

# Disease-Modifying Anti-Rheumatic Drug Therapy for Rheumatoid Arthritis



*Rheumatoid arthritis is a serious autoimmune and inflammatory disease that mainly attacks the joints, causing pain, stiffness, swelling, and decreased movement. Early intervention with the use of a disease-modifying anti-rheumatic drug (DMARD) may slow disease progression and help prevent joint damage.<sup>1,2</sup>*

**Learn how to improve your Healthcare Effectiveness Data and Information Set (HEDIS®) rates by using this tip sheet about the Disease-Modifying Anti-Rheumatic Drug Therapy for Rheumatoid Arthritis (ART) measure, what codes to use and how to correct reporting diagnosis error.**

## Measure

Patients ages 18 and older who were diagnosed with rheumatoid arthritis (RA) and who were dispensed at least one ambulatory prescription for a disease-modifying anti-rheumatic drug (DMARD).

Patients who received a DMARD can be identified by evidence indicated on the following:

- Claim form/encounter data (see DMARD codes below).
- Pharmacy claim (see DMARD medications below).

**Note:** Patients must have at least two visits with different dates of service on or between January 1 and November 30 of the measurement year with any diagnosis of rheumatoid arthritis. Visit type does not need to be the same for the two visits. Only one of the two visits may be an outpatient telehealth visit, a telephone visit or an online assessment.



## Exclusions:

- Patients who meet the following criteria anytime during the measurement year:
  - Patients ages 66 and older enrolled in an Institutional Special Needs Plan (I-SNP) or living long term in an institution.
  - Patients ages 66-80 with frailty and advanced illness.
  - Patients ages 81 and older with frailty.
  - Patients in hospice.
- Patients with HIV diagnosis (optional exclusion).
- Patients with pregnancy diagnosis anytime during the measurement year (optional exclusion).

(continued)

<sup>1</sup>American College of Rheumatology. Rheumatoid Arthritis. Updated March 2019. Retrieved from: [www.rheumatology.org/1-Am-A/Patient-Caregiver/Diseases-Conditions/Rheumatoid-Arthritis](http://www.rheumatology.org/1-Am-A/Patient-Caregiver/Diseases-Conditions/Rheumatoid-Arthritis).

<sup>2</sup>Centers for Disease Control and Prevention. Rheumatoid Arthritis. Updated March 2019. Retrieved from: [www.cdc.gov/arthritis/basics/rheumatoid-arthritis.html](http://www.cdc.gov/arthritis/basics/rheumatoid-arthritis.html).

# Disease-Modifying Anti-Rheumatic Drug Therapy for Rheumatoid Arthritis (continued)



- Perform differential diagnosis and lab work at the initial evaluation.
- Initiate care and treatment by a rheumatologist when indicated to prevent joint damage and misdiagnosis.
- Provide patient education on DMARDs.
- Ensure patients on DMARDs have two visit types coded for RA.
- Utilize telemedicine when indicated to increase compliance with second visit.
- Obtain reports from rheumatologist for medical records.
- Audit records for RA diagnosis accuracy (see correcting diagnosis below).



**Use the appropriate HCPCS code when billing for ART:**

- J0129
- J0135
- J0717
- J1438
- J1602
- J1745
- J3262
- J7502
- J7515
- J7516
- J7517
- J7518
- J9250
- J9260
- J9310
- Q5102
- Q5103
- Q5104



Description	Prescription
5-aminosalicylates	Sulfasalazine
Alkylating agents	Cyclophosphamide
Aminoquinolines	Hydroxychloroquine
Antirheumatics	<ul style="list-style-type: none"> <li>• Auranofin</li> <li>• Leflunomide</li> <li>• Methotrexate</li> <li>• Penicillamine</li> </ul>
Immunomodulators	<ul style="list-style-type: none"> <li>• Abatacept</li> <li>• Adalimumab</li> <li>• Anakinra</li> <li>• Certolizumab</li> <li>• Certolizumab pegol</li> <li>• Etanercept</li> <li>• Golimumab</li> <li>• Infliximab</li> <li>• Rituximab</li> <li>• Sarilumab</li> <li>• Tocilizumab</li> </ul>
Immunosuppressive agents	<ul style="list-style-type: none"> <li>• Azathioprine</li> <li>• Cyclosporine</li> <li>• Mycophenolate</li> </ul>
Janus kinase (JAK) inhibitor	<ul style="list-style-type: none"> <li>• Baricitinib</li> <li>• Tofacitinib</li> </ul>
Tetracyclines	Minocycline



- If a patient was reported with a rheumatoid arthritis diagnosis in error, follow these two steps:
1. Process the correction in the participating physician group's (PPG's) claim system with an adjustment, replacement or voided code.
  2. Send the 837 encounter form to Health Net\* for processing. Include the updated encounter process date and change in frequency code as listed below.

	Professional claims	Institutional claims
<b>Frequency codes</b>	<ul style="list-style-type: none"> <li>7 Adjustment/Replacement</li> <li>8 Void</li> </ul>	<ul style="list-style-type: none"> <li>6 Adjustment</li> <li>7 Replacement</li> <li>8 Void</li> </ul>

For more information, contact your encounter representative.

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