

Introduction

The Centers for Medicare & Medicaid Services (CMS) and Acumen, LLC are collecting feedback from stakeholders on MACRA Episode-Based Cost Measures field testing from October 16, 2017 - November 15, 2017.

This survey is divided into four sections:

- **Section 1: General Questions about the MACRA Episode-Based Cost Measures Field Test Reports**
- **Section 2: Detailed Questions about the MACRA Episode-Based Cost Measures Field Test Reports**
- **Section 3: Feedback on the Supplemental Documentation**
- **Section 4: Feedback on the Measure Specifications for the Eight Measures**

Please feel free to answer as many or as few questions as you prefer. All questions in this survey are optional. Any comments received through this survey will be considered for potential measure refinement and future measure development in this project.

We estimate that it may take 20-30 minutes to complete this survey. Depending on the level of detail of your responses, or if you choose to provide feedback for more than one cost measure, please be aware that the completion time may be shorter or longer.

If you would prefer not to provide your feedback through this survey and would rather submit a formal comment letter, you may skip to the end of the survey and submit a PDF or word document version of your comment. To do so, please complete your contact information and select "Yes" for the final question below. Please note that if you choose to complete the survey, there will still be an opportunity to submit a formal comment letter at the end.

At any point during the survey, you may also choose to exit the survey by clicking "Exit Survey" on the top right of every page. This button allows respondents to exit the survey without saving the responses entered on the current page. If you would like to exit the survey but would like your responses on the current page to be recorded, please click "Next" at the bottom of your current page, and click "Exit Survey" on the following page.

This feedback form closes on November 15, 2017 at 11:59 PM ET.

We are aiming to provide a high-level summary for each measure outlining the key takeaways of the comments to inform potential refinements that will be considered by the Clinical Subcommittee that worked on each measure. A comprehensive field testing summary report will be available in early 2018 for download on the MACRA Page.

Background

Acumen, LLC is a measure development contractor working with CMS to develop episode-based cost measures as mandated by the Medicare Access and Children's Health Insurance Program Reauthorization Act of 2015 (MACRA).

We have developed preliminary specifications for eight episode-based cost measures for potential use in the cost performance category of the Merit-based Incentive Payment System (MIPS). The measures have been developed with the extensive input from stakeholders through Clinical Subcommittees, a Technical Expert Panel, a Person and Family Committee, and public comments.

In particular, seven Clinical Subcommittees, composed of a total of 147 members affiliated with 98 professional societies, have provided detailed clinical input on preliminary measure specifications during in-person and webinar meetings convened between May - August 2017.

The episode-based cost measures which will be reported to group practices and solo practitioners who meet a 10-episode case minimum for at least one measure during field testing are the following:

1. Elective Outpatient Percutaneous Coronary Intervention (PCI)
2. Knee Arthroplasty
3. Revascularization for Lower Extremity Chronic Critical Limb Ischemia
4. Routine Cataract Removal with Intraocular Lens (IOL) Implantation
5. Screening/Surveillance Colonoscopy
6. Intracranial Hemorrhage or Cerebral Infarction
7. Simple Pneumonia with Hospitalization
8. ST-Elevation Myocardial Infarction (STEMI) with PCI

The 2016 MACRA Episode-Based Cost Measure Field Test Reports are available through the [CMS Enterprise Portal](#).

While not all clinicians will receive a confidential field test report given the clinical scope and attribution method for the 8 episode-based cost measures, we encourage all stakeholders to review and comment on the materials that will be publicly available, such as the mock report and supplemental documentation, including a fact sheet, measure specifications, detailed methodology, and FAQ on the MACRA Page.

The materials can be accessed directly through the hyperlinks below:

- [Fact Sheet](#)
- [FAQ Document](#)
- [Mock Report](#)
- [Zip file](#) containing the full set of materials, including the draft measure specifications documents

1. Contact Information

Name

Credentials

Title

Email Address

2. Are you completing this form as an individual or as a representative for an organization?

- Individual
- Representative
- Other (please specify)

3. If you are a representative for an organization, please provide the name of the organization. For convenience, we have provided a dropdown of clinician professional associations if one is applicable to you. If you do not represent a clinician professional association on the list, please type the name of the organization you represent in the "Other" field.

Other (please specify)

4. How did you hear about this feedback opportunity for field testing?

Other (please specify)

5. Are you clinician or a part of a clinician group practice that received a confidential cost measure field test report through the CMS Enterprise Portal? Please note that you do not need need to select "yes" in order to complete this survey; all stakeholders are invited to provide feedback through this survey on the field testing materials posted on the [MACRA page](#).

- Yes
- No

6. Would you like to submit your feedback in a PDF or Word document instead of completing the questions in this survey? If so, please select "Yes" to skip to the end of the survey where you will be able to upload your attachment. If you select "No," you will be directed to the beginning of the survey. You will still have the option to upload an attachment at the end of the survey.

- Yes, I would like to skip to the end of survey to upload a comment as a PDF or Word document.
- No, I would like to complete the survey questions. I understand that I will still have the opportunity to upload a comment as a PDF or Word document at the end of the survey if I am interested in doing so.

Section 1 of 4: General Questions about the Episode-Based Cost Measures Field Test Report

Section 1 of 4: General Questions about the Episode-Based Cost Measures Field Test Report

This section contains questions about the presentation and content of the field test report. If you did not receive a confidential report through the [CMS Enterprise Portal](#), you may view a mock report on the [MACRA Page](#).

For convenience, the materials can be accessed directly through the hyperlinks below:

- [Fact Sheet](#)
- [FAQ Document](#)
- [Mock Report](#)
- [Zip file](#) containing the full set of materials, including the draft measure specifications documents

If you would like to skip to the next section on detailed questions about the cost measure reports, where you will have the opportunity to provide feedback on specific tabs of the report, please scroll down and click 'Next.'

If you would like to exit the survey, please click "Exit Survey" at the top of the page. Please note that clicking this will close the survey without saving the responses entered on this current page.

7. If you received a confidential field test report from the CMS Enterprise Portal, how easy was it to access and download your report from the portal? If you did not receive a confidential field test report, please select "N/A."

1	2	3	4	5	
Very difficult	Somewhat difficult	Moderate	Somewhat easy	Very easy	N/A
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

8. If you are an individual clinician or a member of a clinician group who received a confidential field test report from the CMS Enterprise Portal, how did you obtain a copy of your report?

- I am a clinician and I downloaded the report myself.
- I am a representative of a clinician or clinician group and I downloaded the report myself.
- Someone who represents me or my clinician group downloaded the report.
- Other (please specify)

9. To what extent do you agree or disagree with the following statements regarding the confidential field test report or the mock report available on the [MACRA page](#):

	1	2	3	4	5
	Strongly disagree	Somewhat disagree	Neither agree nor disagree	Somewhat agree	Strongly agree
The information in the cost measure report is easy to understand.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I understand what the cost measure score means.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The cost measure field test report provides actionable information.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

10. Please share any comments about the overall presentation and content of the report, and any suggestions on how we can improve its readability and usefulness in helping you to understand clinicians' performance on the cost measure(s).

Section 2 of 4: Detailed Questions about the Episode-Based Cost Measures Field Test Report

Section 2 of 4: Detailed Questions about the Episode-Based Cost Measures Field Test Report

We are interested in your detailed feedback on each section of the episode-based cost measure field test report.

For convenience, the materials can be accessed directly through the hyperlinks below:

- [Fact Sheet](#)
- [FAQ Document](#)
- [Mock Report](#)
- [Zip file](#) containing the full set of materials, including the draft measure specifications documents

If you would like to skip to the next section on questions regarding the supplemental documentation, please scroll down and click 'Next.'

If you would like to exit the survey, please click "Exit Survey" at the top of the page. Please note that clicking this will close the survey without saving the responses entered on this current page.

