

Use of Imaging Studies for Low Back Pain (LBP)

New for 2023

Added

- A direct reference code, Z51.5, for an encounter for palliative care
- Frailty exclusion now requires 2 different dates of service during the measurement year

Updated

• Members who died during the measurement year is now a required exclusion

Definition

Percentage of members ages 18–75 with a principal diagnosis of low back pain who did not have an imaging study (plain X-ray, MRI, CT scan) within 28 days of the diagnosis.

This measure is reported as an inverted measure and a higher score indicates appropriate treatment of low back pain, where imaging studies did not occur.

Plan(s) Affected	Quality Program(s) Affected	Collection and Reporting Method
CommercialMedicaidMedicare	CMS Quality Rating SystemNCQA AccreditationNCQA Health Plan Ratings	Administrative • Claim/Encounter Data

Codes

The following codes can be used to close HEDIS® numerator gaps in care; they are not intended to be a directive of your billing practice.

The following codes are imaging studies that should be avoided with a diagnosis of uncomplicated low back pain.

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Imaging Studies	
CPT®/CPT II	72020, 72052, 72100, 72110, 72114, 72120, 72131, 72132, 72133, 72141, 72142, 72146, 72147, 72148, 72149, 72156, 72158, 72200, 72202, 72220
SNOMED	2847006, 6238009, 6728003, 7812007, 21613005, 22791004, 24856003, 26537001, 35443000, 41333006,45554006, 46700000, 47987001, 48816001, 57235004, 60443006, 61368000, 66769009, 68862002, 72508000, 79760008, 86392000, 90523008, 90805008, 91333005, 91583001, 168573004, 168588009, 241092006, 241093001, 241094007, 241580002, 241592002, 241596004, 241646009, 241647000, 241648005, 276478001, 303935004, 419942003, 429860003, 429868005, 429871002, 430021001, 430507007, 431250008, 431496002, 431557005, 431613003, 431871005, 431892005, 432078003, 432244001, 432770001, 433140006, 433141005, 440450002, 443580006, 444634007, 448641007, 700319007, 700320001, 700321002, 702487007, 702488002, 702513003, 702514009, 702515005, 702516006, 702521009, 702522002, 702523007, 702607002, 702608007, 709652000, 709653005, 709698004, 711104001, 711184004, 711186002, 711224009, 711271003, 712970008, 713016000, 715290001, 715458009, 716830000, 717912001, 718542005, 718545007, 723646000, 726546000, 772220000, 783627007, 840361000, 868279006, 3721000087104, 3731000087102, 14871000087107, 17141000087101, 39445000119106, 396171000119100, 411571000119106, 411611000119102, 413001000119107, 495741000119105, 571891000119109, 572091000119106, 16328021000119109, 16384831000119100, 16554061000119109

Exclusion



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Timeframe

Required Exclusion(s)

Members in hospice or using hospice servicesMembers receiving palliative careMembers who died	- Any time during the measurement year
Members ages 66 and older as of December 31 of the measurement year who had at least 2 diagnoses of frailty on different dates of service and advanced illness.* Advanced illness is indicated by one of the following:	Frailty diagnoses must be in the measurement year and on different dates of service
 Two or more outpatient, observation, emergency room, telephone, e- visits, virtual check-ins or non-acute inpatient encounters or discharge(s) on separate dates of service with a diagnosis of advanced illness 	Advanced illness diagnosis must be in the measurement year or year prior to the measurement year
 One or more acute inpatient encounter(s) with a diagnosis of advanced illness 	
 One or more acute inpatient discharge(s) with a diagnosis of advanced illness on the discharge claim 	
 Dispensed a dementia medication: Donepezil, Donepezil- memantine, galantamine, rivastigmine or memantine 	
Any member who had a diagnosis where imaging is clinically appropriate	including:
 Cancer HIV Major organ transplant Osteoporosis or osteoporosis therapy Lumbar surgery Spondylopathy 	Any time in a member's history through 28 days after the principal diagnosis of low back pain between Jan. 1 – Dec. 3 of the measurement year
Recent trauma Fragility fractures	Any time 90 days prior to or 28 days after the principal diagnosis of low back pain between Jan. 1 – Dec. 3 of the measurement year
Prolonged use of corticosteroids – 90 consecutive days of corticosteroid treatment	Dispensed any time 12 months prior to the principal diagnosis of low back pain between Jan. 1 – Dec. 3 of the measurement year
Intravenous drug abuseNeurologic impairment	Any time 12 months prior to or 28 days after the principal diagnosis of low back pain between Jan. 1 – Dec. 3 of the measurement year
Spinal infection	Any time 12 months prior to or 28 days after the principal diagnosis of low back pain between Jan. 1 – Dec. 3 of the measurement year



Use of Imaging Studies for Low Back Pain (LBP)

	Test, Service or Procedure to Avoid	Test, Service or Procedure to Close Care Opportunity
The imaging studies listed in the column at right are not clinically ppropriate for a diagnosis of incomplicated low back pain.	CT scan MRI Plain X-ray	
The principal diagnosis of ancomplicated low back pain can come from any of the services sted in the column at right for a member to be included in this measure.		 E-visit or virtual check-in Osteopathic or chiropractic manipulative treatment Outpatient visit Physical therapy visit Telephone visit

Tips and Best Practices to Help Close This Care Opportunity

• Please check your Patient Care Opportunity Report (PCOR) often to see members with open care opportunities. If you have questions, your UnitedHealthcare representative can help