

Quality ID #283: Dementia Associated Behavioral and Psychiatric Symptoms Screening and Management

– National Quality Strategy Domain: Effective Clinical Care

– Meaningful Measure Area: Prevention, Treatment, and Management of Mental Health

2020 COLLECTION TYPE:

MIPS CLINICAL QUALITY MEASURES (CQMS)

MEASURE TYPE:

Process

DESCRIPTION:

Percentage of patients with dementia for whom there was a documented screening for behavioral and psychiatric symptoms, including depression, and for whom, if symptoms screening was positive, there was also documentation of recommendations for management in the last 12 months

INSTRUCTIONS:

This measure is to be submitted a minimum of **once per performance period** for patients with a diagnosis of dementia 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.

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 dementia

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 dementia (ICD-10-CM): A52.17, A81.00, A81.01, A81.89, F01.50, F01.51, F02.80, F02.81, F03.90, F03.91, F05, F10.27, G30.0, G30.1, G30.8, G30.9, G31.01, G31.09, G31.83, G31.85, G31.89, G94

AND

Patient encounter during the performance period (CPT): 90791, 90792, 90832, 90834, 90837, 96116, 96127, 96130, 96131, 96132, 96133, 96136, 96137, 96138, 96139, 96146, 96156, 96158, 96164, 96167, 96170, 97161, 97162, 97163, 97164, 97165, 97166, 97167, 97168, 99201, 99202, 99203, 99204, 99205, 99211, 99212, 99213, 99214, 99215, 99221, 99222, 99223, 99231, 99232, 99233, 99238, 99239, 99251*, 99252*, 99253*, 99254*, 99255*, 99281, 99282, 99283, 99284, 99285, 99304, 99305, 99306, 99307, 99308, 99309, 99310, 99324, 99325, 99326, 99327, 99328, 99334, 99335, 99336, 99337, 99339, 99340, 99341, 99342,

99343, 99344, 99345, 99347, 99348, 99349, 99350, 99487, 99490, 99497

WITHOUT

Telehealth Modifier: GQ, GT, 95, POS 02

NUMERATOR:

Patients with dementia for whom there was a documented screening for behavioral and psychiatric symptoms, including depression in the last 12 months and for whom, if screening was positive, there was also documentation of recommendations for management in the last 12 months

Definition:

Positive Behavioral and Psychiatric Symptoms Screening - Includes documentation for at least one symptom for each of three domains: activity disturbances, mood disturbances, thought and perceptual disturbances including depression during an encounter.

Numerator Instructions:

Symptoms Screening for at least one symptom each for three domains of behavioral and psychiatric symptoms, including depression is defined as using a validated instrument or directly examining the patient or knowledgeable informant to determine the presence or absence of symptoms from three domains: activity disturbances, mood disturbances (including depression), and thought and perceptual disturbances. The following is a non-exhaustive list of symptoms falling into each of the three requisite domains pertinent to this measure:

Activity disturbances (To meet measure, patient or knowledgeable informant must be screened for at least one symptom from this list):

- Agitation
- Wandering
- Purposeless hyperactivity
- Verbal or physical aggressiveness
- Resisting care
- Apathy
- Impulsiveness
- Socially inappropriate behaviors
- Eating disturbances
- Sleep problems
- Diurnal/sleep-wake cycle disturbances
- Repetitive behavior

Mood disturbances (To meet measure, patient or knowledgeable informant must be screened for depression and at least one more symptom from this list):

- Anxiety
- Elation
- Irritability
- Mood lability/fluctuations

Thought and perceptual disturbances (To meet measure, patient or knowledgeable informant must be screened for at least one symptom from this list):

- Having fixed false beliefs (delusions)
- Hearing or seeing non-present entities (hallucinations)
- Paranoia

Examples of reliable and valid instruments that are commonly used in research settings and that can be used to assess behavior include, but are not limited to:

Dementia Signs and Symptoms (DSS) Scale (1) or Neuropsychiatric Inventory (NPI) (2). The assessment of behavioral status may include the assessment of Behavioral and Psychological Symptoms of Dementia (BPSD) (3). For patients residing in nursing homes, it may include an assessment of the behavioral symptom items from the Minimum Data Set (MDS) (4).

NUMERATOR NOTE: The 12 month look back period is defined as 12 months from the date of the denominator eligible encounter. In the event that a patient is not screened or partially screened during an eligible encounter for behavioral and psychiatric symptoms or the screening status is unknown submit **G9921**.

