★ Medicare Star Program

Disease-Modifying Anti-Rheumatic Drug Therapy for Rheumatoid Arthritis (ART)

L.A. Care HEALTH PLAN®

Q: Which members are included in the sample?

A: Adults 18 years and older with a diagnosis of rheumatoid arthritis and who were dispensed at least one ambulatory prescription for a disease-modifying anti-rheumatic drug (DMARD) in 2016.

Q: What codes are used?

A: Please reference attached sample codes and Value Set Directory for additional codes

Q: What documentation is needed in the medical record?

A: *None*. This measure requires **claim/encounter data** submission only using the appropriate Value Set Codes.

Q: What documentation is needed in the medical record?

A: Evidence from claim/encounter/pharmacy data

- A date of service for any outpatient visit or a non-acute inpatient discharge with a diagnosis of rheumatoid arthritis, and a prescription for DMARD in 2016

DMARDs:

Description	Prescription		
5-Aminosalicylates	• Sulfasalazine		
Alkylating agents	• Cyclophosphamide		
Aminoquinolines	• Hydroxychloroquine		
Anti-rheumatics	• Auranofin • Gold sodium thiomalate	• Leflunomide • Methotrexate	• Penicillamine
Immunomodulators	• Abatacept • Adalimumab • Anakinra • Certolizumab	• Certolizumab pegol • Etanercept • Golimumab • Infliximab	• Rituximab • Tocilizumab

★ Medicare Star Program

Disease-Modifying Anti-Rheumatic Drug Therapy for Rheumatoid Arthritis (ART)

L.A. Care HEALTH PLAN®

Q: What documentation is needed in the medical record?

Description	Prescription
Immunosuppressive agents	• Azathioprine • Cyclosporine • Mycophenolate
Janus kinase (JAK) inhibitor	• Tofacitinib
Tetracyclines	• Minocycline

Q: How to improve score for this HEDIS measure?

A:

- ☑ Use of complete and accurate Value Set Codes
- ☑ Timely submission of claims and encounter data
- ☑ Ensure proper documentation in medical record
- ☑ Evidence of a diagnosis of HIV or pregnancy - *documentation will assist in excluding members from the HEDIS sample.*

★ Medicare Star Program

Disease-Modifying Anti-Rheumatic Drug Therapy for Rheumatoid Arthritis (ART)

L.A. Care HEALTH PLAN®

SAMPLE CODES

The codes listed below are not inclusive and do not represent a complete list of codes found in the NCQA HEDIS® Value Set. To ensure accurate documentation, please refer to the HEDIS® 2017 Value Set Directory located on the L.A. Care Website at:

http://www.lacare.org/providers/provider-resources/hedis-resources

ICD-10 codes
Refer to Rheumatoid Arthritis Value Set

CPT codes	
Outpatient	99201-99205, 99211-99215, 99241-99245, 99341-99345, 99347-99350, 99381-99387, 99391-99397, 99401-99404, 99411, 99412, 99420, 99429, 99455, 99456

HCPCS codes	
Outpatient	G0402, G0438, G0439, G0463, T1015
DMARD	J0129, J0135, J0717, J1438, J1600, J1602, J1745, J3262, J7502, J7515-J7518, J9250, J9260, J9310

Exclusion codes
Refer to HIV Value Set, HIV Type 2 Value Set, Pregnancy Value Set

Care for Older Adults (COA)

L.A. Care HEALTH PLAN®

Q: Which members are included in the sample?

A: Adults 66 years and older who had ***each*** of the following in **2016**:

- ☑ Advance care planning
- ☑ Medication review
- ☑ Functional status assessment
- ☑ Pain assessment

Q: What codes are used?

A: Please reference attached sample codes and Value Set Directory for additional codes

Q: What documentation is needed in the medical record?

A:

- ☑ **Advanced Care Planning** – evidence must include either the presence of advanced care plan in the medical record ***or*** documentation of advance care planning discussion with the provider and the date when it was discussed
- ☑ **Evidence of Medication Review** – must include medication list in the medical record, and evidence of a medication review and the date when it was performed ***or*** notation that the member is not taking any medication and the date when it was noted
- ☑ **Evidence of Functional Status Assessment** – documentation must include evidence of functional status assessment ***and*** the date when it was performed
- ☑ **Evidence of Pain Assessment** – documentation must include evidence of a pain assessment (may include positive or negative findings for pain) and the date when it was performed

L.A. Care HEALTH PLAN®

Q: What type of medical record is acceptable?

A:

Advanced Care Planning:

- ☑ Advance Directives
- ☑ Actionable medical orders
- ☑ Copy of Living Wills, Medical Power of Attorney
- ☑ Copy of documentation of surrogate decision maker
- ☑ Notation of advance care planning discussion with a provider in 2016
- ☑ Evidence of oral statements noted in the medical record in 2016

Medication Review:

- ☑ Current medication list in 2016
- ☑ Notation of medication review in 2016
- ☑ Date and notation that the member is not taking any medication in 2016

Functional Status Assessment:

- ☑ Progress notes, IHSS forms, HRA forms, AWE form
- ☑ Notation that Activities of Daily Living (ADL) were assessed or that at least 5 of the following were assessed: bathing, dressing, eating, transferring [e.g., getting in and out of chairs], using toilet, walking
- ☑ Notation that Instrumental Activities of Daily Living (IADL) were assessed or at least 4 of the following were assessed: shopping for groceries, driving or using public transportation, using the telephone, meal preparation, housework, home repair, laundry, taking medications, handling finances
- ☑ Result of assessment using a standardized functional status assessment tool
- ☑ Notation of cognitive status, ambulation status, sensory ability (hearing, vision and speech) and, other functional independence (e.g., exercise)

Care for Older Adults (COA)

L.A. Care HEALTH PLAN®

Q: What type of medical record is acceptable?

