ACP does not support this measure. As written, this measure focuses only on screening when current recommendations stress treatment for patients treated with steroids. Further, the measure could miss patients who are at risk for fracture by only screening patients who receive 10 mg/day of prednisone for 60 days. Evidence demonstrates that hip fractures are significantly higher in patients treated with medium doses (2.5 -7 mg/day) of steroids over a duration of time. Additionally, the measure does not follow the recommendations of The American College of Radiology (ACR). ACR recommends low dose bisphosphonate prophylaxis for patients receiving long-term steroid treatment and Fosamax is recommended for patients receiving more than 5 mg/day for more than three months. Furthermore, the measure excludes patients on tapered dose steroids; fails to exclude patients who are already receiving bisphosphonate therapy; and lacks specification on how to capture the denominator. Finally, the measure incentivizes overuse of dexam-scans rather than evidence-based prophylaxis treatments with bisphosphonates.

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