MIPS #410: Psoriasis: Clinical Response to Systemic Medications

Electronic health records (EHRs) collect and organize notes, medication lists, and patient information using various formats. With providers also documenting this information in unique ways, this can potentially cause confusion and an increased timeline for measure mapping with DataDerm. This tip sheet can help you manage reporting requirements for performance measures and streamline standard documentation practices to allow seamless data pull into DataDerm.

The DataDerm team will work with you to connect DataDerm with your EHR to extract data. To make the process as smooth as possible, it helps to document key elements of patient care. DataDerm cannot read scanned images of any kind, including scanned images for labs, letters to physicians, pathology reports, follow-up plans, and dates. If you have scanned images with information needed for your measures, please add a note in your chart with the date and required patient information for this data to be accurately collected.

This tip sheet can assist paper-based practices in standardizing documentation practices. Keeping notes in the patient's paper chart of all documentation requirements will assist you when reporting for this measure.

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For all patients, document the following in your notes:
- Current diagnosis of **psoriasis vulgaris**
  - Include the ICD-10 code L40.0 and
  - CPT or HCPCS codes for the patient encounter during measurement period (99201, 99202, 99203, 99204, 99205, 99212, 99213, 99214, 99215, 99241, 99242, 99243, 99244, 99245, 99324, 99325, 99326, 99327, 99328, 99334, 99335, 99336, 99337, 99341, 99342, 99343, 99344, 99345, 99347, 99348, 99349, 99350, G0438, G0439)
- Code G9764 - Patient is treated with a systemic medication for psoriasis vulgaris
  - List systemic medication on medication list and/or identify systemics prescribed for treatment of psoriasis vulgaris (see medication list below)
  - Provider name that ordered the systemic medication in notes or identify systemics ordered by another provider
  - Note date of when patient began treatment
    - Document dates of any gap in medication use
    - Document if patient had a gap of 4 weeks or more during the course of treatment
- Assess severity of psoriasis vulgaris. Note scale name (one of the below), date of assessment, and results/score
  - Physician Global Assessment (PGA; 5-point or 6-point scale)
  - Body Surface Area (BSA)
  - Psoriasis Area and Severity Index (PASI)
  - Dermatology Life Quality Index (DLQI)
- Document if applicable:
  - Patient declined therapy change
  - Patient has documented contraindications
  - Patient has not been treated with a systemic for at least 6 consecutive months

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Additional Tips:
- ☐ Collect **once per performance period** for patients seen during the performance period.
- ☐ This measure **ONLY** applies to patients with a diagnosis of **psoriasis vulgaris (L40.0)**.
- ☐ The most recent eligible visit in which the numerator action was performed should be used.
- ☐ See measure specifications for additional codes that can assist in seamless measure mapping from your EHR to DataDerm, if applicable (e.g. G9649).
- ☐ GQ, GT, 95, and POS 02 telehealth modifiers make cases ineligible.
- ☐ Go to the DataDerm Dashboard Resources" tab to get the assessment tools for this measure. Click "Tools" for resources on picking the best assessment tool for your workflow.

Update:
- Skyrizi (risankizumab-rzaa) has been added to the "Medications Applicable to MIPS 410" list.

Examples of Applicable Medications for MIPS 410

Brand name	Chemical name	Mechanism of action/Type of biologic	Indications
Stelara	ustekinumab	IL-12 and IL-23 inhibitors	Psoriasis and/or psoriatic arthritis
Cosentyx	secukinumab	IL-17 inhibitor	Psoriasis and/or psoriatic arthritis
Siliq	brodalumab	IL-17 inhibitor	Psoriasis
Taltz	ixekizumab	IL-17 inhibitor	Psoriasis and/or psoriatic arthritis
Tremfya	guselkumab	IL-23 inhibitor	Psoriasis
Skyrizi	risankizumab-rzaa	IL-23 inhibitors	Psoriasis
Amjevita	adalimumab-atto	TNF-alpha inhibitor	Psoriasis and/or psoriatic arthritis
Cimzia	certolizumab	TNF-alpha inhibitor	Psoriatic arthritis
Cyltezo	adalimumab-adbm	TNF-alpha inhibitor	Psoriasis and/or psoriatic arthritis
Enbrel	etanercept	TNF-alpha inhibitor	Psoriasis and/or psoriatic arthritis
Erelzi	etanercept-szzs	TNF-alpha inhibitor	Psoriasis and/or psoriatic arthritis
Humira	adalimumab	TNF-alpha inhibitor	Psoriasis and/or psoriatic arthritis
Inflectra	infliximab-dyyb	TNF-alpha inhibitor	Psoriasis and/or psoriatic arthritis

Remicade	infliximab	TNF-alpha inhibitor	Psoriasis and/or psoriatic arthritis
Renflexis	infliximab-abda	TNF-alpha inhibitor	Psoriasis and/or psoriatic arthritis
Simponi & Simponia Aria	golimumab	TNF-alpha inhibitor	Psoriatic arthritis
Rheumatrex	methotrexate	Blocks dihydrofolate reductase	Psoriasis
Trexall	methotrexate	Blocks dihydrofolate reductase	Psoriasis
Xatmep	methotrexate	Blocks dihydrofolate reductase	Psoriasis
Otrexup	methotrexate	Inhibits dihydrofolic acid reductase	Psoriasis
Rasuvo	methotrexate	Inhibits dihydrofolic acid reductase	Psoriasis
Gengraf	cycloporine, modified	Blocks lymphocytes (T cells) and lymphokines	Psoriasis
Neoral	cycloporine, modified	Blocks lymphocytes (T cells) and lymphokines	Psoriasis
Sandimmune	cyclosporine	Blocks lymphocytes (T cells) and lymphokines	Psoriasis
Otezla	apremilast	Blocks phosphodiesterase-4 (PDE4)	Psoriasis and/or psoriatic arthritis
Soriatane	acitretin	Unknown; activates retinoid receptors	Psoriasis
Ilumya	tildrakizumab	Selective (IL)-23p19 inhibitor	Psoriasis

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