

# Osteoporosis Management in Women Who Have a Fracture (OMW)

A hand in a white glove points towards a computer monitor displaying a medical scan. The background is dark blue.

# Overview

- Osteoporosis is caused mainly by lack of calcium and vitamin D
- Low calcium leads to decrease in bone mineral density and bone mass which causes porous bones
- Low calcium result in bones to gradually become thin and weaken
- Because the bones become thin and weak, a person is then at high risk for fractures

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## WHY IS IT IMPORTANT

- Nearly 80% of older Americans who suffer bone breaks are not tested or treated for osteoporosis
  - Making sure a bone mineral density test (DEXA) is done within 6 months after a fracture will help identify women at risk of osteoporosis
  - Calcium supplements or treatment with medication can be prescribed as a preventative measure against disability or death in case subsequent episodes of bone breaks occur
- Because women can have osteoporosis without knowing until they break a bone, bone density tests can confirm this “silent disease” and lead to preventative care against serious breaks that can impact quality of life permanently through disability or death
  - Current research shows that osteoporosis will cost the healthcare system \$25.3 billion by 2025 for 3 million fractures
- By treating osteoporosis early, we can decrease the healthcare cost and preventing fractures that would lead to long-term care, decreased quality of life, and potentially death

National Osteoporosis Foundation. *Osteoporosis Fast Facts*. Retrieved April 11, 2023, from <https://www.bonehealthandosteoporosis.org/wp-content/uploads/2015/12/Osteoporosis-Fast-Facts.pdf>

# Understanding the Measure

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- How is someone identified for the measure:
  - Women 67- 85 years of age who had a diagnosed fracture that occurred on July 1 of previous year through June 30 of the current year
- How is it measured:
  - Members who received a bone mineral density (BMD) test such as DEXA or prescription that was dispensed for a drug to treat osteoporosis in the 6 months after a fracture

**Note:** Fractures of finger, toe, face, and skull are not included in this measure

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## TALKING POINTS WITH PROVIDER GROUPS

- Discuss with provider groups the importance of ordering bone density (BMD) test to screen for osteoporosis in women that had a fracture within 6 months
- Share the quality care gaps report showing noncompliant eligible members for this measure – usually small denominator
- Advise provider groups to review these members' medical records to confirm if prescription drug was dispensed within 6 months after a diagnosed fracture or BMD test was completed

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## PROVIDER GROUP'S KEYS TO SUCCESS

- For members without visit (MWOV) or missing annual wellness visit in the current year, use the quality care gaps report to call them and schedule the annual wellness visit (AWV)
- Assist members with scheduling their (bone mineral density) BMD test
- Identify any barriers that is preventing member from getting the test. For example, transportation or does not know which facility to go to
- Remind members to complete Release of Information (ROI), if needed so primary care provider can get the BMD test result
- Documentation of prescription drug samples given to member on the medical record will close care gap – submit as supplemental medical record
  - Type of drug
  - Date of drug dispensed
- Submit supplemental data flat file to close care gaps in our system

# Resources

- [HEDIS Quick Reference Guide \(page 38\)](#)
- [Adult Pocket Guide](#)
- [OMW Flyer](#)

