*Measure #50: Plan of Care for Urinary Incontinence in Women Aged 65 Years and Older

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

INSTRUCTIONS:

This measure is to be reported a minimum of once per reporting period for patients seen during the reporting period. This measure is appropriate for use in the ambulatory setting only. It is anticipated that clinicians who provide services for patients with the diagnosis of urinary incontinence will submit this measure.

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:

Patients with a documented plan of care for urinary incontinence at least once within 12 months

Definition: Plan of care may include behavioral interventions (e.g., 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.

Numerator Coding:

Plan of Care for Urinary Incontinence Documented

CPT II 0509F: Urinary incontinence plan of care documented

OR

Plan of Care for Urinary Incontinence <u>not</u> Documented, Reason not Specified Append a reporting modifier (8P) to CPT Category II code 0509F to report circumstances when the action described in the numerator is not performed and the reason is not otherwise specified.

• 8P: Urinary incontinence plan of care <u>not</u> documented, reason not otherwise specified

DENOMINATOR:

All female patients aged 65 years and older with a diagnosis of urinary incontinence

Denominator Coding:

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

ICD-9 diagnosis codes: 307.6, 625.6, 788.30, 788.31, 788.33, 788.34, 788.35, 788.36, 788.37, 788.38, 788.39

AND

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

RATIONALE:

A treatment option should be documented for the patient with incontinence.

CLINICAL RECOMMENDATION STATEMENTS:

All conservative management options used in younger adults can be used in selected frail, older, motivated people. This includes:

- Bladder retraining
- Pelvic muscle exercises including biofeedback and/or electro-stimulation (ICI) (Grade B)

Pharmacologic agents, especially oxybutynin and tolterodine, may have a small beneficial effect on improving symptoms of detrusor overactivity in women. (ACOG) (Level A)

Oxybutynin and potentially other bladder relaxants can improve the effectiveness of behavioral therapies in frail older persons. (ICI) (Grade B)