



**MHSPHP**

Military Health System Population Health Portal



# MHSPHP Metrics Forum

Use of Imaging in Low Back Pain

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# Please check your profile email

- Please check your profile settings for a correct email address. I send out one email per month regarding the metrics webinars and will send a blaster if the portal is expected to down for an extended period of time.
- From CarePoint welcome page, click on Welcome in upper LEFT, then profile/settings
- Select User Profile

Welcome, Judith Rosen

Judith Rosen  
Profile / Settings  
Applications  
Log Out

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User Profile Context Settings

Civilian

Civilian Judith Rosen  
Last Login: 1/7/2015 6:38:10 PM Account Creation: 3/27/2013 4:46:56 PM

Your Profile

Name (Non-Editable)	Service	Rank
Judith Rosen		Civilian

MTF

59 MDW-359 MDG-JBSA-RANDOLPH

Your Contact Information

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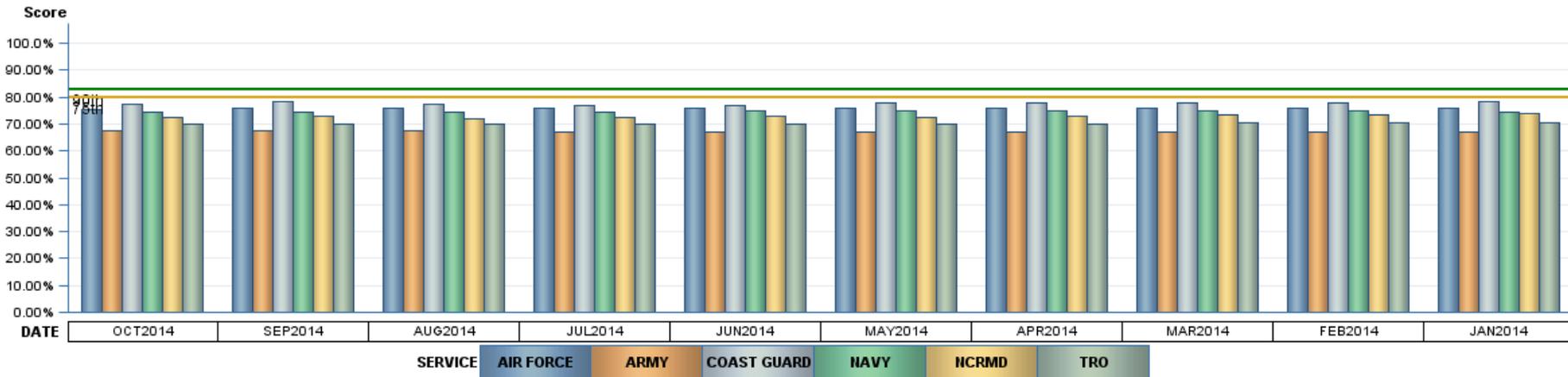
- Methodology of the metric
  - Numerator
  - Denominator population
  - Metric exclusions
- FAQs
- Understanding the Prevalence Report



# Use of Imaging in Low Back Pain

Use of Imaging Studies for Low Back Pain

Applied filters: None



- HEDIS benchmarks are not releasable outside of DoD
- Will not post 2015 benchmarks on slides
- LBP benchmarks increased slightly:
  - 75<sup>th</sup> percentile increased 0.12%
  - 90<sup>th</sup> percentile increased 0.33%

- The percentage of members with a primary diagnosis of acute low back pain who did not have an imaging study (plain X-ray, MRI, CT scan) within 28 days of the diagnosis.
- Emphasis on the “did NOT have imaging”
- A higher score indicates appropriate treatment of low back pain (i.e., the proportion for whom imaging studies did not occur)

- Denominator:
- Patients who had a new primary diagnosis of LBP in an outpatient or emergency room encounter in the first ~11 months of the measurement year
- New diagnosis of LBP definition: exclude any patients who had any diagnosis of LBP in the six months preceding the encounter with the LBP primary diagnosis

# Codes to Identify Denominator Patients

- ICD9 Codes to identify LBP in ER or outpatient encounters

## ICD-9-CM Diagnosis

721.3, 722.10, 722.32, 722.52, 722.93, 724.02, 724.03, 724.2, 724.3, 724.5, 724.6, 724.7, 738.5, 739.3, 739.4, 846, 847.2



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# Continuous Enrollment Criteria

- Patients must be continuously enrolled for 180 days prior to the new primary LBP diagnosis through 28 days after
  - Allows for review of pre-existing LBP diagnosis
  - Allows for capture of testing in 28 days following the primary diagnosis

# Denominator Exclusions for appropriate imaging

- Patients with these diagnoses are excluded from the denominator : Imaging is appropriate for these patients
  - Any diagnosis of cancer at any point in their data history
  - Trauma, IV drug abuse or Neurologic impairment coded in the last 12 months

Description	ICD-9-CM Diagnosis
Cancer	140-209, 230-239, V10
Trauma	800-839, 850-854, 860-869, 905-909, 926.11, 926.12, 929, 952, 958-959
IV drug abuse	304.0-304.2, 304.4, 305.4-305.7
Neurologic impairment	344.60, 729.2



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FAQ: What about the patient who has a long history of LBP, but wasn't seen in last 6 months?

