

Quality ID #485: Psoriasis – Improvement in Patient-Reported Itch Severity

2023 COLLECTION TYPE: **MIPS CLINICAL QUALITY MEASURES (CQMS)**

MEASURE TYPE:
Patient-reported Outcome-based Performance Measure – High Priority

DESCRIPTION:
The percentage of patients, aged 18 years and older, with a diagnosis of psoriasis where at an initial (index) visit have a patient reported itch severity assessment performed, score greater than or equal to 4, and who achieve a score reduction of 2 or more points at a follow up visit.

INSTRUCTIONS:
This outcome measure is to be submitted at **each denominator eligible visit** for patients with a diagnosis of psoriasis seen during the performance period. This measure may be submitted by Merit-based Incentive Payment System (MIPS) eligible clinicians who perform the quality actions described in the measure based on the services provided and the measure-specific denominator coding.

NOTE: Patient encounters for this measure conducted via telehealth (e.g., encounters coded with GQ, GT, 95, or POS 02 modifiers) are allowable.

Measure Submission Type:
Measure data may be submitted by individual MIPS eligible clinicians, groups, or third-party intermediaries. The listed denominator criteria are used to identify the intended patient population. The numerator options included in this specification are used to submit the quality actions as allowed by the measure. The quality data codes listed do not need to be submitted by MIPS eligible clinicians, groups, or third-party intermediaries that utilize this modality for submissions; however, these codes may be submitted for those third party intermediaries that utilize Medicare Part B claims data. For more information regarding Application Programming Interface (API), please refer to the Quality Payment Program (QPP) website.

DENOMINATOR:
All patients aged 18 years and older, with a diagnosis of psoriasis with an initial (index visit) Numeric Rating Scale (NRS), Visual Rating Scale (VRS), or ItchyQuant assessment score of greater than or equal to 4 who are returning for a follow-up visit

Definitions:

Numeric Rating Scale (NRS) for Pruritis – The NRS is comprised of one item and represents the numbers 0 (“no itch”) to 10 (“worst imaginable itch”). Patients are asked to rate the intensity of their itch over the last 24 hours

Visual Rating Scale (VRS) for Pruritis – The VRS is comprised of one item and represents the numbers 0 (“no itch”) to 10 (“worst imaginable itch”). Patients are asked to rate the intensity of their itch over the last 24 hours.

ItchyQuant – An illustrated numeric rating scale for itch severity and represent the numbers 0 (“no itch”) to 10 (“worst itch imaginable”). Patients are asked to rate itch severity over the past 7 days.

DENOMINATOR NOTE: The initial (index) assessment and the follow-up encounter for assessment must occur during the measurement period.

*Signifies that this CPT Category I code is a non-covered service under the Medicare Part B Physician Fee

Schedule (PFS). These non-covered services should be counted in the denominator population for MIPS CQMs.

Denominator Criteria (Eligible Cases):

Patients aged ≥ 18 years on the date of the encounter

AND

Diagnosis of psoriasis (ICD-10-CM): L40.0, L40.1, L40.2, L40.3, L40.4, L40.8, L40.9

AND

At least two patient encounters during the performance period (CPT): 99202, 99203, 99204, 99205, 99211, 99212, 99213, 99214, 99215, 99242*, 99243*, 99244*, 99245*, 99441, 99442, 99443

AND

Initial (index visit) Numeric Rating Scale (NRS), Visual Rating Scale (VRS), or ItchyQuant assessment score of greater than or equal to 4: M1196

NUMERATOR:

Patients who achieve an assessment score that is reduced by 2 or more points (minimal clinically important difference) from the initial (index) assessment score

Numerator Instructions:

To successfully report this measure, the physician(s) and/or provider(s) of the same clinical practice must use the same assessment tool for both the initial (index) AND follow-up assessment using one of the validated tools (NRS, VRS, or ItchyQuant). If a patient has multiple follow-up visits within the measurement period, the last (most recent) visit should be used. Eligible providers who develop the care plan for the patient at the initial (index) visit will be eligible to report this measure.

