Measure #275: Inflammatory Bowel Disease (IBD): Assessment of Hepatitis B Virus (HBV) Status Before Initiating Anti-TNF (Tumor Necrosis Factor) Therapy – National Quality Strategy Domain: Effective Clinical Care

2014 PQRS OPTIONS FOR INDIVIDUAL MEASURES: REGISTRY ONLY

DESCRIPTION:
Percentage of patients aged 18 years and older with a diagnosis of inflammatory bowel disease (IBD) who had Hepatitis B Virus (HBV) status assessed and results interpreted within one year prior to receiving a first course of anti-TNF (tumor necrosis factor) therapy

INSTRUCTIONS:
This measure is to be reported a minimum of once per reporting period for all patients with a diagnosis of inflammatory bowel disease seen during the reporting period. This measure may be reported by clinicians who perform the quality actions described in the measure based on the services provided and the measure-specific denominator coding.

Measure Reporting via Registry:
ICD-9-CM/ICD-10-CM diagnosis codes, CPT codes, and patient demographics are used to identify patients who are included in the measure’s denominator. The listed numerator options are used to report the numerator of the measure.

The quality-data codes listed do not need to be submitted for registry-based submissions; however, these codes may be submitted for those registries that utilize claims data.

DENOMINATOR:
All patients aged 18 and older with a diagnosis of inflammatory bowel disease

Denominator Criteria (Eligible Cases):
Patients aged ≥ 18 years on date of encounter
AND
Diagnosis for inflammatory bowel disease (ICD-9-CM) [for use 1/1/2014-9/30/2014]: 555.0, 555.1, 555.2, 555.9, 556.0, 556.1, 556.2, 556.3, 556.4, 556.5, 556.6, 556.8, 556.9
AND
Patient encounter during the reporting period (CPT): 99201, 99202, 99203, 99204, 99205, 99212, 99213, 99214, 99215, 99341, 99342, 99343, 99344, 99345, 99346, 99347, 99348, 99349, 99350, 99406, 99407

NUMERATOR:
Patients who had HBV status assessed and results interpreted within one year prior to receiving a first course of anti-TNF therapy
**Numerator Instructions:** HBV status must be assessed by one of the following: HBsAG, HBsAG neutralization, HBCAb total, HBcAB IgM, HBsAB.

**Definition:**
*First Course of anti-TNF therapy* – the first (ever) course of anti-TNF therapy

**Numerator Options:**

**Performance Met:**
- Hepatitis B vaccine administered or previously received (4149F)
  - AND
  - Hepatitis B Virus (HBV) status assessed and results interpreted within one year prior to receiving a first course of anti-TNF (tumor necrosis factor) therapy (3517F)

**OR**

**Performance Met:**
- Patient has documented immunity to hepatitis B and is receiving a first course of anti-TNF therapy (G8869)

**OR**

**Other Performance Exclusion:**
- Hepatitis B vaccine injection administered or previously received and is receiving a first course of anti-TNF therapy (G8870)

**OR**

**Other Performance Exclusion:**
- Patient not receiving a first course of anti-TNF therapy (G8871)

**OR**

**Patient Performance Exclusion:**
- Documentation of patient reason(s) for not assessing Hepatitis B Virus (HBV) status (eg, patient declined) within one year prior to receiving first course of anti-TNF therapy (3517F with 2P)

**OR**

**Performance Not Met:**
- Hepatitis B Virus (HBV) status not assessed and results interpreted within one year prior to receiving a first course of anti-TNF (tumor necrosis factor) therapy, reason not otherwise specified (3517F with 8P)

**RATIONALE:**
Before initiating biologic anti-TNF therapy for a patient with IBD, it is essential to screen the patient for HBV, as research has documented reactivation of HBV after anti-TNF therapy. This is a patient safety measure.

Opportunity for improvement: While there are a limited number of studies that investigate gaps in care for patients with IBD, the research that does exist identifies opportunities for improvement in care areas: 1) there is a lack of adherence to documentation of HBV screening, most noticeably in the use of disease-modifying anti-TNF drugs, and 2) variations in care by practice setting, geographic region and physician specialty.

See FDA package labeling for anti-TNF biological agents — golimumab, certolizumab pegol, infliximab and adalimumab.

Reactivation of hepatitis B virus has been reported in patients who are carriers of this virus and are taking TNF blocker medicines. (Kaiser T, Moessner J, McHutchison JG, Tillmann HG. Life threatening liver disease during treatment with monoclonal antibodies. BMJ. 2009;338:b508)

**CLINICAL RECOMMENDATION STATEMENTS:**