

Quality ID #418 (NQF 0053): Osteoporosis Management in Women Who Had a Fracture
– National Quality Strategy Domain: Effective Clinical Care
– Meaningful Measure Area: Management of Chronic Conditions

2020 COLLECTION TYPE:

MIPS CLINICAL QUALITY MEASURES (COMS)

MEASURE TYPE:

Process

DESCRIPTION:

The percentage of women age 50-85 who suffered a fracture in the six months prior to the performance period through June 30 of the performance period and who either had a bone mineral density test or received a prescription for a drug to treat osteoporosis in the six months after the fracture

INSTRUCTIONS:

This measure is to be submitted after **each occurrence** of a fracture during the six months prior to the performance period through June 30 of the performance period. It is anticipated that Merit-based Incentive Payment System (MIPS) eligible clinicians who treat any fracture except fractures of the finger, toe, face or skull will submit this measure. Each occurrence of a fracture is identified by either an ICD-10-CM diagnosis code for fracture and a CPT service code OR an ICD-10-CM diagnosis code for a fracture and a CPT procedure code for surgical treatment of fractures.

***NOTE:** Patients with any fracture except fractures of the finger, toe, face or skull should have a bone mineral density (BMD) measurement performed or pharmacologic therapy prescribed. The management (BMD performed or pharmacologic therapy prescribed) should occur within six months of the fracture. If multiple fractures occurring on the same date of service are submitted on the same claim form, only one instance of submission will be counted. Claims data will be analyzed to determine unique occurrences. Patients already receiving pharmacologic therapy would automatically meet the intent of this measure.*

Measure Submission Type:

Measure data may be submitted by individual MIPS eligible clinicians, groups, or third party intermediaries. The listed denominator criteria are used to identify the intended patient population. The numerator options included in this specification are used to submit the quality actions as allowed by the measure. The quality-data codes listed do not need to be submitted by MIPS eligible clinicians, groups, or third party intermediaries that utilize this modality for submissions; however, these codes may be submitted for those third party intermediaries that utilize Medicare Part B claims data. For more information regarding Application Programming Interface (API), please refer to the Quality Payment Program (QPP) website.

The intent of the exclusion for individuals age 66 and older residing in long-term care facilities, including nursing homes, is to exclude individuals who may have limited life expectancy and increased frailty where the benefit of the process may not exceed the risks. This exclusion is not intended as a clinical recommendation regarding whether the measures process is inappropriate for specific populations, instead the exclusions allows clinicians to engage in shared decision making with patients about the benefits and risks of screening when an individual has limited life expectancy.

DENOMINATOR:

Women who experienced a fracture, except fractures of the finger, toe, face or skull, during the six months prior to the performance period through June 30 of the performance period

Option 1 - Denominator Criteria (Eligible Cases):

