# Quality ID \#222: Functional Status Change for Patients with Elbow, Wrist or Hand Impairments 

## 2024 COLLECTION TYPE: <br> MIPS CLINICAL QUALITY MEASURES (CQMS)

## MEASURE TYPE:

Patient-Reported Outcome-Based Performance Measure - High Priority

## DESCRIPTION:

A patient-reported outcome measure (PROM) of risk-adjusted change in functional status (FS) for patients 14 years+ with elbow, wrist, or hand impairments. The change in FS is assessed using the FOTO Elbow/Wrist/Hand FS PROM. The measure is adjusted to patient characteristics known to be associated with FS outcomes (risk adjusted) and used as a performance measure at the patient, individual clinician, and clinic levels to assess quality.

## INSTRUCTIONS:

This outcome measure is to be submitted once per Treatment Episode for all patients with a functional deficit related to the elbow, wrist, or hand. This is an outcome measure and its calculation requires submitting of the patient's FS PROM score, at a minimum, at the start (Initial Evaluation or Intake) and again at the conclusion (Discharge) of a Treatment Episode. The Initial Evaluation score is recorded during the first treatment encounter, and the Discharge score is recorded at or near the conclusion of the final treatment encounter. It is anticipated that Merit-based Incentive Payment System (MIPS) eligible clinicians providing treatment for functional elbow, wrist, or hand deficits will submit this measure.

## Definitions:

Functional Deficit - Limitation or impairment of physical abilities/function resulting in evaluation and inclusion in a treatment plan of care.
Treatment Episode - A "Treatment Episode" is defined as beginning with an Initial Evaluation for a functional elbow, wrist, or hand deficit, progressing through treatment without interruption (for example, a hospitalization or surgical intervention), and ending with Discharge, signifying that the treatment has been completed. A patient currently under clinical care for an elbow, wrist, or hand deficit remains in a single "Treatment Episode" until the Discharge is conducted and documented by the MIPS eligible clinician. Initial Evaluation - An "Initial Evaluation" is the first encounter for a functional deficit involving the elbow, wrist, or hand and includes an evaluation (CPT 97161, 97162, 97163, 97165, 97166, 97167, 99202, 99203, 99204, 99205, 99212, 99213, 99214, 99215, 98940, 98941, 98942, 98943*, 99304, 99305, or 99306), or an "Initial Evaluation" Status M-code (M1135). A patient presenting with an elbow, wrist, or hand impairment, who has had an interruption of a Treatment Episode for the same functional knee deficit secondary to an appropriate reason like hospitalization or surgical intervention, is an "Initial Evaluation".
Discharge - "Discharge" is accompanied by a treatment finalization and evaluation completion M-Code (M1014) for identifying the close of a Treatment Episode for the same elbow, wrist, or hand deficit identified at the Initial Evaluation and documented by a "Discharge" report by the MIPS eligible clinician. An interruption in clinical care for an appropriate reason like hospitalization or surgical intervention requires a discharge from the current Treatment Episode.
Encounter - A visit between the patient and the provider for the purpose of assessing and/or improving a functional deficit.
Patient Reported - The patient directly provides answers to the FS PROM items. If the patient cannot reliably respond independently (e.g. in the presence of cognitive deficits), a suitable proxy may provide answers.
The Elbow/Wrist/Hand FS PROM score - The "Elbow/Wrist/Hand FS PROM score" may be achieved using one of three forms: the FOTO Elbow/Wrist/Hand FS PROM computer adaptive test, the FOTO Elbow/Wrist/Hand FS PROM short form, or an alternative PROM score that is cross-walked to the FOTO

Elbow/Wrist/Hand FS PROM, using a cross-walk form developed by the measure steward. Computer adaptive test (CAT) is recommended to achieve best balance between reduced patient burden and score precision. At least one cross-walk form has been developed by the measure steward and meets scientific standards to successfully link a construct-equivalent PROM using advanced psychometric equating methods.

For more information about the Elbow/Wrist/Hand FS PROM score forms and to access the components that are available free of charge for use with this MIPS quality measure [e.g., patient-reported outcome measure(s), cross-walking, risk adjustment], visit Public Access to FOTO Measures.

