

Topic	Explanation
Measure Type	Static Star Measure
Description of the Measure	Percentage of members aged 65 years and older who had a risk assessment for falls completed in the measurement year.
Eligible Population	<p>Members 65 years of age or older by the end of the measurement year who had a visit with an eligible provider* during the measurement year.</p> <p><i>*Any clinician with appropriate skills and the experience may perform the screening assessment.</i></p> <p>Exclusions:</p> <ul style="list-style-type: none"> • Those with documentation of medical reason(s) for not screening for fall risk (i.e., patient is not ambulatory). • Codes to identify exclusion: 1100F-1P, 1101F-1P – Patient not screened for future fall risk for medical reasons (E).
Compliant Member	<p>Completed assessment of whether an individual has experienced a fall or problems with gait or balance. A specific screening tool is not required for this measure.</p> <ul style="list-style-type: none"> • Any history of a fall screening done within the measurement year is acceptable for meeting the intent of the measure, including gait and balance assessment, as long as it is documented in the medical record.
How to Submit to Highmark Inc.	<ul style="list-style-type: none"> • Submit CPT II codes via claim to identify numerator compliance: <ul style="list-style-type: none"> - 3288F – Falls Risk assessment documented. - 1100F – Patient screened for future fall risk; documentation of two or more falls in the past year or any fall with injury in the past year. - 1101F – Patient screened for future fall risk; documentation of no falls in the past year or only one fall without injury in the past year.
Best Practices	<ul style="list-style-type: none"> • Identify patients 65 years and older who were NOT screened for Falls Risk during the measurement year. • Falls Risk is part of the AWVs. Claims submission of an AWV procedure code will be captured as numerator compliant for Falls Risk. All other visit types require CPT II code reporting. • Develop and implement evidence-based fall risk assessment in EMR to identify patients having more than one fall during the measurement year or who had a fall that resulted in an injury. • Establish an office standard of practice (i.e., standing orders, pre-visit planning) for documenting the fall risk assessment for patients age 65 and older. • Consider EMR alert to notify Provider/Clinical Staff of patients requiring an annual fall risk assessment. • Provide patient/family education materials on fall prevention strategies.

Topic	Explanation
Other	<p>Fall Definition: A fall is defined as a sudden, unintentional change in position causing an individual to land at a lower level, on an object, the floor, or the ground, other than as a consequence of a sudden onset of paralysis, epileptic seizure, or overwhelming external force. Patients are considered at risk for future falls if they had two or more falls in the past year or any fall with injury in the past year.</p> <ul style="list-style-type: none"> • The setting of the screening is not restricted to the office and may be completed during a virtual health encounter. • Screening for Future Fall Risk is based on the CMS Health Outcomes survey. Please see additional information on the HOS survey found later in this booklet.

Key Additional Resources

Additional information can be found on the Provider Resource Center under **Value-Based Reimbursement Programs Overview**, in the **Medicare Advantage Stars** section