11. Which tabs in the workbook did you look at? Please select all that apply.

- Episode-Based Cost Measure Report ("Overview" tab)
- All Measures: High-Level Summary Results ("Summary" tab)
- Measure Summary Results for Each Cost Measure ("Results_*episode group name*") tabs)
- Breakdown of Utilization and Cost by Medicare Setting and Service Category for Each Cost Measure ("Appx_A_*episode group name*") tabs)
- Episode-Level Table for All Episodes Attributed to Your TIN ("Appx_B_Episodes_Table" tab)
- How to Interpret This Report ("Appx_C_Interpret_Report" tab)
- All Measures - High-Level Summary Results for Your TIN-NPI's TIN (only included on TIN-NPI level reports)

Episode-Based Cost Measures Field Test Report ("Overview" tab)

12. To what extent do you agree or disagree with the following statements regarding the "Overview" tab:

	1	2	3	4	5
	Strongly disagree	Somewhat disagree	Neither agree nor disagree	Somewhat agree	Strongly agree

The information presented in this tab is easy to understand.

The metrics presented in this tab provide actionable information.

13. Please share any comments or feedback regarding this tab of the report.

All Measures: High-Level Summary Results ("Summary" tab)

14. To what extent do you agree or disagree with the following statements regarding the "Summary" tab:

	1	2	3	4	5
	Strongly disagree	Somewhat disagree	Neither agree nor disagree	Somewhat agree	Strongly agree

The information presented in this tab is easy to understand.

The metrics presented in this tab provide actionable information.

15. Please share any comments or feedback regarding this tab of the report.

Measure Summary Results for Each Cost Measure ("Results_*episode group name*") tabs)

16. To what extent do you agree or disagree with the following statements regarding the "Results" tab:

	1	2	3	4	5
	Strongly disagree	Somewhat disagree	Neither agree nor disagree	Somewhat agree	Strongly agree

The information presented in this tab is easy to understand.

The metrics presented in this tab provide actionable information.

17. Please share any comments or feedback regarding this tab of the report.

Appendix A: Breakdown of Utilization and Cost by Medicare Setting and Service Category for Each Cost Measure ("Appx_A_[episode group name]" tabs)

18. To what extent do you agree or disagree with the following statements regarding the "Appendix A" tab:

	1	2	3	4	5
	Strongly disagree	Somewhat disagree	Neither agree nor disagree	Somewhat agree	Strongly agree

The information presented in this tab is easy to understand.

The metrics presented in this tab provide actionable information.

19. Please share any comments or feedback regarding this tab of the report.

Appendix B: Episode-Level Table for All Episodes Attributed to Your TIN ("Appx_B_Episodes_Table" tab)

20. To what extent do you agree or disagree with the following statements regarding the "Appendix B" tab:

	1	2	3	4	5
	Strongly disagree	Somewhat disagree	Neither agree nor disagree	Somewhat agree	Strongly agree

The information presented in this tab is easy to understand.

The metrics presented in this tab provide actionable information.

21. Please share any comments or feedback regarding this tab of the report.

Appendix C: How to Interpret this Report ("Appx_C_Interpret_Report" tab)

22. To what extent do you agree or disagree with the following statements regarding the "Appendix C" tab:

	1	2	3	4	5
	Strongly disagree	Somewhat disagree	Neither agree nor disagree	Somewhat agree	Strongly agree

The information presented in this tab is easy to understand.

The information presented in this tab assists in understanding the metrics presented in the rest of the report.

23. Please share any comments or feedback regarding this tab of the report.

Appendix D: All Measures - High-Level Summary Results for your TIN-NPI's TIN

Please note that this tab is not included in the mock report that is publicly posted, and is only included on TIN-NPI level confidential field test reports.

24. To what extent do you agree or disagree with the following statements regarding the "Appendix D" tab:

	1	2	3	4	5
	Strongly disagree	Somewhat disagree	Neither agree nor disagree	Somewhat agree	Strongly agree

The information presented in this tab is easy to understand.

The metrics presented in this tab provide actionable information.

25. Please share any comments or feedback regarding this tab of the report.

Section 3 of 4: Feedback on the Supplemental Documentation

Section 3 of 4: Feedback on the Supplemental Documentation

We are interested in your feedback on the supplemental documentation for the episode-based cost measures that is publicly available on the [MACRA page](#). These documents include the Fact Sheet, Frequently Asked Questions, and the Draft Cost Measure Methodology and Draft Measure Codes List for each cost measure.

For convenience, the materials can be accessed directly through the hyperlinks below:

- [Fact Sheet](#)
- [FAQ Document](#)
- [Mock Report](#)
- [Zip file](#) containing the full set of materials, including the draft measure specifications documents

Please note that we are only collecting general feedback in this section that is applicable to all Draft Cost Measure Methodology and Draft Measure Codes List files. You will have an opportunity to share feedback on the details of the Draft Cost Measure Methodology or Draft Measure Code Lists for specific measures in Section 4.

If you would like to skip to the section on providing detailed feedback on the measure specifications of each cost measure, please scroll to the bottom of this page and click "Next."

If you would like to exit the survey, please click "Exit Survey" at the top of the page. Please note that clicking this will close the survey without saving the responses entered on this current page.

26. Which of the supplemental documents did you read?

- Fact Sheet
- Cost Measure Methodology
- Measure Codes Lists
- Frequently Asked Questions (FAQ)

Fact Sheet

The Fact Sheet is a two-page document providing high-level background about the MACRA Episode-Based Cost Measures project, the approach to measure development, and the October - November 2017 field testing activities. The Fact Sheet can be found [here](#).

27. To what extent do you agree or disagree with the following statements:

1 2 3 4 5
Strongly disagree Somewhat disagree Neither agree nor disagree Somewhat agree Strongly agree

The information presented in the fact sheet is easy to understand.

The fact sheet is useful in providing high-level background information about the MACRA Episode-Based Cost Measures Field Testing.

28. Please share any comments about the Fact Sheet, including suggestions on how we can improve it to help you understand the cost measure(s) and the measure development process in general.

Cost Measure Methodology

The Cost Measure Methodology document for each measure details the draft methodology for that measure. We recommend reviewing the Cost Measure Methodology with the corresponding Draft Measure Codes List file. The Cost Measure Methodology for each cost measure can be found [here](#). As a reminder, this section is only seeking general feedback on the methodology documents. You will have an opportunity to share detailed feedback on each cost measure's specifications in Section 4 of this survey.

29. To what extent do you agree or disagree with the following statements:

1 2 3 4 5
Strongly disagree Somewhat disagree Neither agree nor disagree Somewhat agree Strongly agree

The information presented in the cost measure methodology document was is to understand.

The cost measure methodology document is useful in understanding the cost measure development process.

30. Please share any comments about the cost measure methodology, including suggestions on how we can improve it to help you understand the cost measure(s) and the measure development process in general.

Measure Codes List

The Measure Codes List file for each measure contains the medical codes that specify the episode group and cost measure. We recommend reviewing the Measure Codes List with the corresponding Cost Measure Methodology document. The Measure Codes Lists for the eight cost measures can be found [here](#). As a reminder, this section is only seeking general feedback on the measure codes list files. You will have an opportunity to share detailed feedback on each cost measure's specifications in Section 4 of this survey.

31. To what extent do you agree or disagree with the following statements:

	1	2	3	4	5
	Strongly disagree	Somewhat disagree	Neither agree nor disagree	Somewhat agree	Strongly agree
The information presented in the measure codes lists is easy to understand.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The measure codes lists is helpful in understanding which medical codes are used in constructing the measure.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

32. Please share any comments about the measure codes lists, including suggestions on how we can improve it to help you understand the cost measure(s) specifications.

Frequently Asked Questions (FAQ)

The FAQ document contains a list of questions and answers on field testing and the MACRA Episode-Based Cost Measures Project in general. The FAQ can be found [here](#).

