

CODE3 Improved Functional Outcome Assessment for Foot/Ankle Repair

Percentage of patients aged 18 years and older with primary foot/ankle repair who completed baseline and follow-up (patient-reported) functional status assessments not more than 180 days prior to the primary foot/ankle repair procedure, and at least 60 days and not more than 180 days after the procedure that demonstrated at least a 10% increase in their functional outcomes

2019 OPTIONS FOR INDIVIDUAL MEASURES:

SCG Health, Code Technology

NATIONAL QUALITY STRATEGY DOMAIN: Person and Caregiver Centered Experience and Outcomes

MEASURE TYPE: Patient Reported Outcome (PRO)

HIGH PRIORITY STATUS: High Priority

SPECIALTY RECOMMENDATION: Surgical/Procedural Care - Foot/Ankle

MEANINGFUL MEASURE AREA: Patient Reported Functional Outcomes

NOF NUMBER: Not applicable

PERFORMANCE NOTES: Traditional (not inverse), single (1) proportional performance calculation

RISK ADJUSTMENT: No

INSTRUCTIONS:

This measure is to be reported a minimum of **once per performance period**. This measure may be reported by eligible clinicians who perform the quality actions described in the measure based on the services provided and the measure-specific denominator coding.

DENOMINATOR:

Patients with patient-reported functional status assessment results not more than 180 days prior to the primary foot/ankle repair procedure, and at least 60 days and not more than 180 days after the procedure

Definitions:

Functional status assessment – Patient completed standardized tools designed to measure a patient's physical limitations in performing the usual human tasks of living and to directly quantify functional and behavioral symptoms.

Standardized Tool – An assessment tool that has been appropriately normed and validated for the population in which it is used. Examples of tools for evaluating ambulation, gait and foot function are: Activity-specific Balance Confidence Scale (ABC); American Academy of Orthopedic Surgeons Lower Limb Outcomes Assessment: Foot and Ankle Module (AAOS-FAM); Bristol Foot Score (BFS); Revised Foot Function Index (FFI-R); Foot Health Status Questionnaire (FHSQ); Functional Gait Assessment (FGA); Manchester Foot Pain and Disability Index (MFPDI); Podiatric Health Questionnaire (PHQ); Rowan Foot Pain Assessment (ROFPAQ); Foot & Ankle Rapid Health Indicator

Denominator criteria (Eligible Cases):

Patients aged ≥ 18 years on date of encounter

AND

Patient encounter during the reporting period (CPT): 23450, 23466, 27000, 27702, 27650, 29806, 29807, 29820, 29821, 29822, 29823, 29824, 29825, 29827, 29828

AND

Revised February 7, 2019

Completed a functional status assessment using a standardized tool not more than 180 days prior to the primary foot/ankle repair procedure, and at least 60 days and not more than 180 days after the procedure

DENOMINATOR EXCLUSIONS:

Patients with multiple traumas at the time of the procedure
Patients with severe cognitive impairment.

NUMERATOR:

Patients with patient-reported functional status assessment results not more than 180 days prior to the primary foot/ankle repair procedure, and at least 60 days and not more than 180 days after the procedure that demonstrated at least a 10% increase in their functional outcomes

Numerator Instructions: All components should be completed once per patient and should be documented in the medical record as having been performed during the performance period.

NOTE: The two assessments must be separated by at least 60 days. It is expected that the functional status assessment score or ranking improve in order for this measure to be successfully completed. PROMIS Global 10 assessment scores should demonstrate an improvement of 10 points on a 100-point scale, or similar calculation.

Numerator Options:

Performance Met: Initial functional status assessment documented as positive using a standardized tool AND subsequent functional status assessment documents improvement of 10% or more in pain and/or function

OR

Performance Met: Initial functional status assessment documented as negative; no pain or functional deficiencies identified

OR

Performance Not Met: Initial functional status assessment documented as positive using a standardized tool AND subsequent functional status assessment documents improvement of 0-9% in pain and/or function

RATIONALE:

While there are some measures that indicate the existence of completed outcome assessments (and those most aligned with Orthopedic Surgery are exclusive to EHR submissions), there are none that measure success as it relates to functional improvement reported by the patient. Not all patients experience a measurable improvement, and not all providers achieve consistent results. Measuring the percentage of non-trivial improvements further clarifies the gaps between providers as well as across organizations and populations.

CLINICAL RECOMMENDATION STATEMENTS:

As per studies, enhanced treatment adherence and outcomes can be obtained by giving attention to patient feedback on healthcare outcomes and patient behavior change.

WORKS CITED:

Deshpande PR, Rajan S, Sudeepthi BL, Abdul Nazir CP. Patient-reported outcomes: A new era in clinical research. *Perspect Clin Res.* 2011;2(4):137-44.

Revised February 7, 2019

2018 © Code Technology. All rights reserved. CPT® contained in the Measures specifications is copyright 2004- 2018 American Medical Association. All Rights Reserved.

COPYRIGHT STATEMENT:

The Measures are not clinical guidelines, do not establish a standard of medical care, and have not been tested for all potential applications.

This measure is in continuous development by Code Technology.

CPT® contained in the Measures specifications is copyright 2004-2018 American Medical Association. All Rights Reserved.

THE MEASURES AND SPECIFICATIONS ARE PROVIDED “AS IS” WITHOUT WARRANTY OF ANY KIND.