



SDPS MEMORANDUM

MEMO NBR: 12-257-OD

DATE: August 13, 2012

SUBJECT: Removal of Hospital Outpatient Quality Reporting Measure (OQR) OP-16: Troponin results for Emergency Department acute myocardial infarction (AMI) patients or chest pain patients (with *Probable Cardiac Chest Pain*) received within 60 minutes of arrival.

TO: Analytic POC Notify, Improve Individual Patient Care Notify, CEO POC List

FROM: Shaheen Halim
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The Centers for Medicare & Medicaid Services (CMS) announces the immediate removal of the following measure from the Hospital Outpatient Quality Reporting (OQR) measure set:

OP-16: Troponin results for Emergency Department acute myocardial infarction (AMI) patients or chest pain patients (with *Probable Cardiac Chest Pain*) received within 60 minutes of arrival.

This measure was adopted for the CY 2013 payment determination with data collection beginning with January 1, 2012 encounters.

We are removing OP-16 from the Hospital Outpatient Quality Reporting measure set based on patient safety concerns. On July 11, 2012 the Food and Drug Administration (FDA) issued a Class I recall on several point of care (POC) testing kits, including those that provide Troponin results. The Class I recall was due to false results. FDA defines a Class I recall as: “a situation in which there is a reasonable probability that the use of or exposure to a violative product will cause serious adverse health consequences or death.” Please find the FDA safety alert at the following web link:

<http://www.fda.gov/Safety/MedWatch/SafetyInformation/SafetyAlertsforHumanMedicalProducts/ucm311405.htm>

While OP-16 does not specify which type of laboratory equipment should be used to obtain Troponin results, hospitals may be using these POC tests in order to expedite results. In view of

the recent Class I recall, CMS is concerned that continued collection of the measure may potentially impact patient safety because of the high probability of false results associated with such equipment.

CMS WILL NOT publically report, validate or use in CY 2013 payment determination any data collected on this measure.

Please cease chart abstraction for OP-16 immediately. Please note that although we have requested immediate discontinuation of chart abstraction for OP-16, CMS is unable to immediately cease data collection in the system. In order to overcome CMS's system limitation, hospitals can choose to submit a value that is not meaningful for this measure. Please do not submit a blank value for OP-16, as a lack of a populated value for OP-16 will cause a case to be rejected.

If a case is rejected due to lack of data, this could impact a hospital's ability to meet Hospital OQR requirements for receiving a full outpatient hospital annual payment update. Some vendors may have the capability to provide a default value for OP-16. Hospitals are encouraged to work with their vendors to determine options to populate the OP-16 data field at submission.

Please notify your internal point of contact if you have any questions. He or she may contact the QualityNet Help Desk if additional information and/or assistance are needed.