33. To what extent do you agree or disagree with the following statements:

	1	2	3	4	5
	Strongly disagree	Somewhat disagree	Neither agree nor disagree	Somewhat agree	Strongly agree
The information presented in the FAQ is easy to understand.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The FAQ adequately answers my questions regarding the field test reports.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The FAQ adequately answers my questions regarding episode-based cost measures.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

34. Please share any comments on the FAQ, including suggestions on how to improve it to help you understand the cost measure(s) or cost measure development process in general.

Section 4 of 4: Feedback on the Measure Specifications

Section 4 of 4: Feedback on the Measure Specifications

We are also interested in obtaining your feedback on the measure specifications for the eight episode-based cost measures.

- 1. Elective Outpatient Percutaneous Coronary Intervention (PCI)**
- 2. Knee Arthroplasty**
- 3. Routine Cataract Removal with Intraocular Lens (IOL) Implantation**
- 4. Revascularization for Lower Extremity Chronic Critical Limb Ischemia**
- 5. Screening/Surveillance Colonoscopy**
- 6. Intracranial Hemorrhage or Cerebral Infarction**
- 7. Simple Pneumonia with Hospitalization**
- 8. ST-Elevation Myocardial Infarction (STEMI) with PCI**

The measure specifications, including the Cost Measure Methodology document and the corresponding draft Measure Codes List file, are available on the [MACRA page](#).

Please note that feedback will be collected for one cost measure at a time. After providing feedback to a measure, you will have have an option to submit feedback for another measure.

If you would like to skip this section and move to the end of the survey, please respond "Yes" to the next question and click "Next."

35. Would you like to skip this section on providing feedback on the measure specifications? If so, please select "Yes" and click "Next" to skip to the end of the survey. Otherwise, leave this question blank, or select "No," and choose which cost measure you would like to submit feedback for in the next question.

- Yes, I would like to skip this section and move to the end of the survey.
- No, I would like to provide feedback on the measure specifications.

36. Please choose which cost measure you would like to submit feedback for:

Section 4 of 4: Feedback on the Measure Specifications

Feedback on the {{ Q36 }} cost measure.

37. To what extent is the information in the cost measure methodology for this measure easy to understand?

1	2	3	4	5
Very difficult to understand	Somewhat difficult to understand	Neither difficult nor easy to understand	Somewhat to understand	Very easy to understand
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

38. To what extent is the information in the draft measure codes list for this measure easy to understand?

1	2	3	4	5
Very difficult to understand	Somewhat difficult to understand	Neither difficult nor easy to understand	Somewhat to understand	Very easy to understand
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Defining an Episode Group

39. To what extent do you agree or disagree with the following statements regarding the {{ Q36 }} cost measure:

	1	2	3	4	5
	Strongly disagree	Somewhat disagree	Neither agree nor disagree	Somewhat agree	Strongly agree
The draft episode triggers selected for this episode group accurately represent the episode group.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The draft episode triggers selected for this episode group identify a homogeneous patient cohort.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The sub-groups identified for this episode group accurately divide the episode group into clinically comparable cohorts of patients.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

40. Please share any comments or feedback on the trigger codes for this episode group, including suggestions on additional trigger codes to consider or removal of current trigger codes.

41. Please share any comments or feedback on the sub-groups for this episode group, including suggestions on other sub-groups to consider.

42. Please share any additional comments or feedback on the "Defining an Episode Group" component of episode-based cost measures.

Assigning Costs to the Episode Group

43. Do you believe the pre-trigger episode window length selected for the {{ Q36 }} cost measure is accurate?

- Too short
- Just right
- Too long

Please share any comments or feedback on the pre-trigger episode window length.

44. Do you believe the post-trigger episode window length selected for the {{ Q36 }} cost measure is accurate?

- Too short
- Just right
- Too long

Please share any comments or feedback on the post-trigger episode window length.

45. Clinical themes are clinical categorizations of the services assigned to episodes during the episode window. These clinical themes are created for the purpose of illustrating clinically important sources of episode spending in clinicians' feedback reports. To what extent do you agree or disagree with the clinical themes identified for this {{ Q36 }} episode group?

	1	2	3	4	5
	Strongly disagree	Somewhat disagree	Neither agree nor disagree	Somewhat agree	Strongly agree
	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Please share any comments or feedback on the clinical themes for this episode group, including any suggestions you may have on additional clinical themes that may be useful to include in measure reporting.

50. To what extent do you agree or disagree with the following statements regarding the {{ Q36 }} cost measure:

1 2 3 4 5
Strongly disagree Somewhat disagree Neither agree nor disagree Somewhat agree Strongly agree

The draft attribution rules identify the clinician(s) responsible for treating a patient with this condition or performing this procedure.

51. Please share any additional comments or feedback on the "Attributing the Episode Group to Clinicians" component of episode-based cost measures.

Risk Adjusting the Episode Group

52. To what extent do you agree or disagree with the following statements regarding the {{ Q36 }} cost measure:

1 2 3 4 5
Strongly disagree Somewhat disagree Neither agree nor disagree Somewhat agree Strongly agree

The draft risk adjustment variables account for major factors outside of the clinicians' control.

The draft exclusions criteria identified for this episode group are clinically accurate.

53. Please share any comments or feedback on the risk adjustment variables for this episode group, including suggestions on additional variables to consider or removal of current variables.

54. Please share any comments or feedback on the exclusions for this episode group, including suggestions on additional exclusions to consider or removal of current exclusions.

55. Please share any additional comments or feedback on the "Risk Adjusting the Episode Group" component of episode-based cost measures.

Aligning Cost with Quality

56. Please share any comments on the "Aligning Cost with Quality" component of episode-based cost measures .

57. Would you like to submit comments on the measure specifications of another measure? If you select "No," you will be directed to the end of the survey.

- Yes, I would like to submit comments on the specifications of another measure.
- No, take me to the end of the survey.

Section 4 of 4: Feedback on the Measure Specifications

Section 4 of 4: Feedback on the Measure Specifications

We are also interested in obtaining your feedback on the measure specifications for the eight episode-based cost measures.

1. Elective Outpatient Percutaneous Coronary Intervention (PCI)
2. Knee Arthroplasty
3. Routine Cataract Removal with Intraocular Lens (IOL) Implantation
4. Revascularization for Lower Extremity Chronic Critical Limb Ischemia
5. Screening/Surveillance Colonoscopy
6. Intracranial Hemorrhage or Cerebral Infarction
7. Simple Pneumonia with Hospitalization
8. ST-Elevation Myocardial Infarction (STEMI) with PCI

The measure specifications, including the Cost Measure Methodology document and the corresponding draft Measure Codes List file, are available on the [MACRA page](#).

Please note that feedback will be collected for one cost measure at a time. After providing feedback to a measure, you will have an option to submit feedback for another measure.

If you would like to skip this section and move to the end of the survey, please respond "Yes" to the next question and click "Next."

58. Would you like to skip this section on providing feedback on the measure specifications? If so, please select "Yes" and click "Next" to skip to the end of the survey. Otherwise, leave this question blank, or select "No," and choose which cost measure you would like to submit feedback for in the next question.

- Yes, I would like to skip this section and move to the end of the survey.
- No, I would like to provide feedback on the measure specifications.

59. Please choose which cost measure you would like to submit feedback for:

Section 4 of 4: Feedback on the Measure Specifications

Feedback on the {{ Q59 }} cost measure.

60. To what extent is the information in the cost measure methodology for this measure easy to understand?

1	2	3	4	5
Very difficult to understand	Somewhat difficult to understand	Neither difficult nor easy to understand	Somewhat to understand	Very easy to understand
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

61. To what extent is the information in the draft measure codes list for this measure easy to understand?

1	2	3	4	5
Very difficult to understand	Somewhat difficult to understand	Neither difficult nor easy to understand	Somewhat to understand	Very easy to understand
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Defining an Episode Group

62. To what extent do you agree or disagree with the following statements regarding the {{ Q59 }} cost measure:

	1	2	3	4	5
	Strongly disagree	Somewhat disagree	Neither agree nor disagree	Somewhat agree	Strongly agree
The draft episode triggers selected for this episode group accurately represent the episode group.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The draft episode triggers selected for this episode group identify a homogeneous patient cohort.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The sub-groups identified for this episode group accurately divide the episode group into clinically comparable cohorts of patients.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

63. Please share any comments or feedback on the trigger codes for this episode group, including suggestions on additional trigger codes to consider or removal of current trigger codes.

