Measure #255: Rh Immunoglobulin (Rhogam) for Rh-Negative Pregnant Women at Risk of Fetal Blood Exposure – National Quality Strategy Domain: Effective Clinical Care

2017 OPTIONS FOR INDIVIDUAL MEASURES:

CLAIMS ONLY

MEASURE TYPE:

Process

DESCRIPTION:

Percentage of Rh-negative pregnant women aged 14-50 years at risk of fetal blood exposure who receive Rh-Immunoglobulin (Rhogam) in the emergency department (ED)

INSTRUCTIONS:

This measure is to be reported <u>each time</u> a pregnant patient presents to the emergency department with complaints including blunt abdominal trauma, vaginal bleeding, ectopic pregnancy, and threatened or spontaneous abortion.

Claims data will be analyzed to determine the emergency department discharge. Patients who present to the emergency department with these complaints should have documentation in the medical record of receiving an order for Rh-Immunoglobulin (Rhogam). It is anticipated that eligible clinicians who provide care in the emergency department will submit this measure. The Part B claim form place of service field must indicate that the encounter has taken place in the emergency department.

Measure Reporting:

The listed denominator criteria is used to identify the intended patient population. The numerator quality-data codes included in this specification are used to submit the quality actions allowed by the measure. All measure-specific coding should be reported on the claim(s) representing the eligible encounter.

DENOMINATOR:

All pregnant female patients aged 14 to 50 years who are Rh-negative and at significant risk of fetal blood exposure

Denominator Criteria (Eligible Cases):

Female patients aged 14 to 50 years on date of encounter

AND

Diagnosis for Rh-Negative (ICD-10-CM): O36.0110, O36.0111, O36.0190, O36.0191, O36.0910, O36.0911, O36.0990, O36.0991

AND

Diagnosis of High Risk Pregnancy Complications (ICD-10-CM): 000.8, 000.9, 002.1, 003.1, 003.6, 004.6, 007.1, 008.1, 020.0, 020.8, 020.9, 026.891, 043.011, 043.019, 044.10, 044.11, 045.001, 045.009, 045.011, 045.019, 045.021, 045.029, 045.091, 045.099, 045.8X1, 045.8X9, 045.90, 045.91, 046.001, 046.011, 046.021, 046.8X1, 046.8X9, 046.90, 046.91

AND

Patient encounter during the performance period (CPT): 99281, 99282, 99283, 99284, 99285, 99291 AND

Place of Service Indicator: 23

(The Part B claim form Place of Service field must indicate emergency department)

NUMERATOR:

Patients who receive an order for Rh-Immunoglobulin (Rhogam) in the ED

Numerator Instructions: This measure is to be reported **each time** a patient meets the requirements as indicated in the denominator. In the clinical event a patient has documented receipt of Rhogam report quality-data code **G8810**.

Numerator Quality-Data Coding Options:

Documentation in Medical Record that Rh-immunoglobulin (Rhogam) Ordered Performance Met: G8809: Rh-immunoglobulin (Rhogam) ordered

OR

Rh-immunoglobulin (Rhogam) not Ordered for Documented Reasons

Denominator Exception: G8810: Rh-immunoglobulin (Rhogam) not ordered for reasons

documented by clinician (e.g., patient had prior

documented receipt of Rhogam within 12 weeks, patient

refusal)

<u>OR</u>

Rh-immunoglobulin (Rhogam) not Ordered, Reason not Given

Performance Not Met: G8811: Documentation Rh-immunoglobulin (Rhogam) was not

ordered, reason not given

RATIONALE:

The potential for maternal exposure to fetal blood is a concern among pregnant patients presenting to the emergency department with a number of common complaints or diagnoses including abdominal pain, blunt abdominal trauma, vaginal bleeding, ectopic pregnancy, threatened or spontaneous abortion, or pelvic instrumentation. This concern increases after the first trimester as fetal RBC mass increases.

CLINICAL RECOMMENDATION STATEMENTS:

Exposure to less than 0.1 ml of fetal blood of a different rhesus (Rh) antigenicity among Rh negative has been shown to increase the risk of maternal alloimmunization. Alloimmunization can result in hemolytic disease of the fetus or newborn including spontaneous abortion, fetal hemolytic anemia, hydrops fetalis and severe neonatal jaundice in subsequent pregnancies.