NOTE: Patient encounters for this measure conducted via telehealth (including but not limited to encounters coded with GQ, GT, 95, POS 02, POS 10) 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 14 years and older with elbow, wrist, or hand impairments who have initiated a Treatment Episode.
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 aged $\geq 14$ on date of Initial Evaluation

## AND

Patient encounter during the performance period identifying evaluation (CPT or M-code): 97161, 97162, $97163,97165,97166,97167,99202,99203,99204,99205,99212,99213,99214,99215,98940,98941,98942$, 98943*, 99304, 99305, 99306, M1135

## AND

With an elbow, wrist, or hand impairment and/or diagnosis pertaining to a functional deficit affecting the elbow, wrist, or hand (ICD-10-CM): M05.121, M05.122, M05.131, M05.132, M05.141, M05.142, M05.221, M05.222, M05.231, M05.232, M05.241, M05.242, M05.321, M05.322, M05.331, M05.332, M05.341, M05.342, M05.421, M05.422, M05.431, M05.432, M05.441, M05.442, M05.521, M05.522, M05.531, M05.532, M05.541, M05.542, M05.621, M05.622, M05.631, M05.632, M05.641, M05.642, M05.721, M05.722, M05.731, M05.732, M05.741, M05.742, M05.821, M05.822, M05.831, M05.832, M05.841, M05.842, M06.021, M06.022, M06.031, M06.032, M06.041, M06.042, M06.221, M06.222, M06.231, M06.232, M06.241, M06.242, M06.321, M06.322, M06.331, M06.332, M06.341, M06.342, M06.821, M06.822, M06.831, M06.832, M06.841, M06.842, M08.021, M08.022, M08.031, M08.032, M08.041, M08.042, M08.221, M08.222, M08.231, M08.232, M08.241, M08.242, M08.421, M08.422, M08.431, M08.432, M08.441, M08.442, M08.821, M08.822, M08.831, M08.832, M08.841, M08.842, M08.921, M08.922, M08.931, M08.932, M08.941, M08.942, M11.021, M11.022, M11.031, M11.032, M11.041, M11.042, M11.121, M11.122, M11.131, M11.132, M11.141, M11.142, M11.221, M11.222, M11.231, M11.232, M11.241, M11.242, M11.821, M11.822, M11.831, M11.832, M11.841, M11.842, M12.521, M12.522, M12.531, M12.532, M12.541, M12.542, M12.821, M12.822, M12.831, M12.832, M12.841, M12.842, M13.121, M13.122, M13.131, M13.132, M13.141, M13.142, M13.821, M13.822, M13.831, M13.832, M13.841, M13.842, M14.621, M14.622, M14.631, M14.632, M14.641, M14.642, M14.821, M14.822, M14.831, M14.832, M14.841, M14.842, M18.0, M18.11, M18.12, M18.2, M18.31, M18.32, M18.4, M18.51, M18.52, M19.021, M19.022, M19.031, M19.032, M19.041, M19.042, M19.121, M19.122, M19.131, M19.132, M19.141, M19.142, M19.221,

M19.222, M19.231, M19.232, M19.241, M19.242, M20.001, M20.002, M20.011, M20.012, M20.021, M20.022, M20.031, M20.032, M20.091, M20.092, M21.021, M21.022, M21.221, M21.222, M21.231, M21.232, M21.241, M21.242, M21.331, M21.332, M21.511, M21.512, M21.521, M21.522, M21.831, M21.832, M21.931, M21.932, M21.941, M21.942, M24.021, M24.022, M24.031, M24.032, M24.041, M24.042, M24.121, M24.122, M24.131, M24.132, M24.141, M24.142, M24.221, M24.222, M24.231, M24.232, M24.241, M24.242, M24.421, M24.422, M24.431, M24.432, M24.441, M24.442, M24.444, M24.445, M24.521, M24.522, M24.531, M24.532, M24.541, M24.542, M24.621, M24.622, M24.631, M24.632, M24.641, M24.642, M24.821, M24.822, M24.831, M24.832, M24.841, M24.842, M25.021, M25.022, M25.031, M25.032, M25.041, M25.042, M25.221, M25.222, M25.231, M25.232, M25.241, M25.242, M25.321, M25.322, M25.331, M25.332, M25.341, M25.342, M25.421, M25.422, M25.431, M25.432, M25.441, M25.442, M25.521, M25.522, M25.531, M25.532, M25.541, M25.542, M25.621, M25.622, 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## AND

Discharge/discontinuation of the episode of care documented in the medical record (M-code): M1014 AND NOT
DENOMINATOR EXCLUSIONS:
Documentation stating patient has a diagnosis of a degenerative neurological condition such as ALS, MS, or Parkinson's diagnosed at any time before or during the episode of care: M1131

