

Topped Out Measures

Measures in the QPP and QCDR programs are designed to measure and improve areas where there is a significant performance gap among clinicians. When general performance has improved such that there is no demonstrable gap in performance (quantitatively speaking: statistically indistinguishable performance at the 75th and 90th percentiles), a measure is considered “**topped out**”: there is no more room for improvement among the majority of physicians.

Measures with a benchmark that are identified as topped out for two years will have their scores reduced and be removed from use over the course of 4 years. For 2018, there are 6 topped out measures, including two that can be reported through AQUIRE: **AUGS23** (Selection of Prophylactic Antibiotics) and **AUGS25** (Venous Thromboembolism (VTE) Prophylaxis). High performance in these measures in 2017 earned you 10 points maximum; for 2018, the maximum points that can be earned is **7 points**. In subsequent years, the possible points earned will decrease even further and in three years the measure will no longer be available.

What can you do to increase your score as measures get topped out? Start by reporting AUGS QCDR Measures! Measures that do not have a benchmark can only earn **3 points**; measures with a benchmark can earn up to **10 points**. In order for our measures to be benchmarked, we need **20 providers** to report on at least **20 cases** (per measure). Gaining benchmarks for our measures will increase your possible points even as general surgery measures are phased out!