Patients aged 50-85 years on date of encounter

AND

Diagnosis for any fracture except fractures of the finger, toe, face or skull (ICD-10-CM): M48.40XA, M48.41XA, M48.42XA, M48.43XA, M48.44XA, M48.45XA, M48.46XA, M48.47XA, M48.48XA, M80.00XA, M80.011A, M80.012A, M80.019A, M80.021A, M80.022A, M80.029A, M80.031A, M80.032A, M80.039A, M80.041A, M80.042A, M80.049A, M80.051A, M80.052A, M80.059A, M80.061A, M80.062A, M80.069A, M80.071A, M80.072A, M80.079A, M80.08XA, M80.80XA, M80.811A, M80.812A, M80.819A, M80.821A, M80.822A, M80.829A, M80.831A, M80.832A, M80.839A, M80.841A, M80.842A, M80.849A, M80.851A, M80.852A, M80.859A, M80.861A, M80.862A, M80.869A, M80.871A, M80.872A, M80.879A, M80.88XA, M84.311A, M84.312A, M84.319A, M84.321A, M84.322A, M84.329A, M84.331A, M84.332A, M84.333A, M84.334A, M84.339A, M84.341A, M84.342A, M84.343A, M84.350A, M84.351A, M84.352A, M84.353A, M84.359A, M84.361A, M84.362A, M84.363A, M84.364A, M84.369A, M84.371A, M84.372A, M84.373A, M84.374A, M84.375A, M84.376A, M84.38XA, M84.750A, M84.751A, M84.752A, M84.753A, M84.754A, M84.755A, M84.756A, M84.757A, M84.759A, M97.01XA, M97.02XA, M97.11XA, M97.12XA, M97.21XA, M97.22XA, M97.31XA, M97.32XA, M97.41XA, M97.42XA, S12.000A, S12.000B, S12.001A, S12.001B, S12.01XA, S12.01XB, S12.02XA, S12.02XB, S12.030A, S12.030B, S12.031A, S12.031B, S12.040A, S12.040B, S12.041A, S12.041B, S12.090A, S12.090B, S12.091A, S12.091B, S12.100A, S12.100B, S12.101A, S12.101B, S12.110A, S12.110B, S12.111A, S12.111B, S12.112A, S12.112B, S12.120A, S12.120B, S12.121A, S12.121B, S12.130A, S12.130B, S12.131A, S12.131B, S12.14XA, S12.14XB, S12.150A, S12.150B, S12.151A, S12.151B, S12.190A, S12.190B, S12.191A, S12.191B, S12.200A, S12.200B, S12.201A, S12.201B, S12.230A, S12.230B, S12.231A, S12.231B, S12.24XA, S12.24XB, S12.250A, S12.250B, S12.251A, S12.251B, S12.290A, S12.290B, S12.291A, S12.291B, S12.300A, S12.300B, S12.301A, S12.301B, S12.330A, S12.330B, S12.331A, S12.331B, S12.34XA, S12.34XB, S12.350A, S12.350B, S12.351A, S12.351B, S12.390A, S12.390B, S12.391A, S12.391B, S12.400A, S12.400B, S12.401A, S12.401B, S12.430A, S12.430B, S12.431A, S12.431B, S12.44XA, S12.44XB, S12.450A, S12.450B, S12.451A, S12.451B, S12.490A, S12.490B, S12.491A, S12.491B, S12.500A, S12.500B, S12.501A, S12.501B, S12.530A, S12.530B, S12.531A, S12.531B, S12.54XA, S12.54XB, S12.550A, S12.550B, S12.551A, S12.551B, S12.590A, S12.590B, S12.591A, S12.591B, S12.600A, S12.600B, S12.601A, S12.601B, S12.630A, S12.630B, S12.631A, S12.631B, S12.64XA, S12.64XB, S12.650A, S12.650B, S12.651A, S12.651B, S12.690A, S12.690B, S12.691A, S12.691B, S12.8XXA, S12.9XXA, S22.000A, S22.000B, S22.001A, S22.001B, S22.002A, S22.002B, S22.008A, S22.008B, S22.009A, S22.009B, S22.010A, S22.010B, S22.011A, S22.011B, S22.012A, S22.012B, S22.018A, S22.018B, S22.019A, S22.019B, S22.020A, S22.020B, S22.021A, S22.021B, S22.022A, S22.022B, S22.028A, S22.028B, S22.029A, S22.029B, S22.030A, S22.030B, S22.031A, S22.031B, S22.032A, S22.032B, S22.038A, S22.038B, S22.039A, S22.039B, S22.040A, S22.040B, S22.041A, S22.041B, S22.042A, S22.042B, S22.048A, S22.048B, S22.049A, S22.049B, S22.050A, S22.050B, S22.051A, S22.051B, S22.052A, S22.052B, S22.058A, S22.058B, S22.059A, S22.059B, S22.060A, S22.060B, S22.061A, S22.061B, S22.062A, S22.062B, S22.068A, S22.068B, S22.069A, S22.069B, S22.070A, S22.070B, S22.071A, S22.071B, S22.072A, S22.072B, S22.078A, S22.078B, S22.079A, S22.079B, S22.080A, S22.080B, S22.081A, S22.081B, S22.082A, S22.082B, S22.088A, S22.088B, S22.089A, S22.089B, S22.20XA, S22.20XB, S22.21XA, S22.21XB, S22.22XA, S22.22XB, S22.23XA, S22.23XB, S22.24XA, S22.24XB, S22.31XA, S22.31XB, S22.32XA, S22.32XB, S22.39XA, S22.39XB, S22.41XA, S22.41XB, S22.42XA, S22.42XB, S22.43XA, S22.43XB, S22.49XA, S22.49XB, S22.5XXA, S22.5XXB, S22.9XXA, S22.9XXB, S32.000A, S32.000B, S32.001A, S32.001B, S32.002A, S32.002B, S32.008A, S32.008B, S32.009A, S32.009B, S32.010A, S32.010B, S32.011A, S32.011B, S32.012A, S32.012B, S32.018A, S32.018B, S32.019A, S32.019B, S32.020A, S32.020B, S32.021A, S32.021B, S32.022A, S32.022B, S32.028A, S32.028B, S32.029A, S32.029B, S32.030A, S32.030B, S32.031A, S32.031B, S32.032A, S32.032B, S32.038A, S32.038B, S32.039A, S32.039B, S32.040A, S32.040B, S32.041A, S32.041B, S32.042A, S32.042B, S32.048A, S32.048B, S32.049A, S32.049B, S32.050A, S32.050B, S32.051A, S32.051B, S32.052A, S32.052B, S32.058A, S32.058B, S32.059A, S32.059B, S32.10XA, S32.10XB, S32.110A, S32.110B, S32.111A, S32.111B, S32.112A, S32.112B, S32.119A, S32.119B, S32.120A, S32.120B, S32.121A, S32.121B, S32.122A, S32.122B, S32.129A, S32.129B, S32.130A, S32.130B, S32.131A, S32.131B, S32.132A, S32.132B, S32.139A, S32.139B,

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AND

Patient encounter during the performance period (CPT or HCPCS): 99201, 99202, 99203, 99204, 99205, 99212, 99213, 99214, 99215, G0402

AND NOT

DENOMINATOR EXCLUSIONS:

Patients who utilize hospice services any time during the measurement period: G9768

OR

Patient had a bone mineral density test in the past two years OR received osteoporosis medication or therapy in the past 12 months: G9769

OR

Patients age 66 or older in Institutional Special Needs Plans (SNP) or residing in long-term care with POS code, 32, 33, 34, 54, or 56 for more than 90 days during the measurement period: G9938

OR

Patients 66 years of age and older with at least one claim/encounter for frailty during the measurement period AND a dispensed medication for dementia during the measurement period or the year prior to the measurement period: G2127

OR

Patients 66 years of age and older with at least one claim/encounter for frailty during the measurement period AND either one acute inpatient encounter with a diagnosis of advanced illness or two outpatient, observation, ED or nonacute inpatient encounters on different dates of service with an advanced illness diagnosis during the measurement period or the year prior to the measurement period: G2126

Table: Dementia Exclusion Medications

Description	Prescription
Cholinesterase inhibitors	Donepezil Galantamine Rivastigmine
Miscellaneous central nervous system agents	Memantine

OR

Option 2 - Denominator Criteria (Eligible Cases):

Patients aged 50-85 years on date of encounter

AND

Diagnosis for any fracture except fractures of the finger, toe, face or skull (ICD-10-CM): M48.40XA, M48.41XA, M48.42XA, M48.43XA, M48.44XA, M48.45XA, M48.46XA, M48.47XA, M48.48XA, M80.00XA, M80.011A, M80.012A, M80.019A, M80.021A, M80.022A, M80.029A, M80.031A, M80.032A, M80.039A,

