

**UREQA1 Ankylosing Spondylitis:
 Controlled Disease
 2021**

Measure	UREQA1
Measure Title	Ankylosing Spondylitis: Controlled Disease
Measure Description	Percentage of qualifying visits for patients aged 18 years and older with a diagnosis of ankylosing spondylitis for at least 6 months whose most recent BASDAI score is less than 4.
Reporting Frequency	This measure is reported for each qualifying visit
High Priority or Outcome	<input checked="" type="checkbox"/> Outcome <input type="checkbox"/> High Priority <input type="checkbox"/> Neither
High Priority Type	Outcome
Measure Type	Outcome
NQS Domain	<input type="checkbox"/> Communication and Care Coordination <input type="checkbox"/> Community/Population Health <input checked="" type="checkbox"/> Effective Clinical Care <input type="checkbox"/> Efficiency and Cost Reduction <input type="checkbox"/> Patient Safety <input type="checkbox"/> Person and Caregiver-Centered Experience and Outcomes
NQS Domain Rationale	A Bath Ankylosing Spondylitis Disease Activity Index (BASDAI) score of less than four (4) is an indicator of controlled disease state for ankylosing spondylitis (1) (3).
Inverse Measure	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (Yes indicates lower score is objective)
Risk Adjusted	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Proportional Measure	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Continuous Variable Measure	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Ration Measure	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Number of Performance Rates	One
Meaningful Measure Area	Management of Chronic Conditions

**UREQA1 Ankylosing Spondylitis:
Controlled Disease
2021**

**Applicable To
Specialties/Subspecialties**

Rheumatology

Denominator

Patients aged 18 years and older as of the date of service

AND

Diagnosis of ankylosing spondylitis for at least 6 months:

- M45.0 Ankylosing spondylitis of multiple sites in spine
- M45.1 Ankylosing spondylitis of occipito-atlanto-axial region
- M45.2 Ankylosing spondylitis of cervical region
- M45.3 Ankylosing spondylitis of cervicothoracic region
- M45.4 Ankylosing spondylitis of thoracic region
- M45.5 Ankylosing spondylitis of thoracolumbar region
- M45.6 Ankylosing spondylitis lumbar region
- M45.7 Ankylosing spondylitis of lumbosacral region
- M45.8 Ankylosing spondylitis sacral and sacrococcygeal region
- M45.9 Ankylosing spondylitis of unspecified sites in spine

AND

Patient encounter during the performance period (CPT or HCPCS): 99201, 99202, 99203, 99204, 99205, 99212, 99213, 99214, 99215

AND

POS 11 Office, 19 Off Campus-Outpatient Hospital or 22 On Campus-Outpatient Hospital

WITHOUT

Telehealth Modifier: GQ, GT , 95, POS 02

Hospice Service Modifier: GV, GW

Denominator Exclusions

As noted above, telehealth visits and patients admitted to hospice are excluded

Numerator

Visits for which a Bath Ankylosing Spondylitis Disease Activity Index (BASDAI) score was performed and documented within the last 6 months.

Performance Met

Most recent BASDAI score is below 4.0

Performance Not Met

Most recent BASDAI score is at or above 4.0

Performance Exceptions

Patient reason for not obtaining BASDAI score (e.g. patient refuses to complete clinical survey, late arrival for visit, communication barrier)

OR

Visit is unrelated to primary management of ankylosing spondylitis

**UREQA1 Ankylosing Spondylitis:
Controlled Disease
2021**

**Evidence of
Reliability/Validity**

When evaluated using strict clinical parameters, the BASDAI was validated (4):

- BASDAI demonstrated statistically significant ($p < 0.001$) reliability.
- BASDAI incorporates a reasonable scale. The individual symptoms and the index as a whole demonstrated good score distribution, using 95% of the scale.

BASDAI demonstrates a sensitivity to change within a short period of time. Following a 3 week physiotherapy course, the BASDAI showed a significant ($p = 0.009$) 16.4% score improvement.

Other Information

Rationale:

Ankylosing spondylitis is an immune-mediated inflammatory arthritis of the spine and, less commonly, peripheral joints. There is no known single etiology. It is likely a combination of genetic, environmental, and immunologic factors that can result in active ankylosing spondylitis.

As ankylosing spondylitis progresses, deformities of the spine such as flattening of the normal lumbar lordosis, kyphosis of the thoracic spine, and hyperextension of the cervical spine can occur. Fusion of the sacroiliac (SI) joints may also occur.

The disease negatively impacts the quality of life (QoL) of those affected. The most common problems are stiffness, back pain, fatigue, poor sleep, side effects of medications, negative body image, and concerns about the future; especially the ability to maintain full-time employment. The latter problem also contributes to the high costs associated with caring for these patients.

Measuring disease activity is important for tracking a patient's progress toward the treatment target and is extremely important in monitoring outcomes (1).

United Rheumatology recommends the use of the BASDAI to measure disease activity in patients with ankylosing spondylitis (1). The BASDAI is the result of the work of a research team consisting of rheumatologists, physiotherapists, and research associates with a special interest in AS who developed the index in Bath, England.

With the BASDAI system, the patient is asked to evaluate the following six parameters (with six questions [Q1-Q6]) on a scale of 1 (low impact on QoL) to 10 (high impact on QoL):

- Fatigue and/or tiredness experienced by the patient (Q1)
- Spinal pain (Q2)

**UREQA1 Ankylosing Spondylitis:
Controlled Disease
2021**

- Peripheral joint pain or swelling (Q3)
- Enthesitis (Q4)
- Intensity of morning stiffness (Q5)
- Duration of morning stiffness (Q6)

The BASDAI score is calculated according to the following formula:

$$\frac{\{Q1+Q2+Q3+Q4+\frac{Q5+Q6}{2}\}}{5} = \text{BASDAI}$$

With a minimum score of 0 and a maximum score of 10, scores of 4 or more suggest suboptimal control. Patients with these scores are good candidates for a change in their medical therapy (1) (2).

See <https://qxmd.com/calculate/basdai> for an interactive BASDI score calculator.

Clinical Recommendation Statements:

The total BASDAI score should be documented in the medical record along with any recommended changes in treatment based on indicators of declining QoL or disease progression.

Citations:

- (1) United Rheumatology Clinical Practice Guideline - Axial Spondyloarthritis, Version 1.1.2016, April 2016
- (2) BASDAI. Assess Disease Activity in Ankylosing Spondylitis. Calculate by QxMD. <https://qxmd.com/calculate/basdai>. Accessed February 29, 2016.
- (3) BASDAI Bath Ankylosing Spondylitis Disease Activity Index. <http://basdai.com/>. Accessed September 26, 2017.
- (4) J Rheumatol. 1994 Dec;21(12):2286-91. Retrieved from <https://www.ncbi.nlm.nih.gov/pubmed/7699630?dopt=Abstract>. Accessed September 26, 2017.