MIPS Falls Risk Assessment Tool

MBB Moore Balance Brace

STEADI Stopping Elderly Accidents, Deaths & Injuries

Quality Measures: 154: Falls Risk Assessment 155: Falls Plan of Care

Patient: _____ **Date:** _____

On an annual basis, ask every patient, age 65 and over, if they have fallen in the past year.

If document 0 or 1 fall without injury, report 2018 MIPS Quality Measure 154 using CPT code 1101F.
NO NEED TO PERFORM FURTHER ASSESSMENT UNTIL NEXT YEAR.

Falls History

Any falls in the past year? ☐ Yes ☐ No

If yes, how many? _____

If yes, any injury? ☐ Yes ☐ No

If two or more falls in past year or one with injury, patient considered to be at increased risk.

MIPS 154 requires balance / gait assessment and review of one or more potentially contributing factors.
MIPS 155 requires all patients determined to be at increased risk for falls to be provided with a "Plan of Care".
After evaluation, separate the attached "Balance and Strength Training Exercises" and give to patient.

Evaluation

Gait, Strength & Balance *(For MIPS 154, must perform at least one. See opposite side for instructions.)*

Timed Up and Go (TUG) Test	*Increased risk if ≥ 12 seconds*	☐ Normal ☐ Increased Risk
30-Second Chair Stand Test	*Score based on age and gender*	☐ Normal ☐ Increased Risk
4-Stage Balance Test	*Increased risk if full tandem stance < 10 seconds*	☐ Normal ☐ Increased Risk

Medications, Prescriptions, OTCs, Supplements *(If yes to any, consider consultation with MD)*

Cognitive impairment	☐ Yes ☐ No
CNS or pyschoactive medications	☐ Yes ☐ No
Medications that can cause sedation or confusion	☐ Yes ☐ No
Medications that can cause hypotension	☐ Yes ☐ No

Vision

Acuity <20/40 OR no eye exam in >1 year	☐ Yes ☐ No

Medical Conditions

Problems with heart rate and/or rhythm	☐ Yes ☐ No
Incontinence	☐ Yes ☐ No
Depression	☐ Yes ☐ No
Foot problems *(Specify)* _____	☐ Yes ☐ No
Other medical conditions *(Specify)* _____	☐ Yes ☐ No

Postural Hypotension

A decrease in systolic BP ≥20 mm Hg or a diastolic BP of ≥10 mm Hg or lightheadedness or dizziness from lying to standing	☐ Yes ☐ No

Plan of Care *(Separate and provide attached handout with goal of increasing mobility & lower extremity stability.)*

The patient was provided balance, strength and gait training instructions	☐ Yes ☐ No
The patient was advised about Vitamin D supplementation	☐ Yes ☐ No
The patient was counseled about home fall hazards and advised on benefits of occupational therapy	☐ Yes ☐ No
The patient was provided a "Plan of Care" to take home	☐ Yes ☐ No

Falls Risk Assessment Billing:

- If Falls Risk Assessment determines history of falls and includes evaluation and plan of care, patient visit may be billable as 99213.

  Consider diagnosis codes:
  History of falls: Z79.81 Repeated falls: R29.6

MIPS Falls Prevention Quality Measure Reporting via Registry

- If documentation of 2 or more falls in past year or one fall with injury, report MIPS Quality Measure 154 as CPT:
  - 3288F (falls risk assessment documented) and
  - 1100F (patient screened for fall risk)
- MIPS Quality Measure 155, Falls: Plan of Care
  - 0518F (falls plan of care documented)

Consider Balance AFO, foot orthoses and shoes if any of the following conditions are present:

Muscle weakness, generalized	M62.81
Difficulty in walking	R26.2
Unsteadiness on feet	R26.81
Other abnormalities of gait and mobility	R26.89
Dropfoot, acquired	M21.371 (Rt.), M21.372 (Lt.)

Adapted from materials developed by the Centers for Disease Control and Prevention.

Additional copies of forms available, for free, from Arizona AFO and SafeStep.

Tear along line and give "Plan of Care" to patient.

