



KeetHealth.com | QCDR@KeetHealth.com | Austin, TX

KNEE INJURY FUNCTIONAL IMPROVEMENT

Measure ID

IROMS11

Measure Title

Failure to Progress (FTP): Proportion of patients failing to achieve a Minimal Clinically Important Difference (MCID) to indicate functional improvement in rehabilitation of patients with knee injury measured via their validated Knee Outcome Survey (KOS) score, or equivalent instrument which has undergone peer reviewed published validation and demonstrates a peer reviewed published MCID.

Measure Description

The proportion of patients failing to achieve an MCID of ten (10) points or more improvement in the KOS change score for patients with knee injury treated during the observation period will be reported.

Additionally, a risk-adjusted MCID proportional difference determined by calculating the difference between the risk model predicted and observed MCID proportion will be reported for each physical therapist or physical therapy group. The risk adjustment will be calculated using a logistic regression model using: baseline KOS score, baseline pain score, age, sex, payer, and symptom duration (time from surgery or injury to baseline physical therapy visit).

These measures will serve as a PT/OT performance measure at the eligible PT/OT or PT/OT group level.

Denominator Description

The total number of all patients with knee injury evaluated and treated by a PT or OT, or PT or OT Group, during the observation window.

Numerator Description

The total number of patients with knee injuries to not achieve an MCID in their KOS change score (MCID ≥ 10) from their initial visits to their final visits in PT/OT practice or PT/OT group during the observation window.

Denominator Exclusions

Patients who are < 18 years old. Patients who did not complete 2 or more surveys. Patients that are non-English speaking and translation services are unavailable. Patients that have a mental or cognitive impairment that compromises their ability accurately complete the MIPS patient reported outcome (PRO). Patients that have a life expectancy of 6 months or less. Patients meeting Medicare requirements for maintenance therapy, such as the maintenance of functional status or prevention of a slow deterioration in function, as defined by the Medicare Benefits Policy Manual, Chapter 15.

Denominator Exceptions

Ongoing care not indicated, patient seen only 1-2 visits (e.g., home program only, referred to another provider or facility, consultation only, or discharged due to significant decline in medical status as documented in the medical record). PT/OT can use their clinical judgement to exclude patients who are extremely medically complex, who in their experience are likely to make poor clinical progress. The provider must clearly document in the medical record the specific medical complexity / complexities present to qualify for this exception.

IROMS11 | This measure is owned and managed by Keet Outcomes the Qualified Clinical Data Registry of Keet, Inc. For permissions contact, QCDR@KeetHealth.com



KeetHealth.com | QCDR@KeetHealth.com | Austin, TX

KNEE INJURY FUNCTIONAL IMPROVEMENT

Numerator Exclusions

None

NQF Number

N/A

NQS Domain

Effective Clinical Care

High Priority Measure

Yes

High Priority Type

Outcome

Measure Type

Patient Reported Outcome

Meaningful Measure Area

Functional Outcomes

Inverse Measure

Yes

Proportional Measure

Yes

Continuous Variable Measure

No

Ratio Measure

No

Number of performance rates to be submitted

6

Measure Risk-Adjusted?

Yes

Care Setting(s)

Ambulatory Care, Clinician Office / Clinic, Outpatient and Telehealth



KeetHealth.com | QCDR@KeetHealth.com | Austin, TX

KNEE INJURY NPRS

Measure ID

IROMS12

Measure Title

Failure to Progress (FTP): Proportion of patients failing to achieve a Minimal Clinically Important Difference (MCID) in improvement in pain score, measured via the Numeric Pain Rating Scale (NPRS), in rehabilitation of patients with knee injury.

Measure Description

The proportion of patients failing to achieve an MCID of two (2) points or more improvement in the NPRS change score for patients with knee injury treated during the observation period will be reported.

