

eCQM Title	Falls: Screening for Future Fall Risk		
eCQM Identifier (Measure Authoring Tool)	139	eCQM Version number	7.2.000
NQF Number	0101	GUID	bc5b4a57-b964-4399-9d40-667c896f31ea
Measurement Period	January 1, 20XX through December 31, 20XX		
Measure Steward	National Committee for Quality Assurance		
Measure Developer	American Medical Association (AMA)		
Measure Developer	National Committee for Quality Assurance		
Measure Developer	PCPI(R) Foundation (PCPI[R])		
Endorsed By	National Quality Forum		
Description	Percentage of patients 65 years of age and older who were screened for future fall risk during the measurement period		
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Measure Scoring	Proportion		
Measure Type	Process		
Stratification	None		
Risk Adjustment	None		
Rate Aggregation	None		
Rationale	<p>As the leading cause of both fatal and nonfatal injuries for older adults, falls are one of the most common and significant health issues facing people aged 65 years or older (Schneider, Shubert and Harmon 2010). Moreover, the rate of falls increases with age (Dykes et al. 2010). Older adults are five times more likely to be hospitalized for fall-related injuries than any other cause-related injury. It is estimated that one in every three adults over 65 will fall each year (Centers for Disease Control and Prevention 2015). In those over age 80, the rate of falls increases to fifty percent (Doherty et al. 2009). Falls are also associated with substantial cost and resource use, approaching \$30,000 per fall hospitalization (Woolcott et al. 2011). Identifying at-risk patients is the most important part of management, as applying preventive measures in this vulnerable population can have a profound effect on public health (al-Aama 2011). Family physicians have a pivotal role in screening older patients for risk of falls, and applying preventive strategies for patients at risk (al-Aama 2011).</p>		
Clinical Recommendation Statement	<p>All older persons who are under the care of a health professional (or their caregivers) should be asked at least once a year about falls. (AGS/BGS/AAOS)</p> <p>Older persons who present for medical attention because of a fall, report recurrent falls in the past year, or demonstrate abnormalities of gait and/or balance should have a fall evaluation performed. This evaluation should be performed by a clinician with appropriate skills and experience, which may necessitate referral to a specialist (eg, geriatrician). (AGS/BGS/AAOS)</p> <p>Older people in contact with health care professionals should be asked routinely whether they have fallen in the past year and asked about the frequency, context, and characteristics of the falls. (NICE) (Grade C)</p> <p>Older people reporting a fall or considered at risk of falling should be observed for balance and gait deficits and considered for their ability to benefit from interventions to improve strength and balance. (NICE) (Grade C)</p>		
Improvement Notation	A higher score indicates better quality		
Reference	al-Aama, T. 2011. "Falls in the Elderly: Spectrum and Prevention." Can Fam Physician 57(7):771-6.		
Reference	Centers for Disease Control and Prevention. 2015. "Important Facts about Falls" (December 14, 2015) http://www.cdc.gov/HomeandRecreationalSafety/Falls/adultfalls.html		
Reference	Doherty, M., and J. Crossen-Sills. 2009. "Fall Risk: Keep your patients in balance." The Nurse Practitioner: The American Journal of Primary Health Care 34(12):46-51.		
Reference	American Geriatrics Society, British Geriatrics Society, and American Academy of Orthopaedic Surgeons Panel on Falls Prevention: Guideline for the prevention of falls in older persons. Journal of the American Geriatrics Society. 2001; 49: 664-672.		
Reference	National Institute for Clinical Excellence (NICE). Falls: the assessment and prevention of falls in older people. November 2004; clinical guideline 21. Available at: https://www.nice.org.uk/guidance/cg161		
Reference	Dykes, P.C., D.L. Carroll DL, A. Hurley A, S. Lipsitz S, A. Benoit A, F. Chang F, S. Meltzer S, R. Tsurikova R, L. Zuyov L, B. Middleton B. 2010. "Fall Prevention in Acute Care Hospitals: A Randomized Trial." JAMA . 2010;304(17):1912-1918.		
Reference	Schneider, E.C., T.E. Shubert, and K.J. Harmon. 2010. "Addressing the Escalating Public Health Issue of Falls Among Older Adults." NC Med J 71(6):547-52.		
Reference	Woolcott, J.C., K.M. Khan, S. Mitrovic, A.H. Anis, C.A. Marra. 2011. "The Cost of Fall Related Presentations to the ED: A Prospective, In-Person, Patient-Tracking Analysis of Health Resource Utilization." Osteoporos Int [Epub ahead of print].		
Definition	<p>Screening for Future Fall Risk: Assessment of whether an individual has experienced a fall or problems with gait or balance. A specific screening tool is not required for this measure, however potential screening tools include the Morse Fall Scale and the timed Get-Up-And-Go test.</p> <p>Fall: A sudden, unintentional change in position causing an individual to land at a lower level, on an object, the floor, or the ground, other than as a consequence of sudden onset of paralysis, epileptic seizure, or overwhelming external force.</p>		
Guidance	None		
Transmission Format	TBD		
Initial Population	Patients aged 65 years and older with a visit during the measurement period		
Denominator	Equals Initial Population		
Denominator Exclusions	Exclude patients whose hospice care overlaps the measurement period.		

