



Pharmacotherapy Management of COPD Exacerbation (PCE) 2025

Healthcare Effectiveness Data Information Set[®] (HEDIS) is a widely used set of performance measures developed and maintained by NCQA. To help you better serve our members and drive improved efforts surrounding HEDIS, we have compiled some tips and best practices. With your help, we can continually build towards a future of shared success.

This HEDIS measure evaluates the percentage of COPD exacerbations for members 40 years of age and older who had an acute inpatient discharge or ED visit on or between January 1 to November 30 of the measurement year and who were dispensed appropriate medications.

Two rates are reported:

- Dispensed a systemic corticosteroid (or there was evidence of an active prescription) within 14 days of the event
- Dispensed a bronchodilator (or there was evidence of an active prescription) within 30 days of the event

The eligible population for this measure is based on acute inpatient discharges and ED visits, not on members. It is possible for the denominator to include multiple events for the same individual.

Exclusions:

- Members who use hospice services or elect to use a hospice benefit any time during the measurement year
- Members who died during the measurement year

Note: HEDIS[®] is a registered trademark of the National Committee for Quality Assurance (NCQA).





Association website at ama-assn.org.

Systemic corticosteroid medications

Dispensed prescription for systemic corticosteroid (*Systemic Corticosteroid Medications List*) on or 14 days after the episode date. Count systemic corticosteroids that are active on the relevant date.

Description	Prescription		
Glucocorticoids	Cortisone Dexamethasone	Hydrocortisone Methylprednisolone	Prednisolone Prednisone

Bronchodilator medications

Dispensed prescription for a bronchodilator (*Bronchodilator Medications List*) on or 30 days after the episode date.

Note: Count bronchodilators that are active on the relevant date.

Description	Prescription		
Anticholinergic agents	Acidinium bromide Ipratropium	Tiotropium Umeclidinium	
Beta 2-agonists	Albuterol Arformoterol Formoterol	Indacaterol Levalbuterol Metaproterenol	Olodaterol Salmeterol
Bronchodilator combinations	Albuterol- ipratropium Budesonide- formoterol Fluticasone- salmeterol Fluticasone- vilanterol	Formoterol- acidinium Formoterol- glycopyrrolate Formoterol- mometasone	Glycopyrrolate- indacaterol Olodaterol- tiotropium Umeclidinium- vilanterol
	Fluticasone furoate-umeclidinium-vilanterol		

Note: The codes listed are informational only; this information does not guarantee reimbursement.

Services	ICD-10-CM
Chronic Obstructive Pulmonary Diseases	J41.0: Simple chronic bronchitis
	J41.1: Mucopurulent chronic bronchitis
	J41.8: Mixed simple and mucopurulent chronic bronchitis
	J42: Unspecified chronic bronchitis
	J43.0: Unilateral pulmonary emphysema [MacLeod's syndrome]
	J43.1: Panlobular emphysema
	J43.2: Centrilobular emphysema
	J43.8: Other emphysema
	J43.9: Emphysema, unspecified
	J44.0: Chronic obstructive pulmonary disease with (acute) lower respiratory infection
J44.1: Chronic obstructive pulmonary disease with (acute) exacerbation	
J44.9: Chronic obstructive pulmonary disease, unspecified	

Note: The logical observation identifiers names and codes (LOINC) are for reporting clinical observations and laboratory testing. The codes listed are informational only; this information does not guarantee reimbursement. If applicable, refer to your provider contract or health plan contact for reimbursement information. For a complete list of CPT® codes, go to the American Medical

HEDIS helpful tips:

- Outreach to members to schedule follow-up visits as needed for chronic condition maintenance and exacerbation.
- Discuss with the member the importance of medication adherence and scheduling follow-up visits, even if they feel better.
- If utilizing an EMR system, consider electronic data sharing with your health plan to capture all coded elements. Contact your provider contract or health plan contact Provider Solutions representative for additional details and questions.



Please visit **My Diverse Patients** for additional information about eLearning experiences on provider cultural competency and health equity.

You can find patient care opportunities within the Patient360 application located on Availity Essentials Payer Spaces. To access the Patient360 application you must have the Patient360 role assignment. From Availity Essentials' home page select **Payer Spaces**, then choose the health plan from the menu. Choose the **Patient360** tile from the *Payer Space Applications* menu and complete the required information on the screen. Gaps in care are located in the *Active Alerts* section of the *Member Summary*.

<https://www.bluecrossnc.com/providers/networks-programs/blue-medicare/healthy-blue-medicare>

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