

Asthma Medication Ratio (AMR)

Healthcare Effectiveness Data Information Set® (HEDIS) is a widely used set of performance measures developed and maintained by NCQA. These are used to drive improvement efforts surrounding best practices.

This HEDIS measure looks at the percentage of members five to 64 years of age who were identified as having persistent asthma and had a ratio of controller medications to total asthma medications of 0.5 or greater during the measurement year:

- Identify members with persistent asthma who met at least one of the following criteria during the measurement year and the year before that:
 - At least one ED visit or acute inpatient encounter with a principal diagnosis of asthma.
 - At least one acute inpatient discharge with a principal diagnosis of asthma on the discharge claim. To identify an acute inpatient discharge:
 - Identify all acute and nonacute inpatient stays.
 - Exclude nonacute inpatient stays.
 - Identify the discharge date for the stay.
 - At least four outpatient visits, telephone visits, or e-visits or virtual check-ins, on different dates of service, with any diagnosis of asthma and at least two asthma medication dispensing events for any controller or reliever medication. Visit type need not be the same for the four visits. Use all the medication lists in the tables below to identify asthma controller and reliever medications.
 - At least four asthma medication dispensing events for any controller or reliever medication. Use all the medication lists in the tables below to identify asthma controller and reliever medications.



 A member identified as having persistent asthma because of at least four asthma medication dispensing events, where leukotriene modifiers or antibody inhibitors were the sole asthma medication dispensed in that year, must also have at least one diagnosis of asthma, in any setting, in the same year as the leukotriene modifier or antibody inhibitor (the measurement year or the year prior to the measurement year).

Record your efforts:

- Oral medication dispensing event: Multiple prescriptions for different medications dispensed on the same day are counted as separate dispensing events; If multiple prescriptions for the same medication are dispensed on the same day, sum up the days' supply and divide by 30. Use the drug ID to determine if the prescriptions are the same or different.
- Inhaler dispensing event: All inhalers (for example, canisters) of the same medication dispensed on the same day count as one dispensing event; Medications with different drug IDs dispensed on the same day are counted as different dispensing events.
- **Injection dispensing events:** Each injection counts as one dispensing event. Multiple dispensed injections of the same or different medications count as separate dispensing events.
- **Units of medications:** When identifying medication units for the numerator, count each individual medication, defined as an amount lasting 30 days or less, as one medication unit. One medication unit equals one inhaler canister, one injection, or a 30-day or less supply of an oral medication.

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
- Members who had no asthma controller or reliever medications dispensed during the measurement year
- Members who had a diagnosis that requires a different treatment approach than members with asthma any time during the member's history through December 31 of the measurement year

HEDIS helpful tips:

- · Schedule the next visit at the end of the appointment.
- Educate members on the importance of adhering to medications and reducing asthma triggers.
- · Regularly evaluate patient's inhaler technique.
- Ask the patient if they have any barriers to filling their prescriptions.
- Avoid coding asthma if the diagnosis is for an asthma-like symptom (for example, wheezing during viral upper respiratory infection and acute bronchitis is not asthma).
- If utilizing an EMR system, consider electronic data sharing with your health plan to capture all coded elements. Contact your Provider Solutions representative for additional details and questions.

Description	ICD-10-CM/CPT®/HCPCS
Asthma	ICD-10-CM
	J45.21: Mild intermittent asthma with (acute) exacerbation
	J45.22: Mild intermittent asthma with status asthmaticus
	J45.30: Mild persistent asthma, uncomplicated
	J45.31: Mild persistent asthma with (acute) exacerbation
	J45.32: Mild persistent asthma with status asthmaticus
	J45.40: Moderate persistent asthma, uncomplicated
	J45.41: Moderate persistent asthma with (acute) exacerbation
	J45.42: Moderate persistent asthma with status asthmaticus
	J45.50: Severe persistent asthma, uncomplicated
	J45.51: Severe persistent asthma with (acute) exacerbation
	J45.52: Severe persistent asthma with status asthmaticus
	J45.901: Unspecified asthma with (acute) exacerbation
	J45.902: Unspecified asthma with status asthmaticus
	J45.909: Unspecified asthma, uncomplicated
	J45.991: Cough variant asthma
	J45.998: Other asthma

Description

ICD-10-CM/CPT®/HCPCS

Outpatient and Telehealth

98966, 98967, 98968, 98970, 98971, 98972, 98980, 98981, 99202, 99203, 99204, 99205, 99211, 99212, 99213, 99214, 99215, 99242, 99243, 99244, 99245, 99341, 99342, 99344, 99345, 99347, 99348, 99349, 99350, 99381, 99382, 99383, 99384, 99385, 99386, 99387, 99391, 99392, 99393, 99394, 99395, 99396, 99397, 99401, 99402, 99403, 99404, 99411, 99412, 99421, 99422, 99423, 99429, 99441, 99442, 99443, 99455, 99456, 99457, 99458, 99483

HCPCS

G0071: Payment for communication technology-based services for five minutes or more of a virtual (non-face-to-face) communication between a rural health clinic (RHC) or federally qualified health center (FQHC) practitioner and RHC or FQHC patient, or five minutes or more of remote evaluation of recorded video and/or images by an RHC or FQHC practitioner, occurring in lieu of an office visit; RHC or FQHC only

