Quality ID #293: Rehabilitative Therapy Referral for Patients with Parkinson's Disease

2025 COLLECTION TYPE:

MIPS CLINICAL QUALITY MEASURES (CQMS)

MEASURE TYPE:

Process - High Priority

DESCRIPTION:

Percentage of all patients with a diagnosis of Parkinson's Disease (PD) who were referred to physical, occupational, speech, or recreational therapy once during the measurement period.

INSTRUCTIONS:

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 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 (including but not limited to encounters coded with GQ, GT, POS 02, POS 10) are allowable. Please note that effective January 1, 2025, while a measure may be denoted as telehealth eligible, specific denominator codes within the encounter may no longer be eligible due to changes outlined in the CY 2024 PFS Final Rule List of Medicare Telehealth Services.

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 with a diagnosis of Parkinson's disease

DENOMINATOR NOTE: *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):

All patients regardless of age

AND

Diagnosis for Parkinson's disease (ICD-10-CM): G20.A1, G20.A2, G20.B1, G20.B2, G20.C AND

Patient encounter during the performance period (CPT): 90791, 90792, 90839, 92521, 92522, 92523, 92524, 92597, 92605, 92607, 92610, 92611, 92612, 92616, 96105, 96110*, 96112, 96116, 96125, 96130, 96132, 96156, 98000, 98001, 98002, 98003, 98004, 98005, 98006, 98007, 98008, 98009, 98010, 98011, 98012, 98013, 98014, 98015, 99202, 99203, 99204, 99205, 99211, 99212, 99213, 99214, 99215, 99242*, 99243*, 99244*, 99245*, 99304, 99305, 99306, 99307, 99308, 99309, 99310, 99421, 99422, 99423, 99483

NUMERATOR:

Patients who were referred to physical, occupational, speech, or recreational therapy once during the measurement period

Numerator Options:

Performance Met: Referral to physical, occupational, speech, or

recreational therapy (G0042)

<u>OR</u>

Denominator Exception: Patient and/or care partner decline referral (G0041)

<u>OR</u>

Denominator Exception: Clinician determines patient does not require referral

(G0038)

<u>OR</u>

Denominator Exception: Patient already receiving

physical/occupational/speech/recreational therapy

during the measurement period (G0040)

<u>OR</u>

Performance Not Met: Patient not referred, reason not otherwise specified

(G0039)

RATIONALE:

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

CLINICAL RECOMMENDATION STATEMENTS:

- 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)

COPYRIGHT:

Version 9.0

December 2024

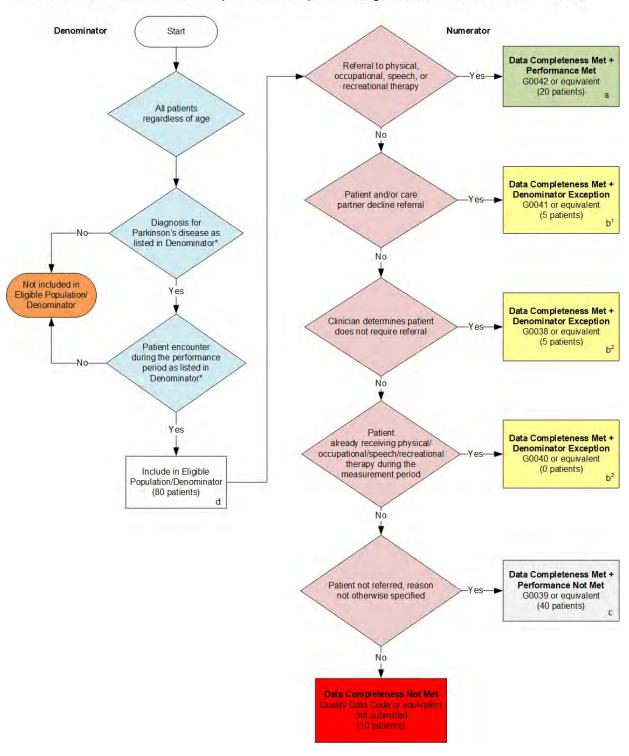
© 2024 American Academy of Neurology Institute All rights reserved.

Limited proprietary coding is contained in the measure specifications for convenience. Users of the proprietary coding sets should obtain all necessary licenses from the owners of these code sets. The AAN and its members disclaim all liability for use or accuracy of any Current Procedural Terminology (CPT®) or other coding contained in the specifications.

CPT® contained in the Measure specifications is copyright 2004-2024 American Medical Association. ICD-10 is copyright 2024 World Health Organization. All Rights Reserved.

