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Quality ID #QMM20: Opening Pressure in Lumbar Puncture
- National Quality Strategy Domain: Effective Clinical Care
- Meaningful Measure Area: Patient-Focused Episode of Care

2021 COLLECTION TYPE:

MIPS CLINICAL QUALITY MEASURES (CQMS)

MEASURE TYPE:

Process

DESCRIPTION:

Percentage of final reports for patients aged ≥ 18 which include Documentation of Opening Pressure Value obtained during Lumbar Puncture

INSTRUCTIONS:

This measure is to be submitted **each time** during the reporting period that a lumbar puncture is performed. Measure performance focuses on the radiologist's inclusion of the Opening Pressure Value obtained during the lumbar puncture in the report. This inclusion can reduce or prevent the need for a second lumbar puncture.

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 final reports for lumbar puncture for patients aged ≥ 18

Denominator Criteria (eligible cases):

All patients aged ≥ 18 on date of encounter

AND

Patient procedure during the performance period (CPT): 62270, 62328, 62272 and 62329

AND

Diagnosis Code (ICD-10-CM):

Seizure: R56.9

Headache: R51, G44, G44.8, G44.81, G44.89, G44.83, G44.84, G44.85, G44.82, G44.0, G44.01, G44.011, G44.019, G44.02, G44.021, G44.029, G44.00, G44.009, G44.001, G44.5, G44.53, G44.59, G44.52, G44.1, G44.3, G44.30, G44.309, G44.301, G44.31, G44.319, G44.2, G44.20, G44.201, G44.209, G44.21, G44.219, G44.211, G44.22, G44.229

Photophobia: H53.141, H53.142, H53.143, H53.149

Nausea: R11.0, R11.2

Fever: 780.6, 780.63, 780.62

Neck Pain: M54.2

Vomiting: R11.11

Assorted Meningitis: A39, A39.0, G03, G03.9, G03.0, G03.1, G03.2, G03.8, A87, A87.0, A87.9, B38, B38.4, B02, B02.1, B00, B00.3, A02, A02.2, A02.21, A54, A54.8, A54.81, B37, B37.5, G00, G00.2, G00.3, G00.0, G00.1, G00.8, B26, B26.1, A27, A27.8, A52, A52.1, G02, A20, A20.3

Numerator:

Final report for lumbar puncture includes documentation of Opening Pressure Value obtained during Lumbar Puncture

Numerator Note:

Final Reports that qualify for the performance exception require documentation that technical difficulties precluded obtaining the opening pressure Value. These issues can include, but are not limited to: Technical difficulty due to "dry tap" or insufficient CSF.

Numerator Options:

Performance Met:

PM020: Final report for lumbar puncture has documentation of open pressure value.

OR

Performance Not Met:

PNM20: Final Report for lumbar puncture does not have documentation of open pressure value.

OR

Denominator Exception:

PE020: Final Report for lumbar puncture documents technical difficulties that preclude obtaining the opening pressure value.

RATIONALE:

Fluoroscopy-guided lumbar puncture (LP) is a minimally invasive, image-guided diagnostic and therapeutic procedure that involves the removal of a small volume of cerebrospinal fluid (CSF) from, or an injection of medication or other substance (e.g. radiotracer, chemotherapy agents) into the lumbar cistern of the spinal column. The opening pressure recorded during diagnostic lumbar puncture reflects intracranial pressure.

This value is critical for accurate diagnosis of suspected elevated intracranial pressure and has been shown to have correlation with morbidity in meningitis. In some cases, measuring the opening pressure could mean the difference between diagnosing or missing entities like CSF leaks, cerebral venous thrombosis, and idiopathic intracranial hypertension (IIH). Since the patient is already undergoing an invasive procedure and the opening pressure can usually be obtained and documented without further risk to the patient the physician should always attempt to measure the CSF opening pressure whenever performing a diagnostic LP.

If lumbar puncture is successfully performed, it is important to also record an accurate opening pressure in all cases as this may alter treatment strategy or portend more severe disease. Furthermore, routine reporting of opening pressure may obviate the need for repeat procedures should this value be needed in the future.