To satisfy this measure, a patient must achieve any of the following score reductions:

Table 1: Initial Assessment Score Difference

Initial (Index Visit) Assessment Score	Minimal Clinically Important Difference (2pts)
10	8 or lower
9	7 or lower
8	6 or lower
7	5 or lower
6	4 or lower
5	3 or lower
4	2 or lower

Numerator Options:

Performance Met:

Itch severity assessment score is reduced by 2 or more points from the initial (index) assessment score to the follow-up visit score (**M1197**)

OR

Performance Not Met:

Itch severity assessment score was not reduced by at least 2 points from initial (index) score to the follow-up visit score or assessment was not completed during the follow-up encounter (**M1198**)

RATIONALE:

Psoriasis is a chronic inflammatory disease in which pruritus is a frequent symptom. Approximately 7.4 million people in the United States have psoriasis. Direct costs of the disease are estimated between \$51.7 and \$63.2 billion, with the

total economic burden estimated to be between \$112 and \$135 billion (Brezinski, 2015).

Chronic inflammatory skin diseases, such as psoriasis, are pruritic and tremendously burdensome; with more than 70 percent of psoriasis patients suffering from itch (Reich, 2016). Itch has profound effects on patients, especially in geriatric populations, where there is increased incidence of pruritus (Yalçin, 2006; Cohen, 2012)). For those over 65 years old, itch is the most common skin complaint (Berger, 2011). The number of patients with pruritus is expected to increase as the elderly population grows – becoming 25 percent of the US population by 2025 (Grozdev, 2011).

Pruritus is a frequent and onerous symptom of psoriasis and, on its own, has significant effects on patients' quality of life. In a study, investigators quantified pruritic burden in a cross-sectional analysis investigating chronic pruritus and pain. They demonstrated that the quality of life impact was due to the severity of the symptom, rather than whether the symptom was pain or pruritus. Moreover, they elucidated a mean health utility score of 0.87 from chronic pruritus (CP) patients, meaning that on average, a patient would give up 13 percent of their life expectancy to live without pruritus (Kini, 2011).

CLINICAL RECOMMENDATION STATEMENTS:

Evidence-based guideline: Joint AAD - NPF Guidelines of care for the management and treatment of psoriasis with topical therapy and alternative medicine modalities for psoriasis severity measures.

Recommendation: Pruritus is a significant symptom of psoriasis. An itch severity assessment is recommended to appropriately assess the degree of pruritus when present.

This measure enhances compliance of the guideline by routinely assessing pruritus in psoriasis patients. For patients with moderate and severe pruritus symptoms, the measure looks to reduce pruritus burden by a minimal clinically important difference (3 or more points).