Anti-D-immunoglobulin reduces the likelihood of alloimmunization. Routine administration of antenatal anti-D-immunoglobulin has been demonstrated as an effective prophylaxis and is recommended by the American College of Obstetricians and Gynecologists (ACOG). Guidelines (UK) recommend administration of anti-D-immunogloblin after the first trimester for a number of sensitizing episodes including but not limited to uterine bleeding and for recurrent, painful or heavy uterine bleeding in the first trimester.

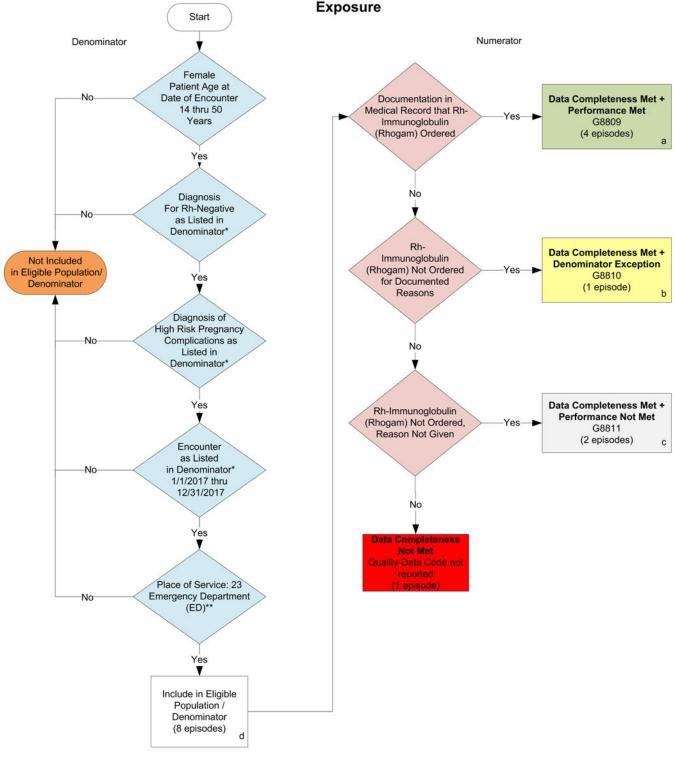
Routine use of anti-D prophylaxis is somewhat controversial as this is done to prevent so-called silent sensitization occurring in the absence of a clear hemorrhage, but this is generally performed in the UK and the US. As anti-D-immunoglobulin does cross the placenta, there are some concerns that this could cause fetal anemia, however, this was felt to be a minor concern relative to the benefits of administration.

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2017 Claims Individual Measure Flow #255: Rh Immunoglobulin (Rhogam) for Rh-Negative Pregnant Women at Risk of Fetal Blood



^{*}See the posted Measure Specification for specific coding and instructions to report this measure.

NOTE: Reporting Frequency - Episode

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^{**}Encounter must occur in the Emergency Department (ED).

2017 Claims/Registry Individual Measure Flow #255: Rh Immunoglobulin (Rhogam) for Rh-Negative Pregnant Women at Risk of Fetal Blood Exposure

SAMPLE CALCULATIONS:

Data Completeness=

Performance Met (a=4 episodes) + Denominator Exception (b=1 episode) + Performance Not Met (c=2 episodes) = 7 episodes = 87.50% Eligible Population / Denominator (d=8 episodes) = 8 episodes

Performance Rate=

Performance Met (a=4 episodes) = 4 episodes = 66.67%

Data Completeness Numerator (7 episodes) – Denominator Exception (1 episodes) = 6 episodes

NOTE: Reporting Frequency - Episode

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^{**}Encounter must occur in the Emergency Department (ED).

2017 Claims Individual Measure Flow

#255: Rh Immunoglobulin (Rhogam) for Rh-Negative Pregnant Women at Risk of Fetal Blood Exposure

Please refer to the specific section of the Measure Specification to identify the denominator and numerator information for use in reporting this Individual Measure.