MEASURE TESTING AND GAP ANALYSIS:

In a review of 123 medical records opening pressure was only documented 55 times (44.7%) during the lumbar puncture procedure.

References:

1. Practice Patterns and Opening Pressure Measurements Using Fluoroscopically Guided Lumbar Puncture, A.S. Abel et al, January 19, 2012 as 10.3174/ajnr.A2, (www.ajnr.org)
2. Cerebrospinal fluid pressure in pyogenic meningitis, R.A. Minns et al, 1989, 64, 814-820, (<http://adc.bmj.com/>)
3. The Effect of Therapeutic Lumbar Punctures on Acute Mortality From Cryptococcal Meningitis, Melissa A. Rolfes et al, Clinical Infectious Disease 2014;59(11):1607–14
4. Diagnostic Lumbar Puncture, Carolynne M Doherty, Raeburn B Forbes, The Ulster Medical Journal, 2014, (www.ums.ac.uk)

Meaningful Measure Priority: Patient-Focused Episode of Care

NQS Domain: Effective Clinical Care

Measure type: Process

High Priority Measure: No

Data Source: Registry, RIS/VR System, Contracted third party data capture systems.

Measure Stewards: MEDNAX Health Solutions Partner & MSN Healthcare Solutions, LLC

Number of Multiple Performance Rates: 1

Inverse Measure: No

Proportion Measure Scoring: Yes

Continuous Measure Scoring: No

Risk adjustment: No

Clinical Setting: Hospital

Includes Telehealth: No

NQF Number: Not applicable

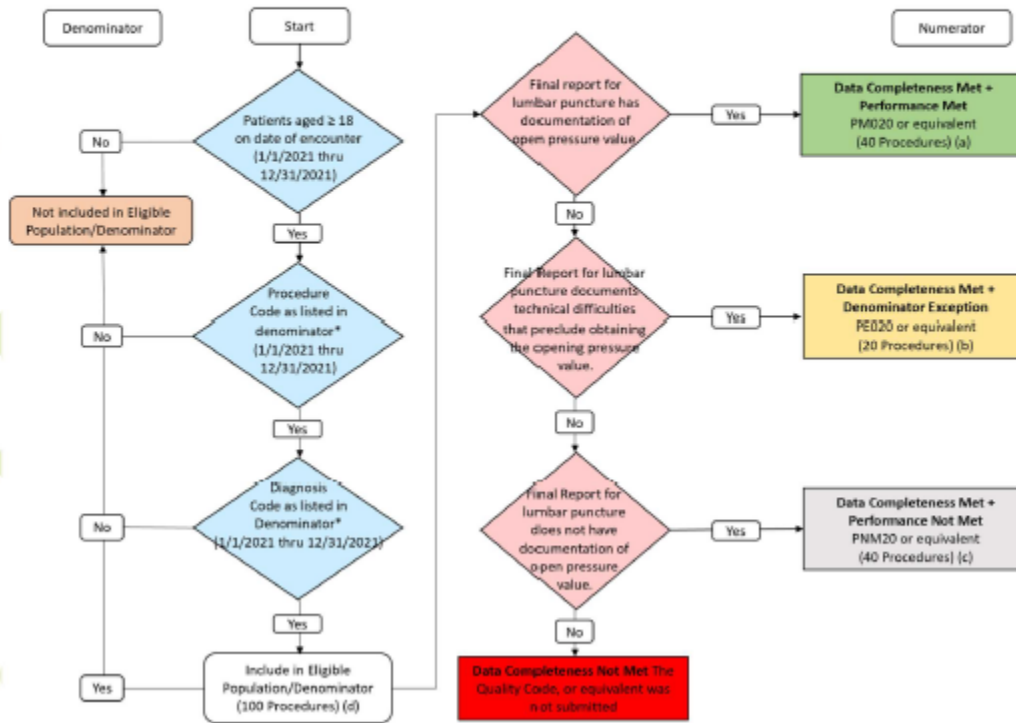
eCQM Number: Not applicable

2021 Clinical Quality Measure Flow Narrative for Quality ID #QMM20: Opening Pressure in Lumbar Puncture

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

2021 Clinical Quality Measure Flow Narrative for Quality ID #QMM20: Opening Pressure in Lumbar Puncture

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

SAMPLE CALCULATIONS:

