<u>2018 OPTIONS FOR INDIVIDUAL MEASURES:</u>
REGISTRY ONLY

<u>MEASURE TYPE:</u>
Process

<u>DESCRIPTION:</u>
Percentage of all patients with a diagnosis of Parkinson's Disease (or caregiver(s), as appropriate) who had rehabilitative therapy options (e.g., physical, occupational, or speech therapy) discussed in the past 12 months

<u>INSTRUCTIONS</u>**:**
This measure is to be submitted a minimum of **<u>once per performance period</u>** for patients with a diagnosis of Parkinson's disease seen during the performance period. This measure may be submitted by eligible clinicians who perform the quality actions described in the measure based on the services provided and the measure-specific denominator coding.

Measure Submission:
The listed denominator criteria is used to identify the intended patient population. The numerator options included in this specification are used to submit the quality actions allowed by the measure. The quality-data codes listed do not need to be submitted for registry submissions; however, these codes may be submitted for those registries that utilize claims data.

<u>DENOMINATOR:</u>
All patients regardless of age with a diagnosis of Parkinson's disease.

> **<u>Denominator Criteria (Eligible Cases):</u>**
> All patients regardless of age
> **AND**
> **Diagnosis for Parkinson's disease (ICD-10-CM):** G20
> **AND**
> **Patient encounter during the performance period (CPT):** 99201, 99202, 99203, 99204, 99205, 99211, 99212, 99213, 99214, 99215, 99304, 99305, 99306, 99307, 99308, 99309, 99310
> **WITHOUT**
> **Telehealth Modifier:** GQ, GT, 95, POS 02

<u>NUMERATOR:</u>
All patients with a diagnosis of Parkinson's Disease (or caregiver(s), as appropriate) who had rehabilitative therapy options (i.e., physical, occupational, and speech therapy) discussed in the past 12 months.

> *NUMERATOR NOTE: The 12 month look back period is defined as 12 months from the date of the denominator eligible encounter. Denominator Exception(s) are determined on the date of the denominator eligible encounter.*

> **<u>Numerator Options:</u>**
> *Performance Met:* Rehabilitative therapy options discussed with patient (or caregiver) **(4400F)**
>
> **OR**
>
> *Denominator Exception:* Documentation of medical reason(s) for not discussing rehabilitative therapy options with patient (or caregiver) **(4400F with 1P)**

<u>OR</u>

Performance Not Met: Rehabilitative therapy options not discussed with patient (or caregiver), reason not otherwise specified (**4400F with 8P**)

<u>RATIONALE:</u>

For those patients with Parkinson's disease who have impaired activities of daily living, therapy options such as physical, occupational, and speech therapy should be offered. Rehabilitative therapies play an important role in improving function and quality of life for these patients. Symptomatic therapy can provide benefit for many years. Patients with Parkinson's disease commonly develop dysarthria.

AAN QSS Neuro Alt (April 2006) Suchowersky O, Gronseth G, Perlmutter J, Reich S, Zesiewicz T, Weiner

WJ, Quality Standards Subcommittee of the American Academy of Neurology. Practice parameter: neuroprotective strategies and alternative therapies for Parkinson disease (an evidence-based review): report of the Quality Standards Subcommittee of the American Academy of Neurology. Neurology 2006 Apr 11; 66(7):976-82.

Factor, S. Weiner, W. Parkinson's disease: Diagnosis and Clinical Management. 2002

<u>CLINICAL RECOMMENDATION STATEMENTS:</u>

- Physiotherapy should be available for people with PD. Particular consideration should be given to:
  - gait re-education, improvement of balance and flexibility; enhancement of aerobic capacity; improvement of movement initiation; improvement of functional independence, including mobility and activities of daily living;
  - provision of advice regarding safety in the home environment. (Level B)(1)
- Occupational therapy should be available for people with PD. Particular consideration should be given to:
  - maintenance of work and family roles, home care and leisure activities; improvement and maintenance of transfers and mobility; improvement of personal self-care activities, such as eating, drinking, washing, and dressing; cognitive assessment and appropriate intervention. (Level D)(1)
- Speech and language therapy should be available for people with PD. Particular consideration should be given to: -Improvement of vocal loudness and pitch range, including speech therapy programs such as Lee Silverman Voice Treatment (LSVT) (Level B)(1)
- For patients with Parkinson's disease complicated by dysarthria, speech therapy may be considered to improve speech volume (Level C). Different exercise modalities, including multidisciplinary rehabilitation, active music therapy, treadmill training, balance training, and "cued" exercise training are probably effective in improving functional outcomes for patients with Parkinson's disease. For patients with Parkinson's disease, exercise therapy may be considered to improve function (Level C). (2)
- The results of this systematic review have suggested that progressive resistance exercise can be effective and worthwhile in people with mild to moderate Parkinson's disease, but carryover of these benefits may not occur in all measures of physical performance. We recommend that progressive resistance exercise should be implemented into clinical practice as a therapy for Parkinson's disease, particularly when the aim is improving walking capacity in such people. (3)

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2018 Registry Flow for Quality ID #293:
Parkinson's Disease: Rehabilitative Therapy Options

Denominator

Numerator

Start

All Patients Regardless of Age

— No → (to Not Included)

↓ Yes

Diagnosis of Parkinson's Disease as Listed in Denominator*

— No → (to Not Included)

↓ Yes

Encounter Codes as Listed in Denominator* (1/1/2018 thru 12/31/2018)

— No → (to Not Included)

↓ Yes

Telehealth Modifier: GQ, GT, 95, POS 02

— No → (to Not Included)