Additionally, a risk-adjusted MCID proportional difference determined by calculating the difference between the risk model predicted and observed MCID proportion will be reported for each physical therapist or physical therapy group. The risk adjustment will be calculated using a logistic regression model using: baseline KOS score, baseline pain score, age, sex, payer, and symptom duration (time from surgery or injury to baseline physical therapy visit).

These measures will serve as a PT/OT performance measure at the eligible PT/OT or PT/OT group level.

Denominator Description

The total number of all patients with knee injury evaluated and treated by a PT or OT, or PT or OT Group, during the observation window.

Numerator Description

The total number of patients with knee injuries to not achieve an MCID in their NPRS change score (MCID \geq 2) from their initial visits to their final visits in PT/OT practice or PT/OT group during the observation window.

Denominator Exclusions

Patients who are < 18 years old. Patients who did not complete 2 or more surveys. Patients that are non-English speaking and translation services are unavailable. Patients that have a mental or cognitive impairment that compromises their ability accurately complete the MIPS patient reported outcome (PRO). Patients that have a life expectancy of 6 months or less. Patients meeting Medicare requirements for maintenance therapy, such as the maintenance of functional status or prevention of a slow deterioration in function, as defined by the Medicare Benefits Policy Manual, Chapter 15.

Denominator Exceptions

Ongoing care not indicated, patient seen only 1-2 visits (e.g., home program only, referred to another provider or facility, consultation only, or discharged due to significant decline in medical status as documented in the medical record). PT/OT can use their clinical judgement to exclude patients who are extremely medically complex, who in their experience are likely to make poor clinical progress. The provider must clearly document in the medical record the specific medical complexity / complexities present to qualify for this exception.



KeetHealth.com | QCDR@KeetHealth.com | Austin, TX

KNEE INJURY NPRS

Numerator Exclusions

None

NQF Number

N/A

NQS Domain

Effective Clinical Care

High Priority Measure

Yes

High Priority Type

Outcome

Measure Type

Patient Reported Outcome

Meaningful Measure Area

Functional Outcomes

Inverse Measure

Yes

Proportional Measure

Yes

Continuous Variable Measure

No

Ratio Measure

No

Number of performance rates to be submitted

6

Measure Risk-Adjusted?

Yes

Care Setting(s)

Ambulatory Care, Clinician Office / Clinic, Outpatient and Telehealth



KeetHealth.com | QCDR@KeetHealth.com | Austin, TX

HIP, LEG OR ANKLE INJURY FUNCTIONAL IMPROVEMENT

Measure ID

IROMS13

Measure Title

Failure to Progress (FTP): Proportion of patients failing to achieve a Minimal Clinically Important Difference (MCID) to indicate functional improvement in rehabilitation of patients with hip, leg, or ankle injuries using the validated Lower Extremity Function Scale (LEFS) score, or equivalent instrument which has undergone peer reviewed published validation and demonstrates a peer reviewed published MCID.

Measure Description

The proportion of patients failing to achieve an MCID of nine (9) points or more improvement in the LEFS change score for patients with hip, leg, or ankle injuries treated during the observation period will be reported.

Additionally, a risk-adjusted MCID proportional difference determined by calculating the difference between the risk model predicted and observed MCID proportion will reported for each physical therapist or physical therapy group. The risk adjustment will be calculated using a logistic regression model using: baseline LEFS score, baseline pain score, age, sex, payer, and symptom duration (time from surgery or injury to baseline physical therapy visit).

These measures will serve as a PT/OT performance measure at the eligible PT/OT or PT/OT group level.

Denominator Description

The total number of all patients with hip, leg, or ankle injury evaluated and treated by a PT or OT, or PT or OT Group, during the observation window.

Numerator Description

The total number of patients with hip, leg, or ankle injuries to not achieve an MCID in their LEFS change score (MCID \geq 9) from their initial visits to their final visits in PT/OT practice or PT/OT group during the observation window.

