



PQRI Flow Sheet: Osteoporosis (By Visit Code)

COMMUNICATION

MANAGEMENT

Patient Name

Practice Medical Record Number

Birth Date (mm/dd/yyyy)

Male / Female Gender

National Provider Identifier (NPI)

Date of Service

CPT Code for

Auditing

All orders must be documented and can include:

- Written Orders
- Verbal Orders
- Standing Orders

Eligibility

PQRI does not include Medicare managed care plans. The program is only applicable to traditional Medicare.

Patient Eligibility

1. Is the patient entitled to traditional Medicare?	YES	NO	If NO is circled for any question, STOP. Do not report quality data for osteoporosis measures.
2. Is the patient aged 50 years or older?	YES	NO	
3. Is the patient's diagnostic code included in the following list of CPT procedure codes: 733.12, 733.13, 733.14, 805.00, 805.01, 805.02, 805.03, 805.04, 805.05, 805.06, 805.07, 805.08, 805.10, 805.11, 805.12, 805.13, 805.14, 805.15, 805.16, 805.17, 805.18, 805.2, 805.4, 805.6, 805.8, 813.40, 813.41, 813.42, 813.44, 813.45, 813.50, 813.51, 813.52, 813.54, 820.00, 820.01, 820.02, 820.03, 820.09, 820.10, 820.11, 820.13, 820.20, 820.21, 820.22, 820.8, 820.9?	YES	NO	
4. Is the patient's visit code included in the following list: 99201, 99202, 99203, 99204, 99205, 99212, 99213, 99214, 99215, 99241, 99242, 99243, 99244, 99245?	YES	NO	

Osteoporosis : Communication with Managing Physician

If Yes, Report

1. Documentation of communication that a fracture occurred and that the patient was or should be tested or treated for osteoporosis	YES	NO	5015F
2. Post-fracture care NOT communicated for <u>medical reason</u>	YES	NO	5015F - 1P
<i>Document medical reason:</i>			
3. Post-fracture care NOT communicated for <u>patient reason</u>	YES	NO	5015F - 2P
<i>Document patient reason:</i>			
4. Post-fracture care NOT communicated, no reason specified	YES	NO	5015F - 8P

Communication may include: Documentation in the medical record indicating that the clinician treating the fracture communicated (e.g., verbally, by letter, DXA report was sent) with the clinician managing the patient's on-going care OR a copy of a letter in the medical record outlining whether the patient was or should be treated for osteoporosis.

Osteoporosis : Management Following Fracture

If Yes, Report

1. Central Dual-energy X-Ray Absorptiometry (DXA) ordered	YES	NO	3096F
2. Pharmacologic therapy (other than minerals/vitamins) for osteoporosis prescribed	YES	NO	4005F
3. Central DXA NOT ordered or pharmacologic therapy NOT prescribed for <u>medical reason</u> .	YES	NO	4005F - 1P
<i>Document medical reason:</i>			
4. Central DXA NOT ordered or pharmacologic therapy NOT prescribed for <u>patient reason</u>	YES	NO	4005F - 2P
<i>Document patient reason:</i>			
5. Central DXA NOT ordered or pharmacologic therapy NOT prescribed for <u>system reason</u>	YES	NO	4005F - 3P
<i>Document system reason:</i>			
6. Central DXA NOT ordered or pharmacologic therapy NOT prescribed, no reason specified	YES	NO	4005F - 8P

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 hormone [PTH (1-34), teriparatide], and selective estrogen receptor modulators or SERMs (raloxifene).