OR
Patient unable to complete the Elbow/Wrist/Hand FS PROM at Initial Evaluation and/or Discharge due to blindness, illiteracy, severe mental incapacity or language incompatibility and an adequate proxy is not available: G9737

## NUMERATOR:

Patients who were presented with the Elbow/Wrist/Hand FS PROM at Initial Evaluation (Intake) and at or near Discharge (Status) for the purpose of calculating the patient's Residual Score

## Definitions:

Functional Status (FS) Score - This is the Elbow/Wrist/Hand FS PROM score as described under Instructions Definitions.
FS Change Score - The "FS Change Score" is calculated by subtracting the FS Score at Initial Evaluation from the FS Score at Discharge.
Predicted FS Change Score - The "Predicted FS Change Score" is calculated by accounting for the influence of multiple patient characteristics as designated by the risk adjustment model. For each patient completing the Elbow/Wrist/Hand FS PROM at Initial Evaluation (Intake), the predictive model provides a riskadjusted prediction of FS change at Discharge.
Residual Score - The "Residual Score" is calculated by subtracting the Predicted FS Change Score from the FS Change Score (i.e., actual minus predicted). The "Residual Score", which is in the same units as the FS Score, should be interpreted as the amount of FS change that is different than the amount of change that was predicted given the risk-adjustment variables of the patient being treated. Residual Scores of zero (0) or greater (>0) should be interpreted as FS Change Scores that met or exceeded what was predicted. Residual Scores less than zero (<0) should be interpreted as FS Change Scores that were less than predicted. Aggregated Residual Scores allow meaningful comparisons amongst clinicians or clinics.

## Numerator Options:

Performance Met:

OR

## OR

Residual Score for the elbow, wrist, or hand impairment successfully calculated and the score was equal to zero (0) or greater than zero $(>0)(\mathbf{G 8 6 6 7})$

Denominator Exception:

## OR <br> Denominator Exception:

## OR <br> Denominator Exception:

## OR

Denominator Exception:
Performance Not Met:

Ongoing care not clinically indicated because the patient needed a home program only, referral to another provider or facility, or consultation only, as documented in the medical record (M1132)

Ongoing care not medically possible because the patient was discharged early due to specific medical events, documented in the medical record, such as the patient became hospitalized or scheduled for surgery (M1133)

Ongoing care not possible because the patient selfdischarged early (e.g., financial or insurance reasons, transportation problems, or reason unknown) (M1134)

Patient refused to participate (G9736)
Residual Score for the elbow, wrist, or hand impairment successfully calculated and the score was less than zero $(<0)(\mathbf{G 8 6 6 8})$

OR
Performance Not Met:

Residual Score for the elbow, wrist, or hand impairment not measured because the patient did not complete the Elbow/Wrist/Hand FS PROM at Initial Evaluation and/or near Discharge, reason not given (G8670)

## RATIONALE:

Functional deficits are common in the general population and are costly to the individual, their family, and society. Improved functional status has been associated with greater quality of life, self-efficacy, improved financial well-being, and lower future medical costs. Improving functional status in people seeking rehabilitation has become a goal of the American Physical Therapy Association (APTA). Therefore, measuring change in functional status is important for providers treating patients in rehabilitation and can be used to assess the success of treatment and direct modification of treatment.

Change in functional status represents the Activities and Participation domain of the International Classification of Functioning, Disability and Health. If treatment is designed to improve the functional deficit, it is logical to assess functional status at discharge using a standardized score to determine if treatment improved the functional status of the patient over the treatment episode.

The National Quality Measures Clearinghouse has approved the measurement of change in functional status, using this measure. (NQMC-1874)

## CLINICAL RECOMMENDATION STATEMENTS:

The American Physical Therapy Association, in their Guide to Physical Therapist Practice, described five recommended elements of patient management: examination, evaluation, diagnosis, prognosis, and intervention. The elements were intended to direct therapists in their approach to patient treatment for the purpose of optimizing patient outcomes. The APTA clearly identifies functional status data as one of the major forms of data to be collected for patients receiving rehabilitation. The functional status measures should be used to assist in the planning, implementation, and modification of treatment interventions and should be used as measures of outcomes. The current functional status scores can be used by therapists to fulfill the recommended methods of the APTA in the management of patients in rehabilitation.

