

Advanced Illness & Frailty Exclusions Guide

Purpose: The National Committee for Quality Insurance (NCQA) is responsible for governing Healthcare Effectiveness Data and Information Set (HEDIS) clinical quality and performance measures which are directly tied to health plan star ratings. NCQA recognizes that not all measures may be relevant or clinically appropriate for older adults with serious illnesses. Therefore, exclusion opportunities exist to exclude patients from measures, such as controlling high blood pressure if patients are reported to have an advanced illness and frailty codes within the same performance year. This resource intends to guide clinicians to understand what advanced illness and frailty diagnoses should be reported to exclude patients from HEDIS measures. Please note reporting requirements and format may differ health plan to health plan should practices should work directly with their contracted payers (e.g., Medicare Advantage health plans) to understand their expectations.

Advance Illness Diagnoses	ICD-10 Range
Advanced Illness codes are certain ICD-10 diagnosis codes that carry an HCC (Hierarchical condition category) risk adjustment weight. These diagnoses represent serious illness; examples include: Malignancies Dementia Parkinson's Amyotrophic lateral sclerosis (ALS) Congestive Heart Failure (CHF) Emphysema Pulmonary fibrosis Chronic Kidney Disease (CKD) stage 5 Pressure ulcers Hepatic disease (fibrosis/sclerosis/cirrhosis, etc.)	Report the appropriate ICD-10 code

Frailty Diagnoses	ICD-10 Range
Pressure ulcers (Specify location & stage)	L89.(XXX)
Muscle weakness (generalized)	M62.81
Sarcopenia	M62.84
Muscle wasting and atrophy, not elsewhere classified, unspecified site (Specify location)	M62.50
Difficulty in walking, not elsewhere classified	R26.2
Unspecified abnormalities of gait and mobility	R26.9
Other reduced mobility (Reduced mobility not otherwise specified)	Z74.09
Age-related physical debility	R54
Abnormal weight loss	R63.4
Underweight (Use additional code to identify Body Mass Index (BMI) if known, Z68.XX)	R63.6
Age-related cognitive decline	R41.81
Weakness	R53.1
Other malaise (e.g., chronic debility, general physical deterioration)	R53.81
Other fatigue (e.g., fatigue not otherwise specified, lack of energy)	R53.83
Fall on same level from slipping, tripping, or stumbling, without striking something, initial encounter	W01.0A
Fall on the same level from slipping, tripping, and stumbling with subsequent striking against furniture	W01.190
Fall on/from unspecified stairs or steps	W10.9
History of falling	Z91.81
Dependence on supplemental oxygen	Z99.81
Dependence on wheelchair (wheelchair confinement status)	Z99.3



Frailty can also be demonstrated and reported using Healthcare Common Procedure Coding System (HCPCS) codes for Durable Medical Equipment (DME) use and home health utilization. DME HCPCS codes include the use of a cane, walker, wheelchair, commode, hospital bed, O2, ventilator, and respiratory assist devices (BiPAP, CPCP). Home health HCPCS codes include having home health and hospice nurses and private duty home personal care services. Clinicians should document the use of DME equipment and home health within their progress notes; then, the practice may consider implementing a process where coders or staff are assigned to review charts and submit the appropriate HCPCS codes for exclusion purposes.

HEDIS Advance Illness and Frailty Exclusions

- NCQA allows additional exclusions to the HEDIS Stars measures for patients with advance illness and frailty.
- Services measured by NCQA may not benefit older adults with limited life expectancy and advanced illness. Unnecessary tests or treatments could burden these patients or even be harmful.

Star Measures Exclusions

Patients 66 and older excluded if have both advance illness and frailty	Patients 81 and older excluded with frailty alone
Breast Cancer Screening	Controlling high blood pressure (CBP)
Colorectal Cancer Screening	Osteoporosis Management in Women who had a Fracture
Controlling Blood Pressure	Disease-Modifying Anti-Rheumatic Drug Therapy
Osteoporosis Mngt in Women who had a Fracture	
Comprehensive Diabetes Care	
Disease-Modifying Anti-Rheumatic Drug Therapy	
Statin Therapy for Patients with Cardiovascular Disease	