The Timed Up and Go (TUG) Test

Purpose: To assess mobility
Equipment: A stopwatch
Directions: Patients wear their regular footwear and can use a walking aid if needed. Begin by having the patient sit back in a standard arm chair and identify a line 10 feet away on the floor.

Instructions to the patient: *When I say "Go," I want you to:*

1. Stand up from the chair
2. Walk to the line on the floor at your normal pace
3. Turn
4. Walk back to the chair at your normal pace
5. Sit down again

On the word "Go" begin timing.

Stop timing after patient has sat back down and record.

Time: _____ *seconds*

Observe the patient's postural stability, gait, stride length, and sway. ***Circle all that apply:***

Slow tentative pace

Loss of balance

Short strides

Little or no arm swing

Steadying self on walls

Shuffling

En bloc turning

Not using assistive device properly

An older adult who takes ≥12 seconds to complete the TUG is at high risk for falling.

Notes:

The 4-Stage Balance Test

Purpose: To assess static balance
Equipment: A stopwatch
Directions: There are four progressively more challenging positions. Patients should not use an assistive device (cane or walker) and keep their eyes open. Describe and demonstrate each position. Stand next to the patient, hold his/her arm and help them assume the correct foot position. When the patient is steady, let go, but remain ready to catch the patient if he/she should lose their balance. If the patient can hold a position for 10 seconds without moving his/her feet or needing support, go on to the next position. If not, stop the test.

Instructions to the patient: *I'm going to show you four positions.*

Try to stand in each position for 10 seconds. You can hold your arms out or move your body to help keep your balance but don't move your feet. Hold this position until I tell you to stop.

For each stage, say "Ready, begin" and begin timing.
After 10 seconds, say "Stop."

Instructions to the patient:

1. Stand with your feet side by side. Time: _____ seconds

2. Place the instep of one foot so it is touching the big toe of the other foot. Time: _____ seconds

3. Place one foot in front of the other, heel touching toe. Time: _____ seconds

4. Stand on one foot. Time: _____ seconds

An older adult who cannot hold the heel to toe, #3, stance for at least 10 seconds is at increased risk of falling.

Notes:

The 30-Second Chair Stand Test

Purpose: To test leg strength and endurance

Equipment: A chair with a straight back without arm rests (seat 17" high), A stopwatch.

Instructions to the patient: *When I say "Go," I want you to:*

1. Sit in the middle of the chair.
2. Place your hands on the opposite shoulder crossed at the wrists.
3. Keep your feet flat on the floor.
4. Keep your back straight and keep your arms against your chest.
5. On "Go," rise to a full standing position and then sit back down again.
6. Repeat this for 30 seconds.

On "Go" begin timing.

- If the patient must use his/her arms to stand, stop the test. Record "0" for the number and score.
- Count the number of times the patient comes to a full standing position in 30 seconds.
- If the patient is over halfway to a standing position when 30 seconds have elapsed, count it as a stand.
- Record the number of times the patient stands in 30 seconds.

*Number:*_____ *Score:* _____

Chair Stand Below Average Scores

Age	Men	Women
60-64	<14	<12
65-69	<12	<11
70-74	<12	<10
75-79	<11	<10
80-84	<10	<9
85-89	<8	<8
90-94	<7	<4

A below average score indicates a high risk for falls.

Notes:

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Balance, strength and gait training can satisfy MIPS Quality Measure #155, Falls: Plan of Care. If performance is met, and submitting measures via registry, enter CPT 0518F, "Falls, plan of care documented."

Provide all patients determined to be at increased risk for falls with attached Balance, Strength and Gait Training Exercises.

(**RX:** Patient's Take-Home Plan of Care)

Simple Exercises for Reducing Fall Risk

Strength training is vital. These are safe and gentle exercise suggestions for you to practice at home. For additional needs consult with your practitioner, physical therapist or occupational therapist, who can play a vital role in lowering your risk for falls.