M80.041A, M80.042A, M80.049A, M80.051A, M80.052A, M80.059A, M80.061A, M80.062A, M80.069A,
M80.071A, M80.072A, M80.079A, M80.08XA, M80.80XA, M80.811A, M80.812A, M80.819A, M80.821A,
M80.822A, M80.829A, M80.831A, M80.832A, M80.839A, M80.841A, M80.842A, M80.849A, M80.851A,
M80.852A, M80.859A, M80.861A, M80.862A, M80.869A, M80.871A, M80.872A, M80.879A, M80.88XA,
M84.311A, M84.312A, M84.319A, M84.321A, M84.322A, M84.329A, M84.331A, M84.332A, M84.333A,
M84.334A, M84.339A, M84.341A, M84.342A, M84.343A, M84.350A, M84.351A, M84.352A, M84.353A,
M84.359A, M84.361A, M84.362A, M84.363A, M84.364A, M84.369A, M84.371A, M84.372A, M84.373A,
M84.374A, M84.375A, M84.376A, M84.38XA, M84.750A, M84.751A, M84.752A, M84.753A, M84.754A,
M84.755A, M84.756A, M84.757A, M84.759A, M97.01XA, M97.02XA, M97.11XA, M97.12XA, M97.21XA,
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S89.139A, S89.141A, S89.142A, S89.149A, S89.191A, S89.192A, S89.199A, S89.201A, S89.202A, S89.209A, S89.211A, S89.212A, S89.219A, S89.221A, S89.222A, S89.229A, S89.291A, S89.292A, S89.299A, S89.301A, S89.302A, S89.309A, S89.311A, S89.312A, S89.319A, S89.321A, S89.322A, S89.329A, S89.391A, S89.392A, S89.399A, S92.001A, S92.001B, S92.002A, S92.002B, S92.009A, S92.009B, S92.011A, S92.011B, S92.012A, S92.012B, S92.013A, S92.013B, S92.014A, S92.014B, S92.015A, S92.015B, S92.016A, S92.016B, S92.021A, S92.021B, S92.022A, S92.022B, S92.023A, S92.023B, S92.024A, S92.024B, S92.025A, S92.025B, S92.026A, S92.026B, S92.031A, S92.031B, S92.032A, S92.032B, S92.033A, S92.033B, S92.034A, S92.034B, S92.035A, S92.035B, S92.036A, S92.036B, S92.041A, S92.041B, S92.042A, S92.042B, S92.043A, S92.043B, S92.044A, S92.044B, S92.045A, S92.045B, S92.046A, S92.046B, S92.051A, S92.051B, S92.052A, S92.052B, S92.053A, S92.053B, S92.054A, S92.054B, S92.055A, S92.055B, S92.056A, S92.056B, S92.061A, S92.061B, S92.062A, S92.062B, S92.063A, S92.063B, S92.064A, S92.064B, S92.065A, S92.065B, S92.066A, S92.066B, S92.101A, S92.101B, S92.102A, S92.102B, S92.109A, S92.109B, S92.111A, S92.111B, S92.112A, S92.112B, S92.113A, S92.113B, S92.114A, S92.114B, S92.115A, S92.115B, S92.116A, S92.116B, S92.121A, S92.121B, S92.122A, S92.122B, S92.123A, S92.123B, S92.124A, S92.124B, S92.125A, S92.125B, S92.126A, S92.126B, S92.131A, S92.131B, S92.132A, S92.132B, S92.133A, S92.133B, S92.134A, S92.134B, S92.135A, S92.135B, S92.136A, S92.136B, S92.141A, S92.141B, S92.142A, S92.142B, S92.143A, S92.143B, S92.144A, S92.144B, S92.145A, S92.145B, S92.146A, S92.146B, S92.151A, S92.151B, S92.152A, S92.152B, S92.153A, S92.153B, S92.154A, S92.154B, S92.155A, S92.155B, S92.156A, S92.156B, S92.191A, S92.191B, S92.192A, S92.192B, S92.199A, S92.199B, S92.201A, S92.201B, S92.202A, S92.202B, S92.209A, S92.209B, S92.211A, S92.211B, S92.212A, S92.212B, S92.213A, S92.213B, S92.214A, S92.214B, S92.215A, S92.215B, S92.216A, S92.216B, S92.221A, S92.221B, S92.222A, S92.222B, S92.223A, S92.223B, S92.224A, S92.224B, S92.225A, S92.225B, S92.226A, S92.226B, S92.231A, S92.231B, S92.232A, S92.232B, S92.233A, S92.233B, S92.234A, S92.234B, S92.235A, S92.235B, S92.236A, S92.236B, S92.241A, S92.241B, S92.242A, S92.242B, S92.243A, S92.243B, S92.244A, S92.244B, S92.245A, S92.245B, S92.246A, S92.246B, S92.251A, S92.251B, S92.252A, S92.252B, S92.253A, S92.253B, S92.254A, S92.254B, S92.255A, S92.255B, S92.256A, S92.256B, S92.301A, S92.301B, S92.302A, S92.302B, S92.309A, S92.309B, S92.311A, S92.311B, S92.312A, S92.312B, S92.313A, S92.313B, S92.314A, S92.314B, S92.315A, S92.315B, S92.316A, S92.316B, S92.321A, S92.321B, S92.322A, S92.322B, S92.323A, S92.323B, S92.324A, S92.324B, S92.325A, S92.325B, S92.326A, S92.326B, S92.331A, S92.331B, S92.332A, S92.332B, S92.333A, S92.333B, S92.334A, S92.334B, S92.335A, S92.335B, S92.336A, S92.336B, S92.341A, S92.341B, S92.342A, S92.342B, S92.343A, S92.343B, S92.344A, S92.344B, S92.345A, S92.345B, S92.346A, S92.346B, S92.351A, S92.351B, S92.352A, S92.352B, S92.353A, S92.353B, S92.354A, S92.354B, S92.355A, S92.355B, S92.356A, S92.356B, S92.811A, S92.811B, S92.812A, S92.812B, S92.819A, S92.819B, S92.901A, S92.901B, S92.902A, S92.902B, S92.909A, S92.909B, S99.001A, S99.001B, S99.002A, S99.002B, S99.009A, S99.009B, S99.011A, S99.011B, S99.012A, S99.012B, S99.019A, S99.019B, S99.021A, S99.021B, S99.022A, S99.022B, S99.029A, S99.029B, S99.031A, S99.031B, S99.032A, S99.032B, S99.039A, S99.039B, S99.041A, S99.041B, S99.042A, S99.042B, S99.049A, S99.049B, S99.091A, S99.091B, S99.092A, S99.092B, S99.099A, S99.099B, S99.101A, S99.101B, S99.102A, S99.102B, S99.109A, S99.109B, S99.111A, S99.111B, S99.112A, S99.112B, S99.119A, S99.119B, S99.121A, S99.121B, S99.122A, S99.122B, S99.129A, S99.129B, S99.131A, S99.131B, S99.132A, S99.132B, S99.139A, S99.139B, S99.141A, S99.141B, S99.142A, S99.142B, S99.149A, S99.149B, S99.191A, S99.191B, S99.192A, S99.192B, S99.199A, S99.199B

