

### Assessment and Classification of Disease Prognosis

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*This measure is to be reported for all patients aged 18 years and older with RA — a minimum of **once** per reporting period.*

#### Measure description

Percentage of patients 18 years and older with a diagnosis of RA who have an assessment and classification of disease prognosis at least once within 12 months

#### What will you need to report for each patient with RA for this measure?

If you select this measure for reporting, you will report:

- Whether or not you assessed and classified disease prognosis, using clinical markers<sup>1</sup>. Disease prognosis should be classified as either poor<sup>2</sup> or good. Patients will fall into one of the two categories below:
  - Disease prognosis for rheumatoid arthritis assessed, poor prognosis documented OR
  - Disease prognosis for rheumatoid arthritis assessed, good prognosis documented

#### What if this process or outcome of care is not appropriate for your patient?

Some measures provide an opportunity for the physician or eligible health professional to document when a process or outcome of care is not appropriate for a given patient (also called performance exclusions). Because this measure is applicable to most if not all patients, there are no allowable performance exclusions.

<sup>1</sup>Classification of disease prognosis should be based upon, at a minimum, the following clinical markers: functional limitation (eg, HAQ Disability Index), extraarticular disease (eg, vasculitis, Sjogren's syndrome, RA lung disease, rheumatoid nodules), rheumatoid factor (RF) positivity, positive anti-cyclic citrullinated peptide (anti-CCP) antibodies (both characterized dichotomously, per CEP recommendation), and/or bony erosions by radiography.

<sup>2</sup>RA patients with features of poor prognosis have active disease with high tender and swollen joint counts, often have evidence of radiographic erosions, elevated levels of RF and or anti-CCP antibodies, and an elevated erythrocyte sedimentation rate, and an elevated C-reactive protein level.