2020 COLLECTION TYPE:
MIPS CLINICAL QUALITY MEASURES (CQMS)

MEASURE TYPE:
Process-High Priority

DESCRIPTION:
All patients 18 and older prescribed opiates for longer than six weeks duration who signed an opioid treatment agreement at least once during Opioid Therapy documented in the medical record

INSTRUCTIONS:
This measure is to be submitted a minimum of **once per performance period** for all patients being prescribed opioids for duration longer than six weeks during the performance period. There is no diagnosis associated with this measure. 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 18 and older prescribed opiates for longer than six weeks duration

> **Denominator Criteria (Eligible Cases):**
> Patients aged ≥ 18 years on date of encounter
> **AND**
> **Patient encounter during the performance period (CPT):** 99201, 99202, 99203, 99204, 99205, 99212, 99213, 99214, 99215, 99304, 99305, 99306, 99307, 99308, 99309, 99310, 99324, 99325, 99326, 99327, 99328, 99334, 99335, 99336, 99337, 99341, 99342, 99343, 99344, 99345, 99347, 99348, 99349, 99350
> **WITHOUT**
> **Telehealth Modifier:** GQ, GT, 95, POS 02
> **AND**
> **Patients prescribed opiates for longer than six weeks:** G9577
> **AND NOT**
> **DENOMINATOR EXCLUSION:**
> **Patients who were in hospice at any time during the performance period:** M1022, M1025, or M1026

NUMERATOR:
Patients who signed an opioid treatment agreement at least once during opioid therapy

Definition:
Opioid Treatment Agreement – a treatment agreement is a signed document between MIPS eligible clinician and patient prior to initiating Continuous Opioid Therapy (COT). This agreement should include:
- Potential Risks of COT
- Alternatives to COT

Numerator Options:
Performance Met: Documentation of signed opioid treatment agreement at least once during opioid therapy **(G9578)**

OR

Performance Not Met: No documentation of signed opioid treatment agreement at least once during opioid therapy **(G9579)**

RATIONALE:
The goal of the consent process is to assist patients to make appropriate medical decisions that are consistent with their preferences and values. In some states, clinicians are required to document this discussion, though specific requirements vary.

CLINICAL RECOMMENDATION STATEMENTS:
When starting COT, informed consent should be obtained. A continuing discussion with the patient regarding COT should include goals, expectations, potential risks, and alternatives to COT (strong recommendation, low-quality evidence).

Clinicians may consider using a written COT management plan to document patient and clinician responsibilities and expectations and assist in patient education (weak recommendation, low-quality evidence) (p. 116).

Chou R, Fanciullo GJ, Fine PG, et al. Clinical Guidelines for the Use of Chronic Opioid Therapy in Chronic Noncancer Pain. J Pain 2009; 10(2):113-130.
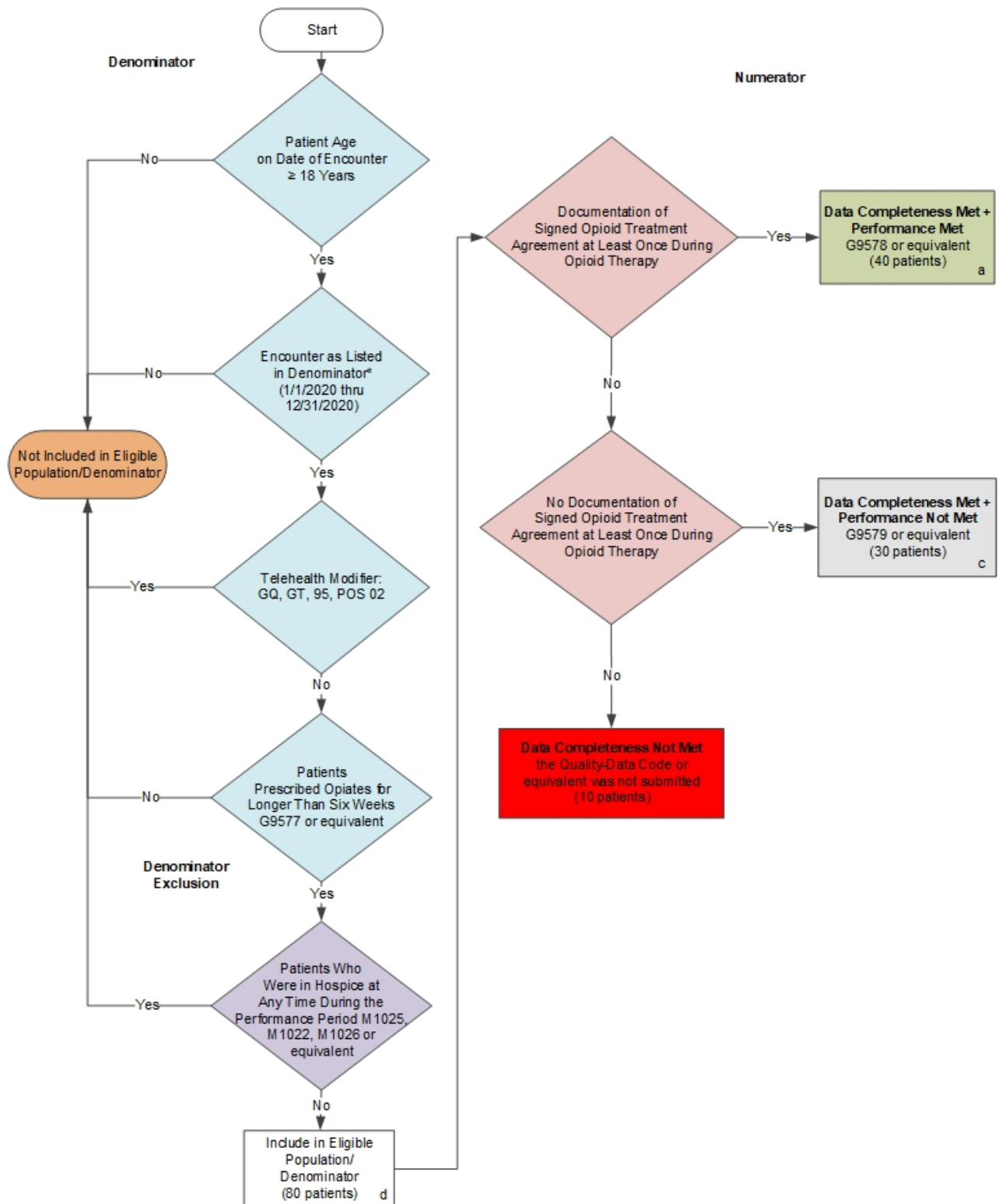
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2020 Clinical Quality Measure Flow for Quality ID #412:
Documentation of Signed Opioid Treatment Agreement

