Measure #109: Patients with Osteoarthritis who have an Assessment of Their Pain and Function

DESCRIPTION:

Percentage of patient visits for patients aged 21 years and older with a diagnosis of osteoarthritis (OA) with assessment for function and pain

INSTRUCTIONS:

This measure is to be reported at <u>each</u> visit occurring during the reporting period for patients with osteoarthritis seen during the reporting period. 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.

This measure is reported using CPT Category II codes:

ICD-9 diagnosis codes, CPT E/M service codes, and patient demographics (age, gender, etc.) are used to identify patients who are included in the measure's denominator. CPT Category II codes are used to report the numerator of the measure.

When reporting the measure, submit the listed ICD-9 diagnosis codes, CPT E/M service codes and the appropriate CPT Category II code <u>OR</u> the CPT Category II code <u>with</u> the modifier. The reporting modifier allowed for this measure is: 8P- reasons not otherwise specified. There are no allowable performance exclusions for this measure.

NUMERATOR:

Patient visits with assessment for level of function and pain documented

Numerator Coding:

Osteoarthritis Symptoms and Functional Status Assessed

CPT II 1006F: Osteoarthritis symptoms and functional status assessed (may include the use of a standardized scale or the completion of an assessment questionnaire, such as an SF-36, AAOS Hip & Knee Questionnaire)

OR

Osteoarthritis Symptoms and Functional Status <u>not</u> Assessed, Reason not Specified Append a reporting modifier (8P) to CPT Category II code 1006F to allow the reporting of circumstances when an action described in a measure's numerator is not performed and the reason is not otherwise specified.

 8P: Osteoarthritis symptoms and functional status <u>not</u> assessed, reason not otherwise specified

DENOMINATOR:

All patient visits for patients aged 21 years and older with a diagnosis of OA

Denominator Coding:

An ICD-9 diagnosis code for osteoarthritis and a CPT E/M service code are required to identify patients for denominator inclusion.

ICD-9 diagnosis codes: 715.00, 715.04, 715.09, 715.10, 715.11, 715.12, 715.13, 715.14, 715.15, 715.16, 715.17, 715.18, 715.20, 715.21, 715.22, 715.23, 715.24, 715.25, 715.26, 715.27, 715.28, 715.30, 715.31, 715.32, 715.33, 715.34, 715.35, 715.36, 715.37, 715.38, 715.80, 715.89, 715.90, 715.91, 715.92, 715.93, 715.94, 715.95, 715.96, 715.97, 715.98 AND

CPT E/M service codes: 99201, 99202, 99203, 99204, 99205, 99212, 99213, 99214, 99215, 99241, 99242, 99243, 99244, 99245

RATIONALE:

Osteoarthritis can be a debilitating condition. An assessment of patient symptoms and functional status is important as it serves as the basis for making treatment modifications, which in turn, assists in improving the patient's quality of life.

CLINICAL RECOMMENDATION STATEMENTS:

Because pain is a major cause of disability in people with arthritis, assessment of functional status should be included in the pain assessment. When selecting a functional status measure, consideration should be given to the cognitive-developmental abilities of the person, the type of practice setting, the domains of function to be assessed, and the time and resources needed to complete the assessment. (APS; B Recommendation)

Any persistent pain that has an impact on physical function, psychosocial function, or other aspects of quality of life should be recognized as a significant problem. (AGA; IIA Recommendation)

Control of pain and maintenance of activity correlate well with satisfactory quality of life. (AAOS)