

Use of High-Risk Medications in Older Adults eCQM CMS156v12

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Description

Percentage of patients 65 years of age and older who were ordered at least two high-risk medications from the same drug class. Three rates are reported.

1. Percentage of patients 65 years of age and older who were ordered at least two high-risk medications from the same drug class.
2. Percentage of patients 65 years of age and older who were ordered at least two high-risk medications from the same drug class, except for appropriate diagnoses.
3. Total rate (the sum of the two numerators divided by the denominator, deduplicating for patients in both numerators).

Guidance

The measure intends to assess if the patient has been ordered at least two high-risk medication prescriptions from the same drug class on different days.

The measure intends to assess if the reporting provider ordered the high-risk medication(s). If the patient had a high-risk medication previously prescribed by another provider, they would not be counted towards the numerator unless the reporting provider also ordered a high-risk medication from the same drug class for them.

Calculate the average daily dose for each prescription event. To calculate the average daily dose, multiply the number of pills prescribed by the dose of each pill and divide by the day's supply. For example, a prescription for a 30-day supply of digoxin containing 15 pills, 0.25 mg each pill, has an average daily dose of 0.125 mg. To calculate the average daily dose for elixirs and concentrates, multiply the volume prescribed by the daily dose and divide by the day's supply. Do not round when calculating the average daily dose.

This eCQM is a patient-based measure.

This version of the eCQM uses QDM version 5.6. Please refer to the eCQI resource center (<https://ecqi.healthit.gov/qdm>) for more information on the QDM.

Initial Population

Patients 65 years and older at the end of the measurement period who had a visit during the measurement period.

Date of birth information can be entered in DrChrono in the patient chart under the **Demographics** tab with the **Patient's Date of Birth**.

AND

A patient encounter during the performance period (**CPT or HCPCS**): 92002, 92004, 92012, 92014, 99201, 99202, 99203, 99204, 99205, 99212, 99213, 99214, 99215, 99341, 99342, 99343, 99344, 99345, 99347, 99348, 99349,

99350, G0438, G0439

CPT and HCPCS codes can be entered into the billing section for the encounter. Below is an example from the appointment window.

Appointment | **Billing** | Eligibility | Vitals | Growthcharts | Flags | Log Comm. | Revisions | Custom Data | MU Helper

Institutional Claim Patient SuperBill | Clinical Note | Billing Details | Other Forms

Billing Status

ICD Version

Patient Payment \$ Copay: \$20

Pre Authorization Approval

Referral #

Payment Profile

Billing Profile

Billing Pick List

Diagnosis Pick List

Credit Card Payment

HCFA Box 10 - Is patient's condition related to:

Employment

Auto Accident

Other Accident

Onset Date Type

Onset Date

Other Date Type

Other Date

Claim Billed: \$145.00 Adjustment: \$0.00 Insurer Paid: \$0.00 Patient Paid: \$0.00

ICD-10 Codes			CPT Codes		
#	Code	Description	Code	Description	Price (\$)
			1 99213	OFFICE O/P EST LOW 20-29 MIN	145.00
ICD-9 Codes to Convert			HCPCS Codes		
#	Code	Description	Code	Description	Price (\$)
			1 G0438	Ppps initial visit	0.00

Denominator 1

Equals initial population.

Denominator 1 Exclusions

Exclude patients who are in hospice care for any part of the measurement period.

Exclude patients receiving palliative care for any part of the measurement period

Denominator 1 Exceptions

None

Numerator 1

Patients with at least two orders of high-risk medications from the same drug class on different days. a. At least two orders of high-risk medications from the same drug class.

b. At least two orders of high-risk medications from the same drug class with summed days supply greater than 90 days.

c. At least two orders of high-risk medications from the same drug class each exceeding average daily dose criteria

Numerator 1 Exclusions

None

Denominator 2

Equal initial population

Denominator 2 Exclusions

Exclude patients who are in hospice care for any part of the measurement period.

Exclude patients receiving palliative care for any part of the measurement period

Denominator 2 Exceptions

None

Numerator 2

Patients with at least two orders of high-risk medications from the same drug class (i.e., antipsychotics and benzodiazepines) on different days except for appropriate diagnoses.

a. Patients with two or more antipsychotic prescriptions ordered on different days, and who did not have a diagnosis of schizophrenia, schizoaffective disorder, or bipolar disorder on or between January 1 of the year prior to the measurement period and the IPSD for antipsychotics.

b. Patients with two or more benzodiazepine prescriptions ordered on different days, and who did not have a diagnosis of seizure disorders, rapid eye movement sleep behavior disorder, benzodiazepine withdrawal, ethanol withdrawal, or severe generalized anxiety disorder on or between January 1 of the year prior to the measurement period and the IPSD for benzodiazepines. Total rate (the sum of the two previous numerators, deduplicated). Total rate (the sum of the two previous numerators, deduplicated).

Numerator 2 Exclusions

Not applicable

Denominator 3

Equals initial population

Denominator 3 Exclusions

Exclude patients who are in hospice care for any part of the measurement period.

Exclude patients receiving palliative care for any part of the measurement period

Denominator 3 Exceptions

None

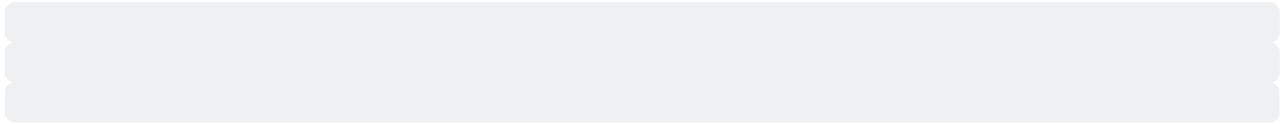
Numerator 3

Total rate (the sum of the two previous numerators, deduplicating for patients in both numerators)

Numerator 3 Exclusions

None

Measure Information



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