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

Denominator

Numerator

Start

Patient Age on Date of Encounter ≥ 18 Years
- No → Not Included in Eligible Population/Denominator
- Yes ↓

Encounter as Listed in Denominator* (1/1/2020 thru 12/31/2020)
- No → Not Included in Eligible Population/Denominator
- Yes ↓

Telehealth Modifier: GQ, GT, 95, POS 02
- Yes → Not Included in Eligible Population/Denominator
- No ↓

Patients Prescribed Opiates for Longer Than Six Weeks G9577 or equivalent
- No → Not Included in Eligible Population/Denominator
- Yes ↓

Denominator Exclusion

Patients Who Were in Hospice at Any Time During the Performance Period M1025, M1022, M1026 or equivalent
- Yes → Not Included in Eligible Population/Denominator
- No ↓

Include in Eligible Population/Denominator (80 patients) d

Documentation of Signed Opioid Treatment Agreement at Least Once During Opioid Therapy
- Yes → Data Completeness Met + Performance Met G9578 or equivalent (40 patients) a
- No ↓

No Documentation of Signed Opioid Treatment Agreement at Least Once During Opioid Therapy
- Yes → Data Completeness Met + Performance Not Met G9579 or equivalent (30 patients) c
- No ↓

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

SAMPLE CALCULATIONS:

Data Completeness=

Performance Met (a=40 patients) + Performance Not Met (c=30 patients)	=	70 patients	=	87.50%
Eligible Population / Denominator (d=80 patients)	=	80 patients		

Performance Rate=

Performance Met (a=40 patients)	=	40 patients	=	57.14%
Data Completeness Numerator (70 patients)	=	70 patients		

*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 #412:
Documentation of Signed Opioid Treatment Agreement

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

1. Start with Denominator

2. Check Patient Age:

   a. If Patient Age is greater than or equal to 18 Years on Date of Encounter equals No during the measurement period, do not include in Eligible Population. Stop Processing.

   b. If Patient Age is greater than or equal to 18 Years on Date of Encounter equals Yes during the measurement period, proceed to check Encounter Performed.

3. 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.

4. Check Telehealth Modifier:

   a. If Telehealth Modifier equals Yes, do not include in Eligible Population. Stop Processing.

   b. If Telehealth Modifier equals No, proceed to check Patients Prescribed Opiates for Longer Than Six Weeks.

5. Check Patients Prescribed Opiates for Longer Than Six Weeks:

   a. If Patients Prescribed Opiates for Longer Than Six Weeks equals No, do not include in Eligible Population. Stop Processing.

   b. If Patients Prescribed Opiates for Longer Than Six Weeks equals Yes, proceed to check Patients Who Were in Hospice at Any Time During the Performance Period.

6. Check Patients Who Were in Hospice at Any Time During the Performance Period:

   a. If Patients Who Were in Hospice at Any Time During the Performance Period equals Yes, do not include in Eligible Population. Stop Processing.

   b. If Patients Who Were in Hospice at Any Time During the Performance Period equals No, include in Eligible Population.

7. 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.

8. Start Numerator

9. Check Documentation of Signed Opioid Treatment Agreement at Least Once During Opioid Therapy:

a. If Documentation of Signed Opioid Treatment Agreement at Least Once During Opioid Therapy 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 40 patients in the Sample Calculation.

c. If Documentation of Signed Opioid Treatment Agreement at Least Once During Opioid Therapy equals No, proceed to check No Documentation of Signed Opioid Treatment Agreement at Least Once During Opioid Therapy.

10. Check No Documentation of Signed Opioid Treatment Agreement at Least Once During Opioid Therapy:

a. If No Documentation of Signed Opioid Treatment Agreement at Least Once During Opioid Therapy 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 30 patients in the Sample Calculation.

c. If No Documentation of Signed Opioid Treatment Agreement at Least Once During Opioid Therapy 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=

$$\frac{\text{Performance Met (a=40 patients) + Performance Not Met (c=30 patients)}}{\text{Eligible Population / Denominator (d=80 patients)}} = \frac{70 \text{ patients}}{80 \text{ patients}} = 87.50\%$$

Performance Rate=

$$\frac{\text{Performance Met (a=40 patients)}}{\text{Data Completeness Numerator (70 patients)}} = \frac{40 \text{ patients}}{70 \text{ patients}} = 57.14\%$$