Osteoporosis Management in Women who had a Fracture (OMW)

This HEDIS measure aims to prevent subsequent fractures through appropriate diagnosis and treatment of osteoporosis. Fractures, especially in older women, can cause significant health issues including a decline in overall function, and in severe cases can lead to death.¹

APPLICABLE LINES OF BUSINESS

- Medicare Advantage

MEASURE DESCRIPTION

Percentage of women 67-85 years of age who suffered a fracture and had either a bone mineral density (BMD) test or received a prescription to treat osteoporosis within six months after the fracture.²

Note: Fractures of the finger, toe, face, or skull aren’t included in this measure.

EXCLUSIONS

Patients are excluded if they:

- Had a bone mineral density test during the 24 months prior to the fracture
- Received osteoporosis therapy during the 12 months prior to the fracture
- Received a dispensed prescription or had an active prescription to treat osteoporosis during the 12 months prior to the fracture
- Are 67 years of age and older as of December 31 of the measurement year and:
  - Are living long-term in an institution
  - Are enrolled in an institutional SNP (I-SNP)
- Are 81 years of age and older as of December 31 of the measurement year with frailty
- Are 67-80 years of age as of December 31 of the measurement year with advanced illness and frailty (for additional definition information see the Advanced Illness and Frailty Exclusions Guide)

INFORMATION THAT PATIENT MEDICAL RECORDS SHOULD INCLUDE

- A bone mineral density test within six months/180 days of the fracture, or
- A prescription to treat osteoporosis that’s filled within six months/180 days of the fracture
Table: Biphosphorates and Other agents

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<thead>
<tr>
<th>Description</th>
<th>Prescription</th>
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<tbody>
<tr>
<td>Biphosphorates</td>
<td>- Alendronate&lt;br&gt;- Alendronate-cholecalciferol&lt;br&gt;- Ibandronate</td>
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<tr>
<td></td>
<td>- Risedronate&lt;br&gt;- Zoledronic acid</td>
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<tr>
<td>Other agents</td>
<td>- Abaloparatide&lt;br&gt;- Denosumab</td>
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<tr>
<td></td>
<td>- Raloxifene&lt;br&gt;- Teriparatide</td>
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**TIPS FOR SUCCESS**

- Discuss osteoporosis prevention with your patients including calcium and vitamin D supplements, weight bearing exercises, and modifying risk factors.
- Remind patients to always tell their primary care provider about a fracture, even if they’ve received treatment for it elsewhere.
- Provide patients with a BMD prescription, where to call for an appointment, and encourage them to obtain the screening. Follow up with the patient to ensure the test was completed.
- Prescribe pharmacological treatment when appropriate.
- Screen female patients starting at age 65 to reduce the risk of osteoporosis.
- Consider screening women younger than 65 if they’re high risk. Some risk factors include low body weight, current tobacco use, excessive alcohol consumption, history of fractures, and glucocorticoid use.

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ii Peter Bach et al. HEDIS 2020 Technical Specifications for Health Plans (National Committee for Quality Assurance 2019), 221-228