AND

Patient procedure during the performance period (CPT): 22310, 22315, 22318, 22319, 22325, 22326, 22327, 22510, 22511, 22513, 22514, 25600, 25605, 25606, 25607, 25608, 25609, 27230, 27232, 27235, 27236, 27238, 27240, 27244, 27245, 27246, 27248

AND NOT

DENOMINATOR EXCLUSIONS:

Patients who utilize hospice services any time during the measurement period: G9768

OR

Patient had a bone mineral density test in the past two years OR received osteoporosis medication or therapy in the past 12 months: G9769

OR

Patients aged 66 or older in Institutional Special Needs Plans (SNP) or residing in long-term care

with POS code 32, 33, 34, 54, or 56 for more than 90 days during the measurement period: G9938

OR

Patients 66 years of age and older with at least one claim/encounter for frailty during the measurement period AND a dispensed medication for dementia during the measurement period or the year prior to the measurement period: G2127

OR

Patients 66 years of age and older with at least one claim/encounter for frailty during the measurement period AND either one acute inpatient encounter with a diagnosis of advanced illness or two outpatient, observation, ED or nonacute inpatient encounters on different dates of service with an advanced illness diagnosis during the measurement period or the year prior to the measurement period: G2126

Table: Dementia Exclusion Medications

Description		Prescription
Cholinesterase inhibitors	Donepezil	Rivastigimine
	Galantamine	
Miscellaneous central nervous system agents	Memantine	

NUMERATOR:

Patients who received either a bone mineral density test or a prescription for a drug to treat osteoporosis in the six months after the fracture

Definitions:

Pharmacologic Therapy – U.S. Food and Drug Administration approved pharmacologic options for osteoporosis prevention and/or treatment of postmenopausal osteoporosis include: bisphosphonates, alendronate, alendronate-cholecalciferol, ibandronate, risedronate, zoledronic acid, calcitonin, teriparatide, denosumab, and raloxifene.

Prescribed – May include prescription given to the patient for treatment of osteoporosis (as listed above) at one or more encounters during the performance period, or documentation that patient is already taking pharmacologic therapy for osteoporosis, as documented in the current medical list.

Bone Mineral Density (BMD)- A bone density test is an examination by either special x-rays or ultrasound to determine how much bone mineral content (calcium and other minerals) is present in any section of bone.

NUMERATOR NOTE: While the Central Dual Energy X-Ray Absorptiometry (DXA) is the most common measurement for measuring bone mineral density (BMD), for the purposes of submitting this measure, spinal densitometry X-ray, ultrasonography for densitometry, CT bone density axial and Peripheral Dual-energy X-Ray Absorptiometry (DXA) would meet performance and the intent of the measure and 3095F would be submitted.

Numerator Options:

Performance Met:

Central Dual-energy X-Ray Absorptiometry (DXA) results documented (3095F)

OR

Performance Met:

Pharmacologic therapy (other than minerals/vitamins) for osteoporosis prescribed (G8633)

OR

Performance Not Met:

Central Dual energy X-ray absorptiometry (DXA) measurement was not performed, reason not otherwise specified (3095F **with** 8P)

OR

Performance Not Met:

Pharmacologic therapy for osteoporosis was not

prescribed, reason not given (G8635)

RATIONALE:

The intent of this measure is secondary prevention of fractures through the appropriate diagnosis and treatment of osteoporosis. Detecting osteoporosis and initiating treatment will help to prevent future fractures from occurring.

Future fractures, especially in the older population, can cause significant health issues, decline in function, and, in some cases lead to mortality.

CLINICAL RECOMMENDATION STATEMENTS:

Appropriate follow-up care for a fracture in post-menopausal women includes either 1) bone mineral density testing to assess whether a patient has osteoporosis or 2) receiving pharmacologic therapy to treat osteoporosis. This measure is based on guidelines and evidence that patients at high risk of fracture, including patients with a history of fragility fractures, should be screened for osteoporosis (USPSTF 2012, Nelson 2010, AACE 2010) and that patients who have a fragility fracture of the hip or spine should be provided with a treatment for osteoporosis (AACE 2010, Crandall 2012).

"The USPSTF recommends screening for osteoporosis in women aged 65 years or older and in younger women whose fracture risk is equal to or greater than that of a 65-year-old white woman who has no additional risk factors." (USPSTF 2011).

All postmenopausal women with a history of fracture without major trauma should receive a bone mineral density test to test for osteoporosis (AACE 2010). Patients who have a history of fracture of the hip or spine also need pharmacologic therapy to treat for osteoporosis. (AACE 2010; NOF 2014).

American Association of Clinical Endocrinologists (AACE). Medical Guidelines for Clinical Practice for the Diagnosis and Treatment of Postmenopausal Osteoporosis, 2010 Dec. Guideline available from [Link to Medical Guidelines for Clinical Practice for the Diagnosis and Treatment of Postmenopausal Osteoporosis](#), accessed April 25, 2014.

National Osteoporosis Foundation. Clinician's Guide to Prevention and Treatment of Osteoporosis. Washington, DC: National Osteoporosis Foundation; 2014. Accessed at: [Link to Clinician's Guide to Prevention and Treatment of Osteoporosis](#)

Preventive Services Task Force (USPSTF). Recommendations and Rationale: Screening for Osteoporosis in Postmenopausal Women. January 2011. Accessed at: [Link to Recommendations and Rationale: Screening for Osteoporosis in Postmenopausal Women](#)

