

Quality ID #290: Assessment of Mood Disorders and Psychosis for Patients with Parkinson's Disease

– National Quality Strategy Domain: Effective Clinical Care

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

2022 COLLECTION TYPE:
MIPS CLINICAL QUALITY MEASURES (CQMS)

MEASURE TYPE:

Process

DESCRIPTION:

Percentage of all patients with a diagnosis of Parkinson's Disease [PD] who were assessed for depression, anxiety, apathy, AND psychosis once during the measurement period.

INSTRUCTIONS:

This measure is to be submitted a minimum of **once per performance period** 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 (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 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

AND

Patient encounter during the performance period (CPT): 99202, 99203, 99204, 99205, 99211, 99212, 99213, 99214, 99215, 99241*, 99242*, 99243*, 99244*, 99245*, 99304, 99305, 99306, 99307, 99308, 99309, 99310, 99421, 99422, 99423, 99441, 99442, 99443, 99483

NUMERATOR:

Patients who were assessed for depression, anxiety, apathy, AND psychosis once during the measurement period

Definitions:

Assessed – use of a screening tool or discussion with the patient or care partner. Please see “Opportunity for Improvement” section below for suggestions on possible screening tools.

Psychosis – includes hallucinations, illusions, delusions, paranoia.

Numerator Instructions:

Opportunity for Improvement

The following screening tools may be helpful for use in practice:

For depression:

Geriatric Depression scale Beck Depression

Hamilton Depression scale

Patient Health Questionnaire 2 (PHQ2)

Patient Health Questionnaire 9 (PHQ9)

Montgomery-Asberg Depression Rating Scale (MADRS)

For Anxiety:

Beck Anxiety Inventory

Hospital Anxiety and Depression Scale

Self-rating Anxiety Scale

Anxiety Status Inventory

Strait Trait Anxiety Inventory

Hamilton Anxiety Rating Scale

Parkinson Anxiety Scale

(PAS)

For Psychosis:

Parkinson psychosis rating scale

Rush hallucination inventory

Baylor hallucination questionnaire

Neuropsychiatric inventory (NPI or NPI-Q)

Brief psychiatric rating scale

Positive and negative syndrome scale

Schedule for assessment of positive symptoms

Unified Parkinson disease rating scale Part I

Numerator Options:

Performance Met:

Depression, anxiety, apathy, AND psychosis assessed
(G2121)

OR

Performance Not Met:

Depression, anxiety, apathy, AND psychosis
not assessed **(G2122)**

RATIONALE:

Psychiatric symptoms are often under diagnosed and under treated. Using appropriate measures will assure that psychiatric symptoms are properly diagnosed and treated so as to not interfere with functioning levels.

CLINICAL RECOMMENDATION STATEMENTS:

- Clinicians should have a low threshold for diagnosing depression in PD. (Level D) (1)
- All people with PD and psychosis should receive a general medical evaluation and treatment for any precipitating condition. (Level D) (1)
- Self-rating or clinician-rated scales may be used to screen for depression in patients with Parkinson’s Disease. (Level C) (2)
- At review appointments and following medicines changes, ask people with Parkinson’s disease and their family members and carers (as appropriate) if the person is experiencing hallucinations (particularly visual)

or delusions.

- Perform a general medical evaluation for people with hallucinations or delusions, and offer treatment for any conditions that might have triggered them.
- Be alert to possible depression (particularly in patients with a past history of depression or a chronic physical health problem with associated functional impairment) and consider asking patients who may have depression two questions, specifically:
 - During the last month, have you often been bothered by feeling down, depressed or hopeless?
 - During the last month, have you often been bothered by having little interest or pleasure in doing things?
- When assessing a patient with suspected depression, consider using a validated measure (for example, for symptoms, functions and/or disability) to inform and evaluate treatment.

COPYRIGHT:

