Perform CDFE on 50% or more of patients with Medicare and diabetes and qualify for PQRS end of year bonus from Medicare

Reporting Periods for 2011

For 2011, there are both six-month and 12-month reporting periods available. For claims-based and registry-based reporting, providers may either report from January 1 through December 31, or July 1 through December 31. For EHR-based reporting, providers must report over the course of the 2011 calendar year, that is, January 1 through December 31.

Once claims have been submitted, CMS will analyze them to verify satisfactory reporting during the entire reporting period. If an eligible professional is deemed to have reported successfully, CMS will calculate the appropriate incentive payment and distribute bonus payment checks in the spring of 2012.

Financial Incentives

Eligible professionals who successfully report will receive an incentive bonus of 1% of all the practitioner’s charges for Medicare Part B covered professional services (not just claims for which quality data were submitted) for the 2011 reporting period. An incentive payment of 0.5% will be paid for successful participation in PQRS for 2012, 2013, and 2014.

ADA (2004) recommends that all individuals with diabetes should receive an annual foot examination to identify high-risk foot conditions. This examination should include assessment of protective sensation, foot structure and biomechanics, vascular status, and skin integrity.

The ADA (2004) recommends that people with one or more high-risk foot conditions should be evaluated more frequently for the development of additional risk factors. People with neuropathy should have a visual inspection of their feet at every contact with a health care professional.

Measure #126: Diabetes Mellitus: Diabetic Foot and Ankle Care, Peripheral Neuropathy – Neurological Evaluation

DESCRIPTION:
Percentage of patients aged 18 years and older with a diagnosis of diabetes mellitus who were evaluated for proper footwear and sizing

INSTRUCTIONS:
This measure is to report a minimum of once per reporting period for patients with diabetes mellitus seen during the reporting period. Evaluation of neurological status in patients with diabetes to assign risk category and therefore have appropriate foot and ankle care to prevent ulcerations and infections ultimately reduces the number and severity of amputations that occur. Risk categorization and follow up treatment plan should be done according to the following table:
Risk Categorization System:

<table>
<thead>
<tr>
<th>Category</th>
<th>Risk Profile</th>
<th>Evaluation Frequency</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>Normal</td>
<td>Annual</td>
</tr>
<tr>
<td>1</td>
<td>Peripheral Neuropathy (LOPS)</td>
<td>Semi-annual</td>
</tr>
<tr>
<td>2</td>
<td>Neuropathy, deformity, and/or PAD</td>
<td>Quarterly</td>
</tr>
<tr>
<td>3</td>
<td>Previous ulcer or amputation</td>
<td>Monthly to quarterly</td>
</tr>
</tbody>
</table>

This measure may be reported by non-MD/DO clinicians who perform the quality actions described in the measure based on the services provided and the measure-specific denominator coding.

**Definition:**

**Lower Extremity Neurological Exam** – Consists of a documented evaluation of motor and sensory abilities including reflexes, vibratory, proprioception, sharp/dull and 5.07 filament detection.

**Lower Extremity Neurological Exam Performed**

G8404: Lower extremity neurological exam performed and documented

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**Measure #127: Diabetes Mellitus: Diabetic Foot and Ankle Care, Ulcer Prevention – Evaluation of Footwear**

**DESCRIPTION:**

Percentage of patients aged 18 years and older with a diagnosis of diabetes mellitus who were evaluated for proper footwear and sizing

**INSTRUCTIONS:**

This measure is to report a minimum of once per reporting period for patients with diabetes mellitus seen during the reporting period. This measure may be reported by non-MD/DO clinicians who perform the quality actions described in the measure based on the services provided and the measure-specific denominator coding.

**Definition:**

**Evaluation for Proper Footwear** – Includes a foot examination documenting the vascular, neurological, dermatological, and structural/biomechanical findings. The foot should be measured using a standard measuring device and counseling on appropriate footwear should be based on risk categorization.

**Footwear Evaluation Performed**

G8410: Footwear evaluation performed and documented
Measure #163: Diabetes Mellitus: Foot Exam

INSTRUCTIONS:
This measure is to be reported a minimum of once per reporting period for patients with diabetes mellitus seen during the reporting period. The performance period for this measure is 12 months. This measure may be reported by clinicians who perform the quality actions described in the measure based on the services provided and the measure-specific denominator coding.

DESCRIPTION:
The percentage of patients aged 18 through 75 years with diabetes who had a foot examination

Foot Exam Performed
CPT II 2028F: Foot examination performed (includes examination through visual inspection, sensory exam with monofilament, and pulse exam – report when any of the three components are completed)