	Exclude patients who were non-ambulatory at some point in the measurement period.
Numerator	Patients who were screened for future fall risk at least once within the measurement period
Numerator Exclusions	Not Applicable
Denominator Exceptions	None
Supplemental Data Elements	For every patient evaluated by this measure also identify payer, race, ethnicity and sex

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Population Criteria

Initial Population

```
exists ( ["Patient Characteristic Birthdate"] Birthdate
  where Global."CalendarAgeInYearsAt"(Birthdate.birthDatetime, start of "Measurement Period")>= 65
)
and exists "Qualifying Encounter"
```

Denominator

"Initial Population"

Denominator Exclusions

```
"Not Ambulatory During Measurement Period"
or ( "Not Ambulatory Prior to Measurement Period"
  and not exists ( "Ambulatory Status Assessment During Measurement Period" )
)
or Hospice."Has Hospice"
```

Numerator

```
exists ["Assessment, Performed": "Falls Screening"] FallsScreen
  where FallsScreen.authorDatetime during "Measurement Period"
```

Numerator Exclusions

None

Denominator Exceptions

None

Stratification

None

Definitions

Ambulatory Status Assessment During Measurement Period

```
["Assessment, Performed": "Ambulatory Status"] AmbulatoryStatusAssessed
  where AmbulatoryStatusAssessed.authorDatetime during "Measurement Period"
  and AmbulatoryStatusAssessed.result is not null
```

Denominator

"Initial Population"

Denominator Exclusions

```
"Not Ambulatory During Measurement Period"
or ( "Not Ambulatory Prior to Measurement Period"
  and not exists ( "Ambulatory Status Assessment During Measurement Period" )
)
or Hospice."Has Hospice"
```

Hospice.Has Hospice

```
exists ( ["Encounter, Performed": "Encounter Inpatient"] DischargeHospice
  where ( DischargeHospice.dischargeDisposition as Code ~ "Discharge to home for hospice care (procedure)"
  or DischargeHospice.dischargeDisposition as Code ~ "Discharge to healthcare facility for hospice care (procedure)"
)
  and DischargeHospice.relevantPeriod ends during "Measurement Period"
)
or exists ( ["Intervention, Order": "Hospice care ambulatory"] HospiceOrder
  where HospiceOrder.authorDatetime during "Measurement Period"
)
or exists ( ["Intervention, Performed": "Hospice care ambulatory"] HospicePerformed
  where HospicePerformed.relevantPeriod overlaps "Measurement Period"
)
```

Initial Population

```
exists ( ["Patient Characteristic Birthdate"] Birthdate
  where Global."CalendarAgeInYearsAt"(Birthdate.birthDatetime, start of "Measurement Period")>= 65
)
and exists "Qualifying Encounter"
```

Not Ambulatory During Measurement Period

```
exists ( "Ambulatory Status Assessment During Measurement Period" AmbulatoryStatusAssessed
  where AmbulatoryStatusAssessed.result in "Patient not ambulatory"
)
```