A: Pain Assessment:

- ☑ Progress notes – notation of a pain assessment (which may include positive or negative findings for pain)
- ☑ Result of assessment using a standardized pain assessment tool
- ☑ Numeric rating scales (verbal or written)
- ☑ Pain Thermometer
- ☑ Pictorial Pain Scales
- ☑ Visual Analogue Scale
- ☑ Brief Pain Inventory
- ☑ Chronic Pain Grade
- ☑ PROMIS Pain Intensity Scale
- ☑ Pain Assessment in Advanced Dementia (PAINAD) Scale

Q: How to improve score for this HEDIS measure?

A:

- ☑ Use of complete and accurate Value Set Codes
- ☑ Timely submission of claims and encounter data
- ☑ Ensure complete and appropriate documentation in medical record
- ☑ Timely submission of AWE Forms that are complete and accurate

Care for Older Adults (COA)

L.A. Care HEALTH PLAN®

SAMPLE CODES

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ICD-10 Codes
N/A

CPT Codes	
Advance Care Planning	99497
Medication Review	90863, 99605, 99606
TCM 14 day	99495
TCM 7 day	99496

CPT II Codes	
Pain Assessment	1125F, 1126F
Advance Care Planning	1157F, 1158F
Medication List	1159F
Medication Review	1160F
Functional Status Assessment	1170F

Care for Older Adults (COA)

L.A. Care HEALTH PLAN®

HCPCS codes	
Medication List	G8427
Advance Care Planning	S0257

Exclusions codes
N/A

★ Medicare Star Program

Osteoporosis Management in Women Who Had a Fracture (OMW)

L.A. Care HEALTH PLAN®

Q: Which members are included in the sample?

A: Women 67-85 years of age who suffered a fracture (7/1/2015 - 6/30/2016), and who had either a bone mineral density (BMD) test or prescription for a drug to treat osteoporosis in the six months after the fracture.

Q: What codes are used?

A: Please reference attached sample codes and Value Set Directory for additional codes

Q: What documentation is needed in the medical record?

A: None. This measure requires **claim/encounter data** submission only using the appropriate Value Set Codes.

Q: What type of document is acceptable?

A: Evidence of claims/encounter data

- ☑ BMD (bone mineral density) test, in any setting, on the IESD or in the 180-day (6 month) period after the IESD. If IESD was an inpatient, a BMD test during inpatient stay.
- ☑ Osteoporosis therapy on the IESD or in the 180-day (6 month) period after IESD. If the IESD was an inpatient, long-acting osteoporosis therapy during the inpatient stay.
- ☑ A dispensed prescription to treat osteoporosis on the IESD or in the 180-day (6 month) period after IESD
- ☑ A dispensed prescription to treat osteoporosis
- ☑ Fracture
- ☑ Visit type

Osteoporosis Therapies:

Description	Prescription	
Biphosphonates	• Alendronate • Alendronate-cholecalciferol • Ibandronate	• Risedronate • Zoledronic acid
Other agents	• Calcitonin • Denosumab	• Raloxifene • Teriparatide

★ Medicare Star Program

Osteoporosis Management in Women Who Had a Fracture (OMW)

L.A. Care HEALTH PLAN®

Q: How to improve score for this HEDIS measure?

A:

- ☑ Use of complete and accurate Value Set Codes
- ☑ Timely submission of claims and encounter data
- ☑ Ensure proper documentation in medical record
- ☑ ***Required Exclusions:***
  - Members who had a BMD test during the 730 days (24 months) prior to IESD*
  - Members who had a claim/encounter for osteoporosis therapy during the 365 days (12 months) prior to IESD*
  - Member who received a dispensed prescription or had an active prescription to treat osteoporosis during the 365 days (12 months) prior to IESD*
  - *IESD: Index Episode Start Date [The earliest date of service for any encounter during the Intake Period (7/1/15 – 6/30/16) with a diagnosis of fracture]

Note: ***Fractures of finger, toe, face and skull are not included.***

★ Medicare Star Program

Osteoporosis Management in Women Who Had a Fracture (OMW)

L.A. Care HEALTH PLAN®

SAMPLE CODES

The codes listed below are not inclusive and do not represent a complete list of codes found in the NCQA HEDIS® Value Set. To ensure accurate documentation, please refer to the HEDIS® 2017 Value Set Directory located on the L.A. Care Website at:

http://www.lacare.org/providers/provider-resources/hedis-resources

ICD-10 codes
Refer to Fractures Value Set

CPT codes	
Bone Mineral Density Tests	76977, 77078, 77080, 77081, 77082, 77085
Fractures	Refer to Fractures Value Set
Observation	99217-99220
Outpatient	99201-99205, 99211-99215, 99241-99245, 99341-99345, 99347-99350, 99381-99387, 99391-99397, 99401-99404, 99411, 99412, 99420, 99429, 99455, 99456
ED	99281-99285

HCPCS codes	
Bone Mineral Density Test	G0130
Fractures	S2360
Long-Acting Osteoporosis Medications	J0897, J1740, J3487-J3489, Q2051

Osteoporosis Management in Women Who Had a Fracture (OMW)

L.A. Care HEALTH PLAN®

HCPCS codes	
Osteoporosis Medications	J0630, J0897, J1740, J3110, J3487-J3489, Q2051,
Outpatient	G0402, G0438, G0439, G0463, T1015

Exclusion codes
Refer to Bone Mineral Density Tests Value Set, Osteoporosis Medications Value Set