

Use of Imaging Studies for Low Back Pain (LBP)

New for 2024

Updated

· Method for identifying advanced illness in exclusions

Clarified

• Laboratory claims cannot be used for select exclusions, including palliative care, advanced illness, frailty, cancer, trauma, HIV and others.

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, 72040, 72050, 72052, 72070, 72072, 72074, 72080, 72081, 72082, 72083, 72084, 72100, 72110, 72114, 72120, 72125, 72126, 72127, 72128, 72129, 72130, 72131, 72132, 72133, 72141, 72142, 72146, 72147, 72148, 72149, 72156, 72157, 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, 241094007, 241580002, 241592002, 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, 1251643002, 3721000087104, 3731000087102, 14871000087107, 17141000087101, 394451000119106, 396171000119100, 411571000119106, 411611000119102, 413001000119107, 495741000119105, 571891000119109, 572091000119106, 16328021000119109, 16384831000119100, 16554061000119109



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Required Exclusion(s)

Exclusion	Timeframe
Members in hospice or using hospice services	Any time during the measurement year
Members receiving palliative care	
Members who died	
 Members 66 years of age and older as of December 31 of the measurement year with frailty and advanced illness. Members must meet both frailty and advanced illness criteria to qualify as an exclusion: Frailty: At least 2 diagnoses of frailty on different dates of service during the measurement year. Do not include claims where the frailty diagnosis was from an independent lab (POS 81). Advanced Illness: Indicated by one of the following: At least 2 diagnoses of advanced illness on different dates of service during the measurement year or year prior. Do not include claims where the advanced illness diagnosis was from an independent lab (POS 81). Dispensed dementia medication Donepezil, Donepezil-memantine, 	Frailty diagnoses must be in the measurement year and on different dates of service Advanced illness diagnosis must be in the measurement year or year prior to the measurement year
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 appropriate for a diagnosis of uncomplicated low back pain.	CT scan MRI Plain X-ray	
The principal diagnosis of uncomplicated low back pain can come from any of the services isted 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) or Practice Assist often to see members with open care opportunities. If you have questions, your UnitedHealthcare representative can help
- Sharing member demographic data is critical to understanding the cultural, linguistic and social needs of those we serve and decreasing health inequities across the care continuum. This data can include, but is not limited to, race, ethnicity, language, sexual orientation, gender identity, pronouns, sex assigned at birth and disability status.
- As part of UnitedHealthcare's clinical structured data exchange program, we encourage you to include this demographic data with any structured data file or CCD. Your information is confidential. UnitedHealthcare will keep personally identifiable information confidential and won't disclose any information without your written consent.