

**Quality ID #420: Varicose Vein Treatment with Saphenous Ablation: Outcome Survey**  
– National Quality Strategy Domain: Effective Clinical Care  
– Meaningful Measure Area: Functional Outcomes

**2023 COLLECTION TYPE:**  
**MIPS CLINICAL QUALITY MEASURES (CQMS)**

**MEASURE TYPE:**  
Patient Reported Outcome -Based Performance Measure – High Priority

**DESCRIPTION:**  
Percentage of patients treated for varicose veins (CEAP C2-S) who are treated with saphenous ablation (with or without adjunctive tributary treatment) that report an improvement on a disease specific patient reported outcome survey instrument after treatment.

**INSTRUCTIONS:**  
This measure is to be submitted **each time** a saphenous ablation procedure is performed for the treatment of varicose veins during the performance period. This measure may be submitted by Merit-based Incentive Payment System (MIPS) eligible clinicians who perform the quality actions described in the measure based on the services provided and the measure-specific denominator coding.

**Measure Submission Type:**  
Measure data may be submitted by individual MIPS eligible clinicians, groups, or third party intermediaries. The listed denominator criteria are used to identify the intended patient population. The numerator options included in this specification are used to submit the quality actions as allowed by the measure. The quality data codes listed do not need to be submitted by MIPS eligible clinicians, groups, or third party intermediaries that utilize this modality for submissions; however, these codes may be submitted for those third party intermediaries that utilize Medicare Part B claims data. For more information regarding Application Programming Interface (API), please refer to the Quality Payment Program (QPP) website.

**DENOMINATOR:**  
All patients who are treated for varicose veins with saphenous ablation and who receive an outcomes survey before and 3-6 months after treatment

**Denominator Criteria (Eligible Cases):**

All patients, regardless of age

**AND**

**Diagnosis for varicose veins (ICD-10-CM):** I83.811, I83.812, I83.813, I83.819

**AND**

**Patient procedure during the performance period (CPT):** 36465, 36473, 36475, 36478, 36482

**WITHOUT**

**Telehealth Modifier:** GQ, GT, 95, POS 02

**NUMERATOR:**  
Patients whose outcome survey score improved when assessed 3-6 months following treatment

**Definition:**

**Outcome Survey** – A normalized and validated “outcome survey” developed for the patient reported outcomes for saphenous vein ablation. The disease specific standardized outcome survey utilized must be documented in the medical record. Examples of outcome surveys include, but are not limited to:

- Venous Insufficiency Epidemiological and Economic Study-Quality of Life (VEINES-QOL)
- Chronic Venous Insufficiency Questionnaire (CIVIQ)

- Aberdeen Varicose Veins Questionnaire (AVVQ)
- Specific Quality of Life and Outcome Response - Venous (SQOR-V)

**Numerator Options:**

***Performance Met:***

Patient survey score improved from baseline following treatment (**G9603**)

**OR**

***Denominator Exception:***

Patient survey results not available (**G9604**)

**OR**

***Performance Not Met:***

Patient survey score did not improve from baseline following treatment (**G9605**)

**RATIONALE:**

Surrogate measures to measure the success of varicose vein treatment with saphenous ablation have numerous flaws. The ultimate measure of success of saphenous ablation for varicose veins is an improved quality of life. This quality measure motivates physicians to assess changes in quality of life after as compared with before an ablation using one of several standardized survey instruments. This enables objective quantification of the improvement in quality of life that saphenous vein ablation provides patients with CEAP C2 disease.

**CLINICAL RECOMMENDATION STATEMENTS:**

The Intersocietal Accreditation Commission (IAC) - Vein Center Division strongly recommends the use of the disease specific patient reported outcome (PRO) instruments before and after ablation and to use the data collected for an analysis of the quality of care being delivered by the center. These guidelines have been created by the IAC and are being implemented by several groups including Society for Vascular Surgery (SVS).

The American Venous Forum recommends the use of PRO instruments before and after vein treatment for all patients.

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