

Measure ID: FOTO4

Measure Title:

Functional Status Change for Patients with Upper or Lower Quadrant Edema

Measure Description:

This is a patient-reported outcome performance measure (PRO-PM) consisting of a patient-reported outcome measure (PROM) of risk-adjusted change in functional status (FS) for patients aged 14 years and older with lymphedema or other causes of edema. For patients with such conditions affecting the arm, hand, chest, or breast body regions, the change in FS is assessed using the FOTO Upper Quadrant Edema (UQE) FS PROM.¹ For patients with such conditions affecting the leg, foot, groin, or lower trunk regions, the change in FS is assessed using the FOTO Lower Quadrant Edema (LQE) FS PROM.² PROM scores were scaled to the 0-100 metric, with higher scores representing higher perceived functional status.

To fairly measure performance between providers, the measure is risk-adjusted to patient characteristics known to be associated with FS outcomes and used as a performance measure at the patient and provider levels to assess quality.

Denominator:

All patients aged 14 years and older who initiated and completed an episode of care for rehabilitation therapy or medical care (with a start of an episode of care defined by the following CPT codes: 97161, 97162, 97163 for physical therapy or 97165, 97166, 97167 for occupational therapy or as otherwise documented in the medical record as the start of an episode of care) with a condition of edema affecting either a) the lower extremity body region (i.e., leg, foot, groin, lower trunk) or b) the upper extremity body region (i.e., arm, hand, chest, breast areas) as documented in the medical record.

The following ICD-10 codes* are provided to further clarify the target population:

I87.2 Venous insufficiency (chronic)(peripheral)

I97.2 Postmastectomy lymphedema syndrome

I97.89 Other postprocedural complications & disorders of the circulatory system, not elsewhere classified (NOTE: Used for lymphedema as a complication of surgical procedure other than postmastectomy)

R60 Edema, not elsewhere classified

Q82.0 Hereditary lymphedema

* Codes with less than the number of characters required for billing are used to represent the inclusion of the more specific codes in that category. This was done to manage the number of codes.

The completion of an episode of care (discharge) is indicated by documentation in the medical record and/or a Discharge Status G-Code identifying the close of the episode of care for the edema condition identified at the start of the episode of care (initial evaluation).

Numerator:

The numerator is the number of a provider's (clinic or clinician) patient care episodes that initiated and completed an episode of care and met or exceeded the Predicted FS Change Score. Thus, performance met is determined by a Residual Score of zero or more.

Numerator Definitions:

- Functional Status (FS) Score – This is the UQE or LQE PROM score as described under Measure Description.
- 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 PROM at Initial Evaluation (Intake), the predictive model provides a risk-adjusted 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 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 are:

- Performance Met (The Residual Score is equal to or greater than zero) and
- Performance Not Met (The Residual Score is less than zero or patient did not complete the measure and reason not given or reason does not match the exclusion or exception criteria.)

Performance may be calculated on the patient and provider levels:

1. Patient Level: For the individual patient episode, the patient's FS Change Score relative to the Predicted FS Change Score.
2. Provider Level: The average of the performance met rate for patient care episodes managed by a provider (clinic or clinician) over a 12-month time period.

Denominator Exclusions:

1. Patients with diagnosis of a degenerative neurological condition such as ALS, MS, Parkinson's diagnosed at any time before or during the episode of care (F2007)
2. Patients unable to complete the UQE or LQE PROM at Initial Evaluation or Discharge due to cognitive deficit, visual deficit, motor deficit, language barrier, or low reading level, and a suitable proxy/recorder is not available. (F2002)
3. Patients seen for Lymphedema Prevention Care only, and patient reported no functional deficits related to edema at the time of Initial Evaluation as documented in the medical record (F2008).

Denominator Exceptions:

1. 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 (F2005)
2. 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 (F2004)

3. Ongoing care not possible because the patient self-discharged early (e.g., financial or insurance reasons, transportation problems, or reason unknown) (F2003)
4. Patient refused to participate (F2001)

Numerator Exclusions:

None

High Priority: Yes

Measure Type: Patient-Reported Outcome-based Performance Measure (PRO-PM)

Care Settings: Ambulatory, Ambulatory Care: Clinician Office/Clinic, Ambulatory Care: Hospital, Hospital Outpatient, Outpatient Services, Post Acute Care (includes telehealth)

Telehealth: Yes

Number of Performance Rates: 1

Traditional measure (not inverse)

Proportional Measure: Yes

Risk Adjustment: The FS Change score is risk adjusted (as described in the Numerator)

MIPS Reporting Option: Traditional MIPS

Submission Pathway: QCDR