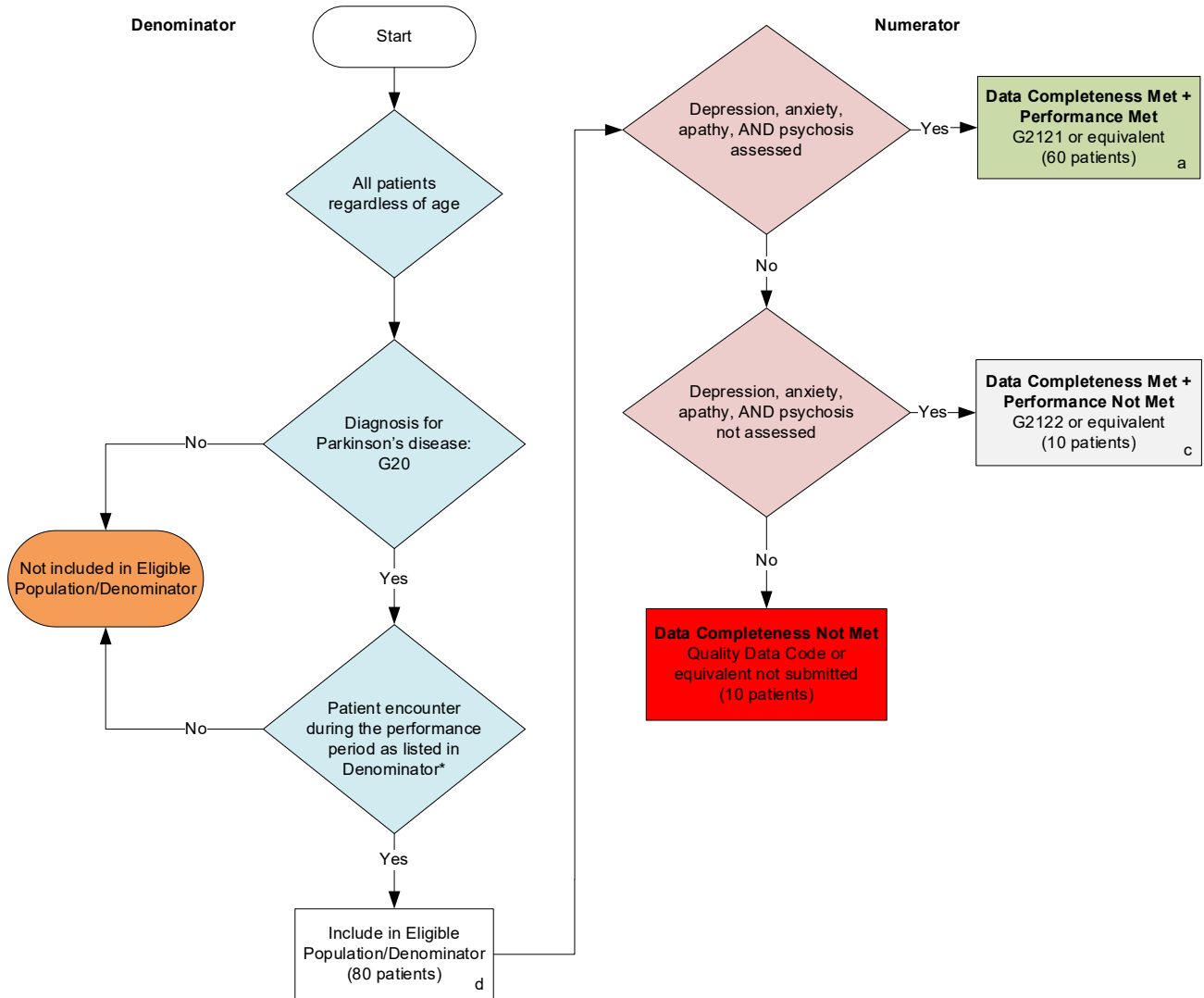
© 2022 American Academy of Neurology Institute All rights reserved.

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 2004-2021 American Medical Association. ICD-10 is copyright 2021 World Health Organization. All Rights Reserved.

2022 Clinical Quality Measure Flow for Quality ID #290: Assessment of Mood Disorders and Psychosis 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=

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

Performance Rate=

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

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

NOTE: Submission Frequency: Patient-Process

CPT only copyright 2021 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.

v6

**2022 Clinical Quality Measure Flow Narrative for Quality ID #290:
Assessment of Mood Disorders and Psychosis 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 *Depression, anxiety, apathy, AND psychosis assessed*:
 - a. If *Depression, anxiety, apathy, AND psychosis assessed* 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 60 patients in the Sample Calculation.
 - b. If *Depression, anxiety, apathy, AND psychosis assessed* equals No, proceed to check *Depression, anxiety, apathy, AND psychosis not assessed*.
8. Check *Depression, anxiety, apathy, AND psychosis not assessed*:
 - a. If *Depression, anxiety, apathy, AND psychosis not assessed* 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 10 patients in the Sample Calculation.
 - b. If *Depression, anxiety, apathy, AND psychosis not assessed* equals No, proceed to check *Data Completeness Not Met*.

9. 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 equals Performance Met (a equals 60 patients) plus Performance Not Met (c equals 10 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 60 patients) divided by Data Completeness Numerator (70 patients). All equals 60 patients divided by 70 patients. All equals 85.71 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.