



California Physician Performance Initiative (CPPI)

Clinical Quality Measure Specifications 2009

Pharmacotherapy Management of COPD Exacerbation (PCE) (updated 8/14/09)

Measure:

The percentage of COPD exacerbations for members 40 years of age and older who had an acute inpatient discharge or ED encounter between October 1, 2007 through August 31, 2008 and who were dispensed appropriate medications. Two rates are reported.

1. Dispensed a systemic corticosteroid within 14 days of the event
2. Dispensed a bronchodilator within 30 days of the event

Note: The eligible population for this measure is based on acute inpatient discharges and ED visits, not on members. It is possible for the denominator to include multiple events for the same individual.

Eligible Population:

Adults 40 years or older, as of September 30, 2008.

Numerator Event:

**Event/
diagnosis** A COPD exacerbation as indicated by an acute inpatient discharge or ED encounter with a principal diagnosis of COPD.

Follow the steps below to identify the eligible population.

- Step 1** Identify all members who during the intake period had an acute inpatient discharge or an ED visit with a primary diagnosis of COPD. The table below identifies ED visits and acute inpatient discharges.

Codes to Identify COPD

Description	ICD-9-CM Diagnosis
Chronic bronchitis	491
Emphysema	492
COPD	496

Codes to Identify Visit Type

Description	CPT	UB Revenue
Acute inpatient		010x, 0110-0114, 0119, 0120-0124, 0129, 0130-0134, 0139, 0140-0144, 0149, 0150-0154, 0159, 016x, 020x-022x, 072x, 0987
ED Visit	99281-99285	045x, 0981

- Step 2** Determine all COPD episode dates. For each member identified in step 1, identify all acute inpatient discharges and ED visits. For an ED visit that leads to an acute inpatient stay with a primary diagnosis of COPD (identified in Step 1), exclude the ED visit and include only the inpatient stay.
- Step 3** Test for transfers. Exclude episode dates on which the member was transferred directly to an acute or nonacute care facility for any diagnosis.
- Step 4** Test for readmission. Exclude inpatient and ED Episode Dates on which the member was readmitted to an acute or nonacute care facility for any diagnosis on or seven days after discharge.
- Step 5** Calculate continuous enrollment. The member must be continuously enrolled without any gaps in coverage from the Episode Date through 30 days after the Episode Date.

Note: All Episode Dates that were not excluded should remain in the denominator. The denominator for this measure is based on acute inpatient discharges and ED visits, not members.

Continuous Enrollment in Health Plan:

Episode date through 30 days after the episode date.

An episode date is the date of service for any inpatient or ED claim/encounter during the intake period with a principal diagnosis of COPD. For an acute inpatient claim/encounter, the Episode Date is the date of discharge. For an ED claim/encounter, the Episode Date is the date of service

Exclusions:

None.

Numerator Event:

Systemic Corticosteroids

Dispensed prescription for systemic corticosteroid (Table PCE-C) on or 14 days after the Episode Date or active on the Episode Date.

Description	Prescription			
Glucocorticoids	• betamethasone	• hydrocortisone	• prednisolone	• triamcinolone
	• dexamethasone	• methylprednisolone	• prednisone	

Note: NCQA has provided a comprehensive list of medications and NDC codes on its Web site (www.ncqa.org).

Bronchodilators:

Dispensed prescription for a bronchodilator (Table PCE-D) on or 30 days after the Episode Date. The organization may count bronchodilators that are active on the Episode Date.

Description	Prescription		
Anticholinergic agents	• albuterol-ipratropium	• ipratropium	• tiotropium
Beta 2-agonists	• albuterol • arformoterol • budesonide-formoterol	• fluticasone-salmeterol • formoterol • levalbuterol	• metaproterenol • pirbuterol • salmeterol
Methylxanthines	• dyphylline-guaifenesin • guaifenesin-theophylline	• potassium iodide-theophylline	

Note: NCQA has provided a comprehensive list of medications and NDC codes on its Web site (www.ncqa.org).

Designated Specialties: Family Practice, internal medicine, allergy/immunology and pulmonology.

Measure Definition Source: NCQA HEDIS 2009.

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