

Assessment of GERD Symptoms in Patients Receiving Chronic Medication for GERD

*This measure is to be reported for all patients aged 18 years and older with GERD — a minimum of **once** per reporting period.*

Measure description

Percentage of patients aged 18 years and older with the diagnosis of gastroesophageal reflux disease (GERD) who have been prescribed continuous proton pump inhibitor (PPI) or histamine H2 receptor antagonist (H2RA) therapy who received an annual assessment of their GERD symptoms after 12 months of therapy

What will you need to report for each patient with GERD for this measure?

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

- Whether or not the patient is receiving continuous (12-months) therapy with proton pump inhibitor (PPI) or histamine H2 receptor antagonist (H2RA)

If the patient is receiving continuous (12-months) therapy with proton pump inhibitor (PPI) or histamine H2 receptor antagonist (H2RA), you will then need to report:

- Whether or not you assessed the patient's GERD symptoms after 12 months of therapy

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

There may be times when it is not appropriate to assess a patient's GERD symptoms, due to:

- Medical reasons (eg, not indicated, contraindicated, other medical reason)

In these cases, you will need to indicate that the medical reason applies, and specify the reason on the worksheet and in the medical chart. The office/billing staff will then report a code with a modifier that represents these valid reasons (also called exclusions).

Gastroesophageal Reflux Disease (GERD)

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PQRI Data Collection Sheet

Patient's Name	Practice Medical Record Number (MRN)	Birth Date (mm/dd/yyyy) / /	Gender <input type="checkbox"/> Male <input type="checkbox"/> Female
National Provider Identifier (NPI)		Date of Service	

Clinical Information

Billing Information

Step 1 Is patient eligible for this measure?			Code Required on Claim Form
	Yes	No	
Patient is aged 18 years and older.	<input type="checkbox"/>	<input type="checkbox"/>	Verify date of birth on claim form.
Patient has a diagnosis of GERD.	<input type="checkbox"/>	<input type="checkbox"/>	Refer to coding specifications document for list of applicable codes.
There is a CPT E/M Service Code for this visit.	<input type="checkbox"/>	<input type="checkbox"/>	
If No is checked for any of the above, STOP. Do not report a CPT category II code.			
Step 2 Does patient also have the other requirements for this measure?			Code to be Reported on Line 24D of Paper Claim Form (or Service Line 24 of Electronic Claim Form)
	Yes	No	
Is patient receiving continuous (12-months) therapy with proton pump inhibitor (PPI) or histamine H2 receptor antagonist (H2RA)?	<input type="checkbox"/>	<input type="checkbox"/>	If No , report only 4186F and STOP. If Yes , report 4185F and proceed to Step 3.
Step 3 Does patient meet or have an acceptable reason for not meeting the measure?			Code to be Reported on Line 24D of Paper Claim Form, if Yes (or Service Line 24 of Electronic Claim Form)
GERD Symptoms	Yes	No	
Assessed ¹	<input type="checkbox"/>	<input type="checkbox"/>	1118F
Not assessed for the following reason: • Medical (eg, not indicated, contraindicated, other medical reason)	<input type="checkbox"/>	<input type="checkbox"/>	1118F-1P
Document reason here and in medical chart. _____ _____			If No is checked for all of the above, report 1118F-8P (GERD symptoms not assessed after 12 months of therapy, reason not otherwise specified.)

¹Assessed after 12 months of therapy.

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Coding Specifications

Codes required to document patient has gastroesophageal reflux disease (GERD) and a visit occurred:

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

GERD ICD-9 diagnosis codes

- 530.10, 530.11, 530.12, 530.19 (esophagitis),
- 530.81 (esophageal reflux)

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)

Quality codes for this measure (at least 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 4185F:** Continuous (12-months) therapy with proton pump inhibitor (PPI) or histamine H2 receptor antagonist (H2RA) received
- **CPT II 4186F:** No continuous (12-months) therapy with either proton pump inhibitor (PPI) or histamine H2 receptor antagonist (H2RA) received
- **CPT II 1118F:** GERD symptoms assessed after 12 months of therapy
- **CPT II 1118F-1P:** Documentation of medical reason(s) for not assessing GERD symptoms
- **CPT II 1118F-8P:** GERD symptoms not assessed after 12 months of therapy, reason not otherwise specified

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