



CESQIP QCDR 2017 Non-MIPS Measure Detail

PRELIMINARY

Certain details (e.g., Measure numbers) being finalized by CMS

June 29, 2017

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Title:

POST-OPERATIVE HYPOCALCEMIA AFTER THYROIDECTOMY SURGERY

Number/Code:

Pending CMS assignment

Measure Developer:

CESQIP

Description:

The number or percent of patients with low calcium levels or negligible parathyroid hormone values reported at 30 days or more post-operatively.

Inverse Measure:

Yes

Disclaimer:

These performance measures are not standards and do not establish a standard of medical care.

NQS Domain:

Effective Clinical Care

Measure Type:

Outcome

Denominator:

All cases of thyroid surgery.

Denominator Exclusions:

None

Numerator:

Cases with low lab values and/or need for replacement designated by "Clinical Concern for Hypoparathyroidism = Yes" present at 30 day post op or any longitudinal period following. Concern for hypoparathyroidism based on excess calcium and/or vitamin D supplementation that is increased in intensity or duration over routine prophylactic supplementation; low calcium and/or PTH levels. Low defined as below lower end of normal value.

Numerator Exclusions:

N/A

Denominator Exceptions:

None

Title:

RELATED READMISSION FOR THYROID OR PARATHYROID RELATED PROBLEMS

Number/Code:

Pending CMS assignment

Measure Developer:

CESQIP

Description:

Track all surgery related readmissions within 30 days after index surgery where reason for readmission is any of the following:

1. Hypocalcemia
2. Hematoma
3. Seroma
4. Wound infection
5. Rash
6. Dehydration
7. Lymphatic or thoracic duct leak
8. Suspected recurrent laryngeal nerve neuropraxia or voice hoarseness
9. Dysphagia
10. Pain
11. Tracheal injury or perforation
12. Esophageal injury or perforation
13. Lower extremity complication (Phlebitis)
14. Deep venous thrombosis
15. Pulmonary embolism (including respiratory distress)
16. Pulmonary (asthma, URI, pneumonia)
17. Gastrointestinal (diarrhea, constipation, SBO)
18. Nausea and/or vomiting
19. Genitourinary (UTI, urinary retention)
20. Myocardial Event (Atrial fib, CHF, MI, CVA)
21. Psychiatric/Neurological (anxiety, syncope, dizziness)

Inverse Measure:

Yes

Disclaimer:

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NQS Domain:

Effective Clinical Care

Measure Type:

Outcome

Denominator:

All cases of thyroid OR parathyroid surgery.

Denominator Exclusions:

None

Numerator:

Patients where readmission within 30 days of index surgery is yes AND reason is a thyroid OR parathyroid related problem

Numerator Exclusions:

N/A

Denominator Exceptions:

None

Title:

PRE-OPERATIVE ULTRASOUND EXAM OF PATIENTS WITH THYROID CANCER

Number/Code:

Pending CMS assignment

Measure Developer:

CESQIP

Description:

Documentation of use and efficacy of complete pre-operative cervical ultrasound exam in cancer patients.

Inverse Measure:

No

Disclaimer:

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NQS Domain:

Effective Clinical Care

Measure Type:

Process

Denominator:

All patients with diagnosis of thyroid cancer seen preoperative.

Denominator Exclusions:

None

Numerator:

Patients with documented cervical ultrasound exams completed preoperative.

Numerator Exclusions:

N/A

Denominator Exceptions:

Patients whose clinical course demands expedited operative intervention.

Title:

PERSISTENT HYPERCALCEMIA

Number/Code:

Pending CMS assignment

Measure Developer:

CESQIP

Description:

Patients with persistent elevated calcium after surgery.

Inverse Measure:

Yes

Disclaimer:

These performance measures are not standards and do not establish a standard of medical care.

NQS Domain:

Effective Clinical Care

Measure Type:

Outcome

Denominator:

All cases of parathyroidectomy surgery for primary hyperparathyroidism as defined by preoperative disease characteristics diagnosis = Sporadic Primary Hyperparathyroidism.

Denominator Exclusions:

Hypercalcemia due to diagnoses other than hyperparathyroidism.

Numerator:

Patients with elevated calcium values (and unaltered pth values) designated by Clinical Concern for Persistent/Recurrent Hyperparathyroidism = Yes documented by 30 day post op.

Numerator Exclusions:

N/A

Denominator Exceptions:

None

Title:

RELATED READMISSION FOR ADRENAL RELATED PROBLEMS

Number/Code:

Pending CMS assignment

Measure Developer:

CESQIP

Description:

Track all surgery related readmissions within 30 days after index surgery where reason for readmission is any of the following:

1. Hematoma
2. Adrenal Insufficiency
3. Hypertension
4. Pain
5. Wound Infection
6. Pneumonia
7. Dehydration
8. Respiratory Distress

Inverse Measure:

Yes

Disclaimer:

These performance measures are not standards and do not establish a standard of medical care.

NQS Domain:

Effective Clinical Care

Measure Type:

Outcome

Denominator:

All cases of adrenalectomy surgery.

Denominator Exclusions:

None

Numerator:

Patients where readmission within 30 days of index surgery is yes AND reason is an adrenal related problem.

Numerator Exclusions:

N/A

Denominator Exceptions:

None

Title:

EVALUATION AND INTEGRATION OF ANTI-COAGULANT MEDICATION PRIOR TO SURGERY

Number/Code:

Pending CMS assignment

Measure Developer:

CESQIP

Description:

Patients with documented evaluation and integration of anti-coagulant medication prior to surgery.

Inverse Measure:

No

Disclaimer:

These performance measures are not standards and do not establish a standard of medical care.

NQS Domain:

Patient Safety

Measure Type:

Process

Denominator:

All cases in registry with documented surgery date.

Denominator Exclusions:

None

Numerator:

Patients with complete evaluation of anti-coagulant medications prior to surgery documented in patient history.

Numerator Exclusions:

N/A

Denominator Exceptions:

None