

**HEDIS® Tip Sheet | Effectiveness of Care Measure**

International Normalizing Ratio (INR) Monitoring for Individuals on Warfarin

Learn how to improve INR monitoring for individuals on Warfarin by using this tip sheet for key details about the measure, codes and best practices.

Measure

The percentage of patients ages 18 years and older who had at least one 56-day interval of Warfarin therapy and who received at least one international normalized ratio (INR) monitoring test during each 56-day interval with active Warfarin therapy.

A higher rate indicates better performance.

Eligible population

Age	18 years and older as of the first day of the measurement year (MY).
Continuous enrollment	The treatment period
Allowable gap	None
Required exclusions	<ul style="list-style-type: none">Exclude patients with a laboratory or medical claim for INR home monitoring during the measurement year.Exclude patients who died during the MY.
Event/diagnosis	Patients who have been dispensed Warfarin during the MY. Note: Pharmacy claims determine eligibility.

Administrative specification

Denominator	The eligible population.
Numerator	Patients who received at least one INR monitoring test during, or were hospitalized during, each 56-day interval during the treatment period. Note: Lab or hospitalization claims determine compliance

INR Monitoring for Individuals on Warfarin (cont.)

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Coding guidance

Measure	CPT	CPT II
INR Test – prothrombin time	85610	N/A
INR measurement performed	N/A	3555F

Exclusion coding guidance

Measure	CPT	HCPCS
INR Home Monitoring Exclusion	93792-93793	G0248-G0250

Best practices

- According to the American Heart Association (AHA), patients should be tested at least once a month, but some patients may require testing as often as twice a week¹.
- Discuss the common signs and symptoms of bleeding, blood clots, and a thrombotic event with the patient².
- Advise patients to take their Warfarin in the evening and schedule their INR test in the morning, so that the INR test result will be back in time to change that day's Warfarin dose if needed.
- Educate patients on staying away from foods high in vitamin K, which will lower the INR test result and cause an increased risk for the patient to develop a blood clot.
- Schedule follow-up appointments prior to patient leaving the office.
- Use Table 4, [Provider Checklist for Evaluation of Anticoagulation-Associated Bleeding](#)³.
- Use the [AHA Anticoagulant Therapy Toolkit](#).
- Use Table 2 for [Common drug interactions with Warfarin](#)⁴.

References

¹ North American Thrombosis Forum. (2023). A Guide to INR levels.

² Jaffer, Bragg. (2003). Practical Tips for Warfarin Dosing and Monitoring.

³ Anticoagulation Clinic of the Cleveland Clinic PDF page 9

⁴ Anticoagulation Clinic of the Cleveland Clinic PDF page 6