Denominator Exclusions

Patients who are < 18 years old. Patients who did not complete 2 or more surveys. Patients that are non-English speaking and translation services are unavailable. Patients that have a mental or cognitive impairment that compromises their ability accurately complete the MIPS patient reported outcome (PRO). Patients that have a life expectancy of 6 months or less. Patients meeting Medicare requirements for maintenance therapy, such as the maintenance of functional status or prevention of a slow deterioration in function, as defined by the Medicare Benefits Policy Manual, Chapter 15.

Denominator Exceptions

Ongoing care not indicated, patient seen only 1-2 visits (e.g., home program only, referred to another provider or facility, consultation only, or discharged due to significant decline in medical status as documented in the medical record). PT/OT can use their clinical judgement to exclude patients who are extremely medically complex, who in their experience are likely to make poor clinical progress. The provider must clearly document in the medical record the specific medical complexity / complexities present to qualify for this exception.

IROMS13 | This measure is owned and managed by Keet Outcomes the Qualified Clinical Data Registry of Keet, Inc. For permissions contact, QCDR@KeetHealth.com



KeetHealth.com | QCDR@KeetHealth.com | Austin, TX

HIP, LEG OR ANKLE INJURY FUNCTIONAL IMPROVEMENT

Numerator Exclusions

None

NQF Number

N/A

NQS Domain

Effective Clinical Care

High Priority Measure

Yes

High Priority Type

Outcome

Measure Type

Patient Reported Outcome

Meaningful Measure Area

Functional Outcomes

Inverse Measure

Yes

Proportional Measure

Yes

Continuous Variable Measure

No

Ratio Measure

No

Number of performance rates to be submitted

6

Measure Risk-Adjusted?

Yes

Care Setting(s)

Ambulatory Care, Clinician Office / Clinic, Outpatient and Telehealth



KeetHealth.com | QCDR@KeetHealth.com | Austin, TX

HIP, LEG OR ANKLE INJURY NPRS

Measure ID

IROMS14

Measure Title

Failure to Progress (FTP): Proportion of patients failing to achieve a Minimal Clinically Important Difference (MCID) in improvement in pain score, measured via the Numeric Pain Rating Scale (NPRS), in rehabilitation of patients with hip, leg, or ankle (lower extremity except knee) injury.

Measure Description

The proportion of patients failing to achieve an MCID of two (2) points or more improvement in the NPRS change score for patients with hip, leg, or ankle injury treated during the observation period will be reported.

Additionally, a risk-adjusted MCID proportional difference determined by calculating the difference between the risk model predicted and observed MCID proportion will be reported for each physical therapist or physical therapy group. The risk adjustment will be calculated using a logistic regression model using: baseline LEFS score, baseline pain score, age, sex, payer, and symptom duration (time from surgery or injury to baseline physical therapy visit).

These measures will serve as a PT/OT performance measure at the eligible PT/OT or PT/OT group level.

Denominator Description

The total number of all patients with hip, leg, or ankle injury evaluated and treated by a PT or OT, or PT or OT Group, during the observation window.

Numerator Description

The total number of patients with hip, leg, or ankle (lower extremity except knee) injuries to not achieve an MCID in their NPRS change score ($MCID \geq 2$) from their initial visits to their final visits in PT/OT practice or PT/OT group during the observation window.

Denominator Exclusions

Patients who are < 18 years old. Patients who did not complete 2 or more surveys. Patients that are non-English speaking and translation services are unavailable. Patients that have a mental or cognitive impairment that compromises their ability accurately complete the MIPS patient reported outcome (PRO). Patients that have a life expectancy of 6 months or less. Patients meeting Medicare requirements for maintenance therapy, such as the maintenance of functional status or prevention of a slow deterioration in function, as defined by the Medicare Benefits Policy Manual, Chapter 15.

Denominator Exceptions

Ongoing care not indicated, patient seen only 1-2 visits (e.g., home program only, referred to another provider or facility, consultation only, or discharged due to significant decline in medical status as documented in the medical record). PT/OT can use their clinical judgement to exclude patients who are extremely medically complex, who in their experience are likely to make poor clinical progress. The provider must clearly document in the medical record the specific medical complexity / complexities present to qualify for this exception.



