Quality ID #291: Parkinson's Disease: Cognitive Impairment or Dysfunction Assessment for Patients with Parkinson's Disease
– 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 all patients with a diagnosis of Parkinson's Disease [PD] who were assessed for cognitive impairment or dysfunction in the past 12 months

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.

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): 99201, 99202, 99203, 99204, 99205, 99211, 99212, 99213, 99214, 99215, 99221, 99222, 99223, 99231, 99232, 99233, 99238, 99239, 99241*, 99242*, 99243*, 99244*, 99245*, 99251*, 99252*, 99253*, 99254*, 99255*, 99304, 99305, 99306, 99307, 99308, 99309, 99310
WITHOUT
Telehealth Modifier: GQ, GT, 95, POS 02

NUMERATOR:
All patients with a diagnosis of Parkinson's Disease who were assessed for cognitive impairment or dysfunction in the past 12 months

> **Definition:**
> **Assessed –** Is defined as use of a screening tool or referral to neuropsychologist for testing.
>
> **Numerator Instructions:**
> Screening tools approved for use in this measure include: (1)
> - Mini-Mental Status Examination (MMSE)(2,3)
> - Montreal Cognitive Assessment (MoCA)(2,3)
> - Dementia Rating Scale (DRS-2)
> - Parkinson's Disease Dementia – Short Screen (PDD-SS)
> - Parkinson Neuropsychiatric Dementia Assessment (PANDA)
> - Parkinson's Disease- Cognitive Rating Scale (PD-CRS)
> - Scales for Outcomes of Parkinson's Disease – Cognition (SCOPA- Cog)
>
> *NUMERATOR NOTE: To meet performance, the cognitive impairment or dysfunction assessment should occur within the previous 12 months from denominator eligible encounter.*
>
> **Numerator Options:**
> *Performance Met:*   Cognitive impairment or dysfunction assessed **(3720F)**
>
> **OR**
>
> *Performance Not Met:*   Cognitive impairment or dysfunction was not assessed, reason not otherwise specified **(3720F *with* 8P)**

RATIONALE:
Cognitive functioning impacts life satisfaction and health-related quality of life. It is anticipated that if assessed on an ongoing basis, cognitive deficits may be identified and addressed in a timely manner. Once identified, such deficits could be treated (or patients referred to appropriate resources) and thereby improve individuals quality of life.

CLINICAL RECOMMENDATION STATEMENTS:
- The Mini-Mental State Examination (MMSE) and the Cambridge Cognitive Examination (CAM Cog) should be considered as screening tools for dementia in patients with PD (Level B).(4)
- An assessment of neuropsychological functioning in a person presenting with parkinsonism suspected of being PD is recommended (Level A) and should include: (I) A collateral history from a reliable carer (II) A brief assessment of cognition (III) Screening for a rapid eye movement (REM) sleep behavior disorder (RBD), psychotic manifestations and severe depression.(5)
- Clinical history should be supplemented by an informant (GPP). A neurological and general physical examination should be performed in all patients with dementia (GPP).(6)
- Cognitive assessment is central to diagnosis and management of dementias and should be performed in all patients (Level A). Screening tests are available of good accuracy in the general diagnosis of dementia or have been proposed specifically for the differential diagnosis between the different forms of dementia (GPP). Neuropsychological assessment should be performed in all patients in the early stages of the disease (Level B) when the cognitive impairment reflects the disruption of specific brain structures. The neuropsychological assessment should include a global cognitive measure and, in addition, more detailed testing of the main cognitive domains including memory, executive functions and instrumental functions (Level C).(6)
- The general practitioner knows the cognitive-behavioral profile of his/her patients and can identify the clinical signs of cognitive decay at their onset, taking also into account the observation of relatives (I/A).(7)
- General practitioners should assess all pathological conditions that could cause cognitive disorders (VI/A).(7)

