



Transforming Healthcare With Patient-Reported Outcomes

Why a System-Wide Strategy
is the Future of Care



www.patientiq.io
hello@patientiq.io

350 W. Ontario St, 3rd Floor
Chicago, IL 60654

Introduction: The Shift to Patient-Centered Care

Healthcare is evolving. Gone are the days when success was measured solely by clinical metrics like readmission rates or surgical complication statistics. Today, the patient's voice is taking center stage, and for good reason. Patient-reported outcomes (PROs)—direct insights from patients about their health status, quality of life, and satisfaction—are reshaping how we evaluate care quality and effectiveness. With the Centers for Medicare & Medicaid Services (CMS) leading the charge through initiatives like the Hospital Outpatient Patient-Reported Outcomes Measures (PRO-PM) program¹, health systems face a clear mandate: integrate PRO collection into the standard of care or risk falling behind in a value-based world.

Yet, adopting PROs isn't as simple as adding a survey to a patient visit. It requires a thoughtful, system-wide strategy to overcome workflow challenges, engage patients effectively, and turn data into actionable insights. This white paper explores why PROs matter, the growing CMS requirements driving their adoption, and how a comprehensive approach—supported by solutions like PatientIQ—can position health systems for success.

¹ Centers for Medicare & Medicaid Services. (n.d.). Home page. U.S. Department of Health and Human Services. <https://www.cms.gov>

The Growing Importance of PROs in Healthcare

PROs offer a window into the patient experience that traditional metrics can't capture. How does a patient feel six months after a knee replacement? Has their mobility improved after spinal fusion? Are they satisfied with their recovery after a mastectomy? These questions matter—not just to patients, but to providers, payers, and regulators.

Research underscores PROs' value. According to the National Institutes of Health, PROs assess health-related quality of life, functional status, and symptom burden², providing a holistic view of care outcomes. They empower shared decision-making, boost patient satisfaction, and align with the goals of value-based care, where outcomes trump volume. For health systems, PROs are more than a feel-good metric—they're a strategic asset, tied directly to CMS quality programs that influence reimbursement and public reporting.

Consider total joint replacements, like Total Hip Arthroplasty (THA) and Total Knee Arthroplasty (TKA). These procedures, common in outpatient settings, are prime candidates for PRO collection. CMS's Inpatient Quality Reporting (IQR) program already mandates PRO data for these surgeries, with outcomes set for public reporting by 2027³. Beyond orthopedics, PROs are gaining traction across specialties—spine surgeries, cardiac interventions, oncologic procedures, and more—reflecting a broader shift toward patient-centered accountability.



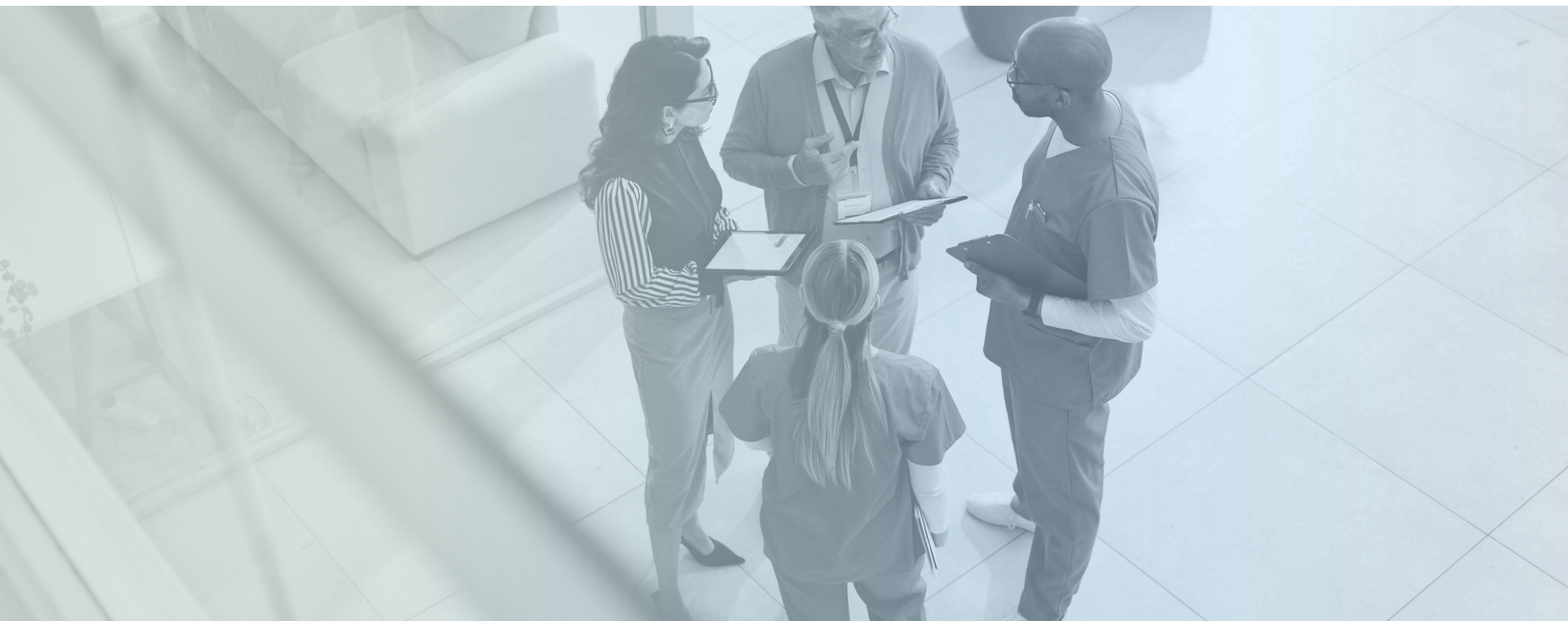
² National Institutes of Health. (n.d.). Patient-Reported Outcomes Measurement Information System (PROMIS). <https://www.healthmeasures.net/explore-measurement-systems/promis>