G0402: Initial preventive physical examination; face-to-face visit, services limited to new beneficiary during the first 12 months of Medicare enrollment

G0438: Annual wellness visit; includes a personalized prevention plan of service (pps), initial visit

G0439: Annual wellness visit, includes a personalized prevention plan of service (pps), subsequent visit

G0463: Hospital outpatient clinic visit for assessment and management of a patient

G2010: Remote evaluation of recorded video and/or images submitted by an established patient (for example, store and forward), including interpretation with follow-up with the patient within 24 business hours, not originating from a related E/M service provided within the previous seven days nor leading to an E/M service or procedure within the next 24 hours or soonest available appointment

G2012: Brief communication technology-based service, for example, virtual check-in, by a physician or other qualified healthcare professional who can report evaluation and management services, provided to an established patient, not originating from a related E/M service provided within the previous seven days nor leading to an E/M service or procedure within the next 24 hours or soonest available appointment; five to 10 minutes of medical discussion

G2250: Remote assessment of recorded video and/or images submitted by an established patient (for example, store and forward), including interpretation with follow-up with the patient within 24 business hours, not originating from a related service provided within the previous seven days nor leading to a service or procedure within the next 24 hours or soonest available appointment

G2251: Brief communication technology-based service, for example, virtual check-in, by a qualified healthcare professional who cannot report evaluation and management services, provided to an established patient, not originating from a related service provided within the previous seven days nor leading to a service or procedure within the next 24 hours or soonest available appointment; five to 10 minutes of clinical discussion

G2252: Brief communication technology-based service, for example, virtual check-in, by a physician or other qualified healthcare professional who can report evaluation and management services, provided to an established patient, not originating from a related E/M service provided within the previous seven days nor leading to an E/M service or procedure within the next 24 hours or soonest available appointment; 11 to 20 minutes of medical discussion

T1015: Clinic visit/encounter, all-inclusive

CDC Race and Ethnicity

1002-5: American Indian or Alaska Native

2028-9: Asian

2054-5: Black or African American

2076-8: Native Hawaiian or Other Pacific Islander

2106-3: White

2135-2: Hispanic or Latino 2186-5: Not Hispanic or Latino

Note: The codes listed are informational only; this information does not guarantee reimbursement.

Asthma controller medications

Description	Prescriptions	Medication lists	Route
Antibody inhibitors	Omalizumab	Omalizumab Medications List	Injection
Anti-interleukin-4	Dupilumab	Dupilumab Medications List	Injection
Anti-interleukin-5	Benralizumab	Benralizumab Medications List	Injection
Anti-interleukin-5	Mepolizumab	Mepolizumab Medications List	Injection
Anti-interleukin-5	Reslizumab	Reslizumab Medications List	Injection
Inhaled steroid combinations	Budesonide-formoterol	Budesonide Formoterol Medications List	Inhalation
Inhaled steroid combinations	Fluticasone-salmeterol	Fluticasone Salmeterol Medications List	Inhalation
Inhaled steroid combinations	Fluticasone-vilanterol	Fluticasone Vilanterol Medications List	Inhalation
Inhaled steroid combinations	Formoterol-mometasone	Formoterol Mometasone Medications List	Inhalation
Inhaled corticosteroids	Beclomethasone	Beclomethasone Medications List	Inhalation
Inhaled corticosteroids	Budesonide	Budesonide Medications List	Inhalation
Inhaled corticosteroids	Ciclesonide	Ciclesonide Medications List	Inhalation
Inhaled corticosteroids	Flunisolide	Flunisolide Medications List	Inhalation
Inhaled corticosteroids	Fluticasone	Fluticasone Medications List	Inhalation
Inhaled corticosteroids	Mometasone	Mometasone Medications List	Inhalation
Leukotriene modifiers	Montelukast	Montelukast Medications List	Oral
Leukotriene modifiers	Zafirlukast	Zafirlukast Medications List	Oral
Leukotriene modifiers	Zileuton	Zileuton Medications List	Oral
Methylxanthines	Theophylline	Theophylline Medications List	Oral

Asthma reliever medications

Description	Prescriptions	Medication lists	Route
Short-acting, inhaled beta-2 agonists	Albuterol	Albuterol Medications List	Inhalation
Short-acting, inhaled beta-2 agonists	Levalbuterol	Levalbuterol Medications List	Inhalation

Patient care opportunities

You can find patient care opportunities within the Patient360 application located on Availity Essentials *Payer Spaces*. To access the Patient360 application, you must have the Patient360 role assignment. From Availity's home page, select **Payer Spaces**, then choose the health plan from the menu. Choose the Patient360 tile from the **Payer Space Applications** menu and complete the required information on the screen. Gaps in care are located in the *Active Alerts* section of the *Member Summary*.

Email is the quickest and most direct way to receive important information from us.

To start receiving email from us (including some sent in lieu of fax or mail), submit your information using the QR code to the right or via our online form: bit.ly_qr-signup-wp-md.



