**2.7.5 - Palliative care service provided to patients with serious illness**

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| **Document Control Log** |
| **[2.7.5 - Palliative care service provided to patients with serious illness](#m275)** |
| **Specification Source:** PRIME Innovative Measure Steward (University of California, San Francisco) |
| **Numerator:**  Number of individuals from the denominator with palliative care services provided during the measurement period, as evidenced by at least one of the following documented in the medical record:   * + - * Encounter (outpatient or inpatient) with Specialty Palliative Care Service       * Encounter (outpatient or inpatient) with Hospice   **Denominator:**  Individuals age 21 and older in the PRIME eligible population with advanced cancer, heart failure, COPD, Interstitial lung disease, respiratory failure or advanced liver condition during the first six months of the measurement period. *Reporting entity must include all four conditions in their denominator as defined by Table 1:**Serious Illness Diagnosis codes.* |

**2.7.5 Palliative care service provided to patients with serious illness**

**Summary of Changes from DY14 Year End Reporting Manual**

* Changed Title:
  + From: “Palliative care service offered to patients with advanced illness”
  + To: “Palliative care service provided to patients with serious illness”
* Throughout
  + Changed References to “advanced illness” changed to “serious illness”
  + For consistency, changed all references to “cancer”, “advanced cancer”, or “advanced stage cancer” to “advanced cancer”
  + Changed references to “COPD” to “COPD, Interstitial lung disease, or respiratory failure”
  + Changed all references to “cirrhosis” and “end stage liver disease” to “advanced liver condition”
  + Removed all instructions, references and codes for conditions other than advanced cancer, CHF, COPD, Interstitial lung disease, respiratory failure or advanced liver condition.
* Value Sets:
  + Removed: “No external value sets required for this metric;“
  + Changed “All required codes are listed…” to “All required Serious Illness Diagnosis codes”
  + Added
    - “A spreadsheet of the same Serious Illness Diagnosis codes including individual code descriptions is available for download at the following link [https://safetynetinstitute.org/wp-content/uploads/2019/05/icd10-serious-illness-feb2019\_final\_prime-2.7.5-specific-codes.xlsx](https://safetynetinstitute.org/wp-content/uploads/2019/05/icd10-serious-illness-feb2019_final_prime-2.7.5-specific-codes.xlsx%20%20)
    - HEDIS specs and value sets can also be obtained at the [NCQA Store](http://store.ncqa.org/index.php/performance-measurement/hedis-publications-outline.html). Refer to the Technical Specifications for Health Plans.”
* Metric Description, changed:
  + From “Palliative care services/referral offered during the measurement period to patients with advanced illness. Systems may choose at least one advanced illness target population using the criteria provided.”
  + To “Palliative care services provided during the measurement period to patients with any of the following serious illnesses: advanced cancer, heart failure, COPD, Interstitial lung disease, respiratory failure or advanced liver condition. All serious illnesses are to be identified using specified Serious Illness Diagnosis Codes.”
* Moved Metric Denominator sections to preceded Metric Numerator sections.
* Metric Denominator
  + Age change from “age 18 and older”, to “age 21 and older” to align with Medi-Cal Palliative Care benefit age criteria.
  + Description changed:
    - From: “…population who meet criteria for advanced illness. Systems may define their advanced illness target population using the specified clinical criteria for at least one of the following conditions: cancer, heart failure, COPD, or cirrhosis (end stage liver disease). Alternatively, systems may choose any diagnoses provided in the Table 1. Serious Illness Diagnosis codes, applying the \* additional criteria below.
    - To: “…population with advanced cancer, heart failure, COPD, Interstitial lung disease, respiratory failure or advanced liver condition during the first six months of the measurement period.