Not Ambulatory Prior to Measurement Period

```
Last(["Assessment, Performed": "Ambulatory Status"] PriorAmbulatoryStatus
  where PriorAmbulatoryStatus.authorDatetime before start "Measurement Period"
  sort by authorDatetime
).result in "Patient not ambulatory"
```

Numerator

```
exists ["Assessment, Performed": "Falls Screening"] FallsScreen
  where FallsScreen.authorDatetime during "Measurement Period"
```

Qualifying Encounter

```
(["Encounter, Performed": "Office Visit"]
 union ["Encounter, Performed": "Annual Wellness Visit"]
 union ["Encounter, Performed": "Preventive Care Services - Established Office Visit, 18 and Up"]
 union ["Encounter, Performed": "Preventive Care Services-Initial Office Visit, 18 and Up"]
 union ["Encounter, Performed": "Home Healthcare Services"]
 union ["Encounter, Performed": "Ophthalmological Services"]
 union ["Encounter, Performed": "Preventive Care Services-Individual Counseling"]
 union ["Encounter, Performed": "Discharge Services - Nursing Facility"]
 union ["Encounter, Performed": "Nursing Facility Visit"]
 union ["Encounter, Performed": "Care Services in Long-Term Residential Facility"]
 union ["Encounter, Performed": "Audiology Visit"] ) ValidEncounter
 where ValidEncounter.relevantPeriod during "Measurement Period"
```

SDE Ethnicity

```
["Patient Characteristic Ethnicity": "Ethnicity"]
```

SDE Payer

```
["Patient Characteristic Payer": "Payer"]
```

SDE Race

```
["Patient Characteristic Race": "Race"]
```

SDE Sex

```
["Patient Characteristic Sex": "ONC Administrative Sex"]
```

Functions**Global.CalendarAgeInYearsAt(BirthDateTime DateTime, AsOf DateTime)**

```
years between ToDate(BirthDateTime)and ToDate(AsOf)
```

Global.ToDate(Value DateTime)

```
DateTime(year from Value, month from Value, day from Value, 0, 0, 0, 0, timezone from Value)
```

Terminology

- codesystem "SNOMEDCT" using "2.16.840.1.113883.6.96 version 2017-09"
- code "Discharge to healthcare facility for hospice care (procedure)" using "SNOMEDCT version 2017-09 Code (428371000124100)"
- code "Discharge to home for hospice care (procedure)" using "SNOMEDCT version 2017-09 Code (428361000124107)"
- valueset "Ambulatory Status" using "2.16.840.1.113883.3.464.1003.118.11.1219"
- valueset "Annual Wellness Visit" using "2.16.840.1.113883.3.526.3.1240"
- valueset "Audiology Visit" using "2.16.840.1.113883.3.464.1003.101.12.1066"
- valueset "Care Services in Long-Term Residential Facility" using "2.16.840.1.113883.3.464.1003.101.12.1014"
- valueset "Discharge Services - Nursing Facility" using "2.16.840.1.113883.3.464.1003.101.12.1013"
- valueset "Encounter Inpatient" using "2.16.840.1.113883.3.666.5.307"
- valueset "Ethnicity" using "2.16.840.1.114222.4.11.837"
- valueset "Falls Screening" using "2.16.840.1.113883.3.464.1003.118.12.1028"
- valueset "Home Healthcare Services" using "2.16.840.1.113883.3.464.1003.101.12.1016"
- valueset "Hospice care ambulatory" using "2.16.840.1.113762.1.4.1108.15"
- valueset "Nursing Facility Visit" using "2.16.840.1.113883.3.464.1003.101.12.1012"
- valueset "Office Visit" using "2.16.840.1.113883.3.464.1003.101.12.1001"
- valueset "ONC Administrative Sex" using "2.16.840.1.113762.1.4.1"
- valueset "Ophthalmological Services" using "2.16.840.1.113883.3.526.3.1285"
- valueset "Patient not ambulatory" using "2.16.840.1.113883.3.464.1003.118.12.1009"
- valueset "Payer" using "2.16.840.1.114222.4.11.3591"
- valueset "Preventive Care Services - Established Office Visit, 18 and Up" using "2.16.840.1.113883.3.464.1003.101.12.1025"
- valueset "Preventive Care Services-Individual Counseling" using "2.16.840.1.113883.3.464.1003.101.12.1026"
- valueset "Preventive Care Services-Initial Office Visit, 18 and Up" using "2.16.840.1.113883.3.464.1003.101.12.1023"
- valueset "Race" using "2.16.840.1.114222.4.11.836"

