Measure #50: Urinary Incontinence: Plan of Care for Urinary Incontinence in Women Aged 65 Years and Older – National Quality Strategy Domain: Person and Caregiver-Centered Experience and Outcomes

2017 OPTIONS FOR INDIVIDUAL MEASURES:
REGISTRY ONLY

MEASURE TYPE:
Process

DESCRIPTION:
Percentage of female patients aged 65 years and older with a diagnosis of urinary incontinence with a documented plan of care for urinary incontinence at least once within 12 months

INSTRUCTIONS:
This measure is to be reported a minimum of once per performance period for patients seen during the performance period. This measure is appropriate for use in the ambulatory setting only. It is anticipated that eligible clinicians who provide services for patients with the diagnosis of urinary incontinence will submit this measure.

Measure Reporting:
The listed denominator criteria is used to identify the intended patient population. The numerator options included in this specification are used to submit the quality actions allowed by 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 female patients aged 65 years and older with a diagnosis of urinary incontinence

Denominator Criteria (Eligible Cases):
All female patients aged ≥ 65 years on date of encounter
AND
AND
Patient encounter during the performance period (CPT or HCPCS): 99201, 99202, 99203, 99204, 99205, 99212, 99213, 99214, 99324, 99325, 99326, 99327, 99334, 99335, 99336, 99337, 99341, 99342, 99343, 99344, 99345, 99347, 99348, 99349, 99350, G0402
AND NOT
DENOMINATOR EXCLUSION:
Hospice services utilized by patient any time during the measurement period: G9694

NUMERATOR:
Patients with a documented plan of care for urinary incontinence at least once within 12 months

Definition:
Plan of Care – May include behavioral interventions (e.g., bladder training, pelvic floor muscle training, prompted voiding), referral to specialist, surgical treatment, reassess at follow-up visit, lifestyle interventions, addressing co-morbid factors, modification or discontinuation of medications contributing to urinary incontinence, or pharmacologic therapy.
Numerator Options:

**Performance Met**: Urinary incontinence plan of care documented (0509F)

**OR**

**Performance Not Met**: Urinary incontinence plan of care not documented, reason not otherwise specified (0509F with 8P)

**RATIONALE:**
A treatment option should be documented for the patient with incontinence.

**CLINICAL RECOMMENDATION STATEMENTS:**
All conservative management options used in younger adults can be used in selected frail, older, motivated people. This includes:

- Bladder retraining
- Pelvic muscle exercises including biofeedback and/or electro-stimulation (ICI) (Grade B)

Pharmacologic agents, especially oxybutynin and tolterodine, may have a small beneficial effect on improving symptoms of detrusor over activity in women. (ACOG) (Level A)

Oxybutynin and potentially other bladder relaxants can improve the effectiveness of behavioral therapies in frail older persons. (ICI) (Grade B)

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2017 Registry Individual Measure Flow

#50: Urinary Incontinence: Plan of Care for Urinary Incontinence in Women Aged 65 Years and Older

**Start**

- **Denominator**
  - Female Patient Age at Date of Service ≥ 65 Years
    - **Yes**
    - Diagnosis of Urinary Incontinence as Listed in Denominator*
      - **Yes**
      - Encounter as Listed in Denominator* (1/1/2017 thru 12/31/2017)
        - **Yes**
        - Hospice Services Utilized Any Time During the Measurement Period G9694 or equivalent
          - **No**
          - Include in Eligible Population/Denominator (8 patients) d
        - **No**
        - Denominator Exclusion
          - **Yes**
          - Urinary Incontinence Plan of Care Not Documented, Reason Not Specified
            - **Yes**
            - Data Completeness Met + Performance Not Met 0509F-8P or equivalent (3 patients) c
            - **No**
            - Data Completeness Met + Performance Met 0509F or equivalent (4 patients) a
    - **No**
    - Not Included in Eligible Population/Denominator

**Numerator**

**SAMPLE CALCULATIONS:**

**Data Completeness**

\[
\text{Performance Met (a=4 patients) + Performance Not Met (c=3 patients)} = 7 \text{ patients} = 87.50\%
\]

\[
\text{Eligible Population / Denominator (d=8 patients) = 8 patients}
\]

**Performance Rate**

\[
\text{Performance Met (a=4 patients)} = 4 \text{ patients} = 57.14\%
\]

\[
\text{Data Completeness Numerator (7 patients)} = 7 \text{ patients}
\]

*See the posted Measure Specification for specific coding and instructions to report this measure.