64. Please share any comments or feedback on the sub-groups for this episode group, including suggestions on other sub-groups to consider.

65. Please share any additional comments or feedback on the "Defining an Episode Group" component of episode-based cost measures.

Assigning Costs to the Episode Group

66. Do you believe the pre-trigger episode window length selected for the {{ Q59 }} cost measure is accurate?

- Too short
- Just right
- Too long

Please share any comments or feedback on the pre-trigger episode window length.

67. Do you believe the post-trigger episode window length selected for the {{ Q59 }} cost measure is accurate?

- Too short
- Just right
- Too long

Please share any comments or feedback on the post-trigger episode window length.

68. Clinical themes are clinical categorizations of the services assigned to episodes during the episode window. These clinical themes are created for the purpose of illustrating clinically important sources of episode spending in clinicians' feedback reports. To what extent do you agree or disagree with the clinical themes identified for this {{ Q59 }} episode group?

	1	2	3	4	5
	Strongly disagree	Somewhat disagree	Neither agree nor disagree	Somewhat agree	Strongly agree
	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Please share any comments or feedback on the clinical themes for this episode group, including any suggestions you may have on additional clinical themes that may be useful to include in measure reporting.

69. To what extent do you agree or disagree with the following statements regarding the {{ Q59 }} cost measure:

1 2 3 4 5
Strongly disagree Somewhat disagree Neither agree nor disagree Somewhat agree Strongly agree

The pre-trigger services assigned to this episode group represent clinically related services the attributed clinician can reasonably influence.

The post-trigger services assigned to this episode group represent clinically related services the attributed clinician can reasonably influence.

70. Please share any comments or feedback on the pre-trigger services assigned to this episode group, including suggestions on additional pre-trigger services to consider or removal of current pre-trigger services.

71. Please share any comments or feedback on the post-trigger services assigned to this episode group, including suggestions on additional post-trigger services to consider or removal of current post-trigger services.

72. Please share any additional comments or feedback on the "Assigning Costs to the Episode Group" component of episode-based cost measures .

Attributing the Episode Group to Clinicians

73. To what extent do you agree or disagree with the following statements regarding the {{ Q59 }} cost measure:

1 2 3 4 5
Strongly disagree Somewhat disagree Neither agree nor disagree Somewhat agree Strongly agree

The draft attribution rules identify the clinician(s) responsible for treating a patient with this condition or performing this procedure.

74. Please share any additional comments or feedback on the "Attributing the Episode Group to Clinicians" component of episode-based cost measures.

Risk Adjusting the Episode Group

75. To what extent do you agree or disagree with the following statements regarding the {{ Q59 }} cost measure:

1 2 3 4 5
Strongly disagree Somewhat disagree Neither agree nor disagree Somewhat agree Strongly agree

The draft risk adjustment variables account for major factors outside of the clinicians' control.

The draft exclusions criteria identified for this episode group are clinically accurate.

76. Please share any comments or feedback on the risk adjustment variables for this episode group, including suggestions on additional variables to consider or removal of current variables.

77. Please share any comments or feedback on the exclusions for this episode group, including suggestions on additional exclusions to consider or removal of current exclusions.

78. Please share any additional comments or feedback on the "Risk Adjusting the Episode Group" component of episode-based cost measures.

Aligning Cost with Quality

79. Please share any comments on the "Aligning Cost with Quality" component of episode-based cost measures .

80. Would you like to submit comments on the measure specifications of another measure? If you select "No," you will be directed to the end of the survey.

- Yes, I would like to submit comments on the specifications of another measure.
- No, take me to the end of the survey.

Section 4 of 4: Feedback on the Measure Specifications

Section 4 of 4: Feedback on the Measure Specifications

We are also interested in obtaining your feedback on the measure specifications for the eight episode-based cost measures.

- 1. Elective Outpatient Percutaneous Coronary Intervention (PCI)**
- 2. Knee Arthroplasty**
- 3. Routine Cataract Removal with Intraocular Lens (IOL) Implantation**
- 4. Revascularization for Lower Extremity Chronic Critical Limb Ischemia**
- 5. Screening/Surveillance Colonoscopy**
- 6. Intracranial Hemorrhage or Cerebral Infarction**
- 7. Simple Pneumonia with Hospitalization**
- 8. ST-Elevation Myocardial Infarction (STEMI) with PCI**

The measure specifications, including the Cost Measure Methodology document and the corresponding draft Measure Codes List file, are available on the [MACRA page](#).

Please note that feedback will be collected for one cost measure at a time. After providing feedback to a measure, you will have an option to submit feedback for another measure.

If you would like to skip this section and move to the end of the survey, please respond "Yes" to the next question and click "Next."

81. Would you like to skip this section on providing feedback on the measure specifications? If so, please select "Yes" and click "Next" to skip to the end of the survey. Otherwise, leave this question blank, or select "No," and choose which cost measure you would like to submit feedback for in the next question.

- Yes, I would like to skip this section and move to the end of the survey.
- No, I would like to provide feedback on the measure specifications.

82. Please choose which cost measure you would like to submit feedback for:

Section 4 of 4: Feedback on the Measure Specifications

Feedback on the {{ Q82 }} cost measure.

83. To what extent is the information in the cost measure methodology for this measure easy to understand?

1	2	3	4	5
Very difficult to understand	Somewhat difficult to understand	Neither difficult nor easy to understand	Somewhat to understand	Very easy to understand
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

84. To what extent is the information in the draft measure codes list for this measure easy to understand?

1	2	3	4	5
Very difficult to understand	Somewhat difficult to understand	Neither difficult nor easy to understand	Somewhat to understand	Very easy to understand
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Defining an Episode Group

85. To what extent do you agree or disagree with the following statements regarding the {{ Q82 }} cost measure:

	1	2	3	4	5
	Strongly disagree	Somewhat disagree	Neither agree nor disagree	Somewhat agree	Strongly agree
The draft episode triggers selected for this episode group accurately represent the episode group.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The draft episode triggers selected for this episode group identify a homogeneous patient cohort.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The sub-groups identified for this episode group accurately divide the episode group into clinically comparable cohorts of patients.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

86. Please share any comments or feedback on the trigger codes for this episode group, including suggestions on additional trigger codes to consider or removal of current trigger codes.

87. Please share any comments or feedback on the sub-groups for this episode group, including suggestions on other sub-groups to consider.

88. Please share any additional comments or feedback on the "Defining an Episode Group" component of episode-based cost measures.

Assigning Costs to the Episode Group

89. Do you believe the pre-trigger episode window length selected for the {{ Q82 }} cost measure is accurate?

- Too short
- Just right
- Too long

Please share any comments or feedback on the pre-trigger episode window length.

90. Do you believe the post-trigger episode window length selected for the {{ Q82 }} cost measure is accurate?

- Too short
- Just right
- Too long

Please share any comments or feedback on the post-trigger episode window length.

91. Clinical themes are clinical categorizations of the services assigned to episodes during the episode window. These clinical themes are created for the purpose of illustrating clinically important sources of episode spending in clinicians' feedback reports. To what extent do you agree or disagree with the clinical themes identified for this {{ Q82 }} episode group?

	1	2	3	4	5
	Strongly disagree	Somewhat disagree	Neither agree nor disagree	Somewhat agree	Strongly agree
	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Please share any comments or feedback on the clinical themes for this episode group, including any suggestions you may have on additional clinical themes that may be useful to include in measure reporting.

100. Please share any comments or feedback on the exclusions for this episode group, including suggestions on additional exclusions to consider or removal of current exclusions.