Numerator Options:

Performance Met:

Screening Performed AND Positive AND Provision of Recommendations (**G9919**)

OR

Performance Met:

Screening Performed AND Negative (**G9920**)

OR

Performance Not Met:

No Screening Performed, Partial Screening Performed OR Positive Screen Without Recommendations and Reason is Not Given or Otherwise Specified (**G9921**)

RATIONALE:

Decreasing the rate of behavioral and psychiatric symptoms of dementia is a desired outcome. These symptoms, including depression, have serious adverse impact on quality of life for patients and caregivers and increase the risk of institutionalization. They may go unrecognized and untreated by health care providers if they are not actively screened for with specific attention to discrete symptom domains.

CLINICAL RECOMMENDATION STATEMENTS:

The following clinical recommendation statements are quoted verbatim from the referenced clinical guidelines and represent the evidence base for the measure:

- “It is important for the [clinician] treating a patient with dementia to regularly assess cognitive deficits or behavioral difficulties that potentially pose a danger to the patient or others.” (5)
- “Traditionally cognitive function has been the main focus of interest in treatment and research of people with dementia. It is becoming increasingly recognized, however, that noncognitive symptoms are those that are most disturbing to families and caregivers and may seriously impact not only the patient’s well-being, but also the family’s, caregiver’ and providers’ approaches to managing the patient”(6)
- “Assess and monitor for behavioral changes; in particular, the presence of agitation, aggression, anxiety, disinhibitions, delusions, and hallucinations” (7)
- “Identification of neuropsychiatric symptoms is essential for both the diagnosis and treatment, as some BPSD constitute the core or supportive diagnostic features of some non-AD dementias, such as DLB, PDD or FTLD” (8)

“In summary, new trials and studies better define adverse effects, but they do not strengthen the evidence for efficacy of antipsychotic drugs in treating psychosis or agitation. Rather, they demonstrate minimal or no efficacy with strong placebo effects as well as variations in response with trial duration. These findings strengthen the support for using nonpharmacological interventions and environmental measures to attempt to reduce psychosis and agitation prior to initiation of medications.”(9)

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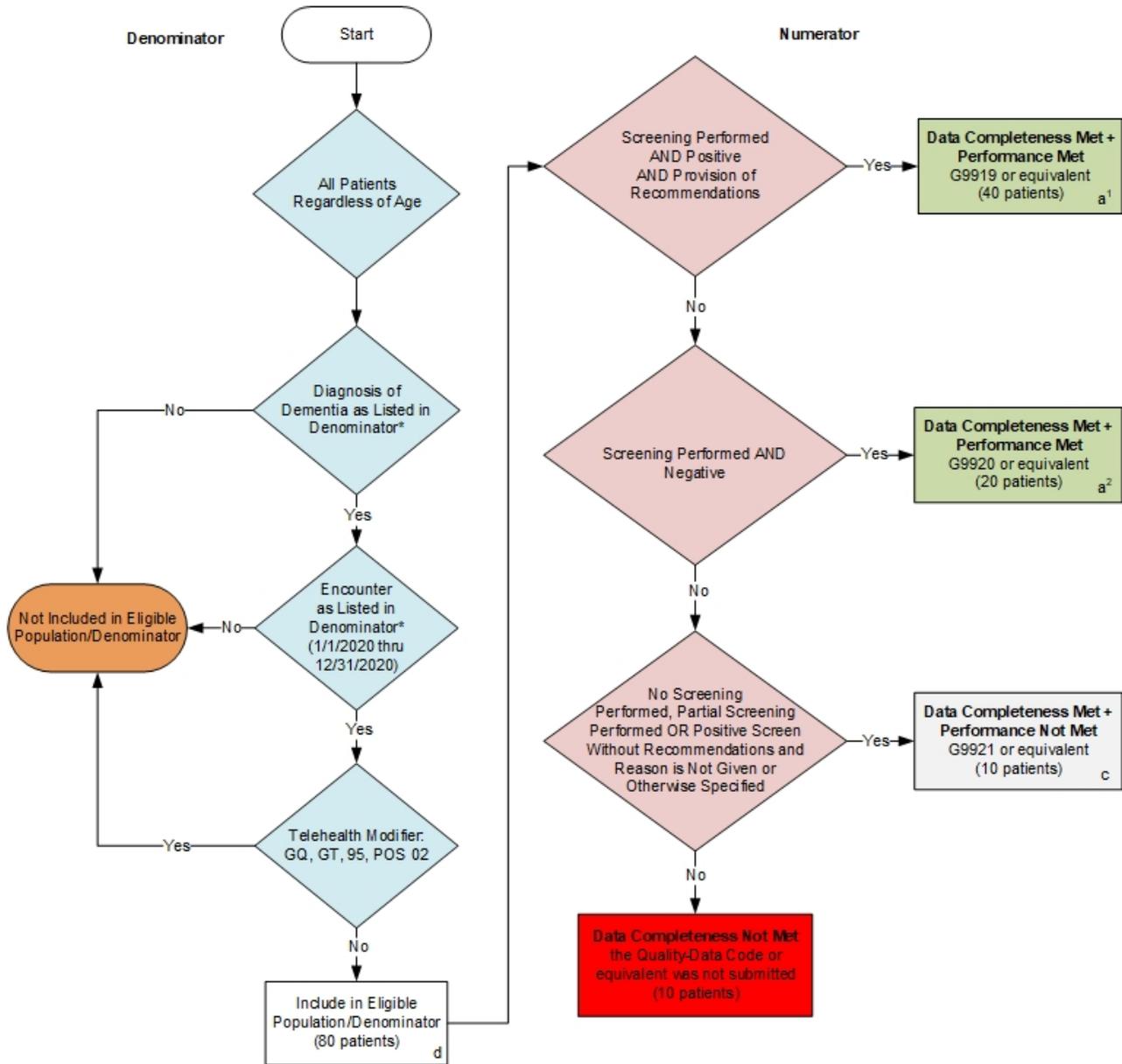
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**2020 Clinical Quality Measure Flow for Quality ID #283:
Dementia Associated Behavioral and Psychiatric Symptoms Screening and Management**

