



Musculoskeletal: NQF-Endorsed® Maintenance Standards Under Review

Click the measure numbers to read more about the measure on QPS!

Measure Number	Title	Description	Measure Steward
0050	Osteoarthritis: Function and Pain Assessment	Type of score: Proportion Percentage of patient visits for patients aged 21 years and older with a diagnosis of osteoarthritis with assessment for function and pain	American Medical Association - Physician Consortium for Performance Improvement (AMA-PCPI)
0051	Osteoarthritis (OA): Assessment for use of anti-inflammatory or analgesic over-the-counter (OTC) medications	Type of score: Proportion Percentage of patient visits for patients aged 21 years and older with a diagnosis of OA with an assessment for use of anti-inflammatory or analgesic OTC medications	American Medical Association - Physician Consortium for Performance Improvement (AMA-PCPI)
0052	Use of Imaging Studies for Low Back Pain	The percentage of members with a primary diagnosis of low back pain who did not have an imaging study (plain x-ray, MRI, CT scan) within 28 days of the diagnosis. The measure is reported as an inverted rate [1 – (numerator/eligible population)]. A higher score indicates appropriate treatment of low back pain (i.e., the proportion for whom imaging studies did not occur).	National Committee for Quality Assurance
0054	Disease Modifying Anti-Rheumatic Drug Therapy for Rheumatoid Arthritis	The percentage of patients 18 years and older by the end of the measurement period, diagnosed with rheumatoid arthritis and who had at least one ambulatory prescription for a disease-modifying anti-rheumatic drug (DMARD).	National Committee for Quality Assurance

Measure Number	Title	Description	Measure Steward
0305	Back Pain: Surgical Timing	Percentage of patients at least 18 years of age and younger than 80 with a back pain episode of 28 days or more without documentation of red flags who had surgery within the first six weeks of back pain onset (overuse measure, lower performance is better). Note: This measure is applicable only for physicians who perform surgery.	National Committee for Quality Assurance
0306	Back Pain: Patient Reassessment	Percentage of patients at least 18 years of age and younger than 80 with back pain with documentation that the physician conducted reassessment of both of the following within four to six weeks of their initial back pain visit or of a surgical procedure date: 1) Pain AND 2) Functional status	National Committee for Quality Assurance
0309	Back Pain: Appropriate Use of Epidural Steroid Injections	Percentage of patients at least 18 years of age and younger than 80 with back pain who have received an epidural steroid injection in the absence of radicular pain AND those patients with radicular pain who received an epidural steroid injection without image guidance (i.e. overuse measure, lower performance is better).	National Committee for Quality Assurance
0310	Back Pain: Shared Decision Making	Percentage of patients at least 18 years of age and younger than 80 with back pain with whom a physician or other clinician reviewed the range of treatment options, including alternatives to surgery prior to surgery. To demonstrate shared decision making, there must be documentation in the patient record of a discussion between the physician and the patient that includes all of the following. 1) Treatment choices, including alternatives to surgery; 2) Risks and benefits; 3) Evidence of effectiveness Note: This measure is applicable only for physicians who perform surgery.	National Committee for Quality Assurance
0312	Back Pain: Repeat Imaging Studies	Percentage of patients at least 18 years of age and younger than 80 with a back pain episode of 28 days or more who received inappropriate repeat imaging studies in the absence of red flags or progressive symptoms (overuse measure, lower performance is better).	National Committee for Quality Assurance
0313	Back Pain: Advice Against Bed Rest	Percentage of patients at least 18 years of age and younger than 80 with a back pain episode of 28 days or more with medical record documentation that a physician advised them against bed rest lasting four days or longer.	National Committee for Quality Assurance

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0314	Back Pain: Advice for Normal Activities	Percentage of patients at least 18 years of age and younger than 80 with a back pain episode of 28 days or more with medical record documentation that a physician advised them to maintain or resume normal activities.	National Committee for Quality Assurance
0315	Back Pain: Appropriate Imaging for Acute Back Pain	Percentage of patients at least 18 years of age and younger than 80 with a diagnosis of back pain for whom the physician ordered imaging studies during the six weeks after pain onset, in the absence of “red flags” (overuse measure, lower performance is better).	National Committee for Quality Assurance
0316	Back Pain: Mental Health Assessment	The percentage of patients at least 18 years of age and younger than 80 with a diagnosis of back pain for whom documentation of a mental health assessment is present in the medical record prior to intervention or when pain lasts more than 6 weeks.	National Committee for Quality Assurance
0317	Back Pain: Recommendation for Exercise	Percentage of patients at least 18 years of age and younger than 80 with back pain lasting more than 12 weeks, with documentation of physician advice for supervised exercise.	National Committee for Quality Assurance
0319	Back Pain: Physical Exam	Percentage of patients at least 18 years of age and younger than 80 with a back pain episode of 28 days or more with documentation of a physical examination on the date of the initial visit with the physician.	National Committee for Quality Assurance
0322	Back Pain: Initial Visit	Percentage of patients at least 18 years of age and younger than 80 with a diagnosis of back pain who have medical record documentation of all of the following on the date of the initial visit to the physician: <ol style="list-style-type: none"> 1. Pain assessment 2. Functional status 3. Patient history, including notation of presence or absence of “red flags” 4. Assessment of prior treatment and response, and 5. Employment status 	National Committee for Quality Assurance