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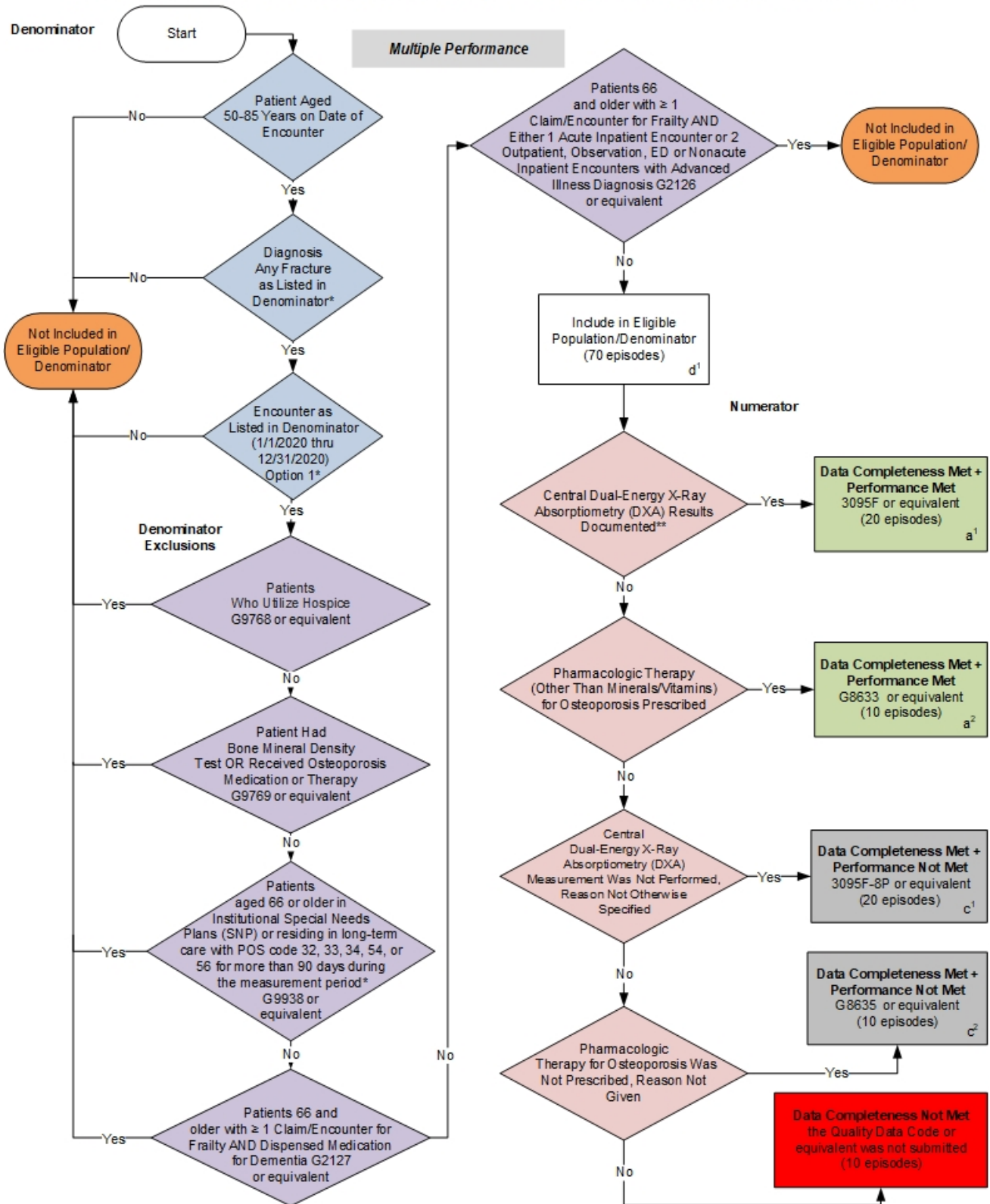
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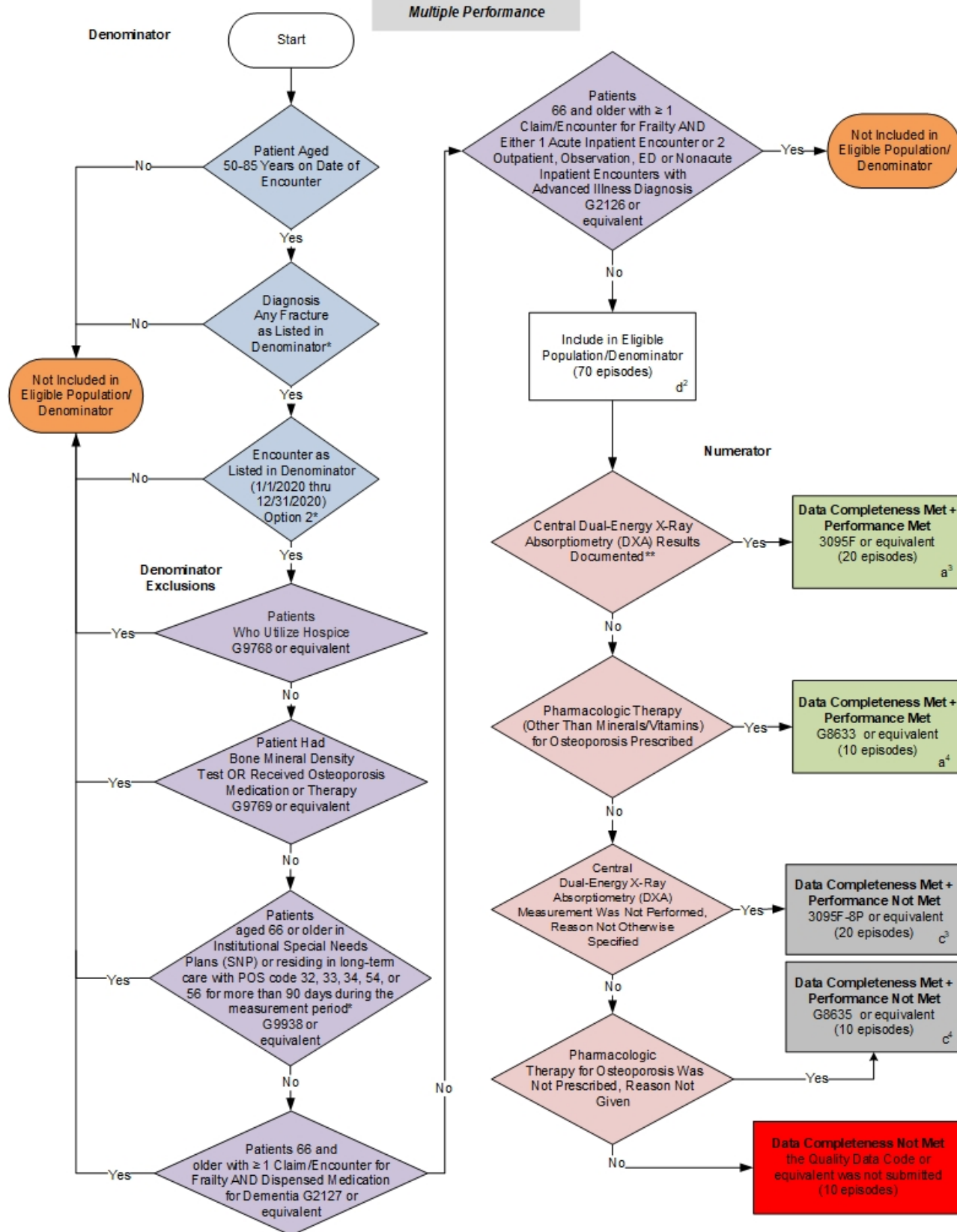
2020 Clinical Quality Measure Flow for Quality ID #418: NQF #0053: Osteoporosis Management in Women Who Had a Fracture: Option 1

Disclaimer: Refer to the measure specification for specific coding and instructions to submit this measure.