NOTE: Reporting Frequency: Patient-process
2017 Registry Individual Measure Flow  
#50: Urinary Incontinence: Plan of Care for Urinary Incontinence in Women Aged 65 Years and Older

Please refer to the specific section of the Measure Specification to identify the denominator and numerator information for use in reporting this Individual Measure.

1. Start with Denominator

2. Check Female Patient Age:
   a. If the Female Age is greater than or equal to 65 years on Date of Service and equals No during the measurement period, do not include in Eligible Patient Population. Stop Processing.
   b. If the Female Age is greater than or equal to 65 years on Date of Service and equals Yes during the measurement period, proceed to Patient Diagnosis.

3. Check Patient Diagnosis:
   a. If Diagnosis of Urinary Incontinence as Listed in the Denominator equals No, do not include in Eligible Patient Population. Stop Processing.
   b. If Diagnosis of Urinary Incontinence as Listed in the Denominator equals Yes, proceed to check Encounter Performed.

4. Check Encounter Performed:
   a. If Encounter as Listed in the Denominator equals No, do not include in Eligible Patient Population. Stop Processing.
   b. If Encounter as Listed in the Denominator equals Yes, include in the Eligible population, proceed to check Hospice Services Utilized by Patient Any Time During the Measurement Period

5. Check Hospice Services Utilized by Patient Any Time During the Measurement Period:
   a. If Hospice Services Utilized by Patient Any Time During the Measurement Period equals No, include in the Eligible population.
   b. If Hospice Services Utilized by Patient Any Time During the Measurement Period equals Yes, do not include in Eligible Patient Population. Stop Processing.

6. Denominator Population
   a. Denominator population is all Eligible Patients in the denominator. Denominator is represented as Denominator in the Sample Calculation listed at the end of this document. Letter d equals 8 patients in the sample calculation.

7. Start Numerator

8. Check Plan of Care for Urinary Incontinence Documented:
   a. If Plan of Care for Urinary Incontinence Documented equals Yes, include in Data Completeness Met and Performance Met.
b. Data Completeness Met and Performance Met letter is represented as Data Completeness in the Sample Calculation listed at the end of this document. Letter a equals 4 patients in Sample Calculation.

c. If Plan of Care for Urinary Incontinence Documented equals No, proceed to Plan of Care for Urinary Incontinence Not Documented, Reason Not Specified.

9. Check Plan of Care for Urinary Incontinence Not Documented Reason Not Specified:

a. If Plan of Care for Urinary Incontinence Not Documented, Reason Not Specified equals Yes, include in Data Completeness Met and Performance Not Met.

b. Data Completeness Met and Performance Not Met letter is represented as Data Completeness in the Sample Calculation listed at the end of this document. Letter c equals 3 patients in the Sample Calculation.

c. If Plan of Care for Urinary Incontinence Not Documented, Reason Not Specified equals No, proceed to Data Completeness Not Met.

10. Check Data Completeness Not Met:

a. If Data Completeness Not Met equals No, Quality Data Code or equivalent not reported. 1 patient has been subtracted from the Data Completeness numerator in sample calculation.

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**SAMPLE CALCULATIONS:**

| Data Completeness | Performance Met (a=4 patients) + Performance Not Met (c=3 patients) = 7 patients = 87.50%  
| Eligible Population / Denominator (d=8 patients) = 8 patients |
| Data Completeness Numerator (7 patients) = 7 patients |

| Performance Rate | Performance Met (a=4 patients) = 4 patients = 57.14%  
| Data Completeness Numerator (7 patients) = 7 patients |