*Denominator Note: Reporting entity must include all four conditions in their denominator as defined by Table 1: Serious Illness Diagnosis codes*“

* Denominator, Serious Illness, condition specific criteria, changed as follows:
  + All look back periods changed to “during the first six months of the measurement period”. See details below.
  + Advanced Cancer
    - Removed utilization criteria
    - Look back period changed:
      * From: “Diagnosis documented during the measurement period or in the two years preceding the measurement period:…”
      * To: “Diagnosis documented during the first six months of the measurement period:…”
  + Congestive Heart Failure:
    - Hospitalization look back period changed from: “…during the measurement period”
      * To: “during the first six months of the measurement period.”
    - Diagnosis definition changed from: “Any patient with a diagnosis of NYHA Class III or IV CHF”
      * To: “…diagnosis of CHF AND on home oxygen…”
    - Diagnosis look back period changed from: “…during the measurement period or in the two years preceding the measurement period”
      * To: “any time during the first six months of the measurement period”
    - Removed Ejection Fracture criteria
  + Diagnosis description changed from “Chronic Obstructive Pulmonary Disease (COPD),”
    - To “Chronic Obstructive Pulmonary Disease (COPD), Interstitial lung disease, or respiratory failure:”
    - Added hospitalization criteria and changed look back period:
      * Previous version:
        + Diagnosis of COPD documented in the two years preceding the measurement period
        + AND Home oxygen during the measurement period
      * Current version: “Meets one of the following:
        + Hospitalization with a primary diagnosis of COPD, Interstitial lung disease, or respiratory failure during the first six months of the measurement period OR
        + Documented diagnosis of COPD, Interstitial lung disease, or respiratory failure AND on home oxygen any time during the first six months of the measurement period”
  + Advanced Liver Condition:
    - Replaced all criteria with “Diagnosis of advanced liver condition documented during the first six months of the measurement period”
* Denominator Codes, changed
  + From: “Serious Illness, as defined by the PRIME entity and/or conditions specified above: Table 1: Serious Illness Diagnosis codes”
  + To: “Diagnosis: Serious Illness”, as defined by: Table 1: Serious Illness Diagnosis codes”
    - Table 1: Moved to follow Reporting Business Logic
    - Table 1: Updated to align with codes validated by the study by Kelley, et al, referenced in the Rationale. Removed conditions no longer included in the metric. Updated code set for remaining conditions.
      * Removed codes: C15.5, C34.00, C34.10, C34.2, C34.30, C34.80, C34.90, C71.0, C71.1, C71.2, C71.3, C71.4, C71.5, C71.6, C71.7, C71.8, C71.9, E84.0, F01.50, F03.90, F05, G30.9, G31.01, G31.1, G31.83, G12.21, G20, K70.30, N18.5, N18.6, R53.81, R62.7, R69, Z49.31, Z51.5, Z94.0, Z99.11, Z99.2, Z99.81
  + Added: “Order: Home oxygen” using BETOS code D1C
  + Removed “Cirrhosis (End Stage Liver Disease) Associated Conditions Value Set: Table 2”
    - All codes removed: R18.8, K65.0, K65.2, K65.8, K65.9, K67, K76.7
* Metric Numerator
  + Removed “Referral to, or…”
  + “…encounter with,…” changed to “…encounter (outpatient or inpatient) with…”
  + Removed “Documented discussion of palliative care services being offered, even if patient declined”
* Numerator Code, changed from “None”, to:
  + “Occurrence, Specialty Palliative Care Service Encounter” using “Z51.5 - Encounter for palliative care”
  + “Occurrence, Hospice Encounter” using HEDIS Hospice Value Set
* Reporting Business Logic
  + Replaced references to “advanced illness” with references to: “Diagnosis: Serious Illness”
  + Updated logic to align with updated denominator and numerator criteria
  + Updated logic language to align with eCQM logic language
* Added “Link to ICD-10 Value Set”
* To “Table: Serious Illness Diagnosis Codes” added “*(name listed in linked ICD-10 Value Set)*”, and added in the table those value set names for each listed serious illness condition
* Added References section
* Removed: Schematic illustrating logic for DY14 measurement period (July 1, 2018 – June 30, 2019)