- Asked so often, I sent it to NCQA!
- Answer: If they have do not have one of the exclusion diagnoses, treat it like a new episode of back pain with no imaging for 4 weeks.
- Bottom line, they will count against the metric if they get imaged. But, you don't provide care for metrics, you care for patients. Review the CPG and do what is clinically appropriate.

- Identify patients who had imaging study in the initial 28 days after their primary LBP diagnosis and remove them from the eligible numerator population
- Remaining patients didn't have imaging study and are the numerator patients (appropriate therapy)
- CPT Codes to identify imaging studies:

Description	CPT
Imaging studies	72010, 72020, 72052, 72100, 72110, 72114, 72120, 72131-72133, 72141, 72142, 72146-72149, 72156, 72158, 72200, 72202, 72220



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## FAQ: What about chiropractors who always get x-rays?

- Also sent this to NCQA
- They responded with a link to standard of care recommendations for chiropractic care that support no imaging for 4 weeks for patients without neurologic impairment
- <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC2051318/pdf/aco112-041a.pdf>



- Acute LBP: Pt had at least 2 visits in last 12 months for LBP
- Chronic LBP: Pt had at least 2 visits at least 42 days apart in last 12 months for LBP
- Low Back Pain Imaging: Patients who meet the criteria for this metric
  - Lists imaging study completed: X-Ray, MRI, CT
  - Identifies system as direct or purchased (“Network”)

- All patients who met the LBP denominator criteria in the last year who are currently enrolled to your DMIS
- Date for each type of imaging completed on the patients and the date of initial LBP diagnosis
- Diagnosing location
- If imaging done and the data is available, the ordering provider and location is listed
- Patients who meet exclusion criteria are not on the lists

- Research the patients who had imaging studies
  - Identify learning opportunities from patients researched
  - Provide provider education on the DoD/VA CPG for those who order the tests
  - Contact similar sites on the top performers lists for information on their successful processes

# How to find patients who negatively impacted the metric

CarePoint My Apps  Welcome, ROSEN.JUDITH.I  Help ? Context S

Home Overview [Patient Management] Administration Reporting Methodology Documents

Patient Management > [Low Back Pain Imaging](#)

**Filters** My Filters

Name:

Description:

Publish:  Private Search?  Set As Default?

	Name	Description	Publish Options	Default?	Date Modified	
<a href="#">Load</a>	<a href="#">Run</a> Patients with Testing	These are your current enrolled patients that negatively impact the LBP metric for the DMIS location they were enrolled to at the time of the LBP diagnosis. These are patients with an Xray, MRI or CT in the 28 days following a new dx of LBP. CPG recommends no testing in the first 28 days.	Public	<input type="checkbox"/>	12/5/2014	<a href="#">Delete</a>

- In My Filters there is a Public filter available for you to RUN on your population

CarePoint My Apps  Welcome, ROSEN.JUDITH.I  Help ? Context S

Home Overview [Patient Management] Administration Reporting Methodology Documents

Patient Management > Low Back Pain Imaging

Filters My Filters

Available Data Sources Available Fields

-- Select Data Source -- Choose a field

AND/OR	(	Selected Field	Operator	Value	)	
AND	(	Low Back Pain Imaging DS.X-Ray System	Is Not Null	e	)	Delete
OR		Low Back Pain Imaging DS.MRI System	Is Not Null	e	)	Delete
OR		Low Back Pain Imaging DS.CT Scan System	Is Not Null	e	)	Delete

Search Clear

- You can add additional parameters to this public filter and save the new filter as your own private filter

- Current enrollees who meet the HEDIS criteria are on the list
- Metric counts all who were enrolled to you at the time of the initial LBP diagnosis; list numbers will not match metric denominator or numerator
- The list is not Actionable—patients either had a test or didn't in the 28 days after diagnosis
- Pts who have no X-Ray, no MRI, no CT meet the numerator criteria (improve metric)
- Pts who have a test work against improving the metric
  - They cannot be “fixed”
- Purpose of the list is to help identify patient care processes that could be improved

## Metric not support with CPG

- **MOST COMMON QUESTION:** My providers are frustrated that this metric encourages imaging when clinical guidelines recommend against it in the first 4 weeks, what do I tell them?
- Actually, the metric supports the DoD/VA CPG as both the metric and the CPG discourage imaging in the first 28 days after the initial diagnosis. This question is asked by many who look at the title of the metric only or by those who don't understand the methodology document.

