Measure #39 (NQF 0046): Screening for Osteoporosis for Women Aged 65-85 Years of Age –
National Quality Strategy Domain: Effective Clinical Care

2016 PQRS OPTIONS FOR INDIVIDUAL MEASURES:
CLAIMS, REGISTRY

DESCRIPTION:
Percentage of female patients aged 65-85 years of age who ever had a central dual-energy X-ray absorptiometry (DXA) to check for osteoporosis

INSTRUCTIONS:
This measure is to be reported a minimum of once per reporting period for patients seen during the reporting period. Female patients aged 65-85 years of age should have a central DXA measurement ordered or performed at least once to screen for osteoporosis. There is no diagnosis associated with this measure. 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.

Measure Reporting via Claims:
CPT codes and patient demographics are used to identify patients who are included in the measure’s denominator. Quality-data codes are used to report the numerator of the measure.

When reporting the measure via claims, submit listed CPT codes and the appropriate CPT Category II code OR quality-data code OR the CPT Category II code with the modifier. The modifiers allowed for this measure are: 1P-medical reasons, 2P-patient reasons, 3P-system reasons, 8P-reason not otherwise specified. All measure-specific coding should be reported on the claim(s) representing the eligible encounter.

Measure Reporting via Registry:
CPT codes and patient demographics are used to identify patients who are included in the measure’s denominator. The listed numerator options are used to report the numerator of the measure.

The quality-data codes listed do not need to be submitted for registry-based submissions; however, these codes may be submitted for those registries that utilize claims data.

DENOMINATOR:
Women age 65-85

Denominator Criteria (Eligible Cases):
Female patients aged 65-85 years on date of encounter
AND
Patient encounter during the reporting period (CPT): 99201, 99202, 99203, 99204, 99205, 99212, 99213, 99214, 99215

NUMERATOR:
The number of women who have documentation in their medical record of having received a DXA test of the hip or spine

Numerator Quality-Data Coding Options for Reporting Satisfactorily:
Central DXA Measurement Performed
Performance Met: G8399:
Patient with documented results of a central Dual-energy X-Ray Absorptiometry (DXA) ever being performed

OR
Central DXA Measurement not Performed for Documented Reasons

Other Performance Exclusion: G8401: Clinician documented that patient was not an eligible candidate for screening

OR

Central DXA Measurement not Performed, Reason not Given

Performance Not Met: G8400: Patient with central Dual-energy X-Ray Absorptiometry (DXA) results not documented, reason not given

RATIONALE:
This measure assesses the number of women 65-85 who have ever received a dual-energy x-ray absorptiometry (DXA) test to check for osteoporosis. There is convincing evidence that bone mineral density tests predict short-term risk for osteoporotic fractures. There is also evidence osteoporosis treatment reduces the incidence of fracture in women who are identified to be at risk of an osteoporotic fracture. Fractures, especially in the older population, can cause significant health issues, decline in function, and, in some cases lead to mortality.

CLINICAL RECOMMENDATION STATEMENTS:
The USPSTF recommends screening for osteoporosis in women aged 65 years and older and in younger women whose fracture risk is equal to or greater than that of a 65-year old white women who has no additional risk factors. (B Recommendation) (USPSTF). “Based on the U.S. FRAX tool, a 65-year-old white woman with no other risk factors has a 9.3% 10-year risk for any osteoporotic fracture. White women between the ages of 50 and 64 years with equivalent or greater 10-year fracture risks based on specific risk factors include but are not limited to the following persons: 1) a 50-year-old current smoker with a BMI less than 21 kg/m2, daily alcohol use, and parental fracture history; 2) a 55-year-old woman with a parental fracture history; 3) a 60-year-old woman with a BMI less than 21 kg/m2 and daily alcohol use; and 4) a 60-year-old current smoker with daily alcohol use. The FRAX tool also predicts 10-year fracture risks for black, Asian, and Hispanic women in the United States. In general, estimated fracture risks in nonwhite women are lower than those for white women of the same age.” (USPSTF)

Current diagnostic and treatment criteria for osteoporosis rely on DXA measurements only.

The USPSTF did not define a specific upper age limit for screening in women, however they noted that clinicians should take into account the patient's remaining lifespan when deciding whether to screen patients with significant illness; the benefit of treatment emerged 18 to 24 months after initiation of treatment.

