HEDIS® Tip Sheet
Use of Imaging Studies for Low Back Pain (LBP)

Measure Description

The percentage of members 18–75 years of age 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.

Note: A higher score indicates appropriate treatment of low back pain (i.e., the proportion for whom imaging studies did not occur).

Product Lines: Commercial, Medicaid, Medicare, Exchange

Codes Included in the Current HEDIS® Measure

Codes to Identify Low Back Pain

Description	Code
Imaging Study	**CPT:** 72020, 72040, 72050, 72052, 72070, 72072, 72074, 72080-72084, 72100, 72110, 72114, 72120, 72125-72133, 72141, 72142, 72146-72149, 72156-72158, 72200, 72202, 72220
Uncomplicated Low Back Pain	Do not include laboratory claims (claims with POS code 81). **ICD-10:** M47.26-M47.28, M47.816-M47.818, M47.896-M47.898, M48.061, M48.07, M48.08, M51.16, M51.17, M51.26, M51.27, M51.36, M51.37, M51.86, M51.87, M53.2X6-M53.2X8, M53.3, M53.86-M53.88, M54.16-M54.18, M54.30-M54.32, M54.40-M54.42, M54.5, M54.50, M54.51, M54.59, M54.89, M54.9, M99.03, M99.04, M99.23, M99.33, M99.43, M99.53, M99.63, M99.73, M99.83, M99.84, S33.100A, S33.100D, S33.100S, S33.110A, S33.110D, S33.110S, S33.120A, S33.120D, S33.120S, S33.130A, S33.130D, S33.130S, S33.140A, S33.140D, S33.140S, S33.5XXA, S33.6XXA, S33.8XXA, S33.9XXA, S39.002A, S39.002D, S39.002S, S39.012A, S39.012D, S39.012S, S39.092A, S39.092D, S39.092S, S39.82XA, S39.82XD, S39.82XS, S39.92XA, S39.92XD, S39.92XS

Medications

Corticosteroid Medications Exclusions

Description	Prescription
Corticosteroid	Betamethasone/Betamethasone acetate, Cortisone, Dexamethasone, Hydrocortisone, Methylprednisolone, Prednisolone, Prednisone, Triamcinolone

Osteoporosis Medications Exclusions

Description	Prescription
Bisphosphonates	Alendronate, Alendronate-cholecalciferol, Ibandronate, Risedronate, Zoledronic acid
Other agents	Abaloparatide, Denosumab, Raloxifene, Romosozumab, Teriparatide

Dementia Medications Exclusions

Description	Prescription
Cholinesterase Inhibitors	Donepezil, Galantamine, Rivastigmine

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Miscellaneous Central Nervous System Agents	Memantine
Dementia Combinations	Donepezil-memantine

Ways Providers can Improve HEDIS® Performance

- Avoid ordering diagnostic studies within 30 days of a diagnosis of new-onset back pain in the absence of red flags (e.g., cancer, recent trauma, neurologic impairment, or IV drug abuse).
- Provide patient education on comfort measures, e.g., pain relief, stretching exercises, and activity level.
- Avoid opioids to treat common low back pain.

Ways Health Plans can Improve HEDIS® Performance

- Provide member education on the importance of reducing the use of imaging for LBP since imaging tests do not provide useful information in cases of strained muscles and ligaments and can expose members to unnecessary radiation
- Educate members about ways to treat symptoms and prevent reinjury such as using heat/ice, using non-narcotic pain relievers, and remaining active
- Audit, identify, and educate providers who overuse imaging tests for lower back pain.

Required Exclusions

- Members who use hospice services or elect to use a hospice benefit any time during the measurement year.
- Members who die any time during the measurement year.
- Cancer any time during the member's history through 28 days after the index episode start date (IESD: The earliest date of service for an eligible encounter during the intake period with a principal diagnosis of low back pain.) Do not include laboratory claims (POS: 81). IES
- Trauma any time during the 90 days prior to the IESD through 28 days after the IESD. Do not include laboratory claims (POS: 81).
- IV drug abuse any time during the 365 days prior to the IESD through 28 days after the IESD. Do not include laboratory claims (POS: 81).
- Neurologic impairment any time during the 365 days prior to the IESD through 28 days after the IESD. Do not include laboratory claims (POS: 81).
- HIV any time during the member's history through 28 days after the IESD. Do not include laboratory claims (POS: 81).
- Spinal infection any time during the 365 days prior to the IESD through 28 days after the IESD. Do not include laboratory claims (POS: 81).
- Major organs transplant any time in the member's history through 28 days after the IESD.
- A history of a major organ transplants any time in the member's history through 28 days after the IESD. Do not include laboratory claims (POS: 81).
- 90 consecutive days of corticosteroid treatment any time during the 366-day period that begins 365 days prior to the IESD and ends on the IESD.
- Osteoporosis therapy or a dispensed prescription to treat osteoporosis any time during the member's history through 28 days after the IESD. Do not include laboratory claims (POS: 81).
- Fragility fractures any time during the 90 days prior to the IESD through 28 days after the IESD. Do not include laboratory claims (POS: 81).
- Lumbar surgery any time during the member's history through 28 days after the IESD.
- Spondylopathy any time during the member's history through 28 days after the IESD. Do not include laboratory claims (POS: 81).
- Members receiving palliative care any time during the measurement year.
- Members who had an encounter for palliative care (ICD-10-CM code Z51.5) any time during the measurement year. Do not include laboratory claims (POS: 81).

- Members 66 years of age and older as of December 31 of the measurement year (all product lines) with frailty and advanced illness. Members must meet ***both*** frailty and advanced illness criteria to be excluded:
    - **Frailty.** At least two indications of frailty with different dates of service during the measurement year. Do not include laboratory claims (claims with POS code 81).
    - **Advanced Illness.** Either of the following during the measurement year or the year prior to the measurement year: (a) Advanced illness on at least two different dates of service. Do not include laboratory claims (claims with POS code 81); (b) Dispensed dementia medication.

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