³ Centers for Medicare & Medicaid Services. (2024). Hospital Inpatient Quality Reporting Program. <https://www.cms.gov/medicare/quality-initiatives-patient-assessment-instruments/hospitalqualityinits/hospitalrhqdapu>

CMS and the Push for PRO Adoption

CMS is doubling down on PROs as part of its value-based care agenda. The Hospital Outpatient Quality Reporting (OQR) Program and the CY 2025 Hospital Outpatient Prospective Payment System (OPPS) updates highlight this focus. For specific outpatient procedures—think hip and knee replacements, spinal fusions, or bariatric surgeries—hospitals must collect PRO data pre- and post-operatively, often at 3, 6, or 12-month intervals.⁴ Tools like PROMIS, HOOS/KOOS, and EQ-5D are becoming standard for capturing these insights.

Why the emphasis? CMS sees PROs as a way to measure what matters most to patients, not just providers. Compliance isn't optional—hospitals that fail to meet these requirements risk financial penalties and miss out on performance-based incentives⁵. For multi-specialty health systems, the stakes are even higher. With PRO mandates spanning orthopedics, cardiology, oncology, and beyond, fragmented approaches won't suffice. A system-wide strategy is essential to ensure consistency, meet regulatory deadlines, and leverage PRO data for quality improvement.



⁴ Centers for Medicare & Medicaid Services. (2024). Hospital Outpatient Quality Reporting Program. <https://www.cms.gov/medicare/quality-initiatives-patient-assessment-instruments/hospitalqualityinits/hospitaloutpatientqualityreportingprogram>

⁵ Centers for Medicare & Medicaid Services. (2024). Medicare program; hospital outpatient prospective payment and ambulatory surgical center payment systems and quality reporting programs; physician-owned hospitals; patient safety and quality; final rule. Federal Register, 89(213), 89188-90234. <https://www.federalregister.gov/documents/2024/11/01/2024-24522/medicare-program-hospital-outpatient-prospective-payment-and-ambulatory-surgical-center-payment>

The Challenges of PRO Implementation

The benefits of PROs are clear, but implementation is where many health systems stumble. Research identifies key hurdles:



Workflow Integration:

Clinicians need solutions that fit seamlessly into busy schedules, not add administrative burdens.



Patient Engagement:

Consistent survey completion requires accessible, user-friendly tools—especially for diverse patient populations.



Data Accuracy and Analysis:

Collecting data is one thing; turning it into meaningful insights is another, requiring robust analytics and interoperability with electronic health records (EHRs).



Cost and Scalability:

Building internal PRO programs can strain budgets and resources, particularly for smaller systems or those spanning multiple specialties.

A siloed approach—where departments adopt PROs independently—only compounds these challenges. Variability in processes, tools, and metrics undermines data quality and compliance. Health systems need a unified strategy that standardizes collection, integrates with EHRs, and scales across specialties, from joint replacements to cancer care.