KeetHealth.com | QCDR@KeetHealth.com | Austin, TX

HIP, LEG OR ANKLE INJURY NPRS

Numerator Exclusions

None

NQF Number

N/A

NQS Domain

Effective Clinical Care

High Priority Measure

Yes

High Priority Type

Outcome

Measure Type

Patient Reported Outcome

Meaningful Measure Area

Functional Outcomes

Inverse Measure

Yes

Proportional Measure

Yes

Continuous Variable Measure

No

Ratio Measure

No

Number of performance rates to be submitted

6

Measure Risk-Adjusted?

Yes

Care Setting(s)

Ambulatory Care, Clinician Office / Clinic, Outpatient and Telehealth



KeetHealth.com | QCDR@KeetHealth.com | Austin, TX

NECK PAIN/INJURY FUNCTIONAL IMPROVEMENT

Measure ID

KEET01*

Measure Title

Failure to Progress (FTP): Proportion of patients failing to achieve a Minimal Clinically Important Difference (MCID) to indicate functional improvement in rehabilitation of patients with neck pain/injury measured via their validated Neck Disability Index (NDI) score.

Measure Description

The proportion of patients failing to achieve an MCID of seven and ½ (7.5) points or more improvement in the NDI change score for patients with neck pain/injury treated during the observation period will be reported.

Additionally, a risk-adjusted MCID proportional difference determined by calculating the difference between the risk model predicted and observed MCID proportion will be reported for each physical therapist or physical therapy group. The risk adjustment will be calculated using a logistic regression model using: baseline NDI score, baseline pain score, age, sex, payer, and symptom duration (time from surgery or injury to baseline physical therapy visit).

These measures will serve as a PT/OT performance measure at the eligible PT/OT or PT/OT group level.

Denominator Description

The total number of all patients with knee injury evaluated and treated by a PT or OT, or PT or OT Group, during the observation window.

Numerator Description

The total number of patients with knee injuries to not achieve an MCID in their NDI change score (MCID ≥ 7.5) from their initial visits to their final visits in PT/OT practice or PT/OT group during the observation window.

Denominator Exclusions

Patients who are < 18 years old. Patients who did not complete 2 or more surveys. Patients that are non-English speaking and translation services are unavailable. Patients that have a mental or cognitive impairment that compromises their ability accurately complete the MIPS patient reported outcome (PRO). Patients that have a life expectancy of 6 months or less. Patients meeting Medicare requirements for maintenance therapy, such as the maintenance of functional status or prevention of a slow deterioration in function, as defined by the Medicare Benefits Policy Manual, Chapter 15.

Denominator Exceptions

Ongoing care not indicated, patient seen only 1-2 visits (e.g., home program only, referred to another provider or facility, consultation only, or discharged due to significant decline in medical status as documented in the medical record). PT/OT can use their clinical judgement to exclude patients who are extremely medically complex, who in their experience are likely to make poor clinical progress. The provider must clearly document in the medical record the specific medical complexity / complexities present to qualify for this exception.

KEET01 | This measure is owned and managed by Keet Outcomes the Qualified Clinical Data Registry of Keet, Inc. For permissions contact, QCDR@KeetHealth.com



KeetHealth.com | QCDR@KeetHealth.com | Austin, TX

NECK PAIN/INJURY FUNCTIONAL IMPROVEMENT

Numerator Exclusions

None

NQF Number

N/A

NQS Domain

Effective Clinical Care

High Priority Measure

Yes

High Priority Type

Outcome

Measure Type

Patient Reported Outcome

Meaningful Measure Area

Functional Outcomes

Inverse Measure

Yes

Proportional Measure

Yes

Continuous Variable Measure

No

Ratio Measure

No

Number of performance rates to be submitted

6

Measure Risk-Adjusted?

