

MACRA MEASURE DEFINITIONS

AQI 48 Patient-Reported Experience with Anesthesia

Percentage of patients aged 18 and older, who were surveyed on their patient experience and satisfaction with anesthesia care and who reported a positive experience. Survey needs to be sent within 30 days of anesthetic. Performance rate will be a function of percentage of surveys sent plus positive response rate.

Send Graphium assessment/satisfaction survey:

Graphium will email and/or text a single survey covering anesthesia satisfaction.

Yes - Graphium is approved to send and patient agrees to receive electronic satisfaction and post-discharge follow-up survey.

Pt Declines - Patients who are non-verbal, unable to be surveyed due to a language/medical reason, or *who decline to be surveyed*.

No - Graphium is not authorized to send a satisfaction and post-discharge follow-up survey. To be used when either surveys are not desired OR another survey service used.

QID 463 Prevention of Post-Operative Vomiting (POV) – Combination Therapy (Pediatrics)

Percentage of patients aged 3 through 17 years, who undergo a procedure under general anesthesia in which an inhalational anesthetic is used for maintenance AND who have two or more risk factors for post-operative vomiting (POV), who receive combination therapy consisting of at least two prophylactic pharmacologic anti-emetic agents of different classes preoperatively and/or intraoperatively.

- ≥ 2 risk factors for PONV:
- Surgery ≥ 30 minutes
 - Age ≥ 3 years
 - Strabismus surgery
 - Family History of POV/PONV
 - Long-acting opioids
 - History of POV or Post-Operative Nausea and Vomiting (PONV)/motion sickness in patient
 - Post-pubertal female
 - Adenotonsillectomy
 - Otoplasty
 - Anticholinesterases

QID 404 Anesthesiology Smoking Abstinence

The percentage of current smokers who abstain from cigarettes prior to anesthesia on the day of elective surgery or procedure.

Patient is a smoker: Patient identifies as a smoker (e.g. cigarette, cigar, pipe, e-cigarette or marijuana)

Received cessation guidance: Received instruction from the anesthesiologist or proxy prior to the day of surgery to abstain from smoking on the day of surgery.

Smoked on day of surgery: Patients who did NOT abstain from smoking prior to anesthesia on the day of surgery or procedure.

AQI 71 Ambulatory Glucose Management

Percentage of diabetic patients, aged 18 years and older, who receive an office-based or ambulatory surgery whose blood glucose level is appropriately managed throughout the perioperative period.

AQI71a: Percentage of patients, aged 18 years and older, with a current diagnosis of diabetes mellitus receiving anesthesia services for office-based or ambulatory surgery whose blood glucose level is tested prior to the start of anesthesia.

AQI71b: Percentage of patients, aged 18 years and older, with a current diagnosis of diabetes mellitus receiving anesthesia services for office-based or ambulatory surgery who experienced a blood glucose level ≥180 mg/dL (10.0 mmol/L) who received insulin prior to anesthesia end time.

AQI71c: Percentage of patients, aged 18 years and older, with a current diagnosis of diabetes mellitus receiving anesthesia services for office-based or ambulatory surgery who received insulin perioperatively and who received a follow-up blood glucose level check following the administration of insulin and prior to discharge.

AQI71d: Percentage of patients, aged 18 years and older, with a current diagnosis of diabetes mellitus receiving anesthesia services for office-based or ambulatory surgery who experienced a blood glucose level ≥180 mg/dL (10.0 mmol/L) who received education on managing their glucose in the postoperative period prior to discharge.

AQI 67 Consultation for Frail Patients

Percentage of patients aged 70 years or older, who undergo an inpatient procedure requiring anesthesia services and have a positive frailty screening result who receive a multidisciplinary consult or care during the hospital encounter.

Frailty can be screened using an established tool including but not limited to following tools:

- Fried Frailty Phenotype Criteria
- The Vulnerable Elders Survey
- Modified Frailty Index
- Initial Clinical Impression ("First Minute Impression")

ABG 42 Known or Suspected Difficult Airway Mitigation Strategies

Percentage of patients with a known or suspected difficult airway who undergo a planned GETA that have both a 2nd provider present AND have difficult airway equipment in the room prior to the induction.

Provider: Any OR staff (eg. physician, CRNA, RN, resident, or anesthesia tech) who is solely available to assist with the airway.

AQI72: Perioperative Anemia Management

Percentage of patients, aged 18 years and older, undergoing **elective total joint arthroplasty** who were screened for anemia preoperatively AND, if positive, have documentation that one or more of the following management strategies were used prior to PACU discharge.

QID 477 Multimodal Pain Management

Percentage of patients, regardless of age, undergoing selected elective surgical procedures that were managed with multimodal pain medicine - defined as the use of ≥2 drugs and/or interventions, NOT including systemic opioids, that act by different mechanisms for providing analgesia. Opioids may be administered for pain relief when indicated but will not count towards this measure.

AQI65: Avoidance of Cerebral Hyperthermia for Procedures Involving CPB

Percentage of patients, aged 18 years and older, undergoing a procedure using cardiopulmonary bypass who did not have a documented intraoperative pulmonary artery, oropharyngeal, or nasopharyngeal temperature ≥37.0 degrees Celsius during the period of cardiopulmonary bypass.

ABG 44 Low Flow Inhalational General Anesthesia

Percentage of patients aged 18 years or older, who undergo an elective procedure lasting 30 minutes or longer requiring inhalational general anesthesia who during the maintenance phase of the anesthetic have a total fresh gas flow less than or equal to 1 L/min (less than or equal to 2 L/min for Sevoflurane).

AQI 18 Coronary Artery Bypass Graft (CABG): Prolonged Intubation – Inverse Measure

Percentage of patients aged 18 years and older undergoing isolated CABG surgery who require postoperative intubation > 24 hours.

QID 430 Prevention of Post-Operative Nausea and Vomiting (PONV)

Percentage of patients, aged 18 years and older, who undergo a procedure under an inhalational general anesthetic, AND who have three or more risk factors for post-operative nausea and vomiting (PONV), who receive combination therapy consisting of **at least two prophylactic pharmacologic antiemetic agents** of different classes preoperatively and/or intraoperatively.

- ≥ 3 risk factors for PONV:
- Female gender
 - History of motion sickness
 - History of PONV
 - Non-smoker
 - Intended administration of opioids for post-op analgesia

Combo therapy used:

- NK-1 Receptor Antagonists
- Phenothiazines
- Butyrophenones
- Glucocorticoids
- Phenylethylamines
- Antihistamines
- 5-Hydroxytryptamine (5-HT3) Receptor Antagonists
- Anticholinergics

QID 424 Perioperative Temperature Management

Percentage of patients, regardless of age, who undergo surgical or therapeutic procedures under general or neuraxial anesthesia of 60 minutes duration or longer for whom at least one body temperature greater than or equal to 35.5 degrees Celsius (or 95.9 degrees Fahrenheit) was achieved within the 30 minutes immediately before or the 15 minutes immediately after anesthesia end time.