**Modification from Native Specification**

Specification Source: PRIME Innovative Measure Steward (University of California, San Francisco; University of North Carolina)

Metric Steward: University of California, San Francisco; University of North Carolina

* + - * N/A

**Value Sets for this metric:**

* + - * All required Serious Illness Diagnosis codes are listed within the metric specification. A spreadsheet of the same Serious Illness Diagnosis codes including individual code descriptions is available for download at the following link [https://safetynetinstitute.org/wp-content/uploads/2019/05/icd10-serious-illness-feb2019\_final\_prime-2.7.5-specific-codes.xlsx](https://safetynetinstitute.org/wp-content/uploads/2019/05/icd10-serious-illness-feb2019_final_prime-2.7.5-specific-codes.xlsx%20%20)
      * HEDIS specs and value sets can also be obtained at the [NCQA Store](http://store.ncqa.org/index.php/performance-measurement/hedis-publications-outline.html). Refer to the Technical Specifications for Health Plans.

**Metric Description**

* + - * Palliative care services provided during the measurement period to patients with any of the following serious illnesses: advanced cancer, heart failure, COPD, Interstitial lung disease, respiratory failure or advanced liver condition during the first six months of the measurement period. All serious illnesses are to be identified using specified Serious Illness Diagnosis Codes.

**Metric Denominator**

Individuals age 21 and older in the PRIME eligible population with advanced stage cancer, heart failure, COPD, Interstitial lung disease, respiratory failure or advanced liver condition during the first six months of the measurement period.

*Denominator Note: Reporting entity must include all four conditions in their denominator as defined by Table 1:**Serious Illness Diagnosis codes.*

***Advanced Cancer:***

* Documented diagnosis during the first six months of the measurement period.

***Congestive Heart Failure (CHF):***

Meets either of the following:

* Hospitalization with the primary diagnosis of CHF during the first six months of the measurement period **OR**
* Documented diagnosis of CHF AND on home oxygen any time during the first six months of the measurement period

***Chronic Obstructive Pulmonary Disease (COPD), Interstitial lung disease, or respiratory failure:***

Meets either of the following:

* Any Hospitalization with the primary diagnosis of COPD, Interstitial lung disease, or Respiratory failure during the first six months of the measurement period **OR**
* Documented diagnosis of COPD, Interstitial lung disease, or respiratory failure AND on home oxygen any time during the first six months of the measurement period

***Advanced Liver Condition:***

* Diagnosis of advanced liver condition documented during the first six months of the measurement period

**Denominator Code/s (CPT, ICD10, other)**

* + - * “Diagnosis: Serious Illness”, as defined by Table 1: Serious Illness Diagnosis Codes
      * “Order: Home oxygen” using BETOS code D1C

**Denominator Exclusion/s**

* None.

**Metric Numerator**

Individuals from the denominator in receipt of palliative care services during the measurement period, as evidenced by at least one of the following documented in the medical record:

* + - * Encounter (outpatient or inpatient) with Specialty Palliative Care Service
      * Encounter (outpatient or inpatient) with Hospice

**Numerator Code/s (CPT, ICD10, other)**

* “Occurrence, Specialty Palliative Care Service Encounter” using “Z51.5 - Encounter for palliative care”
* “Occurrence, Hospice Encounter” using HEDIS Hospice Value Set

**Reporting Business Logic**

* + - * Initial Population = PRIME Eligible Population
      * Denominator Population = Initial Population
        + AND: Age 21 and older as of beginning of measurement period
        + AND: Documentation of a “Diagnosis: Serious Illness” diagnosis during the first six months of the measurement period
        + AND: If “Diagnosis: Serious Illness” equals either “Diagnosis: Congestive Heart Failure” OR “Diagnosis: COPD, Interstitial lung disease or respiratory failure”, then “Diagnosis: Serious Illness” must also fulfill either:

“Diagnosis: Congestive Heart Failure” OR “Diagnosis: COPD, interstitial lung disease or respiratory failure” is the primary diagnosis for at least one hospitalization during the first 6 months of the measurement year; **OR**

“Order: Home oxygen” occurs at any time during the first 6 months of the measurement year

* + - * Numerator Population = Denominator Population
        + AND: Documentation in the medical record includes ≥1 of:

OR: “Occurrence, Specialty Palliative Care Service Encounter” during “measurement period”

OR: “Occurrence, Hospice Encounter” during “measurement period”

**Definitions as applicable**

None

**Other Notes as applicable**

A higher rate indicates better quality

**Rationale for Metric**

Palliative care services have been shown to improve quality of life, reduce patient/caregiver distress and reduce costs.