101. Please share any additional comments or feedback on the "Risk Adjusting the Episode Group" component of episode-based cost measures.

Aligning Cost with Quality

102. Please share any comments on the "Aligning Cost with Quality" component of episode-based cost measures .

103. Would you like to submit comments on the measure specifications of another measure? If you select "No," you will be directed to the end of the survey.

- Yes, I would like to submit comments on the specifications of another measure.
- No, take me to the end of the survey.

Section 4 of 4: Feedback on the Measure Specifications

Section 4 of 4: Feedback on the Measure Specifications

We are also interested in obtaining your feedback on the measure specifications for the eight episode-based cost measures.

1. Elective Outpatient Percutaneous Coronary Intervention (PCI)
2. Knee Arthroplasty
3. Routine Cataract Removal with Intraocular Lens (IOL) Implantation
4. Revascularization for Lower Extremity Chronic Critical Limb Ischemia
5. Screening/Surveillance Colonoscopy
6. Intracranial Hemorrhage or Cerebral Infarction
7. Simple Pneumonia with Hospitalization
8. ST-Elevation Myocardial Infarction (STEMI) with PCI

The measure specifications, including the Cost Measure Methodology document and the corresponding draft Measure Codes List file, are available on the [MACRA page](#).

Please note that feedback will be collected for one cost measure at a time. After providing feedback to a measure, you will have an option to submit feedback for another measure.

If you would like to skip this section and move to the end of the survey, please respond "Yes" to the next question and click "Next."

104. Would you like to skip this section on providing feedback on the measure specifications? If so, please select "Yes" and click "Next" to skip to the end of the survey. Otherwise, leave this question blank, or select "No," and choose which cost measure you would like to submit feedback for in the next question.

- Yes, I would like to skip this section and move to the end of the survey.
- No, I would like to provide feedback on the measure specifications.

105. Please choose which cost measure you would like to submit feedback for:

Section 4 of 4: Feedback on the Measure Specifications

Feedback on the {{ Q105 }} cost measure.

106. To what extent is the information in the cost measure methodology for this measure easy to understand?

1	2	3	4	5
Very difficult to understand	Somewhat difficult to understand	Neither difficult nor easy to understand	Somewhat to understand	Very easy to understand
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

107. To what extent is the information in the draft measure codes list for this measure easy to understand?

1	2	3	4	5
Very difficult to understand	Somewhat difficult to understand	Neither difficult nor easy to understand	Somewhat to understand	Very easy to understand
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Defining an Episode Group

108. To what extent do you agree or disagree with the following statements regarding the {{ Q105 }} cost measure:

	1	2	3	4	5
	Strongly disagree	Somewhat disagree	Neither agree nor disagree	Somewhat agree	Strongly agree
The draft episode triggers selected for this episode group accurately represent the episode group.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The draft episode triggers selected for this episode group identify a homogeneous patient cohort.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The sub-groups identified for this episode group accurately divide the episode group into clinically comparable cohorts of patients.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

109. Please share any comments or feedback on the trigger codes for this episode group, including suggestions on additional trigger codes to consider or removal of current trigger codes.

110. Please share any comments or feedback on the sub-groups for this episode group, including suggestions on other sub-groups to consider.

111. Please share any additional comments or feedback on the "Defining an Episode Group" component of episode-based cost measures.

Assigning Costs to the Episode Group

112. Do you believe the pre-trigger episode window length selected for the {{ Q105 }} cost measure is accurate?

- Too short
- Just right
- Too long

Please share any comments or feedback on the pre-trigger episode window length.

113. Do you believe the post-trigger episode window length selected for the {{ Q105 }} cost measure is accurate?

- Too short
- Just right
- Too long

Please share any comments or feedback on the post-trigger episode window length.

114. Clinical themes are clinical categorizations of the services assigned to episodes during the episode window. These clinical themes are created for the purpose of illustrating clinically important sources of episode spending in clinicians' feedback reports. To what extent do you agree or disagree with the clinical themes identified for this {{ Q105 }} episode group?

	1	2	3	4	5
	Strongly disagree	Somewhat disagree	Neither agree nor disagree	Somewhat agree	Strongly agree
	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Please share any comments or feedback on the clinical themes for this episode group, including any suggestions you may have on additional clinical themes that may be useful to include in measure reporting.

115. To what extent do you agree or disagree with the following statements regarding the {{ Q105 }} cost measure:

1 2 3 4 5
Strongly disagree Somewhat disagree Neither agree nor disagree Somewhat agree Strongly agree

The pre-trigger services assigned to this episode group represent clinically related services the attributed clinician can reasonably influence.

The post-trigger services assigned to this episode group represent clinically related services the attributed clinician can reasonably influence.

116. Please share any comments or feedback on the pre-trigger services assigned to this episode group, including suggestions on additional pre-trigger services to consider or removal of current pre-trigger services.

117. Please share any comments or feedback on the post-trigger services assigned to this episode group, including suggestions on additional post-trigger services to consider or removal of current post-trigger services.

118. Please share any additional comments or feedback on the "Assigning Costs to the Episode Group" component of episode-based cost measures .

Attributing the Episode Group to Clinicians

119. To what extent do you agree or disagree with the following statements regarding the {{ Q105 }} cost measure:

1 2 3 4 5
Strongly disagree Somewhat disagree Neither agree nor disagree Somewhat agree Strongly agree

The draft attribution rules identify the clinician(s) responsible for treating a patient with this condition or performing this procedure.

120. Please share any additional comments or feedback on the "Attributing the Episode Group to Clinicians" component of episode-based cost measures.

Risk Adjusting the Episode Group

121. To what extent do you agree or disagree with the following statements regarding the {{ Q105 }} cost measure:

1 2 3 4 5
Strongly disagree Somewhat disagree Neither agree nor disagree Somewhat agree Strongly agree

The draft risk adjustment variables account for major factors outside of the clinicians' control.

The draft exclusions criteria identified for this episode group are clinically accurate.

122. Please share any comments or feedback on the risk adjustment variables for this episode group, including suggestions on additional variables to consider or removal of current variables.

123. Please share any comments or feedback on the exclusions for this episode group, including suggestions on additional exclusions to consider or removal of current exclusions.

124. Please share any additional comments or feedback on the "Risk Adjusting the Episode Group" component of episode-based cost measures.

Aligning Cost with Quality

125. Please share any comments on the "Aligning Cost with Quality" component of episode-based cost measures .

126. Would you like to submit comments on the measure specifications of another measure? If you select "No," you will be directed to the end of the survey.

- Yes, I would like to submit comments on the specifications of another measure.
- No, take me to the end of the survey.

Section 4 of 4: Feedback on the Measure Specifications

Section 4 of 4: Feedback on the Measure Specifications

We are also interested in obtaining your feedback on the measure specifications for the eight episode-based cost measures.

1. Elective Outpatient Percutaneous Coronary Intervention (PCI)
2. Knee Arthroplasty
3. Routine Cataract Removal with Intraocular Lens (IOL) Implantation
4. Revascularization for Lower Extremity Chronic Critical Limb Ischemia
5. Screening/Surveillance Colonoscopy
6. Intracranial Hemorrhage or Cerebral Infarction
7. Simple Pneumonia with Hospitalization
8. ST-Elevation Myocardial Infarction (STEMI) with PCI

The measure specifications, including the Cost Measure Methodology document and the corresponding draft Measure Codes List file, are available on the [MACRA page](#).

Please note that feedback will be collected for one cost measure at a time. After providing feedback to a measure, you will have an option to submit feedback for another measure.

If you would like to skip this section and move to the end of the survey, please respond "Yes" to the next question and click "Next."

127. Would you like to skip this section on providing feedback on the measure specifications? If so, please select "Yes" and click "Next" to skip to the end of the survey. Otherwise, leave this question blank, or select "No," and choose which cost measure you would like to submit feedback for in the next question.

