

Quality Measures Fact Sheet

**In-Person Evaluation Following Implantation of a Cardiovascular
Implantable Electronic Device (CIED) (NQF #2461)**
*National Quality Strategy Domain: Health and Well-Being
Clinical Preventive Services*

Quality Measures Set: Alternate

Data Source: Claims

BPCI Advanced and Quality

The Center for Medicare & Medicaid Innovation's (the CMS Innovation Center's) BPCI Advanced Model rewards health care providers for delivering services more efficiently, supports enhanced care coordination, and recognizes high quality care. Hospitals and clinicians should work collaboratively to achieve these goals, which have the potential to improve the BPCI Advanced Beneficiary experience and align to the CMS Quality Strategy goals of promoting effective communication and care coordination, highlighting best practices, and making care safer and more affordable. A goal of the BPCI Advanced Model is to promote seamless, patient-centered care throughout each Clinical Episode, regardless of who is responsible for a specific element of that care.

Background on In-Person Evaluation Following Implantation of a Cardiovascular Implantable Electronic Device

Clinical quality outcomes from cardiovascular implantable electronic devices (CIEDs) are varied and providers can improve them by employing key strategies. Early follow-up of patients who have undergone implantation of a CIED, such as a pacemaker, is important to assess for complications and to confirm appropriate device function.³⁸ Clinical guidance recommends that patients with pacemakers have an in-person follow-up appointment within two to 12 weeks following implantation and an annual in-person evaluation thereafter.

³⁸ National Quality Forum (2019). Measure information for NQF #2461. Retrieved from <http://www.qualityforum.org/QPS/2461>.

CMS Innovation Center Rationale for Including the In-Person Evaluation Following Implantation of a CIED Measure in BPCI Advanced

Implantation of a CIED is associated with substantial morbidity, mortality, and financial cost, and the rate of infections is increasing.³⁹ The CMS Innovation Center selected the In-Person Evaluation Following Implantation of a CIED measure for BPCI Advanced because it tracks performance for ensuring that the initial two- to 12-week post-implantation evaluation occurs, either by the implanting provider’s office or through coordination with the patient’s primary cardiologist.

Applicable Clinical Episodes

The In-Person Evaluation Following Implantation of a CIED measure is included in the Alternate Quality Measures Set and applies to the following inpatient Clinical Episode⁴⁰:

- Pacemaker Clinical Episode: Medicare Severity–Diagnosis-Related Groups (MS-DRGs) 242, 243, and 244

Measure Specifications

The In-Person Evaluation Following Implantation of a CIED measure selected for BPCI Advanced follows National Quality Forum (NQF) #2461 measure specifications. The CMS Innovation Center will calculate the measure at the Episode Initiator level, based on BPCI Advanced Beneficiaries treated during attributed Model Year Clinical Episode that ends during the calendar year. The term “BPCI Advanced Beneficiary” refers to a Medicare beneficiary eligible for the Model⁴¹ who receives care from a clinician in an acute care hospital (ACH) or physician group practice (PGP) that participates in BPCI Advanced, and who triggers a Clinical Episode as specified in the “Applicable Clinical Episodes” section above. An Episode Initiator must have a minimum of 10 attributed Clinical Episodes that fit the criteria for the denominator to receive a score.

Denominator

The denominator for the In-Person Evaluation Following Implantation of a CIED measure includes all Model Year Clinical Episodes from the “Applicable Clinical Episodes” section above that end during the calendar year, involving BPCI Advanced Beneficiaries aged 18 and older, that CMS attributes to a BPCI Advanced Episode Initiator at reconciliation. CMS attributes Clinical Episodes to Episode Initiators based upon their CMS Certification Number if they are an ACH, or by their Taxpayer Identification Number if

³⁹ Sohail, M. R., Henrikson, C. A., Braid-Forbes, J. M., Forbes, K. F., & Lerner, D. J. (2011). Mortality and cost associated with cardiovascular implantable electronic device infections. *Archives of Internal Medicine*, 171(20), 1821-1828.