The Case for a System-Wide Strategy

A system-wide PRO strategy isn't just a nice-to-have—it's a necessity. Here's why:



Regulatory Compliance:

With CMS deadlines looming (e.g., 2027 for THA/TKA PRO reporting), a cohesive approach ensures all departments meet requirements, avoiding penalties.



Improved Outcomes:

Standardized PRO data reveals trends—like higher satisfaction after rotator cuff repairs or persistent pain after hysterectomies—driving targeted quality improvements.



Operational Efficiency:

Centralized tools reduce redundancies, streamline workflows, and cut costs compared to patchwork solutions.



Competitive Advantage:

Health systems that master PROs can showcase superior patient outcomes, attracting patients and payers in a value-driven market.

Take a multi-specialty health system as an example. Orthopedics might track HOOS/KOOS for joint replacements, while cardiology uses SF-36 for coronary interventions. Without a unified platform, data sits in silos, limiting its impact. A system-wide strategy, supported by technology, breaks down these barriers, delivering actionable insights across the enterprise.

Your Roadmap for System-Wide PRO Deployment

Developing a system-wide strategy for PRO collection can seem like an insurmountable task. The best place to start is with treatments and procedures where outcomes like pain relief, improved mobility, and quality of life are key indicators of success. CMS has identified specific surgeries that benefit from the collection of PROs. These procedures are the best place to start. They span departments and specialties. Simultaneous deployment of PRO surveys for these procedures will go a long way towards fostering a system-wide culture that prioritizes the patient perspective.

The surgeries often targeted for PRO collection include:



Bariatric Surgery:

- Gastric bypass or sleeve gastrectomy for weight loss



Cardiac Procedures:

- Coronary artery bypass grafting (CABG)
- Percutaneous coronary interventions



General Surgeries:

- Hernia repairs



Oncologic Surgeries

- Breast cancer surgery (mastectomy or lumpectomy)
- Colorectal cancer surgeries



Orthopedic Procedures:

- ACL reconstruction
- Rotator cuff repair



Spine Surgeries:

- Laminectomy/discectomy
- Spinal fusion



Total Joint Replacement:

- Total Hip Arthroplasty (THA)
- Total Knee Arthroplasty (TKA)



Urology and Gynecology:

- Hysterectomy
- Prostatectomy

PRO data must be collected both pre-operatively and post-operatively (typically 3, 6, & 12 months after surgery).

Commonly used PRO instruments for data collection include:

- PROMIS (Patient-Reported Outcomes Measurement Information System)
- HOOS/KOOS (Hip or Knee Disability and Osteoarthritis Outcome Scores)
- Oswestry Disability Index (ODI) for spine
- EQ-5D (EuroQol-5 Dimensions) for general health
- SF-36 or SF-12 (Short Form Health Surveys)

PatientIQ: Your Partner in PRO Success

This is where PatientIQ shines. As a leader in EHR-integrated PRO programs, PatientIQ offers a cloud-based platform that automates collection, integrates seamlessly with any EHR, and provides advanced analytics. Here's how we help health systems thrive:



Effortless Integration:

Our EHR-agnostic solution fits into existing workflows, reducing clinician burden and ensuring data flows smoothly.



Patient Engagement:

User-friendly tools—like procedure-specific education and recovery monitoring—boost participation rates, even among hard-to-reach patients.



Actionable Insights:

Our biostatistical analytics turn raw PRO data into benchmarks and trends, empowering quality improvement and research.



Regulatory Ready:

From THA/TKA to spine surgeries, we align with CMS requirements, helping you stay ahead of deadlines and maximize reimbursements.

Consider a real-world scenario: A health system using PatientIQ for joint replacements saw a **20% increase in patient survey completion and identified a gap in post-operative pain management**—all within months of implementation. That is the power of a system-wide approach backed by the right technology and expertise.

The Future of Care Starts Now

PROs are no longer optional—they're the future of healthcare. CMS's push, combined with patients' demand for personalized care, makes system-wide adoption inevitable. Health systems that act now—building a strategic, scalable PRO program—will lead the way in quality, compliance, and patient satisfaction.

PatientIQ is here to make that vision a reality. Our platform doesn't just collect data; it transforms how you deliver care, aligning your operations with the demands of value-based care. Ready to take the next step? Let's talk about how a system-wide PRO strategy can elevate your health system—for your patients, your providers, and your bottom line.