

## **Impact of Implementing an Incentivized Quality Improvement Program on Patient Reported Outcome Measures (PROMs) at Ambulatory Surgery Centers (ASC)**

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**INTRODUCTION:** In 2018, the Michigan Arthroplasty Registry Collaborative Quality Initiative (MARCQI) began a quality improvement (QI) program to incentivize pre- and post-operative Patient-Reported Outcome Measures (PROM) collection for patients undergoing primary total joint arthroplasty (TJA). The program demonstrated dramatic improvement in PROMs collection while primarily implemented at incentivized hospital sites, while non-incentivized Ambulatory Surgery Centers (ASC) collected at a much lower rate. Therefore, in January 2023, MARCQI introduced an incentivized quality improvement (QI) scorecard for PROMs collection for ASCs. This study examines the change in PROMs collection from the pre- to post-incentive period for primary TJA at ASCs.

**METHODS:** Retrospective qualitative data reviewed of 6,745 primary [THA](#) and 11,069 primary knee cases performed at ASC's. Collection rates were calculated for cases performed pre-incentive (July 1, 2021 – December 31, 2022) and post-incentive (January 1, 2023 – June 30, 2024). Patient characteristics including age, BMI, sex, diabetes, ASA, SDI (social deprivation index), and insurance type were compared between the two groups. Chi-square and ANOVA test was used with alpha = 0.05.

**RESULTS:** After scorecard implementation, pre-op collection of PROMs increased for THA (HOOS JR) from 66.2% to 87.0% ( $p < 0.0001$ ), and for [knees](#) (KOOS JR) from 68.6% to 86.3% ( $p < 0.0001$ ). Matched pre- and post-op TKA collection improved from 39.0% to 50.0% ( $p < 0.0001$ ), and matched THA collection improved from 30.5% to 42.5% ( $p < 0.0001$ ). Patient BMI, sex, diabetes status and SDI were not significantly different between the pre- and post-incentive groups. A significant difference was seen in age, ASA, and insurance status (all  $p < 0.0001$ ) between the two groups.

**DISCUSSION AND CONCLUSION:** An incentivized QI program led to increased PROMs collection in patients undergoing primary TJA at ASCs within [18 months](#) of implementation. Incentivization for participation and completion may improve ASC compliance with QI work and PROMS collection.