⁴⁰ MS-DRGs are up to date as of Model Year 3 (2020) and will be updated for Model Year 4 as needed.

⁴¹ Medicare beneficiaries entitled to benefits under Part A and enrolled under Part B on whose behalf an Episode Initiator submits a claim to Medicare FFS for an Anchor Stay or Anchor Procedure. The term BPCI Advanced Beneficiary specifically excludes: (1) Medicare beneficiaries covered under United Mine Workers or managed care plans (e.g., Medicare Advantage, Health Care Prepayment Plans, or cost-based health maintenance organizations); (2) beneficiaries eligible for Medicare on the basis of an end-stage renal disease (ESRD) diagnosis; (3) Medicare beneficiaries for whom Medicare is not the primary payer; and (4) Medicare beneficiaries who die during the Anchor Stay or Anchor Procedure. A BPCI Advanced Beneficiary must meet this definition for the full duration of the Clinical Episode. (2021 BPCI Advanced Participation Agreement)

they are a PGP. The anchor end date of the Clinical Episode (the last date of the Anchor Stay or the date of the Anchor Procedure) will determine the calendar year to which the Clinical Episode belongs.

All MS-DRG triggers apply, but this measure only applies to patients who undergo CIED implantation.

The exclusions for this measure include patients:

- with Implantable Loop Recorders or Implantable Cardiovascular Monitors
- with pulse generator exchange only
- with prior CIED implantation

Numerator

The numerator includes all Clinical Episodes in the previously defined denominator where the BPCI Advanced Beneficiary has an in-person evaluation of their new CIED in two- to 12-weeks following implantation. For the purposes of this measure, an in-person interrogation device evaluation either with or without iterative adjustment, as clinically indicated, counts as an “in-person evaluation.” Any trained physician or other qualified health care professional can perform the in-person evaluation in a designated CIED follow-up clinic, medical institution, or physician office. Current Procedural Terminology (CPT) codes 93288 and 93289 indicate receipt of an in-person evaluation.

| CPT Code | Description |
|----------|--|
| 93288 | Interrogation device evaluation (in person) with analysis, review, and report by a physician or other qualified health care professional; includes connection, recording and disconnection per patient encounter; single, dual, or multiple lead pacemaker system. |
| 93289 | Interrogation device evaluation (in person) with analysis, review, and report by a physician or other qualified health care professional; includes connection, recording and disconnection per patient encounter; single, dual, or multiple lead transvenous implantable defibrillator system, including analysis of heart rhythm derived data elements. |

Billing departments can use these CPT codes with or without additional CPT codes which indicate the performance of programming device evaluations with iterative adjustments (93279, 93280, 93281, 93282, 93283 or 93284).

Measure Submission

The CMS Innovation Center will calculate this measure using Medicare Part B claims data and does not require any additional action or reporting by Model Participants, outside of claims submission utilizing appropriate coding. The CMS Innovation Center will calculate this measure for the calendar year period that aligns to the Model Year. Model Participants only need to make sure they are reporting the relevant codes listed above on their claims.

Revisions to the Published Specifications

BPCI Advanced calculates this version of the measure at the Episode Initiator level and limits the patient population to BPCI Advanced Beneficiaries, as opposed to all Medicare beneficiaries in the current NQF-endorsed specifications.

Composite Quality Score

The In-Person Evaluation Following CIED measure is one component of the BPCI Advanced Composite Quality Score (CQS) calculation. The CMS Innovation Center uses the CQS to adjust a portion of any Positive Total Reconciliation Amount and any Negative Total Reconciliation Amount. The CQS adjustment will not adjust the Positive Total Reconciliation Amount down by more than 10 percent, nor will it adjust the Negative Total Reconciliation Amount up by more than 10 percent. More information is available at the BPCI Advanced website provided below.

Other Resources

| Organization/Resource | Website Address |
|--------------------------|---|
| NQF #2461 specifications | http://www.qualityforum.org/QPS/2461 |
| BPCI Advanced | https://innovation.cms.gov/initiatives/bpci-advanced |