2019 QCDR MEASURE

CMS Measure ID IROMS16 National Quality Forum (NQF) number NA

Name or title of measure Failure to Progress (FTP): Proportion of patients failing to achieve a Minimal Clinically Important Difference (MCID) in improvement in pain score, measured via the Numeric Pain Rating Scale (NPRS), in rehabilitation patients with neck pain/injury

Measure Description The proportion of patients failing to achieve an MCID of two (2) points or more improvement in the NPRS change score for patients with neck pain/injury treated during the observation period will be reported. Additionally, a risk-adjusted MCID proportional difference will be determined by calculating the difference between the risk model predicted and observed MCID proportion will reported for each physical therapist or physical therapy group. The risk adjustment will be calculated using a logistic regression model using: baseline NDI score, baseline pain score, age, sex, payers, and symptom duration (time from surgery or injury to baseline physical therapy visit).

These measures will serve as a physical or occupational therapy performance measure at the eligible physical or occupational therapist or physical or occupational therapy group level.

National Quality Strategy (NQS) domain Effective Clinical Care

Measure type Patient Reported Outcome (PRO)

Meaningful Measure Area Functional Outcome

High priority status Yes

Denominator The total number of patients with neck pain/injury evaluated and treated by a physical therapist (PT) or Occupational Therapist (OT), or PT or OT Group.

Numerator The total number of patients with neck pain/injury to not achieve an MCID in their NPRS change score (MCID >2) from their initial visits to their final visits in PT/OT practice or PT/OT group during the observation window.

Denominator exclusions Exclude patients who did not complete 2 or more surveys. Patients will be excluded if they are non-English speaking and translation services are not available, if they are unable to read or have a mental impairment that compromises their understanding.

Denominator exceptions PT/OT can use their clinical judgement to exclude patients who are extremely medically complex, who in their experience are likely to make poor clinical progress.
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**Is this measure risk adjusted** Yes

**Number of performance rates required for measures** 6 (2\textsuperscript{nd} rate is reported)

1) Overall proportion of patients achieving an MCID in NPRS change score will be reported.

2) A risk-adjusted MCID proportional difference will be reported where the difference between the risk model predicted and observed MCID (measured via NPRS) proportion will be reported.

For operative (surgical) patients:

3) The proportion of patients not achieving an MCID in NPRS change score will be reported.

4) A risk-adjusted MCID proportional difference will be reported where the difference between the risk model predicted and observed MCID (measured via NPRS) proportion will be reported.

For non-operative (non-surgical) patients:

5) The proportion of patients not achieving an MCID in NPRS change score will be reported.

6) A risk-adjusted MCID proportional difference will be reported where the difference between the risk model predicted and observed MCID (measured via NPRS) proportion will be reported.

**Traditional vs. inverse measure** Inverse

**Proportional, continuous variable, outcome, and ratio measure indicator** Proportional measure