

### Disease Modifying Anti-Rheumatic Drug (DMARD) Therapy

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*This measure is to be reported for all patients aged 18 years and older with rheumatoid arthritis — a minimum of **once** per reporting period. It is anticipated that clinicians who provide care for patients with a diagnosis of RA will submit this measure.*

#### Measure description

Percentage of patients aged 18 years and older who were diagnosed with RA and were prescribed<sup>1</sup>, dispensed, or administered at least one ambulatory prescription for a DMARD<sup>2</sup>

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

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

- Whether or not the patient was prescribed<sup>1</sup>, dispensed, or administered a DMARD<sup>2</sup>

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

There may be times when it is not appropriate to prescribe, dispense, or administer a DMARD<sup>2</sup>, 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).

<sup>1</sup>Prescribed — May include prescription given to the patient for DMARD therapy at one or more visits in the 12-month period OR patient already taking DMARD therapy as documented in current medication list.

<sup>2</sup>Biologic DMARD Therapy — Includes Adalimumab, Etanercept, Infliximab, Abatacept, Anakinra and Rituximab.