

International Normalizing Ratio Monitoring for Individuals on Warfarin (INR)

Provider Tip Sheet

Why is this measure important?

INR monitoring is vital to determining if any dosage changes are necessary to achieve a therapeutic effect. If the test results confirm that a change is needed, warfarin can then be adjusted, which decreases the chances of bleeding, blood clots, or a life-threatening thrombotic event.

Description

This measure monitors the percentage of members 18 years of age and older who had at least one 56-day interval of warfarin therapy and who received at least one international normalized ratio (INR) monitoring test, during each 56-day interval with active warfarin therapy. A higher rate indicates better performance.

Eligible Population

The eligible population includes all individuals who have been dispensed warfarin during the measurement year and looks for those who received at least one INR monitoring test or who were hospitalized during each 56-day interval, during the treatment period.

NOTE: Pharmacy claims determine eligibility. Lab or hospitalization claims determine compliance.

Hospital stays must be at least three days.

Coding Guidance

Measure	CPT	CPT II
INR Test – prothrombin time	85610	
INR measurement performed		3555F

Best Practices

- According to the American Heart Association, patients should be tested at least once a month, but some patients may require testing as often as twice a week.¹
- Discuss the common signs and symptoms of bleeding, blood clots, and a thrombotic event with the patient.²

Continued on page 2

Best Practices (Continued)

- Advise patients to take their warfarin in the evening and schedule their INR test in the morning, so that the INR test result will be back in time to change that day's warfarin dose if needed.
- Educate patients on staying away from foods high in vitamin K, which will lower the INR test result and cause an increased risk for the patient to develop a blood clot.
- Schedule follow-up appointments prior to patient leaving the office.
- Utilize Table 4, [Provider Checklist for Evaluation of Anticoagulation-Associated Bleeding](#), which comes from the Anticoagulation Clinic of the Cleveland Clinic (on page 9 of the PDF).
- Utilize the [AHA Anticoagulant Therapy Toolkit](#).
- Utilize Table 2, [Common drug interactions with warfarin](#), provided by the Anticoagulation Clinic of the Cleveland Clinic (on page 6 of the PDF).

References

1. North American Thrombosis Forum. (2023). [A Guide to INR levels](#).
2. Jaffer, Bragg. (2003). [Practical Tips for Warfarin Dosing and Monitoring](#).

Support

We are committed to the care and well-being of our members. We are also committed to working with you as a partner to develop the best possible treatment plans for all patients.

Please view the Provider section of our website at network.carolinacompletehealth.com for additional tools and resources. You may also contact your [Provider Engagement Administrator](#) directly for support and education.

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