

### Management Following Fracture of Hip, Spine or Distal Radius for Men and Women Aged 50 Years and Older

*This measure is to be reported after **each occurrence** of a fracture of the hip, spine or distal radius during the reporting period for all men and women aged 50 years and older. It is anticipated that clinicians who treat hip, spine, or distal radial fractures will submit this measure.*

#### Measure description

Percentage of patients aged 50 years and older with fracture of the hip, spine or distal radius who had a central dual-energy X-ray absorptiometry (DXA) measurement ordered or performed or pharmacologic therapy<sup>1</sup> prescribed<sup>2</sup>

#### What will you need to report for each occurrence of a fracture of the hip, spine or distal radius for this measure?

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

- Whether or not you ordered or performed a central DXA measurement
- OR
- Whether or not you prescribed pharmacologic therapy (other than minerals/vitamins) for osteoporosis

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

There may be times when it is not appropriate to order or perform a central DXA measurement OR prescribe pharmacologic therapy after a fracture of the hip, spine or distal radius, due to:

- Medical reasons (eg, not indicated, contraindicated, other medical reason) OR
- Patient reasons (eg, patient declined, economic, social, religious, other patient reason) OR
- System reasons (eg, resources to perform the services not available, insurance coverage/payer-related limitations, other reason attributable to health care delivery system)

In these cases, you will need to indicate which 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).

*Note: This measure should be reported at one of the following two instances if management following fracture has occurred or is planned within 3 months of fracture.*

- 1) *During an office visit with ICD-9-CM diagnosis code for fracture of hip, spine or distal radius OR*
- 2) *At the time of a procedure to repair a fracture*

*Prior DXA status or already on pharmacologic therapy pre-fracture meets this measure*

<sup>1</sup>Pharmacologic therapy: U.S. Food and Drug Administration approved pharmacologic options for osteoporosis prevention and/or treatment of postmenopausal osteoporosis include, in alphabetical order: bisphosphonates (alendronate, ibandronate, and risedronate), calcitonin, estrogens (estrogens and/or hormone therapy), parathyroid [PTH (1-34), teriparatide], and selective estrogen receptor modules or SERMs (raloxifene).

<sup>2</sup>“Prescribed” may include prescription given to the patient for treatment of osteoporosis (as listed above) at one or more encounters during the reporting period, OR documentation that patient is already taking pharmacologic therapy for osteoporosis, as documented in the current medication list.