



# Spirometry testing

## For patients with chronic obstructive pulmonary disorder

### ACHIEVE HIGH HEDIS®/QUALITY ASSURANCE REPORTING REQUIREMENTS (QARR) SCORES THROUGH HIGH-QUALITY CARE

This Healthcare Effectiveness Data and Information Set (HEDIS/QARR) measure looks at the percentage of our members aged 40 years and older with a new diagnosis of chronic obstructive pulmonary disease (COPD), or newly active COPD, who received appropriate spirometry testing to confirm the diagnosis.

To meet the requirement, make sure your medical records reflect evidence of appropriate spirometry testing for those with newly diagnosed or newly active COPD. Evidence can be taken from:

- Documentation of outpatient visits.
- Documentation of acute inpatient encounters.
- Documentation made for transfers or readmissions.

### PROPER CODING

The National Committee for Quality Assurance (NCQA) recognizes the following codes to identify COPD:

Description	ICD-10-CM diagnosis
Chronic bronchitis	J41.0, J41.1, J41.8, J42
Emphysema	J43.0, J43.1, J43.2, J43.8, J43.9
COPD	J44.0, J44.1, J44.9

### Codes to identify spirometry testing:

Description	ICD-10-CM diagnosis
Spirometry testing	94010, 94014-94016, 94060, 94070, 94375, 94620

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## WAYS TO IMPROVE YOUR HEDIS/QARR SCORES

You can improve your HEDIS/QARR scores by:

1. Ensuring you are using the proper codes on the claim to support spirometry testing.
2. Utilizing gap in care reports to identify your patients who still need a spirometry test and outreach to them to schedule the testing.
3. Educating your patients on the importance of completing the spirometry test to confirm their diagnosis and to plan the appropriate treatment.
4. Performing a spirometry test for individuals who present with dyspnea, chronic dry cough, increased sputum production or wheezing, frequent chest/respiratory infections, and fatigue.
5. Documenting any spirometry test results performed prior to the initiation of pharmacotherapy treatment to support a COPD diagnosis, such as FEV1 values.

### Educating members about the use of, and compliance with prescribed treatments:

- Long-term medications
- Quick-relief medications
- Smoking cessation counseling
- Breathing training
- Oxygen treatments
- Using meter-dose inhalers
- Avoiding elements that trigger attacks, such as dust, pollen, smoking and secondary smoke, cold air, and pets.



## HOW WE CAN HELP

We help you meet this benchmark by:

- Offering you our HEDIS/QARR Measure Desktop Reference Guide and posting the COPD *Clinical Practice Guidelines* on our provider self-service website.
- Educating members about COPD through quarterly newsletters and health education fliers; for copies to hand out in your office, contact your Provider Relations representative.

## WE'RE HERE TO HELP!

**Have more questions? Need help with a referral?**

Contact your local Provider Relations representative at 866-231-0847.

<https://providerpublic.mybcbswny.com>

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