Option 2

Multiple Performance



SAMPLE CALCULATIONS:

Data Completeness=

$$\frac{\text{Performance Met (a}^1+\text{a}^2+\text{a}^3+\text{a}^4=60 \text{ episodes)} + \text{Performance Not Met (c}^1+\text{c}^2+\text{c}^3+\text{c}^4=60 \text{ episodes)}}{\text{Eligible Population / Denominator (d}^1+\text{d}^2=140 \text{ episodes)}} = \frac{120 \text{ episodes}}{140 \text{ episodes}} = 85.71\%$$

Performance Rate=

$$\frac{\text{Performance Met (a}^1+\text{a}^2+\text{a}^3+\text{a}^4=60 \text{ episodes)}}{\text{Data Completeness Numerator (120 episodes)}} = \frac{60 \text{ episodes}}{120 \text{ episodes}} = 50.00\%$$

* See the posted measure specification for specific coding and instructions to submit this measure.

**While the Central Dual Energy X-Ray Absorptiometry (DXA) is the most common measurement for measuring bone mineral density (BMD), for the purposes of submitting this measure, spinal densitometry X-ray, ultrasonography for densitometry, CT bone density axial and Peripheral Dual-energy X-Ray Absorptiometry (DXA) would meet performance and the intent of the measure and 3095F would be submitted.

This measure contains 2 Submission Criteria, although as the Sample Calculation indicates, there is **ONLY** one data completeness and one performance rate for this measure.

NOTE : Submission Frequency: Episode

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The measure diagrams were developed by CMS as a supplemental resource to be used in conjunction with the measure specifications. They should not be used alone or as a substitution for the measure specification.

v4

**2020 Clinical Quality Measure Flow Narrative for Quality ID #418 NQF #0053:
Osteoporosis Management in Women Who Had a Fracture**

Disclaimer: Refer to the measure specification for specific coding and instructions to submit this measure.

Option 1:

1. Start with Denominator
2. Check Patient Age:
 - a. If Patient Aged 50 to 85 Years on Date of Encounter equals No during the measurement period, do not include in Eligible Population. Stop Processing.
 - b. If Patient Aged 50 to 85 Years on Date of Encounter equals Yes during the measurement period, proceed to check Patient Diagnosis.
3. Check Patient Diagnosis:
 - a. If Diagnosis of Any Fracture as Listed in the Denominator equals No, do not include in Eligible Population. Stop Processing.
 - b. If Diagnosis of Any Fracture as Listed in the Denominator equals Yes, proceed to check Encounter Performed.
4. Check Encounter Performed:
 - a. If Encounter as Listed in the Denominator Option 1 equals No, do not include in Eligible Population. Stop Processing.
 - b. If Encounter as Listed in the Denominator Option 1 equals Yes, proceed to check Patients Who Utilize Hospice Services Any Time During the Measurement Period.
5. Check Patients Who Utilize Hospice Services Any Time During the Measurement Period:
 - a. If Patients Who Utilize Hospice Services Any Time During the Measurement Period equals No, proceed to check Patient Had a Bone Mineral Density Test in the Past Two Years OR Received Osteoporosis Medication or Therapy in the Past 12 Months.
 - b. If Patients Who Utilize Hospice Services Any Time During the Measurement Period equals Yes, do not include in Eligible Population. Stop Processing.
6. Check Patient Had a Bone Mineral Density Test in the Past Two Years OR Received Osteoporosis Medication or Therapy in the Past 12 Months:
 - a. If Patient Had a Bone Mineral Density Test in the Past Two Years OR Received Osteoporosis Medication or Therapy in the Past 12 Months equals No, proceed to check Patient Age 66 or Older in Institutional Special Needs Plans (SNP) or Residing in Long-Term Care with POS code 32, 33, 34, 54, or 56 for more than 90 days during the measurement period.
 - b. If Patient Had a Bone Mineral Density Test in the Past Two Years OR Received Osteoporosis Medication or Therapy in the Past 12 Months equals Yes, do not include in Eligible Population. Stop Processing.

Check Patients Aged 66 or Older in Institutional Special Needs Plans (SNP) or Residing in Long-Term Care with POS code 32, 33, 34, 54, or 56 for more than 90 days during the measurement period. If Patients Aged 66 or Older in Institutional Special Needs Plans (SNP) or Residing in Long-Term Care with POS code 32, 33, 34, 54, or 56 for more than 90 days during the measurement period equals No, proceed to check Patient 66 years of age and older with one or more Claim/Encounter for Frailty AND Dispensed Medication for Dementia.

