

# Memorandum



**To:** CMS MIPS Value Pathways (MVP) Team

**From:** AAN MVP Workgroup (Daniel Ackerman, MD, FAAN; Sonya Knight, DO, FAAN; Robert Kropp, MD, MBA, CHIT, FAAN; Mary Angela O’Neal, MD, FAAN)

**Copy:** Amanda Becker CAE; Amy Bennett, JD; Max Linder; Leslie Kociemba, MPH

**Date:** April 5, 2022

**Subject:** AAN Feedback on “Optimal Care for Patients with Episodic Neurological Conditions MVP” and “Supportive Care for Neurodegenerative Conditions MVP”

The American Academy of Neurology (AAN) appreciates the opportunity to provide additional feedback on CMS’s draft MVPs on “Optimal Clinical Support for Patients with Episodic Neurological Conditions” and “Supportive Care for Neurodegenerative Conditions.” The AAN appreciates CMS recognizing the AAN as key experts and stakeholders in these MVPs and for taking our previous comments into consideration including changing the titles of these MVPs.

The AAN finds the below MVPs as proposed an amenable starting point for MVPs in neurology as they capture various common neurological conditions and divide them into episodic and chronic categories. Please note, some neurological conditions are progressive, with episodic flareups, such as relapsing remitting multiple sclerosis and myasthenia gravis and might not fit into either of the MVPs as currently delineated. Additionally, there are monophasic or single episode conditions such as stroke, Guillain-Barre and meningitis and others that would not fit into these current categories. The AAN hopes that as additional quality measures related to these and other conditions are tested and deemed eligible for use in the Quality Payment Program, that neurology MVPs will adapt to be more reflective of the diversity of neurological conditions that neurologists and neurology providers treat and and/or additional MVPs will be developed to capture these differences. The AAN is interested in learning more from CMS regarding next steps for these and other neurology MVPs and looks forward to continued collaboration with CMS on MVPs that include condition-specific cost measures and quality measures that allow for meaningful participation in MVPs.

While we find these MVPs to be a reasonable starting point for neurologists and neurology providers to engage in the new MVP framework, the AAN requests more guidance on whether there will incentives for providers to report MVPs. Given the ongoing stresses that COVID-19 and workforce shortages have put on the healthcare system, as well as the potential burden of implementing multiple MVPs in clinical settings, we believe that there is little appetite amongst providers to voluntarily participate in MVPs without having demonstrated the value of MVPs or offering incentives to participate in the early years of the framework. We encourage CMS to consider ways to demonstrate MVPs value compared to traditional MIPS to ensure engagement with MVPs in the future.

## **Optimal Clinical Support for Patients with Episodic Neurological Conditions MVP**

### **Quality Performance Category**

The table below illustrates the suggested quality measures for this MVP candidate. (If applicable: Red - recommend removal; Green – recommend adding).

<b><u>Quality Measures</u></b> (10 Quality Measures Total 4 MIPS Quality Measures & 6 QCDR Measures)	<b><u>CMS Response/Rationale</u></b>	<b><u>Feedback</u></b>
<b>Q047:</b> Advance Care Plan (Medicare Part B Claims, MIPS CQM) High Priority	We agree with the inclusion of this measure within the MVP.	We agree with the inclusion of this measure within the MVP.
<b>Q130:</b> Documentation of Current Medications in the Medical Record	We agree with the inclusion of this measure within the MVP.	We agree with the inclusion of this measure within the MVP.

(Medicare Part B Claims, MIPS CQM, eCQM)		
<b>Q268:</b> Epilepsy: Counseling for Women of Childbearing Potential with Epilepsy (MIPS CQM)	We agree with the inclusion of this measure within the MVP.	We agree with the inclusion of this measure within the MVP.
<b>AAN29:</b> Comprehensive Epilepsy Care Center Referral or Discussion for Patients with Epilepsy (QCDR)	We agree with the inclusion pending approval for future performance periods and all criteria met for inclusion of QCDR within an MVP.	We agree with the inclusion of this measure within the MVP.
<b>Q419:</b> Overuse of Imaging for the Evaluation of Primary Headache (MIPS CQM) High Priority	We agree with the inclusion of this measure within the MVP.	We agree with the inclusion of this measure within the MVP.
<b>AAN5:</b> Medication Prescribed for Acute Migraine Attack (QCDR)	We agree with the inclusion of this measure within the MVP.	We agree with the inclusion of this measure within the MVP.
<b>AAN22:</b> Quality of Life Outcome for Patients with Neurologic Conditions (QCDR) High Priority, Outcome	We agree with the inclusion pending approval for future performance periods and all criteria met for inclusion of QCDR within an MVP.	We agree with the inclusion of this measure within the MVP.
<b>AAN30:</b> Migraine Preventive Therapy Management (QCDR)	We agree with the inclusion of this measure within the MVP.	We agree with the inclusion of this measure within the MVP.
<b>AAN31:</b> Acute Treatment Prescribed for Cluster Headache (QCDR)	We agree with the inclusion of this measure within the MVP.	We agree with the inclusion of this measure within the MVP.
<b>AAN32:</b> Preventive Treatment Prescribed for Cluster Headache (QCDR)	We agree with the inclusion of this measure within the MVP.	We agree with the inclusion of this measure within the MVP.