Straight Leg Raise

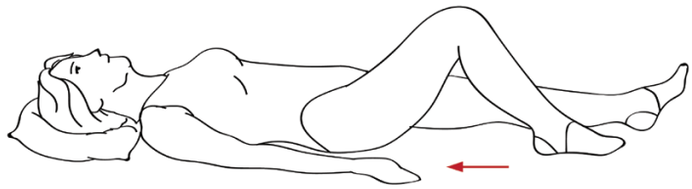
Total leg workout that will assist with walking, transferring andespecially with getting in and out of bed. Works muscles in the stomach and back.

1. Lie on bed, straighten right leg and place left foot flat.
2. Raise right leg with knee locked.
3. Lower right leg slowly and do not allow to go all the way down to bed.
4. Complete a set of 10 leg raises with one leg, then repeat with the other leg.

Heel Slide

Increase leg strength to help with walking, transfers and stairs.

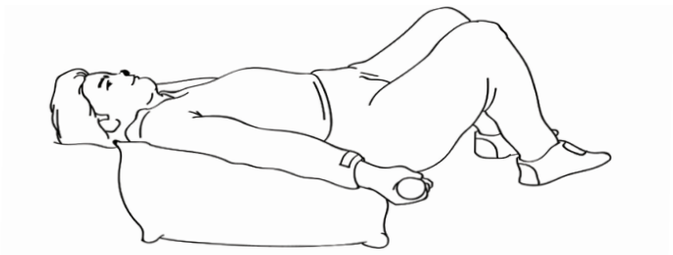
1. Bend right knee and pull heel towards buttocks.
2. Slowly straighten knee.
3. Go slow.
4. Complete a set with one leg then repeat with the other leg.



Elbow Flexion *(Can use light weights)*

Assists with all daily activities.

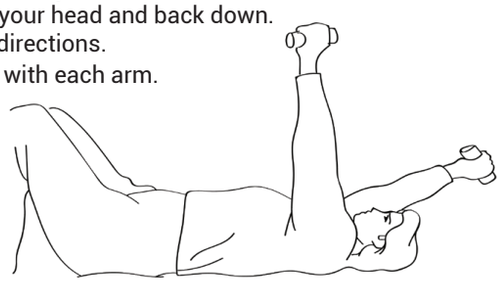
1. Turn palms up so facing ceiling.
2. Keeping upper arms on bed slowly bend BOTH elbows.
3. Slowly straighten arm.
4. Repeat 10 times.



Shoulder Flexion *(Can use light weights)*

Increases arm strength with dressing, cleaning, cooking and reaching for objects overhead.

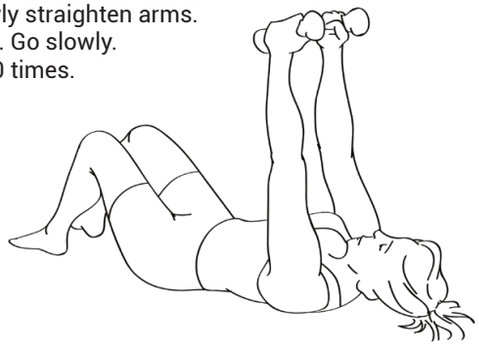
1. Point thumb towards ceiling.
2. Slowly lift right arm over your head keeping elbow straight.
3. Bring it back down to your side.
4. Lift arm up over your head and back down.
5. Go slow in both directions.
6. Repeat 10 times with each arm.



Shoulder Presses *(Can use light weights)*

Total arm workout that will help with all daily activities.

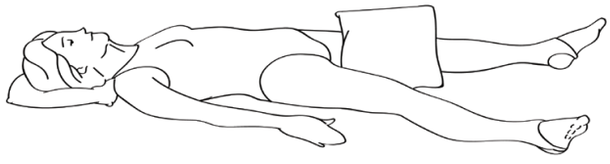
1. Hold arms up towards the ceiling with elbows straight.
2. Bring hands down and touch your chest, keeping elbows pointed away from body.
3. Now slowly straighten arms.
4. BREATHE. Go slowly.
5. Repeat 10 times.



Hip Abduction

Strengthens hip stabilizers which will help improve balance.

1. Slide right leg out to the side.
2. Keep kneecap pointing toward ceiling.
3. Slowly bring leg back to middle.
4. Make sure leg barely lifts off bed.
5. Complete a set of 10 with one leg then repeat with the other leg.



