## Rheumatoid Arthritis (RA)

## **Periodic Assessment of Disease Activity**

PQRI Data Collection Sheet					
				/ /	☐ Male ☐ Female
Patient's Name Practice I	Practice Medical Record Number (MRN)			Birth Date (mm/dd/yyyy)	Gender
National Provider Identifier (NPI)				Date of Service	
Clinical Information				Billing Information	
Step 1 Is patient eligible for this	measure?				
		Yes	No	Code Required on Claim Form	
Patient is aged 18 years and older on da	te of encounter.			Verify date of birth on claim form.	
Patient has a line item diagnosis of rheu	matoid arthritis.			Refer to coding specifications document for list of applicable codes. Codes determining a patient's eligibility must be reported on the same claim as	
There is a CPT E/M Service Code for this	s visit.				
If <b>No</b> is checked for any of the above, STOP. Do not report a CPT category II code.				the quality code(s) identified below.	
Step 2 Does patient meet the me	easure?				
Disease Activity <sup>1</sup>		Yes	No	Code to be Reported on Line 24 if Yes (or Service Line 24 of Eld	
Classified, low				3470F	
Classified, moderate				3471F	
Classified, high				3472F	
				If <b>No</b> is checked for <b>all</b> of the a 3470F–8P (Disease activity not assessed not otherwise specified.)	, ,

<sup>&</sup>lt;sup>1</sup>Disease activity should be classified using a standardized descriptive or numeric scale or composite index. These include but are not limited to: DAS28, SDAI, CDAI, RADAI, RAPID. The scales/instruments listed are examples of how to define activity level and cut-off points can differ by scale.