### **Improvement Activity Performance Category**

The table below illustrates the suggested improvement activities for this MVP candidate. Please note that the improvement activities are currently the same for both the draft Optimal Care for Patients with Episodic Neurological Conditions MVP and the draft Supportive Care for Neurodegenerative Conditions MVP.

<b><u>Improvement Activities</u></b> (12 Improvement Activities Total)	<b><u>CMS Response/Rationale</u></b>	<b><u>Feedback</u></b>
<b>IA_AHE_3:</b> Promote Use of Patient-Reported Outcome Tools (High weight)	We recommend the inclusion of this health equity-related improvement activity within this MVP.	We agree with the inclusion of this improvement activity in this MVP.
<b>IA_BE_4:</b> Engagement of patients through implementation of improvements in patient portal (Medium weight)	We recommend the inclusion of this improvement activity that represents the patient voice and patient engagement within this MVP.	We agree with the inclusion of this improvement activity in this MVP.
<b>IA_BE_16:</b> Promote Self-management in Usual Care (Medium weight)	We agree with the recommendation to include this improvement activity in this MVP.	We agree with the inclusion of this improvement activity in this MVP.
<b>IA_BE_24:</b> Financial Navigation Program (Medium weight)	We agree with the inclusion of this beneficiary engagement improvement activity to allow patient options related	We agree with the inclusion of this improvement activity in this MVP.

	to the high cost of stroke care within this MVP.	
<b>IA_BMH_4:</b> Depression screening (Medium weight)	We agree with the inclusion of this improvement activity within this MVP.	We agree with the inclusion of this improvement activity in this MVP.
<b>IA_BMH_8:</b> Electronic Health Record Enhancements for BH data capture (Medium weight)	We agree with the inclusion of this improvement activity within this MVP.	We agree with the inclusion of this improvement activity in this MVP.
<b>IA_CC_1:</b> Implementation of use of specialist reports back to referring clinician or group to close referral loop (Medium weight)	We recommend the inclusion of this care coordination improvement activity within this MVP.	We agree with the inclusion of this improvement activity in this MVP.
<b>IA_EPA_2:</b> Use of telehealth services that expand practice access (Medium weight)	We agree with the inclusion of this improvement activity within this MVP as it enhances patient access to care.	We agree with the inclusion of this improvement activity in this MVP.
<b>IA_PM_11:</b> Regular review practices in place on targeted patient population needs (Medium weight)	We recommend including this health equity-related improvement activity within this MVP.	We agree with the inclusion of this improvement activity in this MVP.
<b>IA_PM_16:</b> Implementation of medication management practice improvements (Medium weight)	We agree with the inclusion of this improvement activity within this MVP.	We agree with the inclusion of this improvement activity in this MVP.
<b>IA_PM_21:</b> Advance Care Planning (Medium weight)	We agree with the inclusion of this improvement activity within this MVP.	We agree with the inclusion of this improvement activity in this MVP.
<b>IA_PSPA_21:</b> Implementation of fall screening and assessment programs (Medium weight)	We agree with the inclusion of this improvement activity within this MVP.	We recommend removing this improvement activity as it is not relevant to the patient populations in this MVP.

### Cost Performance Category

The table below illustrates the suggested cost measure for this MVP candidate. Please note that the cost measure is currently the same for both the draft Optimal Care for Patients with Episodic Neurological Conditions MVP and the draft Supportive Care for Neurodegenerative Conditions MVP.