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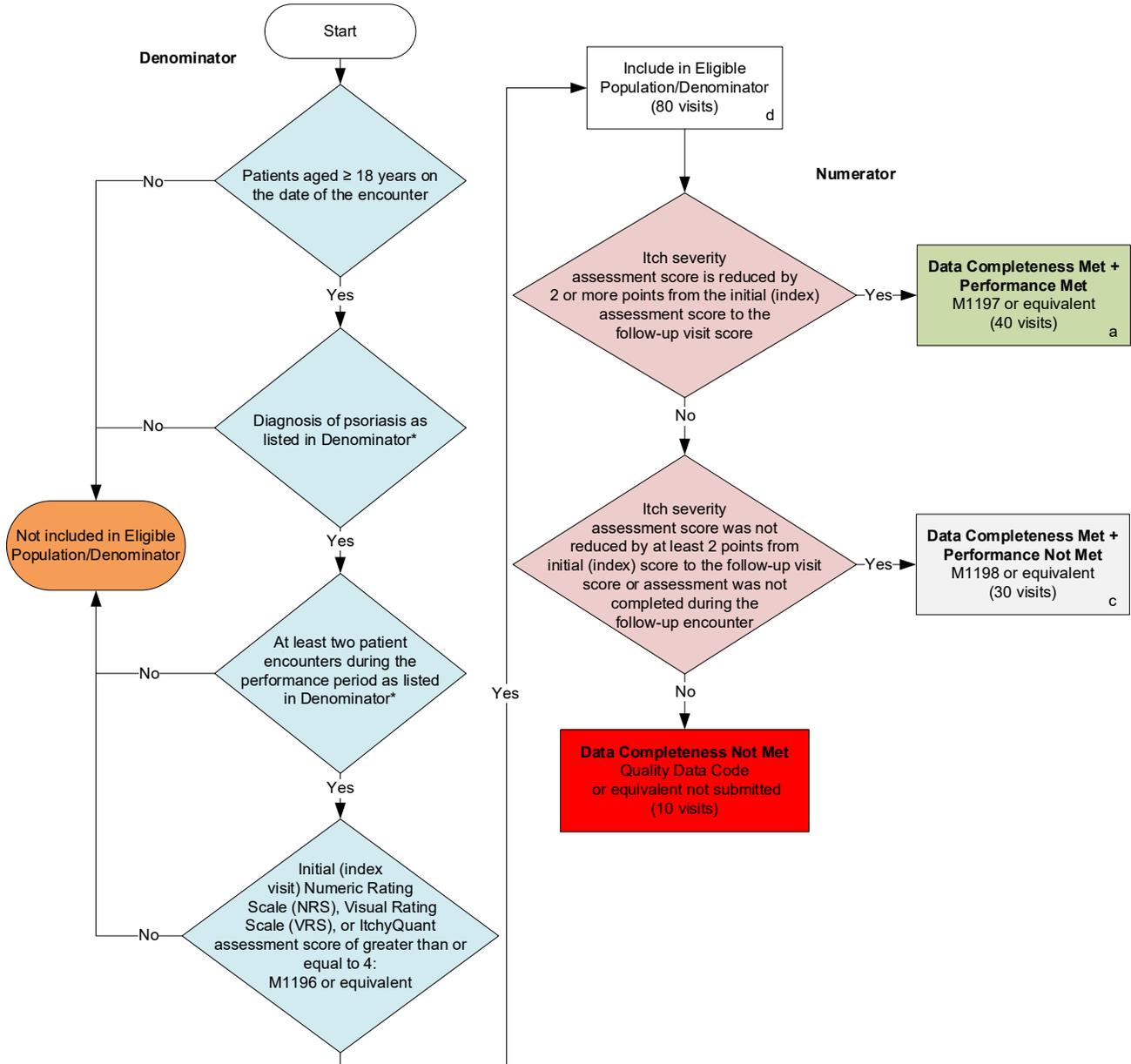
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2023 Clinical Quality Measure Flow for Quality ID #485: Psoriasis – Improvement in Patient-Reported Itch Severity

Disclaimer: Refer to the measure specification for specific coding and instructions to submit this measure.



SAMPLE CALCULATIONS	
Data Completeness=	
Performance Met (a=40 visits) + Performance Not Met (c=30 visits)	$= \frac{70 \text{ visits}}{80 \text{ visits}} = 87.50\%$
Eligible Population / Denominator (d=80 visits)	$= 80 \text{ visits}$
Performance Rate=	
Performance Met (a=40 visits)	$= \frac{40 \text{ visits}}{70 \text{ visits}} = 57.14\%$
Data Completeness Numerator (70 visits)	$= 70 \text{ visits}$

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

NOTE: Submission Frequency: Visit

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**2023 Clinical Quality Measure Flow Narrative for Quality ID #485:
Psoriasis – Improvement in Patient-Reported Itch Severity**

Disclaimer: Refer to the measure specification for specific coding and instructions to submit this measure.