Yes

Care Setting(s)

Ambulatory Care, Clinician Office / Clinic, Outpatient and Telehealth

**KEET01 mirrors the historical IROMS15 quality measure except for the MCID which is set at 7.5 to reflect the most recent evidence based research.*

KEET01 | This measure is owned and managed by Keet Outcomes the Qualified Clinical Data Registry of Keet, Inc. For permissions contact, QCDR@KeetHealth.com



KeetHealth.com | QCDR@KeetHealth.com | Austin, TX

NECK PAIN/INJURY NPRS

Measure ID

IROMS16

Measure Title

Failure to Progress (FTP): Proportion of patients failing to achieve a Minimal Clinically Important Difference (MCID) in improvement in pain score, measured via the Numeric Pain Rating Scale (NPRS), in rehabilitation of patients with neck pain/injury.

Measure Description

The proportion of patients failing to achieve an MCID of two (2) points or more improvement in the NPRS change score for patients with neck pain/injury treated during the observation period will be reported.

Additionally, a risk-adjusted MCID proportional difference determined by calculating the difference between the risk model predicted and observed MCID proportion will be reported for each physical therapist or physical therapy group. The risk adjustment will be calculated using a logistic regression model using: baseline NDI score, baseline pain score, age, sex, payer, and symptom duration (time from surgery or injury to baseline physical therapy visit).

These measures will serve as a PT/OT performance measure at the eligible PT/OT or PT/OT group level.

Denominator Description

The total number of all patients with neck pain/injury evaluated and treated by a PT or OT, or PT or OT Group, during the observation window.

Numerator Description

The total number of patients with neck pain/injuries to not achieve an MCID in their NPRS change score (MCID \geq 2) from their initial visits to their final visits in PT/OT practice or PT/OT group during the observation window.

Denominator Exclusions

Patients who are < 18 years old. Patients who did not complete 2 or more surveys. Patients that are non-English speaking and translation services are unavailable. Patients that have a mental or cognitive impairment that compromises their ability accurately complete the MIPS patient reported outcome (PRO). Patients that have a life expectancy of 6 months or less. Patients meeting Medicare requirements for maintenance therapy, such as the maintenance of functional status or prevention of a slow deterioration in function, as defined by the Medicare Benefits Policy Manual, Chapter 15.

Denominator Exceptions

Ongoing care not indicated, patient seen only 1-2 visits (e.g., home program only, referred to another provider or facility, consultation only, or discharged due to significant decline in medical status as documented in the medical record). PT/OT can use their clinical judgement to exclude patients who are extremely medically complex, who in their experience are likely to make poor clinical progress. The provider must clearly document in the medical record the specific medical complexity / complexities present to qualify for this exception.



KeetHealth.com | QCDR@KeetHealth.com | Austin, TX

NECK PAIN/INJURY NPRS

Numerator Exclusions

None

NQF Number

N/A

NQS Domain

Effective Clinical Care

High Priority Measure

Yes

High Priority Type

Outcome

Measure Type

Patient Reported Outcome

Meaningful Measure Area

Functional Outcomes

Inverse Measure

Yes

Proportional Measure

Yes

Continuous Variable Measure

No

Ratio Measure

No

Number of performance rates to be submitted

6

Measure Risk-Adjusted?

Yes

Care Setting(s)

Ambulatory Care, Clinician Office / Clinic, Outpatient and Telehealth



KeetHealth.com | QCDR@KeetHealth.com | Austin, TX

LOW BACK PAIN FUNCTIONAL IMPROVEMENT

Measure ID

IROMS17

Measure Title

Failure to Progress (FTP): Proportion of patients failing to achieve a Minimal Clinically Important Difference (MCID) to indicate functional improvement in rehabilitation of patients with low back pain measured via their validated Modified Low Back Pain Disability Questionnaire (MDQ) score.

Measure Description

The proportion of patients failing to achieve an MCID of six (6) points or more improvement in the MDQ change score for patients with low back pain treated during the observation period will be reported.