Measure Number	Title	Description	Measure Steward
0514	MRI Lumbar Spine for Low Back Pain	<p>This measure calculates the percentage of MRI of the Lumbar Spine studies with a diagnosis of low back pain on the imaging claim and for which the patient did not have prior claims-based evidence of antecedent conservative therapy.</p> <p>Antecedent conservative therapy may include (see subsequent details for codes):</p> <ol style="list-style-type: none"> 1) Claim(s) for physical therapy in the 60 days preceding the Lumbar Spine MRI 2) Claim(s) for chiropractic evaluation and manipulative treatment in the 60 days preceding the Lumbar Spine MRI 3) Claim(s) for evaluation and management in the period >28 days and <60 days preceding the Lumbar Spine MRI. <p>This measure looks at the percentage of MRI of the lumbar spine for low back pain performed in the outpatient setting where conservative therapy was not utilized prior to the MRI. Lumbar MRI is a common study to evaluate patients with suspected disease of the lumbar spine. The most common, appropriate, indications for this study are low back pain accompanied by a measurable neurological deficit in the lower extremity(s) unresponsive to conservative management. The use of this procedure for low back pain (excluding operative, acute injury or tumor patients) is not typically indicated unless the patient has received a period of conservative therapy and serious symptoms persist.</p> <p>In selecting ICD-10 codes for this measure in 2012, the goal is to convert this measure to a new code set, fully consistent with the intent of the original measure.</p>	Centers for Medicare & Medicaid Services
0589	Rheumatoid Arthritis New DMARD Baseline Serum Creatinine	This measure identifies adult patients with a diagnosis of rheumatoid arthritis who received appropriate baseline serum creatinine testing within 90 days before to 14 days after the new start of methotrexate, leflunomide, azathioprine, D-Penicillamine, intramuscular gold, cyclosporine, or cyclophosphamide during the measurement year.	Resolution Health, Inc.
0590	Rheumatoid Arthritis New DMARD Baseline Liver Function Test	This measure identifies adult patients with a diagnosis of rheumatoid arthritis who received appropriate baseline liver function testing (AST or ALT) within 90 days before to 14 days after the new start of sulfasalazine, methotrexate, leflunomide, azathioprine, cyclosporine or cyclophosphamide during the measurement year.	Resolution Health, Inc.
0591	Rheumatoid Arthritis New DMARD Baseline CBC	This measure identifies adult patients with a diagnosis of rheumatoid arthritis who received appropriate baseline complete blood count (CBC) testing within 90 days before to 14 days after the new start of sulfasalazine, methotrexate, leflunomide, azathioprine, D-Penicillamine, intramuscular gold, oral gold, cyclosporine, or cyclophosphamide during the measurement year.	Resolution Health, Inc.

Measure Number	Title	Description	Measure Steward
<u>0592</u>	Rheumatoid Arthritis Annual ESR or CRP	This measure identifies adult patients with a history of rheumatoid arthritis who have received erythrocyte sedimentation rate (ESR) or C-reactive protein (CRP) lab tests during the measurement year.	Resolution Health, Inc.
<u>0597</u>	Methotrexate: LFT within 12 weeks	This measure identifies adult patients with rheumatoid arthritis who were prescribed at least a 6-month supply of methotrexate during the measurement year and received a liver function test (LFT) in the 120 days (3 months + 1 month grace period) following the earliest observed methotrexate prescription claim.	Resolution Health, Inc.
<u>0598</u>	Methotrexate: CBC within 12 weeks	This measure identifies adult patients with rheumatoid arthritis who were prescribed at least a 6-month supply of methotrexate during the measurement year and received a CBC test within 120 days (3 months + 1 month grace period) following the earliest observed methotrexate prescription claim	Resolution Health, Inc.
<u>0599</u>	Methotrexate: Creatinine within 12 weeks	This measure identifies adult patients with rheumatoid arthritis who were prescribed at least a 6-month supply of methotrexate during the measurement year and received a serum creatinine test in the 120 days (3 months + 1 month grace period) after the earliest observed methotrexate prescription claim.	Resolution Health, Inc.
<u>0601</u>	New Rheumatoid Arthritis Baseline ESR or CRP within Three Months	This measure identifies adult patients newly diagnosed with rheumatoid arthritis during the first 8 months of the measurement year who received erythrocyte sedimentation rate (ESR) or C-reactive protein (CRP) lab tests either 4 months (3 months + 1-month grace period) before or after the initial diagnosis.	Resolution Health, Inc.
<u>0662</u>	Median Time to Pain Management for Long Bone Fracture	Median time from emergency department arrival to time of initial oral or parenteral pain medication administration for emergency department patients with a principal diagnosis of long bone fracture (LBF).	Centers for Medicare and Medicaid Services