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## 2024 Clinical Quality Measure Flow for Quality ID \#222: Functional Status Change for Patients with Elbow, Wrist or Hand Impairments

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



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

## 2024 Clinical Quality Measure Flow Narrative for Quality ID \#222: Functional Status Change for Patients with Elbow, Wrist or Hand Impairments

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

1. Start with Denominator
2. Check All patients aged greater than or equal to 14 years on date of Initial Evaluation:
a. If All patients aged greater than or equal to 14 years on date of Initial Evaluation equals No, do not include in Eligible Population/Denominator. Stop processing.
b. If All patients aged greater than or equal to 14 years on date of Initial Evaluation equals Yes, proceed to check Patient encounter during the performance period identifying evaluation as listed in Denominator*.
3. Check Patient encounter during the performance period identifying evaluation as listed in Denominator*:
a. If Patient encounter during the performance period identifying evaluation as listed in Denominator* equals No, do not include in Eligible Population/Denominator. Stop processing.
b. If Patient encounter during the performance period identifying evaluation as listed in Denominator* equals Yes, proceed to check With an elbow, wrist, or hand impairment and/or diagnosis pertaining to a functional deficit affecting elbow, wrist or hand as listed in Denominator*.
4. Check With an elbow, wrist, or hand impairment and/or diagnosis pertaining to a functional deficit affecting elbow, wrist or hand as listed in Denominator*:
a. If With an elbow, wrist, or hand impairment and/or diagnosis pertaining to a functional deficit affecting elbow, wrist or hand as listed in Denominator* equals No, do not include in Eligible Population/Denominator. Stop processing.
b. If With an elbow, wrist, or hand impairment and/or diagnosis pertaining to a functional deficit affecting elbow, wrist or hand as listed in Denominator* equals Yes, proceed to check Discharge/discontinuation of the episode of care documented in the medical record.
5. Check Discharge/discontinuation of the episode of care documented in the medical record:
a. If Discharge/discontinuation of the episode of care documented in the medical record equals No, do not include in Eligible Population/Denominator. Stop processing.
b. If Discharge/discontinuation of the episode of care documented in the medical record equals Yes, proceed to check Documentation stating patient has a diagnosis of a degenerative neurological condition such as ALS, MS, or Parkinson's diagnosed at any time before or during the episode of care.
6. Check Documentation stating patient has a diagnosis of a degenerative neurological condition such as ALS, MS, or Parkinson's diagnosed at any time before or during the episode of care:
a. If Documentation stating patient has a diagnosis of a degenerative neurological condition such as ALS, MS, or Parkinson's diagnosed at any time before or during the episode of care equals Yes, do not include in Eligible Population/Denominator. Stop processing.
b. If Documentation stating patient has a diagnosis of a degenerative neurological condition such as ALS, MS, or Parkinson's diagnosed at any time before or during the episode of care equals No, proceed to check Patient unable to complete Elbow/Wrist/Hand FS PROM at Initial Evaluation and/or Discharge
due to blindness, illiteracy, severe mental incapacity or language incompatibility and an adequate proxy is not available.
7. Check Patient unable to complete Elbow/Wrist/Hand FS PROM at Initial Evaluation and/or Discharge due to blindness, illiteracy, severe mental incapacity or language incompatibility and an adequate proxy is not available:
a. If Patient unable to complete Elbow/Wrist/Hand FS PROM at Initial Evaluation and/or Discharge due to blindness, illiteracy, severe mental incapacity or language incompatibility and an adequate proxy is not available equals Yes, do not include in Eligible Population/Denominator. Stop processing.
b. If Patient unable to complete Elbow/Wrist/Hand FS PROM at Initial Evaluation and/or Discharge due to blindness, illiteracy, severe mental incapacity or language incompatibility and an adequate proxy is not available equals No, include in Eligible Population/Denominator.
8. Denominator Population:

- Denominator Population is all Eligible Episodes in the Denominator. Denominator is represented as Denominator in the Sample Calculation listed at the end of this document. Letter d equals 80 episodes in the Sample Calculation.


## 9. Start Numerator

10. Check Residual Score for the elbow, wrist or hand impairment successfully calculated and the score was greater than or equal to 0 :
a. If Residual Score for the elbow, wrist or hand impairment successfully calculated and the score was greater than or equal to 0 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 30 episodes in the Sample Calculation.
b. If Residual Score for the elbow, wrist or hand impairment successfully calculated and the score was greater than or equal to 0 equals No, proceed to check Ongoing care not clinically indicated because the patient needed a home program only, referral to another provider or facility, or consultation only, as documented in the medical record.

