

June 30, 2025

Nicole Brennan, MPH, DrPH  
Executive Director  
Partnership for Quality Measurement

RE: Proposed Measures for the 2025 Measure Set Review (MSR) Cycle

Submitted via <https://p4qm.org/2025-MSR-Cycle-Proposed-Measure-Comments>

Dear Dr. Brennan:

On behalf of the members of the American Podiatric Medical Association (APMA), the national organization representing the vast majority of the nation's estimated 15,000 doctors of podiatric medicine (DPMs), also known as podiatric physicians and surgeons, we thank you for the opportunity to comment on the proposed measures for the 2025 measure set review cycle.

**APMA requests that measures (00199-01-C-MIPS) Diabetes Mellitus: Diabetic Foot and Ankle Care, Peripheral Neuropathy - Neurological Evaluation and (00200-01-C-MIPS) Diabetes Mellitus: Diabetic Foot and Ankle Care, Ulcer Prevention - Evaluation of Footwear not be prioritized for review. APMA requests that these measures remain in the Quality Payment Program (QPP) as they continue to promote high value care for patients with diabetes and are meaningful measures for podiatrists and other eligible clinicians.**

Diabetes affects nearly 12% of the U.S. population and almost 1/3 of those aged 65 and older.<sup>1</sup> People with diabetes experience complications, such as neuropathy (loss of sensation in their lower extremities), foot deformity, and skin breakdown (diabetic foot ulcer). Shoe trauma, in concert with loss of protective sensation and concomitant foot deformity, is the leading event precipitating foot ulceration in persons with diabetes. The lifetime risk of a person with diabetes developing a foot ulcer may be as high as 25%.<sup>2</sup> And, nearly 85% of amputations are precipitated by foot ulcers among people with diabetes, making foot ulceration is the most common single precursor to lower extremity amputations among people with diabetes.<sup>3</sup> From a study back in

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<sup>1</sup> National Diabetes Statistics Report. [https://www.cdc.gov/diabetes/php/data-research/index.html#:~:text=Total:%2038.4%20million%20people%20have,older%20\(48.8%25\)%20have%20prediabetes](https://www.cdc.gov/diabetes/php/data-research/index.html#:~:text=Total:%2038.4%20million%20people%20have,older%20(48.8%25)%20have%20prediabetes)

<sup>2</sup> Boulton AJ, Armstrong DG, Albert SF, Frykberg RG, Hellman R, Kirkman MS, Lavery LA, LeMaster JW, Mills JL Sr, Mueller MJ, Sheehan P, Wukich DK; Task Force of the Foot Care Interest Group of the American Diabetes Association. Comprehensive foot examination and risk assessment. *Endocr Pract.* 2008 Jul-Aug;14(5):576-83. doi: 10.4158/EP.14.5.576. PMID: 18753100.

<sup>3</sup> Sloan FA, Feinglos MN, Grossman DS. Receipt of care and reduction of lower extremity amputations in a nationally representative sample of U.S. Elderly. *Health Serv Res.* 2010 Dec;45(6 Pt 1):1740-62. doi: 10.1111/j.1475-6773.2010.01157.x. Epub 2010 Aug 16. PMID: 20722748; PMCID: PMC3026956.

2014, diabetic foot ulcers were found to impose substantial burden on payers, ranging from \$9-13 billion in addition to the costs associated with diabetes itself.<sup>4</sup>

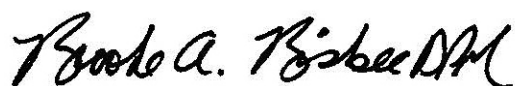
As one of Dr. Oz's top priorities is to shift the paradigm for health care from a system that focuses on sick care to one that fosters prevention, wellness, and chronic disease management, maintaining these two measures in QPP aligns with that goal. A 2011 study found that care provided by podiatrists, such as care that is outlined in these two quality measures, can reduce the disease and economic burdens of diabetes.<sup>5</sup> Patients under the care of a podiatric physician had significantly lower rates of amputation and significantly lower costs.<sup>5</sup>

In addition to providing limb- and life-saving quality care to people with diabetes, it is critical to maintain (00199-01-C-MIPS) Diabetes Mellitus: Diabetic Foot and Ankle Care, Peripheral Neuropathy - Neurological Evaluation and (00200-01-C-MIPS) Diabetes Mellitus: Diabetic Foot and Ankle Care, Ulcer Prevention - Evaluation of Footwear given the small number of podiatry-specific measures in the QPP. The removal of these measures would result in there being no measures related to diabetic foot care and fewer relevant, meaningful quality measures for podiatrists and other eligible clinicians who care for people with diabetes.

APMA is currently working with CMS and Acumen to develop a Non-Pressure Ulcer episode-based cost measure. One of the goals of this effort is to ensure there is a cost measure to populate a future MIPS Value Pathway (MVP) that is relevant to podiatrists since no such MVP currently exists. The diabetic foot quality measures are currently the most relevant quality measures to pair with this cost measure in a future MVP.

Thank you for the opportunity to offer comments on the proposed measures for the 2025 MSR cycle. **APMA requests that measures 00199-01-C-MIPS and 00200-01-C-MIPS not be prioritized for review and remain in the QPP.** Please contact Dyane Tower, DPM, MPH, MS, CAE, Vice President, Clinical Affairs and Medical at [DTower@apma.org](mailto:DTower@apma.org) or (301) 581-9250, for further inquiries or discussion.

Sincerely,



Brooke Bisbee, DPM  
President

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<sup>4</sup> Rice JB, Desai U, Cummings AK, Birnbaum HG, Skornicki M, Parsons NB. Burden of diabetic foot ulcers for medicare and private insurers. *Diabetes Care*. 2014;37(3):651-8. doi: 10.2337/dc13-2176. Epub 2013 Nov 1. Erratum in: *Diabetes Care*. 2014 Sep;37(9):2660. PMID: 24186882.

<sup>5</sup> Carls GS, Gibson TB, Driver VR, Wrobel JS, Garoufalis MG, Defrancis RR, Wang S, Bagalman JE, Christina JR. The economic value of specialized lower-extremity medical care by podiatric physicians in the treatment of diabetic foot ulcers. *J Am Podiatr Med Assoc*. 2011 Mar-Apr;101(2):93-115. doi: 10.7547/1010093. PMID: 21406693.