- 1. Start with Denominator
- 2. Check Patient Age and Gender:
 - a. If the Female Age is equal to 14 thru 50 years of age on Date of Encounter equals No during the measurement period, do not include in Eligible Patient Population. Stop Processing.
 - b. If the Female Age is equal to 14 thru 50 years of age on Date of Encounter equals Yes during the measurement period, proceed to check Patient Diagnosis.
- 3. Check Patient Diagnosis:
 - a. If Diagnosis for Rh-Negative as Listed in the Denominator equals No, do not include in Eligible Patient Population. Stop Processing.
 - b. If Diagnosis for Rh-Negative as Listed in the Denominator equals Yes, proceed to check Diagnosis of High Risk Pregnancy Complications.
- 4. Check Diagnosis of High Risk Pregnancy Complications:
 - a. If Diagnosis of High Risk Pregnancy Complications as Listed in the Denominator equals No, do not include in Eligible Patient Population. Stop Processing.
 - b. If Diagnosis of High Risk Pregnancy Complications as Listed in the Denominator equals Yes, proceed to check Encounter Performed.
- 5. Check Encounter Performed:
 - a. If Encounter as Listed in the Denominator equals No, do not include in Eligible Patient Population. Stop Processing.
 - b. If Encounter as Listed in the Denominator equals Yes, proceed to check Place of Service: 23 Emergency Department (ED)
- 6. Check Place of Service: 23 Emergency Department (ED):
 - a. If Place of Service: 23 Emergency Department (ED) as Listed in the Denominator equals No, do not include in Eligible Patient Population. Stop Processing.
 - b. If Place of Service: 23 Emergency Department (ED) as Listed in the Denominator equals Yes, include in the Eligible population.
- Denominator Population:
 - a. Denominator population is all Eligible Patients in the denominator. Denominator is represented as Denominator in the Sample Calculation listed at the end of this document. Letter d equals 8 episodes in the sample calculation.
- 8. Start Numerator

- Check Documentation in Medical Record that Rh-Immunoglobulin (Rhogam) Ordered:
 - a. If Documentation in Medical Record that Rh-Immunoglobulin (Rhogam) Ordered equals Yes, include in Data Completeness Met and Performance Met.
 - b. Data Completeness Met and Performance Met is represented in the Data Completeness and Performance Rate in the Sample Calculation listed at the end of this document. Letter a equals 4 episodes in Sample Calculation.
 - If Documentation in Medical Record that Rh-Immunoglobulin (Rhogam) Ordered equals No, proceed to Rh-Immunoglobulin (Rhogam) Not Ordered for Documented Reasons.
- 10. Check Rh-Immunoglobulin (Rhogam) Not Ordered for Documented Reasons:
 - a. If Rh-Immunoglobulin (Rhogam) Not Ordered for Documented Reasons equals Yes, include in Data Completeness Met and Performance Exclusion.
 - Data Completeness Met and Denominator Exception is represented in the Data Completeness and Performance Rate in the Sample Calculation listed at the end of this document. Letter b equals 1 episode in the Sample Calculation.
 - c. If Rh-Immunoglobulin (Rhogam) Not Ordered for Documented Reasons equals No, proceed to Documentation Rh-Immunoglobulin (Rhogam) was Not Ordered, Reason Not Given.
- 11. Check Rh-Immunoglobulin (Rhogam) was Not Ordered, Reason Not Given:
 - a. If Rh-Immunoglobulin (Rhogam) was Not Ordered, Reason Not Given equals Yes, include in the Data Completeness Met and Performance Not Met.
 - b. Data Completeness Met and Performance Not Met is represented in the Data Completeness in the Sample Calculation listed at the end of this document. Letter c equals 2 episodes in the Sample Calculation.
 - If Rh-Immunoglobulin (Rhogam) was Not Ordered, Reason Not Given equals No, proceed to Data Completeness Not Met.
- 12. Check Data Completeness Not Met
 - a. If Data Completeness Not Met equals No, Quality Data Code was not reported. 1 episode has been subtracted from the Data Completeness numerator in the sample calculation.

SAMPLE CALCULATIONS: Data Completeness= Performance Met (a=4 episodes) + Denominator Exception (b=1 episode) + Performance Not Met (c=2 episodes) = 7 episodes 8 episodes Eligible Population / Denominator (d=8 episodes) = 87.50% Performance Rate= Performance Met (a=4 episodes) = 4 episodes = 66.67% Data Completeness Numerator (7 episodes) - Denominator Exception (1 episodes) = 6 episodes