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2016 Claims/Registry Individual Measure Flow
PQRS #39 NQF #0046: Screening for Osteoporosis for Women Aged 65-85 Years of Age

SAMPLE CALCULATIONS:

**Reporting Rate**
\[
\text{Performance Met (a=4 patients)} + \text{Performance Exclusion (b=1 patient)} + \text{Performance Not Met (c=2 patients)} = 7 \text{ patients} = \frac{87.50 \%}{8 \text{ patients}}
\]

**Performance Rate**
\[
\text{Reporting Numerator (7 patients)} - \text{Performance Exclusion (b=1 patient)} = \frac{4 \text{ patients}}{6 \text{ patients}} = 66.67 \%
\]

*See the posted Measure Specification for specific coding and instructions to report this measure.

NOTE: Reporting Frequency: Patient-process
2016 Claims/Registry Individual Measure Flow
PQRS #39 NQF #0046: Screening for Osteoporosis for Women Aged 65-85 Years of Age

Please refer to the specific section of the Measure Specification to identify the denominator and numerator information for use in reporting this Individual Measure.

1. Start with Denominator

2. Check Female Patient Age:
   a. If the Female Age is 65 through 85 years of age on Date of Service and equals No during the measurement period, do not include in Eligible Patient Population. Stop Processing.
   b. If the Female Age is 65 through 85 years of age on Date of Service and equals Yes during the measurement period, proceed to check Encounter Performed.

3. Check Encounter Performed:
   a. If Encounter as Listed in the Denominator equals No, do not include in Eligible Patient Population. Stop Processing.
   b. If Encounter as Listed in the Denominator equals Yes, include in the Eligible population.

4. Denominator Population:
   a. Denominator population is all Eligible Patients in the denominator. Denominator is represented as Denominator in the Sample Calculation listed at the end of this document. Letter d equals 8 patients in the sample calculation.

5. Start Numerator

6. Check Patient with Documented Results of a Central Dual-energy X-Ray Absorptiometry (DXA):
   a. If Patient with Documented Results of a Central Dual-energy X-Ray Absorptiometry (DXA) equals Yes, include in Reporting Met and Performance Met.
   b. Reporting Met and Performance Met letter is represented in the Reporting Rate and Performance Rate in the Sample Calculation listed at the end of this document. Letter a equals 4 patients in Sample Calculation.
   c. If Patient with Documented Results of a Central Dual-energy X-Ray Absorptiometry (DXA) equals No, proceed to Clinician Documented that Patient was Not an Eligible Candidate for Screening.

7. Check Clinician Documented that Patient was Not an Eligible Candidate for Screening:
   a. If Clinician Documented that Patient was Not an Eligible Candidate for Screening equals Yes, include in Reporting Met and Performance Exclusion.
   b. Reporting Met and Performance Exclusion letter is represented in the Reporting Rate and Performance Rate in the Sample Calculation listed at the end of this document. Letter b equals 1 patient in the Sample Calculation.
   c. If Clinician Documented that Patient was Not an Eligible Candidate for Screening equals No, proceed to Patient with Central Dual-Energy X-Ray Absorptiometry (DXR) Results Not Documented, Reason Not Given.
8. Check Patient with Central Dual-Energy X-Ray Absorptiometry (DXR) Results Not Documented, Reason Not Given:
   a. If Patient with Central Dual-Energy X-Ray Absorptiometry (DXR) Results Not Documented, Reason Not Given equals Yes, include in Reporting Met and Performance Not Met.
   b. Reporting Met and Performance Not Met letter is represented in the Reporting Rate in the Sample Calculation listed at the end of this document. Letter c equals 2 patient in the Sample Calculation.
   c. If Patient with Central Dual-Energy X-Ray Absorptiometry (DXR) Results Not Documented, Reason Not Given equals No, proceed to Reporting Not Met.

9. Check Reporting Not Met:
   a. If Reporting Not Met equals No, Quality Data Code or equivalent not reported. 1 patient has been subtracted from the reporting numerator in sample calculation.

**SAMPLE CALCULATIONS:**

<table>
<thead>
<tr>
<th>Reporting Rate</th>
<th>Performance Met (a=4 patients) + Performance Exclusion (b=1 patient) + Performance Not Met (c=2 patients) = 7 patients</th>
<th>87.50%</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Eligible Population / Denominator (d=8 patients) = 8 patients</td>
<td></td>
</tr>
<tr>
<td>Performance Rate</td>
<td>Performance Met (a=4 patients) = 4 patients * 66.67%</td>
<td>6.67%</td>
</tr>
<tr>
<td>Reporting Numerator (7 patients) - Performance Exclusion (b=1 patient) = 6 patients</td>
<td></td>
<td></td>
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</tbody>
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