FACT SHEET
Summary of Venous Thromboembolism (VTE) Changes
for 1/1/14 + Discharges

VTE-1: Venous Thromboembolism Prophylaxis
- The algorithm was revised to account for the new allowable value (Value 9- Aspirin) in the data element VTE Prophylaxis and ICU VTE Prophylaxis. This change was necessary to accommodate changes in VTE prophylaxis guidelines for elective total hip and knee arthroplasty and hip fracture surgery applicable to the SCIP-VTE-2 measure. Aspirin alone is not recommended as VTE prophylaxis for the VTE population.

VTE-3: Venous Thromboembolism Patients with Anticoagulation Overlap Therapy
- A NEW data element Reason for No Overlap Therapy was created to exclude cases with documentation of reasons for not administering overlap therapy.

The information below consists of clarifications and changes in abstraction instructions.

Data Element or Table: ICU Admission or Transfer
- Notes for Abstraction for VTE were clarified to include instructions that if the patient was admitted or transferred to the ICU anytime during this hospitalization regardless of the patient location select value “1” (Yes).

Data Element or Table: Monitoring Documentation
- Exclusion Guidelines for Abstraction were changed to clarify the duration of IV Unfractionated Heparin and to specify the exclusion of the route IV push.

Data Element or Table: Overlap Therapy
- Multiple changes were made to clarify the appropriate documentation needed to inquire if overlap therapy did occur. Since there are extensive revisions to this data element, it is suggested that the Definition, Suggested Data Question, Allowable Values, Notes for Abstraction, Suggested Data Sources, and the Inclusion Guidelines for Abstraction areas be reviewed in the manual.

Data Element or Table: Reason for Discontinuation of Parenteral Therapy
- A defined timeframe was determined, requiring explicit documentation for patients who did not receive five days of overlap therapy, or had an INR less than 2.0.
- Instructions were added to clarify that reasons for discontinuation of overlap therapy must be documented by a Physician/APN/PA or pharmacist within the same day that the parenteral therapy was discontinued.
- Instructions were added to state that if rivaroxaban (Xarelto) is ordered or administered during hospitalization or prescribed at discharge, select “Yes.”
- Inclusion Guidelines for Abstraction were changed.
**Data Element or Table: Reason for No VTE Prophylaxis- Hospital Admission**

- The data element definitions were re-defined.
- Notes for Abstraction were changed to clarify acceptable timeframe and reasons for no VTE prophylaxis.
- Inclusion and Exclusion Guidelines for Abstraction were changed.

**Data Element or Table: VTE Prophylaxis**

- Allowable Value 9: Aspirin was added.
- Notes for Abstraction were clarified to state that aspirin is not an approved medication for prophylaxis in the VTE population. If aspirin is the only source of prophylaxis found in the record, select “A.”

**Data Element or Table: VTE Prophylaxis Status**

- Notes for Abstraction were clarified to include instructions to select “3” for patients receiving anticoagulant therapy other than warfarin for atrial fibrillation or other conditions.

**Data Element or Table: Appendix H, Table 2.1 VTE Prophylaxis Inclusion Table**

- Eliquis® (apixaban) was added.
- Brand names for mechanical VTE prophylaxis were removed.
- Footnotes were added:
  1. The U.S. Food and Drug Administration has approved Eliquis (apixaban) to reduce the risk of stroke and systemic embolism in patients with non-valvular atrial fibrillation.
  2. The U.S. Food and Drug Administration has approved Xarelto (rivaroxaban) to reduce the risk of blood clots, deep vein thrombosis (DVT) and pulmonary embolism (PE) following knee or hip replacement surgery only. It is additionally approved: to reduce the risk of stroke in patients with non-valvular atrial fibrillation; for treatment of DVT or PE; to reduce the risk of recurrent DVT and PE following initial treatment.

For a complete list of changes please see the “Release Notes,” located in the Specifications Manual for National Hospital Inpatient Quality Measures for discharges 1/1/2014. The manual can be found at:

http://www.qualitynet.org/dcs/ContentServer?c=Page&pagename=QnetPublic%2FPage%2FQnetTier2&cid=1141662756099

OR


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