1. Start with Denominator
2. Check *Patients aged 18 years and older on the date of the encounter*.
 - a. If *Patients aged 18 years and older on the date of the encounter* equals No, do not include in *Eligible Population/Denominator*. Stop processing.
 - b. If *Patients aged 18 years and older on the date of the encounter* equals Yes, proceed to check *Diagnosis of psoriasis as listed in Denominator**.
3. Check *Diagnosis of psoriasis as listed in Denominator**:
 - a. If *Diagnosis of psoriasis as listed in Denominator** equals No, do not include in *Eligible Population/Denominator*. Stop processing.
 - b. If *Diagnosis of psoriasis as listed in Denominator** equals Yes, proceed to check *At least two patient encounters during the performance period as listed in Denominator**.
4. Check *At least two patient encounters during the performance period as listed in Denominator**:
 - a. If *At least two patient encounters during the performance period as listed in Denominator** equals No, do not include in *Eligible Population/Denominator*. Stop processing.
 - b. If *At least two patient encounters during the performance period as listed in Denominator** equals Yes, proceed to check *Initial (index visit) Numeric Rating Scale (NRS), Visual Rating Scale (VRS), or ItchyQuant assessment score of greater than or equal to 4*.
5. Check *Initial (index visit) Numeric Rating Scale (NRS), Visual Rating Scale (VRS), or ItchyQuant assessment score of greater than or equal to 4*:
 - a. If *Initial (index visit) Numeric Rating Scale (NRS), Visual Rating Scale (VRS), or ItchyQuant assessment score of greater than or equal to 4* equals No, do not include in *Eligible Population/Denominator*. Stop processing.
 - b. If *Initial (index visit) Numeric Rating Scale (NRS), Visual Rating Scale (VRS), or ItchyQuant assessment score of greater than or equal to 4* equals Yes, include in *Eligible Population/Denominator*.
6. Denominator Population:
 - 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 visits in the Sample Calculation.
7. Start Numerator
8. Check *Itch severity assessment score is reduced by 2 or more points from the initial (index) assessment score to the follow-up visit score*:
 - a. If *Itch severity assessment score is reduced by 2 or more points from the initial (index) assessment score to the follow-up visit score* equals Yes, include in *Data Completeness Met and Performance*

Met.

- *Data Completeness Met and Performance Met* letter is represented as Data Completeness and Performance Rate in the Sample Calculation listed at the end of this document. Letter a equals 40 visits in the Sample Calculation.
- b. *If Itch severity assessment score is reduced by 2 or more points from the initial (index) assessment score to the follow-up visit score equals No, proceed to check Itch severity assessment score was not reduced by at least 2 points from initial (index) score to the follow-up visit score or assessment was not completed during the follow-up encounter.*
9. *Check Itch severity assessment score was not reduced by at least 2 points from initial (index) score to the follow-up visit score or assessment was not completed during the follow-up encounter:*
- a. *If Itch severity assessment score was not reduced by at least 2 points from initial (index) score to the follow-up visit score or assessment was not completed during the follow-up encounter equals Yes, include in the Data Completeness Met and Performance Not Met.*
- *Data Completeness Met and Performance Not Met* letter is represented as Data Completeness in the Sample Calculation listed at the end of this document. Letter c equals 30 visits in the Sample Calculation.
- b. *If Itch severity assessment score was not reduced by at least 2 points from initial (index) score to the follow-up visit score or assessment was not completed during the follow-up encounter equals No, proceed to check Data Completeness Not Met.*
10. *Check Data Completeness Not Met:*
- *If Data Completeness Not Met, the Quality Data Code or equivalent was not submitted. 10 visits have been subtracted from the Data Completeness Numerator in the Sample Calculation.*

Sample Calculations:

Data Completeness equals Performance Met (a equals 40 visits) plus Performance Not Met (c equals 30 visits) divided by Eligible Population / Denominator (d equals 80 visits). All equals 70 visits divided by 80 visits. All equals 87.50 percent.

Performance Rate equals Performance Met (a equals 40 visits) divided by Data Completeness Numerator (70 visits). All equals 40 visits divided by 70 visits. All equals 57.14 percent.

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

NOTE: Submission Frequency: Visit

The measure diagrams were developed by CMS as a supplemental resource to be used in conjunction with the measure specifications. They should not be used alone or as a substitution for the measure specification.