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



SAMPLE CALCULATIONS:

Data Completeness=

$$\frac{\text{Performance Met (a}^1\text{+a}^2\text{=60 patients)} + \text{Performance Not Met (c=10 patients)}}{\text{Eligible Population / Denominator (d=80 patients)}} = \frac{70 \text{ patients}}{80 \text{ patients}} = 87.50\%$$

Performance Rate=

$$\frac{\text{Performance Met (a}^1\text{+a}^2\text{=60 patients)}}{\text{Data Completeness Numerator (70 patients)}} = \frac{60 \text{ patients}}{70 \text{ patients}} = 85.71\%$$

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

NOTE: Submission Frequency: Patient-Process

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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.

v4

**2020 Clinical Quality Measure Flow Narrative for Quality ID #283:
Dementia Associated Behavioral and Psychiatric Symptoms Screening and Management**

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 Patient Diagnosis:
 - a. If Diagnosis of Dementia as Listed in the Denominator equals No, do not include in Eligible Population. Stop Processing.
 - b. If Diagnosis of Dementia as Listed in the Denominator equals Yes, proceed to check Encounter Performed.
4. Check Encounter Performed:
 - a. If Encounter as Listed in the Denominator equals No, do not include in Eligible 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 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 Screening Performed AND Positive AND Provision of Recommendations:
 - a. If Screening Performed AND Positive AND Provision of Recommendations equals Yes, include in Data Completeness Met and Performance Met.
 - b. 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 a¹ equals 40 patients in the Sample Calculation.
 - c. If Screening Performed AND Positive AND Provision of Recommendations equals No, proceed to check Screening Performed AND Negative.
9. Check Screening Performed AND Negative:
 - a. If Screening Performed AND Negative equals Yes, include in Data Completeness Met and Performance Met.

- b. 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 a² equals 20 patients in the Sample Calculation.
 - c. If Screening Performed AND Negative equals No, proceed to check No Screening Performed, Partial Screening Performed OR Positive Screen Without Recommendations and Reason is Not Given or Otherwise Specified.
10. Check No Screening Performed, Partial Screening Performed OR Positive Screen Without Recommendations and Reason is Not Given or Otherwise Specified:
- a. If No Screening Performed, Partial Screening Performed OR Positive Screen Without Recommendations and Reason is Not Given or Otherwise Specified equals Yes, include in Data Completeness Met and Performance Not Met.
 - b. 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 10 patients in the Sample Calculation.
 - c. If No Screening Performed, Partial Screening Performed OR Positive Screen Without Recommendations and Reason is Not Given or Otherwise Specified equals No, proceed to check Data Completeness Not Met.
11. Check Data Completeness Not Met:
- a. 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:

Data Completeness=

$$\frac{\text{Performance Met (a}^1\text{+a}^2\text{=80 patients) + Performance Not Met (c=10 patients)}}{\text{Eligible Population / Denominator (d=80 patients)}} = \frac{70 \text{ patients}}{80 \text{ patients}} = 87.50\%$$

Performance Rate=

$$\frac{\text{Performance Met (a}^1\text{+a}^2\text{=80 patients)}}{\text{Data Completeness Numerator (70 patients)}} = \frac{80 \text{ patients}}{70 \text{ patients}} = 85.71\%$$