↓ No

Include in Eligible Population/Denominator (80 patients) **d**

Not Included in Eligible Population/Denominator

Rehabilitative Therapy Options Discussed with Patient (or Caregiver)

— Yes → **Data Completeness Met + Performance Met G4400F or equivalent (50 patients) a**

↓ No

Documentation of Medical Reason(s) for Not Discussing Rehabilitative Therapy Options with Patient (or Caregiver)

— Yes → **Data Completeness Met + Denominator Exception 4400F – 1P or equivalent (10 patients) b**

↓ No

Rehabilitative Therapy Options Not Discussed with Patient (or Caregiver), Reason Not Otherwise Specified

— Yes → **Data Completeness Met + Performance Not Met G4400F-8P or equivalent (10 patients) c**

↓ No

Data Completeness Not Met Quality-Data Code or equivalent not submitted (10 patients)

SAMPLE CALCULATIONS:

Data Completeness=

Performance Met (a=50 patients) + Denominator Exception (b=10 patients) + Performance Not Met (c=10 patients) = 70 patients = 87.50%

Eligible Population / Denominator (d=80 patients) = 80 patients

Performance Rate=

Performance Met (a=50 patients) = 50 patients = 83.33%

Data Completeness Numerator (70 patients) – Denominator Exception (b=10 patients) = 60 patients

* See the posted Measure Specification for specific coding and instructions to submit this measure.

NOTE: Submission Frequency: Patient-process

Please refer to the specific section of the Specification to identify the denominator and numerator information for use in submitting this Individual Specification. This flow is for registry data submission.

1. Start with Denominator

2. Check Patient Age:

    a. All Patients Regardless of Age, proceed to check Patient Diagnosis.

3. Check Patient Diagnosis:

    a. If Diagnosis of Parkinson's Disease as Listed in the Denominator equals No, do not include in Eligible Patient Population. Stop Processing.

    b. If Diagnosis of Parkinson's Disease as Listed in the Denominator equals Yes, proceed to check Current Encounter Performed.

4. Check Encounter Performed:

    a. If Encounter as Listed in the Denominator equals No, do not include in Eligible Patient Population. Stop Processing.

    b. If Encounter as Listed in the Denominator equals Yes, proceed to check Telehealth Modifier.

5. Check Telehealth Modifier:

    a. If Telehealth Modifier equals Yes, do not include in Eligible Patient Population. Stop Processing.

    b. If Telehealth Modifier equals No, include in Eligible Population.

6. Denominator Population:

    a. Denominator population is all Eligible Patients in the denominator. Denominator is represented as Denominator in the Sample Calculation listed at the end of this document. Letter d equals 80 patients in the Sample Calculation.

7. Start Numerator

8. Check Rehabilitative Therapy Options Discussed with Patient (or Caregiver):

    a. If Rehabilitative Therapy Options Discussed with Patient (or Caregiver) equals Yes, include in Data Completeness Met and Performance Met.

    b. Data Completeness Met and Performance Met is represented in the Data Completeness and Performance Rate in the Sample Calculation listed at the end of this document. Letter a equals 50 patients in the Sample Calculation.

    c. If Rehabilitative Therapy Options Discussed with Patient (or Caregiver) equals No, proceed to Documentation of Medical Reason(s) for Not Discussing Rehabilitative Therapy Options with Patient (or Caregiver).

9. Check Documentation of Medical Reason(s) for Not Discussing Rehabilitative Therapy Options with Patient (or Caregiver):

   a. If Documentation of Medical Reason(s) for Not Discussing Rehabilitative Therapy Options with Patient (or Caregiver) equals Yes, include in Data Completeness Met and Denominator Exception.

   b. Data Completeness Met and Denominator Exception is represented in the Data Completeness and Performance Rate in the Sample Calculation listed at the end of this document. Letter b equals 10 patients in the Sample Calculation.

   c. If Documentation of Medical Reason(s) for Not Discussing Rehabilitative Therapy Options with Patient (or Caregiver) equals No, proceed to Rehabilitative Therapy Options Not Discussed with Patient (or Caregiver), Reason Not Otherwise Specified.

10. Check Rehabilitative Therapy Options Not Discussed with Patient (or Caregiver), Reason Not Otherwise Specified:

    a. If Rehabilitative Therapy Options Not Discussed with Patient (or Caregiver), Reason Not Otherwise Specified equals Yes, include in Data Completeness Met and Performance Not Met.

    b. Data Completeness Met and Performance Not Met is represented in the Data Completeness in the Sample Calculation listed at the end of this document. Letter c equals 10 patient in the Sample Calculation.

    c. If Rehabilitative Therapy Options Not Discussed with Patient (or Caregiver), Reason Not Otherwise Specified equals No, proceed to Data Completeness Not Met.

11. Check Data Completeness Not Met:

    a. If Data Completeness Not Met equals No, Quality Data Code or equivalent not submitted. 10 patients have been subtracted from the Data Completeness Numerator in the Sample Calculation.

SAMPLE CALCULATIONS:

Data Completeness=

$$\frac{\text{Performance Met (a=50 patients) + Denominator Exception (b=10 patients) + Performance Not Met (c=10 patients)}}{\text{Eligible Population / Denominator (d=80 patients)}} = \frac{70 \text{ patients}}{80 \text{ patients}} = \textbf{87.50\%}$$

Performance Rate=

$$\frac{\text{Performance Met (a=50 patients)}}{\text{Data Completeness Numerator (70 patients) – Denominator Exception (b=10 patients) = 60 patients}} = \frac{50 \text{ patients}}{} = \textbf{83.33\%}$$