<https://www.gmo.amedd.army.mil/pguide.htm>

- **Is there a way to exclude any of the patients?**
- Yes, you can enter MHSPHP exclusions for these patients
  - OHI: Patients who exclusively use other health insurance for all care (have another PCM and don't use MTF care)
  - Miscoded: perhaps the pt had a trauma injury that was not coded
  - Clinically inappropriate: there is a clinical reason documented in the medical record that required imaging that did not meet the standard exclusions listed on slide 8
- Reminder, MHSPHP exclusions have no impact on HEDIS
- MHSPHP exclusions only impact the “Medical Home Metric” visible in the Reporting tab



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## FAQ: when do pts fall off list

- Patients fall off the list when their initial LBP diagnosis is over 12 months old

FACILITY	OCT2014			
	Total Enrolled	Eligible	Valid	Score
+ - USCG CLINIC ELIZABETH CITY ( 0430 )	1,012	38	38	100.0%
+ - NH NAPLES ( 0617 )	3,836	113	110	97.35%
+ - 377th MED GRP-KIRTLAND ( 0083 )	12,890	447	431	96.42%
+ - NBHC COMFLEACT SASEBO ( 0852 )	2,445	74	71	95.95%
+ - BMC CAMP BUSH/COURTNEY ( 7032 )	2,607	47	45	95.74%
+ - 422 ABS MED FLT-CROUGHTON ( 0653 )	748	38	36	94.74%
+ - BMC CAPODICHINO ( 1153 )	1,544	90	85	94.44%
+ - 65th MED GRP-LAJES ( 0629 )	796	61	57	93.44%
+ - NBHC NAVCOASTSYSC PANAMA CITY ( 0265 )	1,468	35	32	91.43%
+ - 39th MED GROUP-INCIRLIK ( 0635 )	2,198	103	94	91.26%
+ - NH ROTA ( 0618 )	2,950	92	83	90.22%
+ - 31st MED GRP-AVIANO ( 0808 )	6,679	283	255	90.11%
+ - NH YOKOSUKA ( 0622 )	8,275	197	174	88.32%
+ - NBHC MCRD SAN DIEGO ( 0230 )	1,742	98	86	87.76%
+ - NBHC THE BASIC SCHOOL ( 1671 )	2,677	170	149	87.65%
+ - 60th MED GRP-MCCLELLAN ( 0250 )	3,842	97	85	87.63%
+ - REMOTE 13(EUROPE) ( 7913 )	9,615	142	124	87.32%
+ - 470 MED FLT-GEILENKIRCHEN ( 0799 )	2,013	68	59	86.76%
+ - OZARK MEDICAL HOME-LEONRD WOOD ( 6115 )	4,901	74	64	86.49%
+ - USCG CLINIC BOSTON ( 0426 )	975	44	38	86.36%
+ - 8th MED GRP-KUNSAN AB ( 0637 )	2,192	151	130	86.09%

+ - NH SIGONELLA ( 0624 )	2,640	122	105	86.07%
+ - NH OKINAWA ( 0621 )	11,338	278	239	85.97%
+ - BMC MCB CAMP PENDLETON ( 0208 )	3,507	239	205	85.77%
+ - 47th MED GRP-LAUGHLIN ( 0114 )	3,497	111	95	85.59%
+ - 374th MED GRP-YOKOTA AB ( 0640 )	6,021	239	204	85.36%
+ - USCG CLINIC ALAMEDA ( 0418 )	1,699	94	80	85.11%
+ - 633rd MED GRP LANGLEY-EUSTIS ( 0120 )	34,233	999	848	84.88%
+ - USCG CLINIC CAPE COD ( 0425 )	855	52	44	84.62%
+ - 28th MED GRP-ELLSWORTH ( 0106 )	10,542	399	337	84.46%
+ - 62 AREA-SAN MATEO ( 6225 )	3,406	289	243	84.08%
+ - USCG CLINIC SEATTLE ( 0435 )	1,328	56	47	83.93%
+ - AHC KATTERBACH ( 1015 )	3,990	129	108	83.72%
+ - OP FORCES-OKINAWA ( 6340 )	8,302	473	396	83.72%
+ - AHC SCHWEINFURT ( 1124 )	4	61	51	83.61%
+ - NH LEMOORE ( 0028 )	10,925	298	249	83.56%
+ - BMC CAMP HANSEN ( 7033 )	3,712	176	147	83.52%
+ - PREMIER MEDICAL HOME-CARSON ( 6102 )	4,809	66	55	83.33%
+ - NBHC BANCROFT HALL ( 0525 )	4,955	132	110	83.33%
+ - REMOTE 14(PACIFIC) ( 7914 )	2,680	60	50	83.33%
+ - 52nd MED GROUP-SPANGDAHLEM ( 0805 )	6,566	294	244	82.99%
+ - 88th MED GRP-WRIGHT-PATTERSON ( 0095 )	30,595	823	681	82.75%
+ - BMC MCAS KANEOHE BAY ( 0285 )	8,209	284	235	82.75%



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# Call for Best Practices!

- Please email [judith.rosen.1.ctr@us.af.mil](mailto:judith.rosen.1.ctr@us.af.mil) your best practices