

eMeasure Title	Disease Activity Measurement for Patients with Rheumatoid Arthritis (RA)		
eMeasure Identifier (Measure Authoring Tool)	4491	eMeasure Version number	2.0
NQF Number	NA	GUID	f65efe7c-3043-4628-a726-d80b35f2c770
Measurement Period	January 1, 20XX through December 31, 20XX		
Measure Steward	American College of Rheumatology		
Measure Developer	American College of Rheumatology		
Endorsed By	None		
Description	Percentage of patients 18 years and older with a diagnosis of rheumatoid arthritis whose disease activity is assessed using a standardized measurement tool at 50% or more encounters for RA with the same clinician during the measurement period.		
Copyright	None		
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Measure Scoring	Proportion		
Measure Type	Process		
Stratification	1		

Risk Adjustment	None
Rate Aggregation	None
Rationale	<p>Target low disease activity or remission. The panel recommends targeting either low disease activity (Table 3) or remission (Table 2) in all patients with early RA (Figure 1; level of evidence C) and established RA (Figure 2; level of evidence C) receiving any DMARD or biologic agent. (2012 guideline, page 631)</p> <p>The goal for each RA patient should be low disease activity or remission. In ideal circumstances, RA remission should be the target of therapy, but in others, low disease activity may be an acceptable target. But for other patients, the decision about what the target should be for each patient is appropriately left to the clinician caring for each RA patient, in the context of patient preferences, comorbidities, and other individual considerations. Therefore, this article does not recommend a specific target for all patients.</p>
Clinical Recommendation Statement	<p>In 2008, the American Medical Association's Physician Consortium for Performance Improvement (AMA PCPI), the National Committee for Quality Assurance (NCQA) and the American College of Rheumatology (ACR) collaborated to develop a rheumatoid arthritis (RA) quality measure set for the Physical Quality Reporting System (PQRS), including a measure related to disease activity assessment. The measure assessed whether disease activity was assessed at least once per year and categorized as remission, low, moderate or high. The ACR subsequently developed a national registry platform, the Rheumatology Clinical Registry (RCR), to aid rheumatologists in reporting this PQRS measure. In 2012, performance on the measure was 54% among participating rheumatologists. Feedback from the rheumatology community and experts suggested potential ways to improve the measure (Desai S and Yazdany J. Arthritis Rheum. 2011 Dec;63(12):3649-60). The current e-measure builds on the experience of the last 6 years to add specificity and greater validity to disease activity assessment in RA (only validated and feasible measures are listed as acceptable, and the requirement for performing assessments has been increased to $\geq 50\%$ or more of all RA encounters). These changes more closely align with ACR guidelines for measuring disease activity and "treating to target" in RA (Singh J, Arthritis Care Res. 2012 May;64(5):625-39) and Anderson J, Arthritis Care Res (Hoboken). 2012 May;64(5):640-7).</p>
Improvement Notation	Higher score indicates better quality.
Reference	Recommendation 1A in 2012 ACR RA guideline (Singh et al. AC&R, 2012)

Definition	<p>For purposes of this measure, “Rheumatoid Arthritis Disease Activity Measurement Tools” include the following instruments:</p> <ul style="list-style-type: none"> -Clinical Disease Activity Index (CDAI) -Disease Activity Score with 28-joint counts (erythrocyte sedimentation rate or C-reactive protein) (DAS-28) -Patient Activity Scale (PAS) -Patient Activity Score-II (PAS-II) -Routine Assessment of Patient Index Data with 3 measures (RAPID 3) -Simplified Disease Activity Index (SDAI) <p>A result of any kind qualifies for meeting numerator performance.</p>
Guidance	<p>One of the requirements for a patient to be included in the Initial Patient Population is that the patient has a minimum of 2 RA encounters with the same provider, all occurring during the measurement period.</p> <p>If the patient qualifies for the Initial Patient Population, then every encounter for RA should be evaluated to determine whether disease activity using a standardized measurement tool was assessed. The logic represented in this measure will determine if the patient had a disease activity assessment performed at each visit during the measurement period (ie, Occurrence A of Encounter, Performed). The measure requires all of the eligible encounters to be analyzed in order to determine if the patient’s disease activity was assessed at $\geq 50\%$ of encounters for RA. Once it has been determined if the patient meets $\geq 50\%$ threshold, all patient data across a single physician should be aggregated to determine the performance rate.</p>
Transmission Format	TBD
Initial Population	Patients 18 years and older with a diagnosis of rheumatoid arthritis seen for two or more face-to-face encounters for RA with the same clinician during the measurement period.
Denominator	Equals Initial Population
Denominator Exclusions	None
Numerator	Percentage of patients with $\geq 50\%$ of total number of outpatient RA encounters in the measurement year with assessment of disease activity using a standardized measure.
Numerator Exclusions	None
Denominator Exceptions	None
Supplemental Data Elements	For every patient evaluated by this measure also identify payer, race, ethnicity and sex.

**DB Implementation
Guidance**

The measure requires all of the eligible encounters to be analyzed in order to determine if the patient's disease activity was assessed at $\geq 50\%$ of encounters for RA. Once it has been determined if the patient meets $\geq 50\%$ threshold, all patient data across a single physician should be aggregated to determine the performance rate.

To meet the Denominator criteria, a patient must have a diagnosis of Rheumatoid arthritis (RA) active on encounter that is there is no need of documentation of RA on encounter. RA should be \leq encounter.