- c. If Patients Aged 66 or Older in Institutional Special Needs Plans (SNP) or Residing in Long-Term Care with POS code 32, 33, 34, 54, or 56 for more than 90 days during the measurement period equals Yes, do not include in Eligible Population. Stop Processing.
7. Check Patients 66 years of age and older with one or more Claim/Encounter for Frailty AND Dispensed Medication for Dementia:
 - a. If Patients 66 years of age and older with one or more Claim/Encounter for Frailty AND Dispensed Medication for Dementia equals No, proceed to check Patients 66 years of age and older with one or more Claim/Encounter for Frailty AND Either 1 Acute Inpatient Encounter or 2 Outpatient, Observation, ED or Nonacute Inpatient Encounters with Advanced Illness Diagnosis.
 - b. If Patients 66 years of age and older with one or more Claim/Encounter for Frailty AND Dispensed Medication for Dementia equals Yes, do not include in Eligible Population. Stop Processing.
8. Check Patients 66 years of age and older with one or more Claim/Encounter for Frailty AND Either 1 Acute Inpatient Encounter or 2 Outpatient, Observation, ED or Nonacute Inpatient Encounters with Advanced Illness Diagnosis
 - a. If Patients 66 years of age and older with one or more Claim/Encounter for Frailty AND Either 1 Acute Inpatient Encounter or 2 Outpatient, Observation, ED or Nonacute Inpatient Encounters with Advanced Illness Diagnosis equals No, include in Eligible Population.
 - b. If Patients 66 years of age and older with one or more Claim/Encounter for Frailty AND Either 1 Acute Inpatient Encounter or 2 Outpatient, Observation, ED or Nonacute Inpatient Encounters with Advanced Illness Diagnosis equals Yes, do not include in Eligible Population. Stop Processing.
9. Denominator Population:
 - a. Denominator Population is all Eligible Episodes in the Denominator. Denominator is represented as Denominator in the Sample Calculation listed at the end of this document. Letter d¹ equals 70 episodes in the Sample Calculation.
10. Start Numerator
11. Check Central Dual-Energy X-Ray Absorptiometry (DXA) Results Documented**:
 - a. If Central Dual-Energy X-Ray Absorptiometry (DXA) Results Documented** equals Yes, include in Data Completeness Met and Performance Met.
 - b. Data Completeness Met and Performance Met letter is represented as Data Completeness and Performance Rate in the Sample Calculation listed at the end of this document. Letter a¹ equals 20 episodes in the Sample Calculation.
 - c. If Central Dual-Energy X-Ray Absorptiometry (DXA) Results Documented** equals No, proceed to check Pharmacological Therapy (Other Than Minerals/Vitamins) for Osteoporosis Prescribed.
12. Check Pharmacological Therapy for Osteoporosis (Other Than Minerals/Vitamins) Prescribed:

- a. If Pharmacological Therapy for Osteoporosis (Other Than Minerals/Vitamins) Prescribed equals Yes, include in Data Completeness Met and Performance Met.
 - b. Data Completeness Met and Performance Met letter is represented as Data Completeness in the Sample Calculation listed at the end of this document. Letter a² equals 10 episodes in Sample Calculation.
 - c. If Pharmacological Therapy for Osteoporosis (Other Than Minerals/Vitamins) Prescribed equals No, proceed to check Central Dual-Energy X-Ray Absorptiometry (DXA) Measurement Was Not Performed, Reason Not Otherwise Specified.
13. Check Central Dual-energy X-Ray Absorptiometry (DXA) Measurement Was Not Performed, Reason Not Otherwise Specified:
- a. If Central Dual-energy X-Ray Absorptiometry (DXA) Measurement Was Not Performed, Reason Not Otherwise Specified equals Yes, include in Data Completeness Met and Performance Not Met.
 - b. Data Completeness Met and Performance Not Met letter is represented as Data Completeness in the Sample Calculation listed at the end of this document. Letter c¹ equals 20 episodes in the Sample Calculation.
 - c. If Central Dual-energy X-Ray Absorptiometry (DXA) Measurement Was Not Performed, Reason Not Otherwise Specified equals No, proceed to check Pharmacologic Therapy for Osteoporosis Was Not Prescribed, Reason Not Given.
14. Check Pharmacologic Therapy for Osteoporosis Was Not Prescribed, Reason Not Given:
- a. If Pharmacologic Therapy for Osteoporosis Was Not Prescribed, Reason Not Given equals Yes, include in Data Completeness Met and Performance Not Met.
 - b. Data Completeness Met and Performance Not Met letter is represented as Data Completeness in the Sample Calculation listed at the end of this document. Letter c² equals 10 episodes in the Sample Calculation.
 - c. If Pharmacologic Therapy for Osteoporosis Was Not Prescribed, Reason Not Given equals No, proceed to check Data Completeness Not Met.
15. Check Data Completeness Not Met:
- a. If Data Completeness Not Met, the Quality Data Code or equivalent was not submitted. 10 episodes have been subtracted from the Data Completeness Numerator in the Sample Calculation.

Option 2:

1. Start with Denominator
2. Check Patient Age:
 - a. If the Patient Aged 50 to 85 Years on Date of Encounter equals No during the measurement period, do not include in Eligible Population. Stop Processing.
 - b. If the Patient Aged 50 to 85 Years on Date of Encounter equals Yes during the measurement period, proceed to check Patient Diagnosis.
3. Check Patient Diagnosis:
 - a. If Diagnosis of Any Fracture as Listed in the Denominator equals No, do not include in Eligible Population. Stop Processing.
 - b. If Diagnosis of Any Fracture as Listed in the Denominator equals Yes, proceed to check Procedure Performed.
4. Check Procedure Performed:
 - a. If Procedure as Listed in the Denominator Option 2 equals No, do not include in Eligible Population. Stop Processing.
 - b. If Procedure as Listed in the Denominator Option 2 equals Yes, proceed to check Patients Who Utilize Hospice Services Any Time During the Measurement Period.
5. Check Patients Who Utilize Hospice Services Any Time During the Measurement Period:
 - a. If Patients Who Utilize Hospice Services Any Time During the Measurement Period equals No, proceed to check Patient Had a Bone Mineral Density Test in the Past Two Years OR Received Osteoporosis Medication or Therapy in the Past 12 Months.
 - b. If Patients Who Utilize Hospice Services Any Time During the Measurement Period equals Yes, do not include in Eligible Population. Stop Processing.
6. Check Patient had a Bone Mineral Density Test in the Past Two Years OR Received Osteoporosis Medication or Therapy in the Past 12 Months:
 - a. If Patient had a Bone Mineral Density Test in the Past Two Years OR Received Osteoporosis Medication or Therapy in the Past 12 Months equals No, proceed to check Patient Age 66 or Older in Institutional Special Needs Plans (SNP) or Residing in Long-Term Care with POS code 32, 33, 34, 54, or 56 for more than 90 days During the Measurement Period.
 - b. If Patient had a Bone Mineral Density Test in the Past Two Years OR Received Osteoporosis Medication or Therapy in the Past 12 Months equals Yes, do not include in Eligible Population. Stop Processing.
7. Check Patients Aged 66 or Older in Institutional Special Needs Plans (SNP) or Residing in Long-Term Care with POS code 32, 33, 34, 54, or 56 for more than 90 days during the measurement period

