Plan of Care for Urinary Incontinence in Women Aged 65 Years and Older

*This measure is to be reported for all female patients aged 65 years and older with urinary incontinence — a minimum of **once** per reporting period.*

Measure description

Percentage of female patients aged 65 years and older with a diagnosis of urinary incontinence with a documented plan of care for urinary incontinence at least once within 12 months

What will you need to report for each female patient aged 65 years and older with urinary incontinence for this measure?

If you select this measure for reporting, you will report:

- Whether or not you documented a plan of care[1] for urinary incontinence

What if this process or outcome of care is not appropriate for your patient?

Some measures provide an opportunity for the physician or non-physician provider to document when a process or outcome of care is not appropriate for a given patient (also called performance exclusions). Because this measure is applicable to most if not all patients, there are no allowable performance exclusions.

[1]Plan of care may include behavioral interventions (eg, bladder training, pelvic floor muscle training, prompted voiding), referral to specialist, surgical treatment, reassess at follow-up visit, lifestyle interventions, addressing co-morbid factors, modification or discontinuation of medications contributing to urinary incontinence, or pharmacologic therapy.

PQRI 2007 Measure 50, Effective Date 07/01/2007

Plan of Care for Urinary Incontinence in Women Aged 65 Years and Older

PQRI Data Collection Sheet

Patient's Name | Practice Medical Record Number (MRN) | Birth Date (mm/dd/yyyy) / / | Gender ☐ Male ☐ Female

National Provider Identifier (NPI) | Date of Service

Clinical Information

Step 1 Is patient eligible for this measure?

	Yes	No
Patient is aged 65 years and older.	☐	☐
Patient is female.	☐	☐
There is a CPT E/M Service Code for this visit.	☐	☐

If **No** is checked for any of the above, STOP. Do not report a CPT category II code.

Step 2 Does patient meet the measure?

Plan of Care[1]	Yes	No
Documented	☐	☐

Billing Information

Code Required on Claim Form
Verify date of birth on claim form.
Refer to gender on claim form.
Refer to coding specifications document for list of applicable codes.

Code to be Reported on Line 24D of Paper Claim Form, if *Yes* (or Service Line 24 of Electronic Claim Form)
0509F
If **No** is checked for the above, report 0509F–8P (Plan of care for urinary incontinence was not documented, reason not otherwise specified.)

[1]Plan of care may include behavioral interventions (eg, bladder training, pelvic floor muscle training, prompted voiding) referral to specialist, surgical treatment, reassess at follow-up visit, lifestyle interventions, addressing co-morbid factors, modification or discontinuation of medications contributing to urinary incontinence, or pharmacologic therapy.

PQRI 2007 Measure 50, Effective Date 07/01/2007

Plan of Care for Urinary Incontinence in Women Aged 65 Years and Older

Coding Specifications

Codes required to document patient has urinary incontinence and a visit occurred:

An ICD-9 diagnosis code for urinary incontinence and a CPT E/M service code are required to identify patients to be included in this measure.

Urinary incontinence ICD-9 diagnosis codes

- 307.6 (nonorganic origin),
- 625.6 (stress, female),
- 788.30, 788.31, 788.32, 788.33, 788.34, 788.35, 788.36, 788.37, 788.38, 788.39 (urinary incontinence)

AND

CPT E/M service codes

- 99201, 99202, 99203, 99204, 99205 (office — new patient),
- 99212, 99213, 99214, 99215 (office — established patient),
- 99241, 99242, 99243, 99244, 99245 (outpatient consult),
- 99387 (preventive medicine services — new patient),
- 99397 (preventive medicine services — established patient),
- 99401, 99402, 99403, 99404 (preventive medicine services — individual counseling)

Quality codes for this measure (one of the following for every eligible patient):

CPT II Code descriptors

(Data Collection sheet should be used to determine appropriate combination of codes.)

- ***CPT II 0509F:*** Urinary incontinence plan of care documented
- ***CPT II 0509F–8P:*** Urinary incontinence plan of care not documented, reason not otherwise specified