- In raising the diagnostic hypothesis of dementia, general practitioners should assess the presence of co-morbidities and identify risk factors due to social isolation (VI/A).(7)
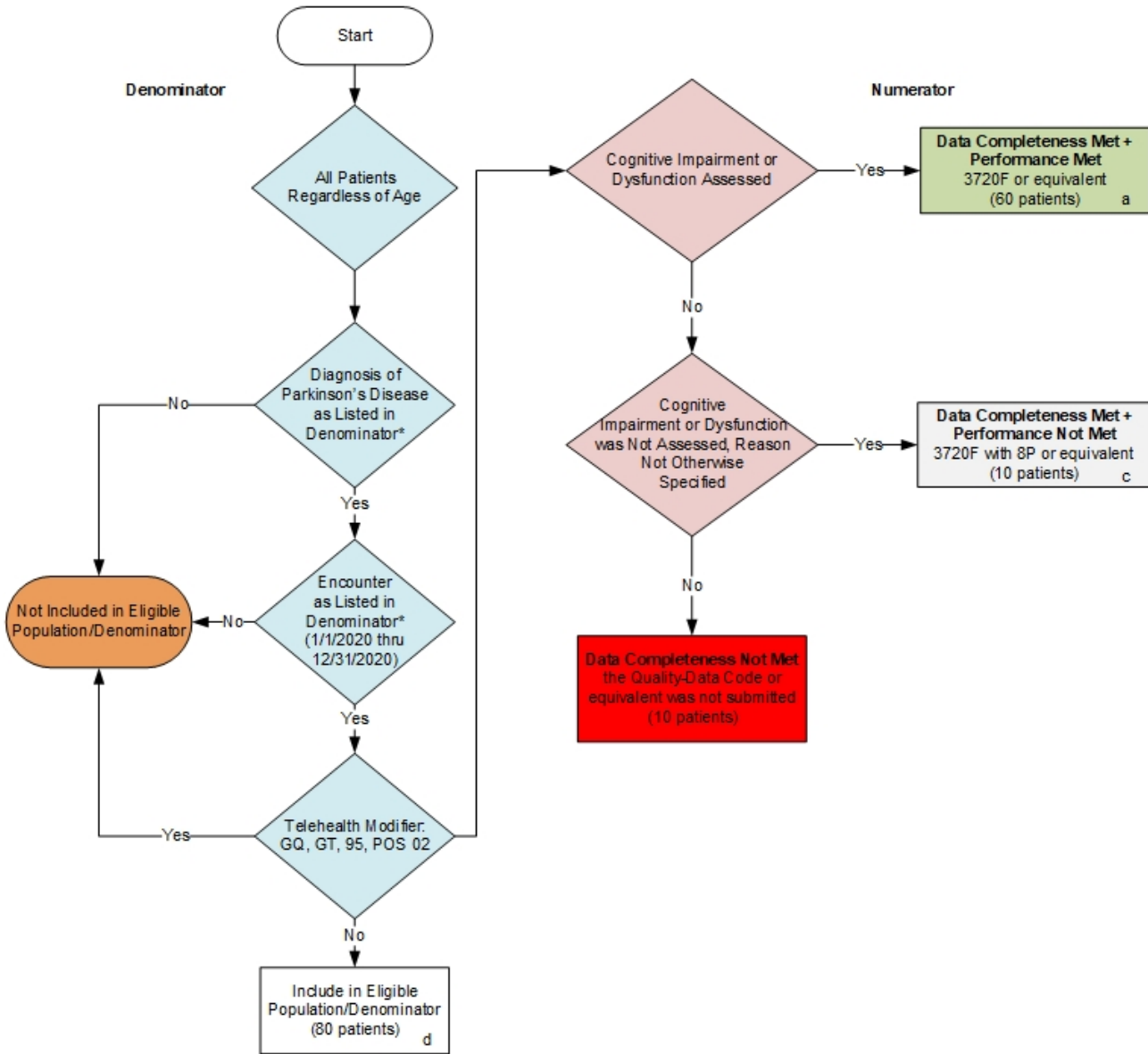
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2020 Clinical Quality Measure Flow for Quality ID #291:
Parkinson's Disease: Cognitive Impairment or Dysfunction Assessment for Patients with Parkinson's Disease

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

Denominator

Start

All Patients Regardless of Age

Diagnosis of Parkinson's Disease as Listed in Denominator* — No →

Encounter as Listed in Denominator* (1/1/2020 thru 12/31/2020) — No →

Not Included in Eligible Population/Denominator

Telehealth Modifier: GQ, GT, 95, POS 02 — Yes →

Include in Eligible Population/Denominator (80 patients) — d

Numerator

Cognitive Impairment or Dysfunction Assessed — Yes →
Data Completeness Met + Performance Met
3720F or equivalent
(60 patients)   a

Cognitive Impairment or Dysfunction was Not Assessed, Reason Not Otherwise Specified — Yes →
Data Completeness Met + Performance Not Met
3720F with 8P or equivalent
(10 patients)   c

Data Completeness Not Met the Quality-Data Code or equivalent was not submitted
(10 patients)

SAMPLE CALCULATIONS:

Data Completeness=

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

Performance Rate=

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

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

NOTE: Submission Frequency: Patient-Process

2020 Clinical Quality Measure Flow Narrative for Quality ID #291:
Parkinson's Disease: Cognitive Impairment or Dysfunction Assessment 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 Patient Diagnosis:

    a. If Diagnosis of Parkinson's Disease as Listed in the Denominator equals No, do not include in Eligible Population. Stop Processing.

    b. If Diagnosis of Parkinson's Disease 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 Cognitive Impairment or Dysfunction Assessed:

    a. If Cognitive Impairment or Dysfunction Assessed 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 a equals 60 patients in Sample Calculation.

    c. If Cognitive Impairment or Dysfunction Assessed equals No, proceed to check Cognitive Impairment or Dysfunction was Not Assessed, Reason Not Otherwise Specified.

9. Check Cognitive Impairment or Dysfunction was Not Assessed, Reason Not Otherwise Specified:

a. If Cognitive Impairment or Dysfunction was Not Assessed, Reason Not 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 Cognitive Impairment or Dysfunction was Not Assessed, Reason Not Otherwise Specified equals No, proceed to check Data Completeness Not Met.

10. 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=

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

Performance Rate=

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