- a. If Patients Aged 66 or Older in Institutional Special Needs Plans (SNP) or Residing in Long-Term Care with POS code 32, 33, 34, 54, or 56 for more than 90 days during the measurement period equals No, proceed to check Patients 66 years of age and older with one or more Claim/Encounter for Frailty AND Dispensed Medication for Dementia:
 - b. If Patients Aged 66 or Older in Institutional Special Needs Plans (SNP) or Residing in Long-Term Care with POS code 32, 33, 34, 54, or 56 for more than 90 days during the measurement period equals Yes, do not include in Eligible Population. Stop Processing.
8. Check Patients 66 years of age and older with one or more Claim/Encounter for Frailty AND Dispensed Medication for Dementia:
 - a. If Patients 66 years of age and older with one or more Claim/Encounter for Frailty AND Dispensed Medication for Dementia equals No, proceed to check Patients 66 years of age and older with one or more Claim/Encounter for Frailty AND Either 1 Acute Inpatient Encounter or 2 Outpatient, Observation, ED or Nonacute Inpatient Encounters with Advanced Illness Diagnosis.
 - b. If Patients 66 years of age and older with one or more Claim/Encounter for Frailty AND Dispensed Medication for Dementia equals Yes, do not include in Eligible Population. Stop Processing.
9. Check Patients 66 years of age and older with one or more Claim/Encounter for Frailty AND Either 1 Acute Inpatient Encounter or 2 Outpatient, Observation, ED or Nonacute Inpatient Encounters with Advanced Illness Diagnosis
 - a. If Patients 66 years of age and older with one or more Claim/Encounter for Frailty AND Either 1 Acute Inpatient Encounter or 2 Outpatient, Observation, ED or Nonacute Inpatient Encounters with Advanced Illness Diagnosis equals No, include in Eligible Population.
 - b. If Patients 66 years of age and older with one or more Claim/Encounter for Frailty AND Either 1 Acute Inpatient Encounter or 2 Outpatient, Observation, ED or Nonacute Inpatient Encounters with Advanced Illness Diagnosis equals Yes, do not include in Eligible Population. Stop Processing.
10. Denominator Population:
 - a. Denominator Population is all Eligible Episodes in the Denominator. Denominator is represented as Denominator in the Sample Calculation listed at the end of this document. Letter d² equals 70 episodes in the Sample Calculation.
11. Start Numerator
12. Check Central Dual-Energy X-Ray Absorptiometry (DXA) Results Documented:
 - a. If Central Dual-Energy X-Ray Absorptiometry (DXA) Results Documented** equals Yes, include in Data Completeness Met and Performance Met.
 - b. Data Completeness Met and Performance Met letter is represented as Data Completeness and Performance Rate in the Sample Calculation listed at the end of this document. Letter a³ equals 20 episodes in Sample Calculation.
 - c. If Central Dual-Energy X-Ray Absorptiometry (DXA) Results Documented** equals No, proceed to check Pharmacological Therapy (Other Than Minerals/Vitamins) for Osteoporosis Prescribed.
13. Check Pharmacological Therapy (Other Than Minerals/Vitamins) for Osteoporosis Prescribed:
 - a. If Pharmacological Therapy (Other Than Minerals/Vitamins) for Osteoporosis Prescribed equals Yes,

include in Data Completeness Met and Performance Met.

- b. Data Completeness Met and Performance Met letter is represented as Data Completeness and Performance Rate in the Sample Calculation listed at the end of this document. Letter a⁴ equals 10 episodes in the Sample Calculation.
 - c. If Pharmacological Therapy (Other Than Minerals/Vitamins) for Osteoporosis Prescribed equals No, proceed to check Central Dual-Energy X-Ray Absorptiometry (DXA) Measurement Was Not Performed, Reason Not Otherwise Specified.
14. Check Central Dual-Energy X-Ray Absorptiometry (DXA) Measurement Was Not Performed, Reason Not Otherwise Specified:
- a. If Central Dual-Energy X-Ray Absorptiometry (DXA) Measurement Was Not Performed, Reason Not Otherwise Specified equals Yes, include in Data Completeness Met and Performance Not Met.
 - b. Data Completeness Met and Performance Not Met letter is represented as Data Completeness in the Sample Calculation listed at the end of this document. Letter c³ equals 20 episodes in the Sample Calculation.
 - c. If Central Dual-Energy X-Ray Absorptiometry (DXA) Measurement Was Not Performed, Reason Not Otherwise Specified equals No, proceed to check Pharmacologic Therapy for Osteoporosis Was Not Prescribed, Reason Not Given.
15. Check Pharmacologic Therapy for Osteoporosis Was Not Prescribed, Reason Not Given:
- a. If Pharmacologic Therapy for Osteoporosis Was Not Prescribed, Reason Not Given equals Yes, include in Data Completeness Met and Performance Not Met.
 - b. Data Completeness Met and Performance Not Met letter is represented as Data Completeness in the Sample Calculation listed at the end of this document. Letter c⁴ equals 10 episodes in the Sample Calculation.
 - c. If Pharmacologic Therapy for Osteoporosis Was Not Prescribed, Reason Not Given equals No, proceed to check Data Completeness Not Met.
16. Check Data Completeness Not Met:
- a. If Data Completeness Not Met, the Quality Data Code or equivalent was not submitted. 10 episodes have been subtracted from the Data Completeness Numerator in Sample Calculation.

SAMPLE CALCULATIONS:

Data Completeness=

$$\frac{\text{Performance Met (a}^1+\text{a}^2+\text{a}^3+\text{a}^4=60 \text{ episodes)} + \text{Performance Not Met (c}^1+\text{c}^2+\text{c}^3+\text{c}^4=60 \text{ episodes)}}{\text{Eligible Population / Denominator (d}^1+\text{d}^2=140 \text{ episodes)}} = \frac{120 \text{ episodes}}{140 \text{ episodes}} = 85.71\%$$

Performance Rate=

$$\frac{\text{Performance Met (a}^1+\text{a}^2+\text{a}^3+\text{a}^4=60 \text{ episodes)}}{\text{Data Completeness Numerator (120 episodes)}} = \frac{60 \text{ episodes}}{120 \text{ episodes}} = 50.00\%$$