Additionally, a risk-adjusted MCID proportional difference determined by calculating the difference between the risk model predicted and observed MCID proportion will be reported for each physical therapist or physical therapy group. The risk adjustment will be calculated using a logistic regression model using: baseline MDQ score, baseline pain score, age, sex, payer, and symptom duration (time from surgery or injury to baseline physical therapy visit).

These measures will serve as a PT/OT performance measure at the eligible PT/OT or PT/OT group level.

Denominator Description

The total number of all patients with knee injury evaluated and treated by a PT or OT, or PT or OT Group, during the observation window.

Numerator Description

The total number of patients with low back pain to not achieve an MCID in their MDQ change score (MCID ≥ 6) from their initial visits to their final visits in PT/OT practice or PT/OT group during the observation window.

Denominator Exclusions

Patients who are < 18 years old. Patients who did not complete 2 or more surveys. Patients that are non-English speaking and translation services are unavailable. Patients that have a mental or cognitive impairment that compromises their ability accurately complete the MIPS patient reported outcome (PRO). Patients that have a life expectancy of 6 months or less. Patients meeting Medicare requirements for maintenance therapy, such as the maintenance of functional status or prevention of a slow deterioration in function, as defined by the Medicare Benefits Policy Manual, Chapter 15.

Denominator Exceptions

Ongoing care not indicated, patient seen only 1-2 visits (e.g., home program only, referred to another provider or facility, consultation only, or discharged due to significant decline in medical status as documented in the medical record). PT/OT can use their clinical judgement to exclude patients who are extremely medically complex, who in their experience are likely to make poor clinical progress. The provider must clearly document in the medical record the specific medical complexity / complexities present to qualify for this exception.



KeetHealth.com | QCDR@KeetHealth.com | Austin, TX

LOW BACK PAIN FUNCTIONAL IMPROVEMENT

Numerator Exclusions

None

NQF Number

N/A

NQS Domain

Effective Clinical Care

High Priority Measure

Yes

High Priority Type

Outcome

Measure Type

Patient Reported Outcome

Meaningful Measure Area

Functional Outcomes

Inverse Measure

Yes

Proportional Measure

Yes

Continuous Variable Measure

No

Ratio Measure

No

Number of performance rates to be submitted

6

Measure Risk-Adjusted?

Yes

Care Setting(s)

Ambulatory Care, Clinician Office / Clinic, Outpatient and Telehealth



KeetHealth.com | QCDR@KeetHealth.com | Austin, TX

LOW BACK PAIN NPRS

Measure ID

IROMS18

Measure Title

Failure to Progress (FTP): Proportion of patients failing to achieve a Minimal Clinically Important Difference (MCID) in improvement in pain score, measured via the Numeric Pain Rating Scale (NPRS), in rehabilitation of patients with low back pain.

Measure Description

The proportion of patients failing to achieve an MCID of two (2) points or more improvement in the NPRS change score for patients with low back pain treated during the observation period will be reported.

Additionally, a risk-adjusted MCID proportional difference determined by calculating the difference between the risk model predicted and observed MCID proportion will be reported for each physical therapist or physical therapy group. The risk adjustment will be calculated using a logistic regression model using: baseline MDQ score, baseline pain score, age, sex, payer, and symptom duration (time from surgery or injury to baseline physical therapy visit).

These measures will serve as a PT/OT performance measure at the eligible PT/OT or PT/OT group level.

Denominator Description

The total number of all patients with low back pain evaluated and treated by a PT or OT, or PT or OT Group, during the observation window.

Numerator Description

The total number of patients with low back pain to not achieve an MCID in their NPRS change score (MCID \geq 2) from their initial visits to their final visits in PT/OT practice or PT/OT group during the observation window.

Denominator Exclusions

Patients who are < 18 years old. Patients who did not complete 2 or more surveys. Patients that are non-English speaking and translation services are unavailable. Patients that have a mental or cognitive impairment that compromises their ability accurately complete the MIPS patient reported outcome (PRO). Patients that have a life expectancy of 6 months or less. Patients meeting Medicare requirements for maintenance therapy, such as the maintenance of functional status or prevention of a slow deterioration in function, as defined by the Medicare Benefits Policy Manual, Chapter 15.

