM>
  <COLLECTION_MD>0</COLLECTION_MD>
  <RESPONDER>0</RESPONDER>
  <HLTH_LITERACY>0</HLTH_LITERACY>
  <BMI>40</BMI>
  <HEIGHT>170</HEIGHT>
  <WEIGHT>100</WEIGHT>
  <NARCOTIC_USE>0</NARCOTIC_USE>
  <OTHER_JOINT_PAIN>0</OTHER_JOINT_PAIN>
  <BACK_PAIN>1</BACK_PAIN>
  <HOOSIR>
    <HOOSIRQ1_STAIRS>0</HOOSIRQ1_STAIRS>
    <HOOSIRQ2_WALKING>1</HOOSIRQ2_WALKING>
    <HOOSIRQ3_RISING>2</HOOSIRQ3_RISING>
    <HOOSIRQ4_BEND>3</HOOSIRQ4_BEND>
    <HOOSIRQ5_LYINGINBED>4</HOOSIRQ5_LYINGINBED>
    <HOOSIRQ6_SITTING>0</HOOSIRQ6_SITTING>
  </HOOSIR>
  <VR_12>
    <VR_12Q4a_ACCOMPLISH>1</VR_12Q4a_ACCOMPLISH>
    <VR_12Q4b_CAREFUL>2</VR_12Q4b_CAREFUL>
    <VR_12Q6a_CALM>3</VR_12Q6a_CALM>
    <VR_12Q6b_ENERGY>4</VR_12Q6b_ENERGY>
    <VR_12Q6c_DOWN>5</VR_12Q6c_DOWN>
    <VR_12Q7_SOCLACT>1</VR_12Q7_SOCLACT>
  </VR_12>
</SURVEY>
  
```

PRO Data Dictionary

Activity Name	Key Measure	Max. Num Length	Type	Range	Data Source	Req. by ICD-10	Req. by ICD-10-CM	Req. by ICD-10-PCS	Req. by ICD-10-PCS
...

CSV file template

CCN	MBI	S_Type	P_Type	DOB	PROC_DT	COLLECTION_DT	ADMSN_DT	RESPONDER	HLTH_LITERACY	BMI	HEIGHT	WEIGHT	NARCOTIC_OTHER	BACK_PAIN	HOOSIRQ1	HOOSIRQ2	HOOSIRQ3	HOOSIRQ4	HOOSIRQ5	HOOSIRQ6	VR_12	VR_12Q4a	VR_12Q4b	VR_12Q6a	VR_12Q6b	VR_12Q6c	VR_12Q7

Data Submission Resources

File Upload Edit Messages

Data Element	Condition	Message Status	Message Description (XML)	Message Description (CSV)
	File accepted		No errors found	No errors found
PROC_DT S_TYPE	Submission period closed	Critical	Procedure date is outside range for this submission period.	Row XXX: Procedure date is outside range for this submission period.
CCN	Required field not present	Critical	Missing Medicare Provider Number or CCN	Row XXX: Missing Medicare Provider Number or CCN
CCN	Field format incorrect	Critical	Medicare Provider Number or CCN cannot be more than ten digits	Row XXX: Medicare Provider Number or CCN cannot be more than ten digits
CCN	CCN is closed	Critical	Provider associated with this CCN is closed	Row XXX: Provider associated with this CCN is closed
CCN	Vendor not authorized	Critical	Vendor not authorized to submit for this CCN	Row XXX: Vendor not authorized to submit for this CCN
MBI	Required field not present	Critical	Missing Medicare Beneficiary Identifier (MBI) Enter 11-digit MBI	Row XXX: Missing Medicare Beneficiary Identifier (MBI) Enter 11-digit MBI
MBI	Field format incorrect	Critical	MBI must be letters and numbers only. Cannot contain dashes or spaces	Row XXX: MBI must be letters and numbers only. Cannot contain dashes or spaces
S_Type	Required field not present	Critical	Missing pre- or post-operative survey type. Enter 1 for pre-op survey, 2 for post-op survey.	Row XXX: Missing pre- or post-operative survey type. Enter 1 for pre-op survey, 2 for post-op survey.
S_Type	Field format incorrect	Critical	Survey data type format is invalid. Enter 1 for pre-op survey, 2 for post-op survey.	Row XXX: Survey data type format is invalid. Enter 1 for pre-op survey, 2 for post-op survey.

Questions and Answers

- Send your questions to the QualityNet Question and Answer Tool:
https://cmsqualitysupport.servicenowservices.com/qnet_qa?id=ask_a_question
- Select IQR-Inpatient Quality Reporting Program in the Program list. Then, select Hip/Knee PRO-PM in the Topic list.

Voluntary Reporting of the Hospital-Level THA/TKA
PRO-Based Performance Measure

Question and Answer Session

Continuing Education Approval

This program has been approved for [continuing education credit](#) for the following boards:

- **National credit**
 - Board of Registered Nursing (Provider #16578)
- **Florida-only credit**
 - Board of Clinical Social Work, Marriage & Family Therapy and Mental Health Counseling
 - Board of Registered Nursing
 - Board of Nursing Home Administrators
 - Board of Dietetics and Nutrition Practice Council
 - Board of Pharmacy

Note: To verify approval for any other state, license, or certification, please check with your licensing or certification board.

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