**References**

* Kelley AS, Ferreira KB, Bollens-Lund E, Mather H, Hanson LC, Ritchie CS, Identifying Older Adults with Serious Illness: Transitioning from ICD-9 to ICD-10, Journal of Pain and Symptom Management (2019), doi: <https://doi.org/10.1016/j.jpainsymman.2019.03.006>.

**Link to ICD-10 Value Set**

**Table 1: Serious Illness Diagnosis Codes (*name listed in linked ICD-10 Value Set)***

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| **Advanced Cancer *(Cancer)***  *Any documentation of these diagnoses in the first 6 months of the measurement year* | C153, C154, C155, C158, C159, C160, C161, C162, C163, C164, C165, C166, C168, C169, C220, C221, C222, C223, C224, C227, C228, C229, C250, C251, C252, C253, C254, C257, C258, C259, C33, C384, C450, C480, C481, C482, C488, C561, C562, C569, C5700, C5701, C5702, C5710, C573, C574, C710, C712, C713, C714, C717, C718, C719, C770, C771, C772, C773, C774, C775, C778, C779, C7800, C781, C782, C7830, C7839, C784, C785, C786, C787, C7880, C7889, C7900, C7901, C79011, C79019, C7902, C792, C7931, C7932, C7949, C7951, C7952, C7960, C7961, C7962, C7970, C7981, C7982, C7989, C800, C9100, C9102, C9110, C9112, C9190, C9192, C91Z0, C91Z2, C9200, C9202, C9210, C9212, C9220, C9222, C9230, C9232, C9240, C9242, C9250, C9252, C9262, C9290, C9292, C92A2, C92Z0, C92Z2, C9300, C9302, C9310, C9312, C9332, C93910, C9392, C93Z0, C93Z2, C9400, C9402, C9420, C9422, C9430, C9432, C9480, C9482, C9500, C9502, C9510, C9512, C9590, C9592 |
| **Heart Failure *(Heart Disease)***  *Only if claim for home oxygen (BETOS code D1C) or primary diagnosis for hospital admission in the first 6 months of the measurement year* | I0981, I110, I130, I132, I501, I5020, I5021, I5022, I5023, I5030, I5031, I5032, I5033, I5040, I5041, I5042, I5043, I5043, I50810, I50811, I50812, I50813, I50814, I5082, I5083, I5084, I5089, I509 |
| **COPD, Interstitial lung disease or Respiratory Failure *(Lung Disease)***  *Only if home oxygen (BETOS code D1C) or primary cause of hospitalization in the first 6 months of the measurement year* | J411, J418, J42, J430, J431, J432, J438, J439, J440, J441, J449, J470, J471, J479, J60, J61, J620, J628, J630, J631, J632, J633, J634, J635, J636, J64, J65, J660, J661, J662, J668, J670, J671, J672, J673, J674, J675, J676, J677, J678, J679, J684, J8410, J84112, J8417, J9600, J9601, J9602, J9610, J9611, J9612, J9620, J9621, J9622, J9690, J9691, J9692, J982, J983 |
| **Advanced Liver Condition *(Liver Disease)***  *Any documentation of these diagnoses in the first 6 months of the measurement year* | I8500, I8501, I8510, I8511, K702, K7030, K7031, K7040 , K7041, K7210, K7290, K7291, K740, K741, K742, K743, K744, K745, K7460, K7469, K766, K767 |



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