2025 Clinical Quality Measure Flow for Quality ID #293: Rehabilitative Therapy Referral for Patients with Parkinson's Disease

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



SAMPLE CALCULATIONS

Data Completeness=

Performance Met (a=20 patients) + Denominator Exceptions (b¹+b²+b³=10 patients) + Performance Not Met (c=40 patients) = 70 patients = 87.50% Eligible Population / Denominator (d=80 patients) = 80 patients

Performance Rate=

Performance Met (a=20 patients) = 20 patients = 20 patients = 33.33%

Data Completeness Numerator (70 patients) – Denominator Exceptions (b¹+b²+b³=10 patients) = 60 patients = 60 patients

*See the posted measure specification for specific coding and instructions to submit this measure. NOTE: Submission Frequency: Patient-Process

CPT only copyright 2024 American Medical Association. All rights reserved. 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.

٧9

2025 Clinical Quality Measure Flow Narrative for Quality ID #293: Rehabilitative Therapy Referral for Patients with Parkinson's Disease

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

- 1. Start with Denominator
- 2. All patients regardless of age
- 3. Check Diagnosis for Parkinson's disease:
 - a. If *Diagnosis for Parkinson's disease* equals No, do not include in *Eligible Population/Denominator*. Stop processing.
 - b. If *Diagnosis for Parkinson's disease* equals Yes, proceed to check *Patient encounter during the performance period as listed in Denominator**.
- 4. Check Patient encounter during the performance period as listed in Denominator*:
 - a. If *Patient encounter during the performance period as listed in Denominator** equals No, do not include in *Eligible Population/Denominator*. Stop processing.
 - b. If *Patient encounter during the performance period as listed in Denominator** equals Yes, include in *Eligible Population/Denominator*.
- 5. 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 patients in the Sample Calculation.
- 6. Start Numerator
- 7. Check Referral to physical, occupational, speech, or recreational therapy.
 - a. If Referral to physical, occupational, speech, or recreational therapy equals Yes, include in Data Completeness Met and Performance Met.
 - Data Completeness Met and Performance Met letter is represented in the Data Completeness and Performance Rate in the Sample Calculation listed at the end of this document. Letter a equals 20 patients in the Sample Calculation.
 - b. If *Referral to physical, occupational, speech, or recreational therapy* equals No, proceed to check *Patient and/or care partner decline referral.*
- 8. Check Patient and/or care partner decline referral:
 - a. If Patient and/or care partner decline referral equals Yes, include in Data Completeness Met and Denominator Exception.
 - Data Completeness Met and Denominator Exception letter is represented in the Data Completeness and Performance Rate in the Sample Calculation listed at the end of this document. Letter b¹ equals 5 patients in the Sample Calculation.
 - b. If *Patient and/or care partner decline referral* equals No, proceed to check *Clinician determines patient does not require referral*.

- 9. Check Clinician determines patient does not require referral:
 - a. If Clinician determines patient does not require referral equals Yes, include in Data Completeness Met and Denominator Exception.
 - Data Completeness Met and Denominator Exception letter is represented in the Data Completeness and Performance Rate in the Sample Calculation listed at the end of this document. Letter b² equals 5 patients in the Sample Calculation.
 - b. If Clinician determines patient does not require referral equals No, proceed to check Patient already receiving physical/occupational/speech/recreational therapy during the measurement period.
- 10. Check Patient already receiving physical/occupational/speech/recreational therapy during the measurement period:
 - a. If Patient already receiving physical/occupational/speech/recreational therapy during the measurement period equals Yes, include in Data Completeness Met and Denominator Exception.
 - Data Completeness Met and Denominator Exception letter is represented in the Data Completeness and Performance Rate in the Sample Calculation listed at the end of this document. Letter b³ equals 0 patients in the Sample Calculation.
 - b. If Patient already receiving physical/occupational/speech/recreational therapy during the measurement period equals No. proceed to check Patient not referred, reason not otherwise specified.
- 11. Check Patient not referred, reason not otherwise specified:
 - a. If Patient not referred, reason not otherwise specified equals Yes, include in Data Completeness Met and Performance Not Met.
 - Data Completeness Met and Performance Not Met letter is represented in the Data Completeness in the Sample Calculation listed at the end of this document. Letter c equals 40 patients in the Sample Calculation.
 - b. If Patient not referred, reason not otherwise specified equals No, proceed to check Data Completeness Not Met.
- 12. Check Data Completeness Not Met:
 - If Data Completeness Not Met, the Quality Data Code or equivalent was not submitted. 10 patients have been subtracted from the Data Completeness Numerator in the Sample Calculation.

Sample Calculations

Version 9.0

Data Completeness equals Performance Met (a equals 20 patients) plus Denominator Exceptions (b1 plus b2 plus b3 equals 10 patients) plus Performance Not Met (c equals 40 patients) divided by Eligible Population/Denominator (d equals 80 patients). All equals 70 patients divided by 80 patients. All equals 87.50 percent.

Performance Rate equals Performance Met (a equals 20 patients) divided by Data Completeness Numerator (70 patients) minus Denominator Exceptions (b¹ plus b² plus b³ equals 10 patients). All equals 20 patients divided by 60 patients. All equals 33.33 percent.

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

NOTE: Submission Frequency: Patient-Process

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.