



## Performance Measure Review

ACP does not support QPP measure 052: "COPD: Inhaled Bronchodilator Therapy." Current performance does not meet best practices, there is opportunity for improvement, and patients with COPD should be prescribed LABA or LAMA monotherapy or combination therapy. However, measure developers cite outdated evidence to form the basis of the measure. There is unclear evidence to differentiate the benefit of specific bronchodilator therapy on COPD outcomes. Large studies demonstrate the benefit of LABA-LAMA combination therapy on decreased exacerbation rates, but therapy does not significantly impact mortality rates. Furthermore, the measure lacks specificity regarding patients' reported symptoms, COPD disease severity to which the measure applies, and recommended bronchodilator therapy details. We suggest the developers revise the numerator specifications to stipulate either short-acting or long-acting inhaled bronchodilator therapy and the denominator should specify FEV1 <60% as opposed to the ratio to account for disease severity. Also, testing results demonstrate weak measure reliability (numerator kappa score: 0.1444 CI). Moreover, we note several issues around measure feasibility. First, electronic databases may not capture documentation of active symptoms. Second, clinicians may encounter interoperability barriers to data retrieval if pulmonary functions tests (PFT) are documented in proprietary information systems. Third, the measure requires electronic or paper chart data abstraction OR implementation of an automatic PFT data retrieval process, and fourth, it is difficult to report the denominator specifications without specificity regarding patient symptoms.