Information – Use of Imaging Studies for Low Back Pain (LBP)

- HEDIS defines use of imaging studies for low back pain (LBP) as including the percentage of members 18-50 years of age who had a primary diagnosis of low back pain and DID NOT have an imaging study (plain X-ray, MRI, CT scan) within 28 days of diagnosis.
- Members included in this measure are: members who had an outpatient or ED visit with a primary diagnosis of Low Back Pain (excludes those who have prolonged use of corticosteroids, HIV, major organ transplant, spinal infection, cancer, recent trauma, IV drug abuse, or neurologic impairment).

Diagnosis Guidelines

- Evidence shows that many patients diagnosed with low back pain receive excessive imaging, which can lead to unnecessary worry and unneeded surgery. For the great majority of individuals who experience severe low back pain, pain improves within the first two weeks of onset.
- Even though guidelines support initial management without imaging for patients with uncomplicated low back pain, many physicians continue to order routine imaging without clear clinical indication. The evaluation for low back pain should include a complete, focused medical history. Avoiding imaging (X-ray, MRI, CT scans) for patients when there is no clinical necessity can prevent unnecessary harm, unintended consequences to patients, and reduce health care costs.

Effective Management Practice and Protocol

- Review your current process for appropriate clinical use of imaging studies for low back pain.
- Imaging should be avoided for patients when there is no clinical necessity.
- If you have patients who received an imaging study for low back pain, within 28 days of diagnosis without clinical indication, please review improvement opportunities to your current process.

Billing and Reporting Practices

- Where care has been rendered, please ensure a properly coded claim has been submitted. Visits billed should contain a diagnosis for all conditions for which the member is being treated.
- Claims meeting compliance are those where an imaging study (X-ray, MRI, CT scan) is performed more than 28 days after diagnosis.

Fidelis Care is committed to ensuring quality care for members and adhering to HEDIS standards and policies. Please visit fideliscare.org for educational resources and other helpful tools. For questions regarding the HEDIS measure, contact the Provider Call Center at 1-888-FIDELIS (1-888-343-3547) and follow the prompts.