Denominator Exceptions

Ongoing care not indicated, patient seen only 1-2 visits (e.g., home program only, referred to another provider or facility, consultation only, or discharged due to significant decline in medical status as documented in the medical record). PT/OT can use their clinical judgement to exclude patients who are extremely medically complex, who in their experience are likely to make poor clinical progress. The provider must clearly document in the medical record the specific medical complexity / complexities present to qualify for this exception.



KeetHealth.com | QCDR@KeetHealth.com | Austin, TX

LOW BACK PAIN NPRS

Numerator Exclusions

None

NQF Number

N/A

NQS Domain

Effective Clinical Care

High Priority Measure

Yes

High Priority Type

Outcome

Measure Type

Patient Reported Outcome

Meaningful Measure Area

Functional Outcomes

Inverse Measure

Yes

Proportional Measure

Yes

Continuous Variable Measure

No

Ratio Measure

No

Number of performance rates to be submitted

6

Measure Risk-Adjusted?

Yes

Care Setting(s)

Ambulatory Care, Clinician Office / Clinic, Outpatient and Telehealth



KeetHealth.com | QCDR@KeetHealth.com | Austin, TX

ARM, SHOULDER, AND HAND INJURY FUNCTIONAL IMPROVEMENT

Measure ID

IROMS19

Measure Title

Failure to Progress (FTP): Proportion of patients failing to achieve a Minimal Clinically Important Difference (MCID) to indicate functional improvement in rehabilitation of patients with arm, shoulder, or hand injury measured via their validated Disability of the Arm, Shoulder and Hand (DASH) score, Quick Disability of the Arm, Shoulder and Hand (QDASH) score, or equivalent instrument which has undergone peer reviewed published validation and demonstrates a peer reviewed published MCID.

Measure Description

The proportion of patients failing to achieve an MCID of ten (10) points or more improvement in the DASH change score or eight (8) points or more improvement in the QDASH change score for patients with arm, shoulder or hand injury treated during the observation period will be reported.

Additionally, a risk-adjusted MCID proportional difference determined by calculating the difference between the risk model predicted and observed MCID proportion will be reported for each physical therapist or physical therapy group. The risk adjustment will be calculated using a logistic regression model using: baseline DASH or QDASH score, baseline pain score, age, sex, payer, and symptom duration (time from surgery or injury to baseline physical therapy visit). These measures will serve as a PT/OT performance measure at the eligible PT/OT or PT/OT group level.

Denominator Description

The total number of all patients with arm, shoulder, or hand injury evaluated and treated by a PT or OT, or PT or OT Group, during the observation window.

Numerator Description

The total number of patients with arm, shoulder, or hand injuries to not achieve an MCID in their DASH change score (MCID \geq 10 for DASH, MCID \geq 8 for QDASH) from their initial visits to their final visits in PT/OT practice or PT/OT group during the observation window.

Denominator Exclusions

Patients who are < 18 years old. Patients who did not complete 2 or more surveys. Patients that are non-English speaking and translation services are unavailable. Patients that have a mental or cognitive impairment that compromises their ability accurately complete the MIPS patient reported outcome (PRO). Patients that have a life expectancy of 6 months or less. Patients meeting Medicare requirements for maintenance therapy, such as the maintenance of functional status or prevention of a slow deterioration in function, as defined by the Medicare Benefits Policy Manual, Chapter 15.

Denominator Exceptions

Ongoing care not indicated, patient seen only 1-2 visits (e.g., home program only, referred to another provider or facility, consultation only, or discharged due to significant decline in medical status as documented in the medical record). PT/OT can use their clinical judgement to exclude patients who are extremely medically complex, who in their experience are likely to make poor clinical progress. The provider must clearly document in the medical record the specific medical complexity / complexities present to qualify for this exception.

