



## National Osteoporosis Awareness and Prevention Month

May is National Osteoporosis Awareness and Prevention month. Providers have an important role in osteoporosis prevention and detection by spreading the message that Medicare provides coverage of bone mass measurements for patients at risk for osteoporosis.

### OVERVIEW

Osteoporosis reduces bone mass through structural deterioration, leading to compromised bone strength. Evidence shows that a loss in bone mass is a strong predictor of future fracture risk.<sup>1</sup> It is estimated that one in two women and one in four men over age 50 will have a fracture due to osteoporosis.<sup>2</sup> National guidelines recommend women ages 65 and older complete a bone mineral density (BMD) test every two years.<sup>3</sup> Statistics show that minority women are at increased risk based on lower likelihood of completing recommended services.<sup>4</sup>

### QUALITY IMPROVEMENT PROJECT

Health Net of Arizona, Inc. (Health Net) recently launched a three-year Medicare quality improvement project (QIP) to improve osteoporosis screening, treatment and management, as mandated by the Centers for Medicare & Medicaid Services (CMS). The goal of the QIP is to improve health outcomes, patient satisfaction and address health disparities by:

- Increasing awareness of osteoporosis, including risk factors and prevention.
- Promoting early detection of osteoporosis for men, women and minorities at risk of developing the disease.
- Closing the care-gap for patients with a fracture who were never screened or treated for osteoporosis by piloting the involvement of a Bone Health Specialist (nurse care manager). This care coordinator role is modeled on the best practice concept of the Fracture Liaison Services (FLS) program.<sup>5</sup>

### FALL RISK MANAGEMENT

Fall-related injuries are the leading cause of hospital admissions for trauma in older adults. Most fractures among older adults are attributable to falls, with bone fragility as an underlying factor. Providers play an important role in the prevention, assessment and treatment of osteoporosis and falls; however, opportunities to educate patients on the risks are often missed. The Centers for Disease Control and Prevention (CDC) recommends providers use the following four-step approach to help patients avoid fall-related injuries<sup>6</sup>:

- 1 Be proactive. Ask all patients ages 65 and older if they have fallen in the past year.
- 2 Identify and assess fall risk factors.
- 3 Refer patients to specialists or community programs, as needed.

THIS UPDATE APPLIES TO ARIZONA PROVIDERS:

- Physicians
- Medical Groups/IPAs
- Hospitals
- Ancillary Providers

LINES OF BUSINESS:

- Advantage Platinum (HMO)
- Advantage Platinum (PPO, POS)
- Medicare Advantage (HMO)

PROVIDER SERVICES

az\_internetproviderinquiries@healthnet.com  
1-800-289-2818  
www.healthnet.com

NATIONAL PROVIDER COMMUNICATIONS

provider.communications@healthnet.com  
fax 1-800-937-6086

- 4 Follow up with patient within 30 days.

## HEDIS® MEASURES

In recognition of the importance of osteoporosis management and fall prevention, NCQA implemented the following Healthcare Effectiveness Data and Information Set (HEDIS®) Effectiveness of Care measures:

- Osteoporosis Testing in Older Women (OTO) – Measures the percentage of Medicare women ages 65 to 85 who report ever having received a bone density test to check for osteoporosis.
- Fall Risk Management (FRM) – Measures the percentage of Medicare patients ages 65 and older who reported falling or having problems with balance or walking in the past 12 months, who were seen by a doctor in the past 12 months, and who responded “yes” to the question, “Has your doctor or other health provider done anything to help prevent falls or treat problems with balance or walking?” Suggestions to prevent falling may include:
  - Using a cane or walker.
  - Checking blood pressure while lying or standing.
  - Exercising or starting a physical therapy program.
  - Performing a vision or hearing test.
- Osteoporosis Management in Women Who Had a Fracture (OMW) – Measures the percentage of women ages 67 to 85 who suffered a fracture and who had either a BMD test (Table 1) or prescription for a drug (Table 2) to treat osteoporosis in the six months after the fracture.