Data Completeness =

$$\frac{\text{Performance Met (a=40 procedures)} + \text{Denominator Exception (b=20 procedures)} + \text{Performance Not Met (c=40 procedures)}}{\text{Eligible Population / Denominator (d=100 procedures)}} = \frac{100 \text{ procedures}}{100 \text{ procedures}} = 100.00\%$$

Performance Rate =

$$\frac{\text{Performance Met (a=40 procedures)}}{\text{Data Completeness Numerator (100 procedures) - Denominator Exception (20 procedures)}} = \frac{40 \text{ procedures}}{80 \text{ procedures}} = 50.00\%$$

2021 Clinical Quality Measure Flow Narrative for Quality ID #QMM20: Opening Pressure in Lumbar Puncture

***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 at 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 at Date of Encounter equals YES during the measurement period, proceed to check Procedure Performed
3. Check Procedure Performed
 - a. If Procedure Code as listed in denominator equals NO, do not include in Eligible Population. Stop Processing
 - b. If Procedure Code as listed in the Denominator equals YES, proceed to check Diagnosis Code
4. Check Diagnosis Code
 - a. If Diagnosis Code as listed in Denominator equals NO, do not include in Eligible Population. Stop Processing.
 - b. If Diagnosis Code as listed in Denominator equals YES, include in Eligible Population
5. Denominator Population:
 - a. Denominator Population is all Eligible Procedures in the Denominator. Denominator is represented as Denominator in the Sample Calculation listed at the end of this document. Letter “d” equals 100 procedures in the Sample Calculation.
6. Start Numerator
7. Check Final report for lumbar puncture has documentation of open pressure value.
 - a. If Final report for lumbar puncture has documentation of open pressure value 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 procedures in the Sample Calculation
 - c. If Final report for lumbar puncture has documentation of open pressure value equals NO, Proceed to Final Report for lumbar puncture documents technical difficulties that preclude obtaining the opening pressure value.
8. Check Final Report for lumbar puncture documents technical difficulties that preclude obtaining the opening pressure value:
 - a. If Final Report for lumbar puncture documents technical difficulties that preclude obtaining the opening pressure value equals YES, include in Data Completeness Met and Denominator Exception.
 - b. Data Completeness Met and Denominator Exception letter is represented in the Data Completeness and Performance Rate in the Sample Calculation listed at the end of this document. Letter “b” equals 20 procedures in the Sample Calculation

- c. If Final Report for lumbar puncture documents technical difficulties that preclude obtaining the opening pressure equals NO, Proceed to Final Report for lumbar puncture does not have documentation of open pressure
9. Check Final Report for lumbar puncture does not have documentation of open pressure value:
- a. If Final Report for lumbar puncture does not have documentation of open pressure value 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 and Performance Rate in the Sample Calculation listed at the end of this document. Letter “c” equals 40 procedures in the Sample Calculation
 - c. If Final Report for lumbar puncture does not have documentation of open pressure value equals NO, Proceed to 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. 0 procedures have been subtracted from the Data Completeness Numerator in the Sample Calculation

SAMPLE CALCULATIONS:

Data Completeness =

$$\frac{\text{Performance Met (a=40 procedures)} + \text{Denominator Exception (b=20 procedures)} + \text{Performance Not Met (c=40 procedures)}}{\text{Eligible Population / Denominator (d=100 procedures)}} = \frac{100 \text{ procedures}}{100 \text{ procedures}} = 100.00\%$$

Performance Rate =

$$\frac{\text{Performance Met (a=40 procedures)}}{\text{Data Completeness Numerator (100 procedures) - Denominator Exception (20 procedures)}} = \frac{40 \text{ procedures}}{80 \text{ procedures}} = 50.00\%$$