Important: For the exercises below, be sure to use a sturdy, stable chair.

Marching in Place

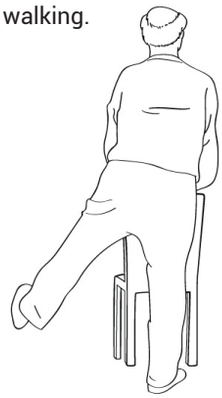
Teaches weight shifting and standing on one foot.

1. Rest hands on chair.
2. Keeping back as straight as possible, lift right knee up towards your chest and hold for a moment.
3. Slowly lower right leg.
4. Keeping back as straight as possible, lift left knee up towards your chest and hold for a moment.
5. Slowly lower left leg.
6. Repeat 10 times.

Standing Hip Abduction

Strengthens hip stabilizers that assist with walking.

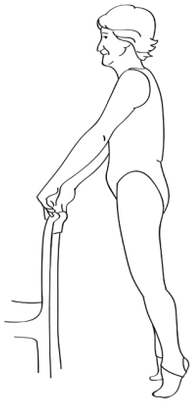
1. Rest hands on chair.
2. Kick leg out to side, keeping knee straight and toes pointed forward.
3. Make sure the kick movements are side to side and not to the front or back.
4. It should be a small movement.
5. Do not let leg drop back to starting position, control its descent.
6. Repeat 10 times with each leg.



Toe Raises

Most older adults are fearful of falling forward so they push backwards. This exercise helps them feel more comfortable leaning backward. Strengthens backs of legs which will assist with balance. The goal is to complete the exercise safely without any support on the chair.

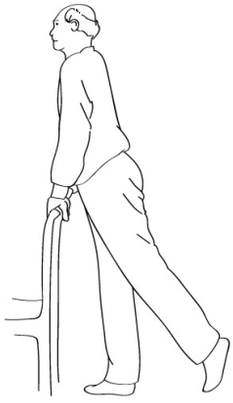
1. Rest hands on chair, use legs for balance, not arms.
2. Go up and down on toes.
3. Go slowly.
4. Do not lean forward.
5. Repeat 10 times.



Standing Leg Extension

This strengthens the muscles in the back of the leg and increases confidence with stepping backwards.

1. Rest hands on chair.
2. Slowly kick left leg back, keeping knee straight.
3. It should be a small movement. If you start to lean forward you are kicking too far.
4. Do not let leg drop back to starting position, control its descent.
5. Repeat 10 times with each leg.



FIVE MORE STEPS YOU CAN TAKE TO PREVENT FALLS

Vitamin D Supplementation

Most older adults are advised to consider taking at least 800 IU vitamin D, daily.

Review your medicines

If its been determined that medications might be a contributing factor to falls, review what you take, even over-the counter substances, with your medical doctor. With aging, the way medicines work in your body can change. Some medicines, or combinations of medicines, can make you sleepy or dizzy and can cause you to fall.

Have your feet checked

If you are experiencing foot or ankle pain, or you have been diagnosed with diabetes, visit a podiatric physician (podiatrist) immediately, and at least once per year thereafter. Ask how the Moore Balance Brace may help reduce your risk for falling.

Have your vision checked

Have your eyes checked by an eye doctor at least once a year. You may be wearing the wrong glasses or have a condition like glaucoma or cataracts that limits your vision. Poor vision can increase your risk of falling.

Make your home safer

About half of all falls happen at home. Remove things you can trip over (papers, books, clothes, and shoes) from stairs and places where you walk. Remove small throw rugs. Have grab bars put in next to your toilet and in the tub or shower. Use non-slip mats in the bathtub and on shower floors. As you get older, you need brighter lights to see well. Have handrails and lights put in on all staircases. Wear shoes both inside and outside the house. Avoid going barefoot or wearing slippers.

Other Saftey Tips

- Keep emergency numbers in large print near each phone.
- Put a phone near the floor in case you fall and cannot get up.
- Think about wearing an alarm device that will bring help in case you fall and cannot get up.

SKU MIPS17