- Yes, I would like to skip this section and move to the end of the survey.
- No, I would like to provide feedback on the measure specifications.

128. Please choose which cost measure you would like to submit feedback for:

Section 4 of 4: Feedback on the Measure Specifications

Feedback on the {{ Q128 }} cost measure.

129. To what extent is the information in the cost measure methodology for this measure easy to understand?

1	2	3	4	5
Very difficult to understand	Somewhat difficult to understand	Neither difficult nor easy to understand	Somewhat to understand	Very easy to understand
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

130. To what extent is the information in the draft measure codes list for this measure easy to understand?

1	2	3	4	5
Very difficult to understand	Somewhat difficult to understand	Neither difficult nor easy to understand	Somewhat to understand	Very easy to understand
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Defining an Episode Group

131. To what extent do you agree or disagree with the following statements regarding the {{ Q128 }} cost measure:

	1	2	3	4	5
	Strongly disagree	Somewhat disagree	Neither agree nor disagree	Somewhat agree	Strongly agree
The draft episode triggers selected for this episode group accurately represent the episode group.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The draft episode triggers selected for this episode group identify a homogeneous patient cohort.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The sub-groups identified for this episode group accurately divide the episode group into clinically comparable cohorts of patients.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

132. Please share any comments or feedback on the trigger codes for this episode group, including suggestions on additional trigger codes to consider or removal of current trigger codes.

133. Please share any comments or feedback on the sub-groups for this episode group, including suggestions on other sub-groups to consider.

134. Please share any additional comments or feedback on the "Defining an Episode Group" component of episode-based cost measures.

Assigning Costs to the Episode Group

135. Do you believe the pre-trigger episode window length selected for the {{ Q128 }} cost measure is accurate?

- Too short
- Just right
- Too long

Please share any comments or feedback on the pre-trigger episode window length.

136. Do you believe the post-trigger episode window length selected for the {{ Q128 }} cost measure is accurate?

- Too short
- Just right
- Too long

Please share any comments or feedback on the post-trigger episode window length.

137. Clinical themes are clinical categorizations of the services assigned to episodes during the episode window. These clinical themes are created for the purpose of illustrating clinically important sources of episode spending in clinicians' feedback reports. To what extent do you agree or disagree with the clinical themes identified for this {{ Q128 }} episode group?

	1	2	3	4	5
	Strongly disagree	Somewhat disagree	Neither agree nor disagree	Somewhat agree	Strongly agree
	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Please share any comments or feedback on the clinical themes for this episode group, including any suggestions you may have on additional clinical themes that may be useful to include in measure reporting.

138. To what extent do you agree or disagree with the following statements regarding the {{ Q128 }} cost measure:

1 2 3 4 5
Strongly disagree Somewhat disagree Neither agree nor disagree Somewhat agree Strongly agree

The pre-trigger services assigned to this episode group represent clinically related services the attributed clinician can reasonably influence.

The post-trigger services assigned to this episode group represent clinically related services the attributed clinician can reasonably influence.

139. Please share any comments or feedback on the pre-trigger services assigned to this episode group, including suggestions on additional pre-trigger services to consider or removal of current pre-trigger services.

140. Please share any comments or feedback on the post-trigger services assigned to this episode group, including suggestions on additional post-trigger services to consider or removal of current post-trigger services.

141. Please share any additional comments or feedback on the "Assigning Costs to the Episode Group" component of episode-based cost measures .

Attributing the Episode Group to Clinicians

142. To what extent do you agree or disagree with the following statements regarding the {{ Q128 }} cost measure:

1 2 3 4 5
Strongly disagree Somewhat disagree Neither agree nor disagree Somewhat agree Strongly agree

The draft attribution rules identify the clinician(s) responsible for treating a patient with this condition or performing this procedure.

143. Please share any additional comments or feedback on the "Attributing the Episode Group to Clinicians" component of episode-based cost measures.

Risk Adjusting the Episode Group

144. To what extent do you agree or disagree with the following statements regarding the {{ Q128 }} cost measure:

1 2 3 4 5
Strongly disagree Somewhat disagree Neither agree nor disagree Somewhat agree Strongly agree

The draft risk adjustment variables account for major factors outside of the clinicians' control.

The draft exclusions criteria identified for this episode group are clinically accurate.

145. Please share any comments or feedback on the risk adjustment variables for this episode group, including suggestions on additional variables to consider or removal of current variables.

146. Please share any comments or feedback on the exclusions for this episode group, including suggestions on additional exclusions to consider or removal of current exclusions.

147. Please share any additional comments or feedback on the "Risk Adjusting the Episode Group" component of episode-based cost measures.

Aligning Cost with Quality

148. Please share any comments on the "Aligning Cost with Quality" component of episode-based cost measures .

149. Would you like to submit comments on the measure specifications of another measure? If you select "No," you will be directed to the end of the survey.

- Yes, I would like to submit comments on the specifications of another measure.
- No, take me to the end of the survey.

Section 4 of 4: Feedback on the Measure Specifications

Section 4 of 4: Feedback on the Measure Specifications

We are also interested in obtaining your feedback on the measure specifications for the eight episode-based cost measures.

1. Elective Outpatient Percutaneous Coronary Intervention (PCI)
2. Knee Arthroplasty
3. Routine Cataract Removal with Intraocular Lens (IOL) Implantation
4. Revascularization for Lower Extremity Chronic Critical Limb Ischemia
5. Screening/Surveillance Colonoscopy
6. Intracranial Hemorrhage or Cerebral Infarction
7. Simple Pneumonia with Hospitalization
8. ST-Elevation Myocardial Infarction (STEMI) with PCI

The measure specifications, including the Cost Measure Methodology document and the corresponding draft Measure Codes List file, are available on the [MACRA page](#).

Please note that feedback will be collected for one cost measure at a time. After providing feedback to a measure, you will have an option to submit feedback for another measure.

If you would like to skip this section and move to the end of the survey, please respond "Yes" to the next question and click "Next."

150. Would you like to skip this section on providing feedback on the measure specifications? If so, please select "Yes" and click "Next" to skip to the end of the survey. Otherwise, leave this question blank, or select "No," and choose which cost measure you would like to submit feedback for in the next question.

- Yes, I would like to skip this section and move to the end of the survey.
- No, I would like to provide feedback on the measure specifications.

151. Please choose which cost measure you would like to submit feedback for:

Section 4 of 4: Feedback on the Measure Specifications

Feedback on the {{ Q151 }} cost measure.

152. To what extent is the information in the cost measure methodology for this measure easy to understand?

1	2	3	4	5
Very difficult to understand	Somewhat difficult to understand	Neither difficult nor easy to understand	Somewhat to understand	Very easy to understand
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

153. To what extent is the information in the draft measure codes list for this measure easy to understand?

1	2	3	4	5
Very difficult to understand	Somewhat difficult to understand	Neither difficult nor easy to understand	Somewhat to understand	Very easy to understand
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Defining an Episode Group

154. To what extent do you agree or disagree with the following statements regarding the {{ Q151 }} cost measure:

	1	2	3	4	5
	Strongly disagree	Somewhat disagree	Neither agree nor disagree	Somewhat agree	Strongly agree
The draft episode triggers selected for this episode group accurately represent the episode group.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The draft episode triggers selected for this episode group identify a homogeneous patient cohort.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The sub-groups identified for this episode group accurately divide the episode group into clinically comparable cohorts of patients.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

155. Please share any comments or feedback on the trigger codes for this episode group, including suggestions on additional trigger codes to consider or removal of current trigger codes.

156. Please share any comments or feedback on the sub-groups for this episode group, including suggestions on other sub-groups to consider.

157. Please share any additional comments or feedback on the "Defining an Episode Group" component of episode-based cost measures.

Assigning Costs to the Episode Group

158. Do you believe the pre-trigger episode window length selected for the {{ Q151 }} cost measure is accurate?

- Too short
- Just right
- Too long

Please share any comments or feedback on the pre-trigger episode window length.

