



# 2027 Value Based Reimbursement (VBR)

## METRICS

### Measurement period:

- Participation metrics: *January 1, 2026 – November 15, 2026*
- Quality Improvement (QI) metrics: *July 1, 2025 – June 30, 2026 unless otherwise noted*

Fee Increase	Metric #	Metric type & description
	Physician level <b>REQUIRED</b> metrics	
	1	Surgeon attendance at 3 of 3 site-based quality improvement (QI) meetings
	2	Direct access to clinical office notes to abstract 90-day events for 99% of MARCQI surgeon cases
	3	Share and discuss 2026 MARCQI Individual surgeon level report after downloading from MARCQI data registry with 2 peer orthopaedic surgeons
	Physician level <b>OTHER</b> metrics	
	4	<b>PROs Collection:</b> Surgeon level completed primary Pre-op and 1 post-op (14-425 days) HOOS -JR or KOOS-JR + PROMIS10 (Overall average of surgeries performed = $\geq 60\%$ )  When the difference between the PROS submission and completion rate at the site is $>5\%$ , the PROS completion rate will be used for this metric.
	5	Surgeon level 90-Day post-operative hip dislocation rate of $< 1.0\%$ for all primary hip surgeries performed on 07.01.2025 - 06.30.2026
	6	Identify quality improvement next steps following 2026 MARCQI Individual surgeon report review
	Collaborative-wide level metrics	
	7	<b>90-Day Hip fracture:</b> Reduce or maintain COLLABORATIVE level rate of 90-Day Hip fracture for all primary HIP procedures (excluding conversions) performed on 07.01.2025 - 06.30.2026 from FY2024 rate of $\leq 0.8\%$
	8	Post-operative opioid prescribing patterns following total hip arthroplasty for opioid naïve patients performed on 07.01.2025 - 06.30.2026 at $\leq 240$ OME at discharge within the collaborative is $\geq 85\%$
	9	DEVICE SELECTION: 90% of MARCQI site Clinical Champions provide a letter of their site's implant utilization and outcomes to their site's procurement/contracting or C-suite by November 15, 2026.

Fee Increase	Metrics met	Metric type
102%	All: 1, 2, 3	Physician level <b>REQUIRED</b> metrics
	2 of 3: 4, 5, 6	Physician level <b>OTHER</b> metrics
	1 of 3: 7, 8, 9	Collaborative-wide level metrics
103%	All: 1, 2, 3	Physician level <b>REQUIRED</b> metrics
	All: 4, 5, 6	Physician level <b>OTHER</b> metrics
	2 of 3: 7, 8, 9	Collaborative-wide level metrics
105%	All: 1, 2, 3	Physician level <b>REQUIRED</b> metrics
	All: 4, 5, 6	Physician level <b>OTHER</b> metrics
	All: 7, 8, 9	Collaborative-wide level metrics



# 2027 Value Based Reimbursement (VBR)

## Timelines

Metric	Timelines
<b>3 of 3 Physician level required metrics met</b>	
1. Surgeon attendance at 3 of 3 site-based quality improvement (QI) meetings	<ul style="list-style-type: none"> <li>• 1<sup>st</sup> meeting attendance: <b>02.08.2026 – 05.14.2026</b></li> <li>• 2<sup>nd</sup> meeting attendance: <b>05.16.2026 – 10.01.2026</b></li> <li>• 3<sup>rd</sup> meeting attendance: <b>10.03.2026 – 11.15.2026</b></li> </ul>
2. Direct access to clinical office notes to abstract 90-day events for 99% of MARCQI surgeon cases	Cases performed: 07.01.2025 – 06.30.2026
3. Share and discuss 2026 MARCQI Individual surgeon level report after downloading from MARCQI data registry with 2 peer orthopaedic surgeons	<ul style="list-style-type: none"> <li>• <b>10.16.2026</b> – Last day to request a surgeon database account</li> <li>• <b>11.02.2026</b> – Last day to download 2026 Individual Surgeon Report and share with peers</li> <li>• <b>11.15.2026</b> – Last day for peers to submit their peer review attestation</li> </ul>
<b>2 of 3 Physician level other metrics met</b>	
4. PROs Collection: Surgeon level completed primary Pre-op and 1 post-op (14-425 days) HOOS -JR or KOOS-JR + PROMIS10 (Overall average as of surgeries performed on July 1, 2023 to 06.30.2025) is $\geq 60\%$  When the difference between the PROS submission and completion rate at the site is $>5\%$ , the PROS completion rate will be used for this metric.	Cases performed: 07.01.2023 – 06.30.2025  <ul style="list-style-type: none"> <li>• <b>11.05.2026</b> – Last day for data entry</li> </ul>
5. Surgeon level 90-Day post-operative hip dislocation rate of $< 1.0\%$ for all primary hip surgeries performed on 07.01.2025 - 06.30.2026	Cases performed: 07.01.2025 – 06.30.2026  <ul style="list-style-type: none"> <li>• <b>11.05.2026</b> – Last day for data entry</li> </ul>
6. Identify quality improvement next steps following 2026 MARCQI Individual surgeon report review	<ul style="list-style-type: none"> <li>• <b>11.02.2026</b> – Last day identify quality improvement next steps following surgeon report review</li> </ul>
<b>1 of 3 Collaborative-wide level metrics met</b>	
7. 90-Day Hip fracture: Reduce or maintain COLLABORATIVE level rate of 90-Day Hip fracture for all primary HIP procedures (excluding conversions) performed on 07.01.2025 - 06.30.2026 from FY2024 rate of $< 0.8\%$	Cases performed: 07.01.2025 – 06.30.2026
8. Post-operative opioid prescribing patterns following total hip arthroplasty for opioid naïve patients performed on 07.01.2025 - 06.30.2026 at $< 240$ OME at discharge within the collaborative is $> 85\%$	Cases performed: 07.01.2025 – 06.30.2026
9. DEVICE SELECTION: 90% of MARCQI site Clinical Champions provide a letter of their site's implant utilization and outcomes to their site's procurement/contracting or C-suite by November 15, 2026.	<ul style="list-style-type: none"> <li>• <b>11.15.2026</b> – Last day for clinical champions to submit attestation and next steps</li> </ul>