

2022 HEDIS Measure Tips



One in a series of tip sheets that look at key Healthcare Effectiveness Data and Information Set measures, commonly referred to as HEDIS® measures.

Use of Imaging Studies for Low Back Pain (LBP)

Effectiveness of Care HEDIS® Measure*

HEDIS measure description

The percentage of members with a primary diagnosis of low back pain who did **not** have an imaging study (e.g., standard X-ray, MRI, CT scan) within 28 days of the diagnosis.

Measure population (denominator)

Members 18 to 75 years of age as of December 31 of the measurement year who had a primary diagnosis of low back pain from January 1 to December 3 of the measurement year.

Measure compliance (numerator)

The number of members with a primary diagnosis of low back pain who did **not** have an imaging study within 28 days following the diagnosis (such as a plain X-ray, MRI or CT scan).

Note: This measure is reported as an inverted rate. A higher score indicates appropriate treatment of low back pain (e.g., the percentage for whom imaging studies did not occur).

Did you know?

- In a three-month period, more than one-fourth of U.S. adults experience at least one day of back pain.
- Imaging studies done less than six weeks after the onset of low back pain rarely improve outcomes but do increase cost and radiation exposure.

This measure applies to both commercial and Medicare members.

continued

Exclusions

Condition and/or treatment	Time frame (through 28 days after diagnosis)
<ul style="list-style-type: none"> • Cancer • HIV • Major organ transplant 	History
<ul style="list-style-type: none"> • Osteoporosis Medication(s) • Lumbar surgery • Spondylopathy 	
<ul style="list-style-type: none"> • Recent trauma 	Prior 3 months (90 days)
<ul style="list-style-type: none"> • Low back pain diagnosis 	Prior 6 months (180 days)
<ul style="list-style-type: none"> • Neurologic impairment • Spinal infection 	Prior 12 months (1 year)
<ul style="list-style-type: none"> • Intravenous drug abuse 	
<ul style="list-style-type: none"> • Prolonged use of corticosteroids (defined as 90 consecutive days) 	Prior 12 months (1 year) <i>Does not include 28 days after</i>
Additional Exclusions	Time frame
<ul style="list-style-type: none"> • In hospice or using hospice services • Receiving palliative care 	During the measurement year
<ul style="list-style-type: none"> • Deceased members 	
<ul style="list-style-type: none"> • Members 66 years of age and older with advanced illness and frailty 	See <i>Advanced Illness and Frailty Guide</i> for details

Helpful HEDIS hints

- Acute low back pain can be managed by:
 - Staying active
 - Education on injury prevention
 - Safe back exercises
 - Use of over-the-counter pain relievers
- Avoid ordering diagnostic studies in the first 6 weeks of new-onset back pain unless certain “red flags” are present.

Red flags

- Severe or progressive neurologic deficits (e.g., bowel or bladder dysfunction, saddle paresthesia)
- Fever
- Sudden back pain with spinal tenderness (especially with a history of osteoporosis, cancer or steroid use)
- Trauma
- Serious underlying medical condition (e.g., cancer)
- If ordering an imaging study and less than six weeks have passed since the onset of back pain and an exclusion applies, be sure to code the exclusion in addition to the diagnoses of low back pain.

Resources

1. NIH News in Health. 2014. “When your back hurts: Don’t let back pain knock you flat.” newsinhealth.nih.gov/2014/12/when-your-back-hurts

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