Data Criteria (QDM Data Elements)

- "Assessment, Performed: Ambulatory Status" using "Ambulatory Status (2.16.840.1.113883.3.464.1003.118.11.1219)"
- "Assessment, Performed: Falls Screening" using "Falls Screening (2.16.840.1.113883.3.464.1003.118.12.1028)"
- "Encounter, Performed: Annual Wellness Visit" using "Annual Wellness Visit (2.16.840.1.113883.3.526.3.1240)"
- "Encounter, Performed: Audiology Visit" using "Audiology Visit (2.16.840.1.113883.3.464.1003.101.12.1066)"
- "Encounter, Performed: Care Services in Long-Term Residential Facility" using "Care Services in Long-Term Residential Facility (2.16.840.1.113883.3.464.1003.101.12.1014)"
- "Encounter, Performed: Discharge Services - Nursing Facility" using "Discharge Services - Nursing Facility (2.16.840.1.113883.3.464.1003.101.12.1013)"
- "Encounter, Performed: Encounter Inpatient" using "Encounter Inpatient (2.16.840.1.113883.3.666.5.307)"
- "Encounter, Performed: Home Healthcare Services" using "Home Healthcare Services (2.16.840.1.113883.3.464.1003.101.12.1016)"
- "Encounter, Performed: Nursing Facility Visit" using "Nursing Facility Visit (2.16.840.1.113883.3.464.1003.101.12.1012)"
- "Encounter, Performed: Office Visit" using "Office Visit (2.16.840.1.113883.3.464.1003.101.12.1001)"
- "Encounter, Performed: Ophthalmological Services" using "Ophthalmological Services (2.16.840.1.113883.3.526.3.1285)"
- "Encounter, Performed: Preventive Care Services - Established Office Visit, 18 and Up" using "Preventive Care Services - Established Office Visit, 18 and Up (2.16.840.1.113883.3.464.1003.101.12.1025)"
- "Encounter, Performed: Preventive Care Services-Individual Counseling" using "Preventive Care Services-Individual Counseling (2.16.840.1.113883.3.464.1003.101.12.1026)"
- "Encounter, Performed: Preventive Care Services-Initial Office Visit, 18 and Up" using "Preventive Care Services-Initial Office Visit, 18 and Up (2.16.840.1.113883.3.464.1003.101.12.1023)"
- "Intervention, Order: Hospice care ambulatory" using "Hospice care ambulatory (2.16.840.1.113762.1.4.1108.15)"
- "Intervention, Performed: Hospice care ambulatory" using "Hospice care ambulatory (2.16.840.1.113762.1.4.1108.15)"
- "Patient Characteristic Ethnicity: Ethnicity" using "Ethnicity (2.16.840.1.114222.4.11.837)"
- "Patient Characteristic Payer: Payer" using "Payer (2.16.840.1.114222.4.11.3591)"
- "Patient Characteristic Race: Race" using "Race (2.16.840.1.114222.4.11.836)"
- "Patient Characteristic Sex: ONC Administrative Sex" using "ONC Administrative Sex (2.16.840.1.113762.1.4.1)"

Supplemental Data Elements**SDE Ethnicity**

```
["Patient Characteristic Ethnicity": "Ethnicity"]
```

SDE Payer

```
["Patient Characteristic Payer": "Payer"]
```

SDE Race

```
["Patient Characteristic Race": "Race"]
```

SDE Sex

```
["Patient Characteristic Sex": "ONC Administrative Sex"]
```

Risk Adjustment Variables

```
None
```

Measure Set	None
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