11. Check Ongoing care not clinically indicated because the patient needed a home program only, referral to another provider or facility, or consultation only, as documented in the medical record:
a. If Ongoing care not clinically indicated because the patient needed a home program only, referral to another provider or facility, or consultation only, as documented in the medical record 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 $b^{1}$ equals 0 episodes in the Sample Calculation.
b. If Ongoing care not clinically indicated because the patient needed a home program only, referral to another provider or facility, or consultation only, as documented in the medical record equals No, proceed to check Ongoing care not medically possible because the patient was discharged early due to specific medical events, documented in the medical record, such as the patient became hospitalized or scheduled for surgery.

12. Check Ongoing care not medically possible because the patient was discharged early due to specific medical events, documented in the medical record, such as the patient became hospitalized or scheduled for surgery:
a. If Ongoing care not medically possible because the patient was discharged early due to specific medical events, documented in the medical record, such as the patient became hospitalized or scheduled for surgery 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 $b^{2}$ equals 0 episodes in the Sample Calculation.
b. If Ongoing care not medically possible because the patient was discharged early due to specific medical events, documented in the medical record, such as the patient became hospitalized or scheduled for surgery equals No, proceed to check Ongoing care not possible because the patient self-discharged early.

13. Check Ongoing care not possible because the patient self-discharged early:
a. If Ongoing care not possible because the patient self-discharged early 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 $b^{3}$ equals 20 episodes in the Sample Calculation.
b. If Ongoing care not possible because the patient self-discharged early equals No, proceed to check Patient refused to participate.

14. Check Patient refused to participate:
a. If Patient refused to participate 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 $b^{4}$ equals 0 episodes in the Sample Calculation.
b. If Patient refused to participate equals No, proceed to check Residual Score for the elbow, wrist, or hand impairment successfully calculated and the score was less than 0.

15. Check Residual Score for the elbow, wrist, or hand impairment successfully calculated and the score was less than 0 :
a. If Residual Score for the elbow, wrist, or hand impairment successfully calculated and the score was less than 0 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 $\mathrm{c}^{1}$ equals 0 episodes in the Sample Calculation.
b. If Residual Score for the elbow, wrist, or hand impairment successfully calculated and the score was less than 0 equals No, proceed to check Residual Score for the elbow, wrist or hand impairment not measured because the patient did not complete the Elbow/Wrist/Hand FS PROM at Initial Evaluation and/or near Discharge, reason not given.

16. Check Residual Score for the elbow, wrist or hand impairment not measured because the patient did not complete the Elbow/Wrist/Hand FS PROM at Initial Evaluation and/or near Discharge, reason not given:
a. If Residual Score for the elbow, wrist or hand impairment not measured because the patient did not complete the Elbow/Wrist/Hand FS PROM at Initial Evaluation and/or near Discharge, reason not given 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 $\mathrm{c}^{2}$ equals 20 episodes in the Sample Calculation.
b. If Residual Score for the elbow, wrist or hand impairment not measured because the patient did not complete the Elbow/Wrist/Hand FS PROM at Initial Evaluation and/or near Discharge, reason not given equals No, proceed to check Data Completeness Not Met.


## 17. Check Data Completeness Not Met:

- If Data Completeness Not Met, the Quality Data Code or equivalent was not submitted. 10 episodes have been subtracted from the Data Completeness Numerator in the Sample Calculation.


## Sample Calculations

Data Completeness equals Performance Met (a equals 30 episodes) plus Denominator Exception ( $b^{1}$ plus $b^{2}$ plus $b^{3}$ plus $b^{4}$ equals 20 episodes) plus Performance Not Met ( $c^{1}$ plus $c^{2}$ equals 20 episodes) divided by Eligible Population/Denominator (d equals 80 episodes). All equals 70 episodes divided by 80 episodes. All equals 87.50 percent.

Performance Rate equals Performance Met (a equals 30 episodes) divided by Data Completeness Numerator (70 episodes) minus Denominator Exception ( $b^{1}$ plus $b^{2}$ plus $b^{3}$ plus $b^{4}$ equals 20 episodes). All equals 30 episodes divided by 50 episodes. All equals 60.00 percent.

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

NOTE: Submission Frequency: Episode
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.