<u>Cost Measure(s)</u>	<u>CMS Response</u>	<u>Feedback</u>
Medicare Spending Per Beneficiary (MSPB) Clinician	We recommend the inclusion of this cost measure within this MVP. MSPB Clinician may be attributed to neurologists working in inpatient settings and is the most applicable cost measure at this time.	We understand the rationale for including this cost measure in the MVP.

### Supportive Care for Neurodegenerative Conditions

#### Quality Performance Category

The table below illustrates the suggested quality measures for this MVP candidate.

<u>Quality Measures</u> (13 Quality Measures Total 10 MIPS Quality Measures & 3 QCDR Measures)	<u>CMS Response/Rationale</u>	<u>Feedback</u>
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<b>Q047:</b> Advance Care Plan (Medicare Part B Claims, MIPS CQM) High Priority	We agree with the inclusion of this measure within the MVP.	We agree with the inclusion of this measure within the MVP.
<b>Q238:</b> Use of High-Risk Medications in Older Adults (eCQM, MIPS CQM) High Priority	We agree with the inclusion of this measure within the MVP.	We agree with the inclusion of this measure within the MVP.
<b>Q281:</b> Dementia: Cognitive Assessment (eCQM)	We agree with the inclusion of this measure within the MVP.	We agree with the inclusion of this measure within the MVP.
<b>Q282:</b> Dementia: Functional Status Assessment (MIPS CQM)	We agree with the inclusion of this measure within the MVP.	We agree with the inclusion of this measure within the MVP.
<b>Q286:</b> Dementia: Safety Concern Screening and Follow-Up for Patients with Dementia (MIPS CQM) High Priority	We agree with the inclusion of this measure within the MVP. We would like to note that the 2022 benchmarking file shows this measure is at the end of the topped out lifecycle. This high performance rate may limit the measure's long term viability for MIPS and this MVP.	We agree with the inclusion of this measure within the MVP.
<b>Q288:</b> Dementia: Education and Support of Caregivers for Patients with Dementia (MIPS CQM) High Priority	We agree with the inclusion of this measure within the MVP.	We agree with the inclusion of this measure within the MVP.
<b>Q290:</b> Assessment of Mood Disorders and Psychosis for Patients with Parkinson's Disease (MIPS CQM)	We agree with the inclusion of this measure within the MVP.	We agree with the inclusion of this measure within the MVP.
<b>Q291:</b> Assessment of Cognitive Impairment or Dysfunction for Patients with Parkinson's Disease (MIPS CQM)	We agree with the inclusion of this measure within the MVP.	We agree with the inclusion of this measure within the MVP.
<b>Q293:</b> Rehabilitative Therapy Referral for Patients with Parkinson's Disease (MIPS CQM) High Priority	We agree with the inclusion of this measure within the MVP.	We agree with the inclusion of this measure within the MVP.
<b>Q386:</b> Amyotrophic Lateral Sclerosis (ALS) Patient Care Preferences (MIPS CQM) High Priority	We agree with the inclusion of this measure within the MVP.	We agree with the inclusion of this measure within the MVP.
<b>AAN9:</b> Querying About Symptoms of Autonomic Dysfunction for Patients with Parkinson's Disease (QCDR)	We agree with the inclusion pending approval for future performance periods and all criteria met for inclusion of QCDR within an MVP.	We agree with the inclusion of this measure within the MVP.
<b>AAN22:</b> Quality of Life Outcome for Patients with Neurologic Conditions (QCDR) High Priority, Outcome	We agree with the inclusion pending approval for future performance periods and all criteria met for inclusion of QCDR within an MVP.	We agree with the inclusion of this measure within the MVP.
<b>AAN34:</b> Patient reported falls and plan of care (QCDR) High Priority, Outcome	We agree with the inclusion of this measure within the MVP.	We agree with the inclusion of this measure within the MVP.

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<b>IA_BE_16:</b> Promote Self-management in Usual Care (Medium weight)	We agree with the recommendation to include this improvement activity in this MVP.	We agree with the inclusion of this improvement activity in this MVP.
<b>IA_BE_24:</b> Financial Navigation Program (Medium weight)	We agree with the inclusion of this beneficiary engagement improvement activity to allow patient options related to the high cost of stroke care within this MVP.	We agree with the inclusion of this improvement activity in this MVP.
<b>IA_BMH_4:</b> Depression screening (Medium weight)	We agree with the inclusion of this improvement activity within this MVP.	We agree with the inclusion of this improvement activity in this MVP.
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