IROMS19 | This measure is owned and managed by Keet Outcomes the Qualified Clinical Data Registry of Keet, Inc. For permissions contact, QCDR@KeetHealth.com



KeetHealth.com | QCDR@KeetHealth.com | Austin, TX

ARM, SHOULDER, AND HAND INJURY FUNCTIONAL IMPROVEMENT

Numerator Exclusions

None

NQF Number

N/A

NQS Domain

Effective Clinical Care

High Priority Measure

Yes

High Priority Type

Outcome

Measure Type

Patient Reported Outcome

Meaningful Measure Area

Functional Outcomes

Inverse Measure

Yes

Proportional Measure

Yes

Continuous Variable Measure

No

Ratio Measure

No

Number of performance rates to be submitted

6

Measure Risk-Adjusted?

Yes

Care Setting(s)

Ambulatory Care, Clinician Office / Clinic, Outpatient and Telehealth



KeetHealth.com | QCDR@KeetHealth.com | Austin, TX

ARM, SHOULDER, AND HAND INJURY NPRS

Measure ID

IROMS20

Measure Title

Failure to Progress (FTP): Proportion of patients failing to achieve a Minimal Clinically Important Difference (MCID) in improvement in pain score, measured via the Numeric Pain Rating Scale (NPRS), in rehabilitation of patients with arm, shoulder, or hand injury.

Measure Description

The proportion of patients failing to achieve an MCID of two (2) points or more improvement in the NPRS change score for patients with arm, shoulder, or hand injury treated during the observation period will be reported.

Additionally, a risk-adjusted MCID proportional difference determined by calculating the difference between the risk model predicted and observed MCID proportion will be reported for each physical therapist or physical therapy group. The risk adjustment will be calculated using a logistic regression model using: baseline DASH score, baseline pain score, age, sex, payer, and symptom duration (time from surgery or injury to baseline physical therapy visit).

These measures will serve as a PT/OT performance measure at the eligible PT/OT or PT/OT group level.

Denominator Description

The total number of all patients with arm, shoulder, or hand injury evaluated and treated by a PT or OT, or PT or OT Group, during the observation window.

Numerator Description

The total number of patients with arm, shoulder, or hand injuries to not achieve an MCID in their NPRS change score ($MCID \geq 2$) from their initial visits to their final visits in PT/OT practice or PT/OT group during the observation window.

Denominator Exclusions

Patients who are < 18 years old. Patients who did not complete 2 or more surveys. Patients that are non-English speaking and translation services are unavailable. Patients that have a mental or cognitive impairment that compromises their ability accurately complete the MIPS patient reported outcome (PRO). Patients that have a life expectancy of 6 months or less. Patients meeting Medicare requirements for maintenance therapy, such as the maintenance of functional status or prevention of a slow deterioration in function, as defined by the Medicare Benefits Policy Manual, Chapter 15.

Denominator Exceptions

Ongoing care not indicated, patient seen only 1-2 visits (e.g., home program only, referred to another provider or facility, consultation only, or discharged due to significant decline in medical status as documented in the medical record). PT/OT can use their clinical judgement to exclude patients who are extremely medically complex, who in their experience are likely to make poor clinical progress. The provider must clearly document in the medical record the specific medical complexity / complexities present to qualify for this exception.



KeetHealth.com | QCDR@KeetHealth.com | Austin, TX

ARM, SHOULDER, AND HAND INJURY NPRS

Numerator Exclusions

None

NQF Number

N/A

NQS Domain

Effective Clinical Care

High Priority Measure

Yes

High Priority Type

Outcome

Measure Type

Patient Reported Outcome

Meaningful Measure Area

Functional Outcomes

Inverse Measure

Yes

Proportional Measure

Yes

Continuous Variable Measure

No

Ratio Measure

No

Number of performance rates to be submitted

6

Measure Risk-Adjusted?

Yes

Care Setting(s)

Ambulatory Care, Clinician Office / Clinic, Outpatient and Telehealth