159. Do you believe the post-trigger episode window length selected for the {{ Q151 }} cost measure is accurate?

- Too short
- Just right
- Too long

Please share any comments or feedback on the post-trigger episode window length.

160. Clinical themes are clinical categorizations of the services assigned to episodes during the episode window. These clinical themes are created for the purpose of illustrating clinically important sources of episode spending in clinicians' feedback reports. To what extent do you agree or disagree with the clinical themes identified for this {{ Q151 }} episode group?

	1	2	3	4	5
	Strongly disagree	Somewhat disagree	Neither agree nor disagree	Somewhat agree	Strongly agree
	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Please share any comments or feedback on the clinical themes for this episode group, including any suggestions you may have on additional clinical themes that may be useful to include in measure reporting.

161. To what extent do you agree or disagree with the following statements regarding the {{ Q151 }} cost measure:

1 2 3 4 5
Strongly disagree Somewhat disagree Neither agree nor disagree Somewhat agree Strongly agree

The pre-trigger services assigned to this episode group represent clinically related services the attributed clinician can reasonably influence.

The post-trigger services assigned to this episode group represent clinically related services the attributed clinician can reasonably influence.

162. Please share any comments or feedback on the pre-trigger services assigned to this episode group, including suggestions on additional pre-trigger services to consider or removal of current pre-trigger services.

163. Please share any comments or feedback on the post-trigger services assigned to this episode group, including suggestions on additional post-trigger services to consider or removal of current post-trigger services.

164. Please share any additional comments or feedback on the "Assigning Costs to the Episode Group" component of episode-based cost measures .

Attributing the Episode Group to Clinicians

165. To what extent do you agree or disagree with the following statements regarding the {{ Q151 }} cost measure:

1 2 3 4 5
Strongly disagree Somewhat disagree Neither agree nor disagree Somewhat agree Strongly agree

The draft attribution rules identify the clinician(s) responsible for treating a patient with this condition or performing this procedure.

166. Please share any additional comments or feedback on the "Attributing the Episode Group to Clinicians" component of episode-based cost measures.

Risk Adjusting the Episode Group

167. To what extent do you agree or disagree with the following statements regarding the {{ Q151 }} cost measure:

1 2 3 4 5
Strongly disagree Somewhat disagree Neither agree nor disagree Somewhat agree Strongly agree

The draft risk adjustment variables account for major factors outside of the clinicians' control.

The draft exclusions criteria identified for this episode group are clinically accurate.

168. Please share any comments or feedback on the risk adjustment variables for this episode group, including suggestions on additional variables to consider or removal of current variables.

169. Please share any comments or feedback on the exclusions for this episode group, including suggestions on additional exclusions to consider or removal of current exclusions.

170. Please share any additional comments or feedback on the "Risk Adjusting the Episode Group" component of episode-based cost measures.

Aligning Cost with Quality

171. Please share any comments on the "Aligning Cost with Quality" component of episode-based cost measures .

172. Would you like to submit comments on the measure specifications of another measure? If you select "No," you will be directed to the end of the survey.

- Yes, I would like to submit comments on the specifications of another measure.
- No, take me to the end of the survey.

Section 4 of 4: Feedback on the Measure Specifications

Section 4 of 4: Feedback on the Measure Specifications

We are also interested in obtaining your feedback on the measure specifications for the eight episode-based cost measures.

1. Elective Outpatient Percutaneous Coronary Intervention (PCI)
2. Knee Arthroplasty
3. Routine Cataract Removal with Intraocular Lens (IOL) Implantation
4. Revascularization for Lower Extremity Chronic Critical Limb Ischemia
5. Screening/Surveillance Colonoscopy
6. Intracranial Hemorrhage or Cerebral Infarction
7. Simple Pneumonia with Hospitalization
8. ST-Elevation Myocardial Infarction (STEMI) with PCI

The measure specifications, including the Cost Measure Methodology document and the corresponding draft Measure Codes List file, are available on the [MACRA page](#).

Please note that feedback will be collected for one cost measure at a time. After providing feedback to a measure, you will have an option to submit feedback for another measure.

If you would like to skip this section and move to the end of the survey, please respond "Yes" to the next question and click "Next."

173. Would you like to skip this section on providing feedback on the measure specifications? If so, please select "Yes" and click "Next" to skip to the end of the survey. Otherwise, leave this question blank, or select "No," and choose which cost measure you would like to submit feedback for in the next question.

- Yes, I would like to skip this section and move to the end of the survey.
- No, I would like to provide feedback on the measure specifications.

174. Please choose which cost measure you would like to submit feedback for:

Section 4 of 4: Feedback on the Measure Specifications

Feedback on the {{ Q174 }} cost measure.

175. To what extent is the information in the cost measure methodology for this measure easy to understand?

1	2	3	4	5
Very difficult to understand	Somewhat difficult to understand	Neither difficult nor easy to understand	Somewhat to understand	Very easy to understand
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

176. To what extent is the information in the draft measure codes list for this measure easy to understand?

1	2	3	4	5
Very difficult to understand	Somewhat difficult to understand	Neither difficult nor easy to understand	Somewhat to understand	Very easy to understand
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Defining an Episode Group

177. To what extent do you agree or disagree with the following statements regarding the {{ Q174 }} cost measure:

	1	2	3	4	5
	Strongly disagree	Somewhat disagree	Neither agree nor disagree	Somewhat agree	Strongly agree
The draft episode triggers selected for this episode group accurately represent the episode group.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The draft episode triggers selected for this episode group identify a homogeneous patient cohort.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The sub-groups identified for this episode group accurately divide the episode group into clinically comparable cohorts of patients.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

178. Please share any comments or feedback on the trigger codes for this episode group, including suggestions on additional trigger codes to consider or removal of current trigger codes.

179. Please share any comments or feedback on the sub-groups for this episode group, including suggestions on other sub-groups to consider.

180. Please share any additional comments or feedback on the "Defining an Episode Group" component of episode-based cost measures.

Assigning Costs to the Episode Group

181. Do you believe the pre-trigger episode window length selected for the {{ Q174 }} cost measure is accurate?

- Too short
- Just right
- Too long

Please share any comments or feedback on the pre-trigger episode window length.

182. Do you believe the post-trigger episode window length selected for the {{ Q174 }} cost measure is accurate?

- Too short
- Just right
- Too long

Please share any comments or feedback on the post-trigger episode window length.

183. Clinical themes are clinical categorizations of the services assigned to episodes during the episode window. These clinical themes are created for the purpose of illustrating clinically important sources of episode spending in clinicians' feedback reports. To what extent do you agree or disagree with the clinical themes identified for this {{ Q174 }} episode group?

	1	2	3	4	5
	Strongly disagree	Somewhat disagree	Neither agree nor disagree	Somewhat agree	Strongly agree
	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Please share any comments or feedback on the clinical themes for this episode group, including any suggestions you may have on additional clinical themes that may be useful to include in measure reporting.

184. To what extent do you agree or disagree with the following statements regarding the {{ Q174 }} cost measure:

1 2 3 4 5
Strongly disagree Somewhat disagree Neither agree nor disagree Somewhat agree Strongly agree

The pre-trigger services assigned to this episode group represent clinically related services the attributed clinician can reasonably influence.

The post-trigger services assigned to this episode group represent clinically related services the attributed clinician can reasonably influence.

185. Please share any comments or feedback on the pre-trigger services assigned to this episode group, including suggestions on additional pre-trigger services to consider or removal of current pre-trigger services.

186. Please share any comments or feedback on the post-trigger services assigned to this episode group, including suggestions on additional post-trigger services to consider or removal of current post-trigger services.

187. Please share any additional comments or feedback on the "Assigning Costs to the Episode Group" component of episode-based cost measures .

