PROMs FAQs

PROMs play an increasingly important role in orthopaedic practice, but questions remain about their requirement, benefits, and operational impact. This document provides practical answers to common surgeon questions related to PROM implementation, workload, patient participation, reporting expectations, and quality improvement.

What are PROMs and why do they matter?

PROMs are validated tools that capture a patient's perspective on pain, function, and quality of life. They provide information that may not be captured through imaging, physical examination, or other clinical measures alone.[1]



PROMs can help clinicians:

- **Improve** clinical decision-making and patient outcomes.[1,2]
- **Support** shared decision-making and patient-centered care.[1,2]
- **Set expectations** before treatment or surgery.[1,2]
- **Monitor** recovery and outcomes over time.[1,3]
- **Identify** patients who may benefit from additional evaluation or intervention.[1,7]
- **Measure** and demonstrate the value of care delivered.[1,2]

PROMs are also increasingly being used for quality reporting, performance measurement, and value-based reimbursement programs. They are no longer used solely for research purposes but are becoming an important component of routine clinical practice.[1,2,3]

Is PROM Integration Required?

PROM collection is increasingly being incorporated into quality reporting and value-based care programs.

- CMS has implemented PROM-based performance measures for procedures such as total hip and total knee arthroplasty.[3]
- Participating hospitals must meet PROM submission requirements to remain compliant with applicable reporting programs.[3]
- PROM performance data may be used for public reporting and can influence future reimbursement through value-based payment programs.[3,6]
- While PROM collection is not currently required across all orthopaedic specialties and practice settings, its role in quality measurement and performance assessment continues to expand.[1,6]

Will PROM Integration Increase my Workload?

Implementing a PROMs program requires an initial investment of time and resources to establish workflows, assign responsibilities, and train staff.[1]

However, the long-term impact on clinician workload can be minimized through thoughtful program design.

Strategies include:

- Educating patients and staff on the purpose and value of PROMs.[2]
- Collecting PROMs before appointments whenever possible.[1]
- Using automated survey distribution and reminder systems.[1,4]
- Delegating operational tasks, such as monitoring completion rates and patient follow-up, to designated staff members.[1,2]
- Integrating PROM collection into existing clinical workflows rather than creating separate processes, identifying PROM champions, and engaging key stakeholders in workflow design.[1,2]
- Many of the challenges associated with PROM implantation stem from workflow design rather than the surveys themselves. With appropriate planning and support, PROM collection can become a routine part of clinical practice.[1,2]

What are the main barriers to implementing PROMs?

Common challenges include:

- **Staff time and workflow burden.** Practices often struggle to identify who is responsible for distributing surveys, monitoring completion rates, following up with non-responders, and managing data over time.[1,4]
- **Obtaining complete patient responses.** Response rates can be affected by survey fatigue, lack of patient understanding, and technology barriers.[1,5]

How can practices improve patient participation in PROMs collection?

Patient participation can be improved through thoughtful program design. Strategies that have been shown to support higher completion rates include:

- **Offering multiple completion options,** such as email, text messaging, patient portals, and in-clinic collection, to meet patients where they are.[4]
- **Providing surveys in the patient's preferred language** whenever possible to reduce barriers and improve understanding.[1]
- **Educating patients on why PROMs matter** and how their responses will be used to inform their care and monitor outcomes.[1,4]
- **Using automated reminders and follow-up outreach** for patients who do not initially respond.[4]

What happens if I don't collect PROMs?

- **Potential reimbursement implications.** CMS now requires hospitals participating in the THA/TKA Patient-Reported Outcome-Based Performance Measure (PRO-PM) to meet PROM submission requirements. Hospitals that fail to meet reporting requirements may be subject to reductions in their Annual Payment Update under the Hospital Inpatient Quality Reporting Program.[3]
- **Reduced ability to demonstrate value and monitor outcomes.** PROMs provide insight into how patients are functioning before and after treatment. Without them, practices may have limited ability to objectively demonstrate patient improvement, participate in value-based care initiatives, or identify patients who may need additional support during recovery.[1,3]
- **Missed opportunities for quality improvement and benchmarking.** PROMs can help practices evaluate outcomes over time, identify areas for improvement, and compare performance across providers, procedures, and patient populations.[1]

References

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