**Table 1: Coding for OMW**

Osteoporosis Testing & Treatment	ICD-10-PCS	CPT®	HCPCS
<b>BONE MINERAL DENSITY TEST</b>	BP48ZZ1, BP49ZZ1, BP4GZZ1, BP4HZZ1, BP4LZZ1, BP4MZZ1, BP4NZZ1, BP4PZZ1, BQ00ZZ1, BQ01ZZ1, BQ03ZZ1, BQ04ZZ1, BR00ZZ1, BR07ZZ1, BR09ZZ1, BR0GZZ1	76977, 77078, 77080, 77081, 77082, 77085	G0130
<b>OSTEOPOROSIS THERAPY</b>			J0630, J0897, J1740, J3110, J3487, J3488, J3489, Q2051

**Table 2: Prescriptions for Osteoporosis**

Medication Class	Prescription
<b>BISPHOSPHONATES</b>	<ul style="list-style-type: none"> <li>• alendronate</li> <li>• alendronate-cholecalciferol</li> <li>• calcium carbonate-risedronate</li> </ul> <ul style="list-style-type: none"> <li>• ibandronate</li> <li>• risedronate</li> <li>• zoledronic acid</li> </ul>
<b>OTHER AGENTS</b>	<ul style="list-style-type: none"> <li>• calcitonin</li> <li>• denosumab</li> </ul> <ul style="list-style-type: none"> <li>• raloxifene</li> <li>• teriparatide</li> </ul>

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## Improving Osteoporosis Management

In an effort to impact and improve HEDIS® scores, providers should identify patients who are at risk of developing osteoporosis or prone to falling by implementing the following practices:

- Ask all patients ages 65 and older whether they have had a fall or balance problems since their last office visit.
- Order bone mineral density testing when appropriate and for patients at risk.
- Educate patients about the bone mass measurement benefit through Medicare.
- Include risk assessments for osteoporosis and falls into routine wellness visits.
- Educate patients on personal risk factors and steps to prevent osteoporosis, falls and fractures.
- Discuss diagnosis and management options for osteoporosis and falls.

## FALL PREVENTION AWARENESS DAY – SEPTEMBER 22, 2016

Acknowledging the importance of falls as the leading cause of unintentional injuries among older adults, the first day of fall each year is declared as Fall Prevention Awareness Day. In addition to National Osteoporosis Awareness and Prevention Month, Fall Prevention Awareness Day is an excellent opportunity for providers to raise awareness about the seriousness of falls and methods to reduce fall risk among older adults, their families and caregivers.

For more information about Fall Prevention Awareness Day, along with evidence-based falls prevention program, tools and activities, visit the National Council on Aging (NCOA) website at [www.ncoa.org/healthy-aging/falls-prevention/falls-prevention-awareness-day/](http://www.ncoa.org/healthy-aging/falls-prevention/falls-prevention-awareness-day/).

## ADDITIONAL INFORMATION

The National Osteoporosis Foundation (NOF) Break Free from Osteoporosis campaign encourages individuals to identify their risk factors for osteoporosis and make necessary lifestyle changes to maintain strong and healthy bones. Encourage patients to visit the NOF website at [www.nof.org](http://www.nof.org) for resources and events to increase awareness, knowledge and understanding of prevention and early detection of osteoporosis.

Providers are encouraged to access Health Net's provider portal online at [provider.healthnet.com](http://provider.healthnet.com) for real-time information, including eligibility verification, claims status, prior authorization status, plan summaries, and more.

If you have questions regarding the information contained in this update, contact the Health Net Provider Services Center by email at [AZ\\_InternetProviderInquiries@healthnet.com](mailto:AZ_InternetProviderInquiries@healthnet.com), through the Health Net provider website at [provider.healthnet.com](http://provider.healthnet.com), or by telephone at 1-800-289-2818.

<sup>1</sup> Office of the Surgeon General (US). Bone Health and Osteoporosis: A Report of the Surgeon General. Rockville (MD): Office of the Surgeon General (US); 2004. 6, Determinants of Bone Health.

<sup>2</sup> Kanis JA, Jonell O, Oden A, Sembo I, Redlund-Johnell I, Dawson A, et al. Long term risk of osteoporotic fracture in Malmo. *Osteoporosis Int* 2000;11:669-74.

<sup>3</sup> National Osteoporosis Foundation. Clinician's Guide to Prevention and Treatment of Osteoporosis. Washington, DC: National Osteoporosis Foundation; 2014.

<sup>4</sup> Neuman MD, Kennelly AM, Tosi LL (2011) Breakout session: sex/gender and racial/ethnic disparities in the care of osteoporosis and fragility fractures. *Clin Orthop Relat Res*; 2011; 469:1936–1940.

<sup>5</sup> Kirtan Ganda and Markus J. Seibel (2012). The Role of Fracture Liaison Services in Re-Fracture Prevention, Primary Care at a Glance - Hot Topics and New Insights, Dr. Oreste Capelli (Ed.), ISBN: 978-953-51-0539-8, InTech, DOI: 10.5772/37535.

<sup>6</sup> Adapted from "Preventing Falls in Older Patients: Provider Pocket Guide," published by the Centers for Disease Control and Prevention, National Center for Injury Prevention and Control, 2015.