Attributing the Episode Group to Clinicians

188. To what extent do you agree or disagree with the following statements regarding the {{ Q174 }} cost measure:

1 2 3 4 5
Strongly disagree Somewhat disagree Neither agree nor disagree Somewhat agree Strongly agree

The draft attribution rules identify the clinician(s) responsible for treating a patient with this condition or performing this procedure.

189. Please share any additional comments or feedback on the "Attributing the Episode Group to Clinicians" component of episode-based cost measures.

Risk Adjusting the Episode Group

190. To what extent do you agree or disagree with the following statements regarding the {{ Q174 }} cost measure:

1 2 3 4 5
Strongly disagree Somewhat disagree Neither agree nor disagree Somewhat agree Strongly agree

The draft risk adjustment variables account for major factors outside of the clinicians' control.

The draft exclusions criteria identified for this episode group are clinically accurate.

191. Please share any comments or feedback on the risk adjustment variables for this episode group, including suggestions on additional variables to consider or removal of current variables.

192. Please share any comments or feedback on the exclusions for this episode group, including suggestions on additional exclusions to consider or removal of current exclusions.

193. Please share any additional comments or feedback on the "Risk Adjusting the Episode Group" component of episode-based cost measures.

Aligning Cost with Quality

194. Please share any comments on the "Aligning Cost with Quality" component of episode-based cost measures .

195. Would you like to submit comments on the measure specifications of another measure? If you select "No," you will be directed to the end of the survey.

- Yes, I would like to submit comments on the specifications of another measure.
- No, take me to the end of the survey.

Section 4 of 4: Feedback on the Measure Specifications

Section 4 of 4: Feedback on the Measure Specifications

We are also interested in obtaining your feedback on the measure specifications for the eight episode-based cost measures.

1. Elective Outpatient Percutaneous Coronary Intervention (PCI)
2. Knee Arthroplasty
3. Routine Cataract Removal with Intraocular Lens (IOL) Implantation
4. Revascularization for Lower Extremity Chronic Critical Limb Ischemia
5. Screening/Surveillance Colonoscopy
6. Intracranial Hemorrhage or Cerebral Infarction
7. Simple Pneumonia with Hospitalization
8. ST-Elevation Myocardial Infarction (STEMI) with PCI

The measure specifications, including the Cost Measure Methodology document and the corresponding draft Measure Codes List file, are available on the [MACRA page](#).

Please note that feedback will be collected for one cost measure at a time. After providing feedback to a measure, you will have an option to submit feedback for another measure.

If you would like to skip this section and move to the end of the survey, please respond "Yes" to the next question and click "Next."

196. Would you like to skip this section on providing feedback on the measure specifications? If so, please select "Yes" and click "Next" to skip to the end of the survey. Otherwise, leave this question blank, or select "No," and choose which cost measure you would like to submit feedback for in the next question.

- Yes, I would like to skip this section and move to the end of the survey.
- No, I would like to provide feedback on the measure specifications.

197. Please choose which cost measure you would like to submit feedback for:

Section 4 of 4: Feedback on the Measure Specifications

Feedback on the {{ Q197 }} cost measure.

198. To what extent is the information in the cost measure methodology for this measure easy to understand?

1	2	3	4	5
Very difficult to understand	Somewhat difficult to understand	Neither difficult nor easy to understand	Somewhat to understand	Very easy to understand
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

199. To what extent is the information in the draft measure codes list for this measure easy to understand?

1	2	3	4	5
Very difficult to understand	Somewhat difficult to understand	Neither difficult nor easy to understand	Somewhat to understand	Very easy to understand
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Defining an Episode Group

200. To what extent do you agree or disagree with the following statements regarding the {{ Q197 }} cost measure:

	1	2	3	4	5
	Strongly disagree	Somewhat disagree	Neither agree nor disagree	Somewhat agree	Strongly agree
The draft episode triggers selected for this episode group accurately represent the episode group.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The draft episode triggers selected for this episode group identify a homogeneous patient cohort.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The sub-groups identified for this episode group accurately divide the episode group into clinically comparable cohorts of patients.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

201. Please share any comments or feedback on the trigger codes for this episode group, including suggestions on additional trigger codes to consider or removal of current trigger codes.

202. Please share any comments or feedback on the sub-groups for this episode group, including suggestions on other sub-groups to consider.

203. Please share any additional comments or feedback on the "Defining an Episode Group" component of episode-based cost measures.

Assigning Costs to the Episode Group

204. Do you believe the pre-trigger episode window length selected for the {{ Q197 }} cost measure is accurate?

- Too short
- Just right
- Too long

Please share any comments or feedback on the pre-trigger episode window length.

205. Do you believe the post-trigger episode window length selected for the {{ Q197 }} cost measure is accurate?

- Too short
- Just right
- Too long

Please share any comments or feedback on the post-trigger episode window length.

206. Clinical themes are clinical categorizations of the services assigned to episodes during the episode window. These clinical themes are created for the purpose of illustrating clinically important sources of episode spending in clinicians' feedback reports. To what extent do you agree or disagree with the clinical themes identified for this {{ Q197 }} episode group?

	1	2	3	4	5
	Strongly disagree	Somewhat disagree	Neither agree nor disagree	Somewhat agree	Strongly agree
	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Please share any comments or feedback on the clinical themes for this episode group, including any suggestions you may have on additional clinical themes that may be useful to include in measure reporting.

207. To what extent do you agree or disagree with the following statements regarding the {{ Q197 }} cost measure:

1 2 3 4 5
Strongly disagree Somewhat disagree Neither agree nor disagree Somewhat agree Strongly agree

The pre-trigger services assigned to this episode group represent clinically related services the attributed clinician can reasonably influence.

The post-trigger services assigned to this episode group represent clinically related services the attributed clinician can reasonably influence.

208. Please share any comments or feedback on the pre-trigger services assigned to this episode group, including suggestions on additional pre-trigger services to consider or removal of current pre-trigger services.

209. Please share any comments or feedback on the post-trigger services assigned to this episode group, including suggestions on additional post-trigger services to consider or removal of current post-trigger services.

210. Please share any additional comments or feedback on the "Assigning Costs to the Episode Group" component of episode-based cost measures .

Attributing the Episode Group to Clinicians

211. To what extent do you agree or disagree with the following statements regarding the {{ Q197 }} cost measure:

1 2 3 4 5
Strongly disagree Somewhat disagree Neither agree nor disagree Somewhat agree Strongly agree

The draft attribution rules identify the clinician(s) responsible for treating a patient with this condition or performing this procedure.

212. Please share any additional comments or feedback on the "Attributing the Episode Group to Clinicians" component of episode-based cost measures.

Risk Adjusting the Episode Group

213. To what extent do you agree or disagree with the following statements regarding the {{ Q197 }} cost measure:

1 2 3 4 5
Strongly disagree Somewhat disagree Neither agree nor disagree Somewhat agree Strongly agree

The draft risk adjustment variables account for major factors outside of the clinicians' control.

The draft exclusions criteria identified for this episode group are clinically accurate.

214. Please share any comments or feedback on the risk adjustment variables for this episode group, including suggestions on additional variables to consider or removal of current variables.

215. Please share any comments or feedback on the exclusions for this episode group, including suggestions on additional exclusions to consider or removal of current exclusions.

216. Please share any additional comments or feedback on the "Risk Adjusting the Episode Group" component of episode-based cost measures.

Aligning Cost with Quality

217. Please share any comments on the "Aligning Cost with Quality" component of episode-based cost measures .

Comment Upload

Comment Upload

218. If you would prefer to submit a comment via PDF or Microsoft document or as an addition to your responses in this survey, please attach the document here.

Comments may be submitted by uploading documents here. Only PDF, DOC, and DOCX files are supported.

Choose File

No file chosen

End of Survey

Thank you for completing the MACRA Episode-Based Cost Measure Field Testing Feedback Survey. We appreciate your feedback, and will take your comments into consideration for measure refinement and future measure development activities.

If you have any questions, please email us at: QPPCostMeasureTesting@ketchum.com.