Quality ID #143 (NQF 0384): Oncology: Medical and Radiation – Pain Intensity Quantified – National Quality Strategy Domain: Person and Caregiver-Centered Experience and Outcomes

2018 OPTIONS FOR INDIVIDUAL MEASURES:

REGISTRY ONLY

MEASURE TYPE:

Process

DESCRIPTION:

Percentage of patient visits, regardless of patient age, with a diagnosis of cancer currently receiving chemotherapy or radiation therapy in which pain intensity is quantified

INSTRUCTIONS:

This measure is to be submitted at <u>each denominator eligible visit</u> occurring during the performance period for patients with a diagnosis of cancer who are seen during the performance period. It is anticipated that eligible clinicians providing care for patients with cancer will submit this measure.

NOTE: For patients receiving radiation therapy, pain intensity should be quantified at each radiation treatment management encounter. For patients receiving chemotherapy, pain intensity should be quantified at each face-to-face encounter with the physician while the patient is receiving treatment. For purposes of calculating this measure, eligible encounters for patients receiving chemotherapy will include those encounters where the patient has been administered chemotherapy within 30 days prior to the encounter and also been administered chemotherapy within 30 days after the date of the encounter. For example, at every visit for patients with a diagnosis of cancer who are also receiving chemotherapy or radiation therapy, the patient should have pain intensity quantified.

Measure Submission:

The listed denominator criteria is used to identify the intended patient population. The numerator options included in this specification are used to submit the quality actions allowed by the measure. The quality-data codes listed do not need to be submitted for registry submissions; however, these codes may be submitted for those registries that utilize claims data.

DENOMINATOR:

All patient visits, regardless of patient age, with a diagnosis of cancer currently receiving chemotherapy or radiation therapy

Denominator Criteria (Eligible Cases):

Diagnosis for cancer (ICD-10-CM): C00.0, C00.1, C00.2, C00.3, C00.4, C00.5, C00.6, C00.8, C00.9, C01, C02.0, C02.1, C02.2, C02.3, C02.4, C02.8, C02.9, C03.0, C03.1, C03.9, C04.0, C04.1, C04.8, C04.9, C05.0, C05.1, C05.2, C05.8, C05.9, C06.0, C06.1, C06.2, C06.80, C06.89, C06.9, C07, C08.0, C08.1, C08.9, C09.0, C09.1, C09.8, C09.9, C10.0, C10.1, C10.2, C10.3, C10.4, C10.8, C10.9, C11.0, C11.1, C11.2, C11.3, C11.8, C11.9, C12, C13.0, C13.1, C13.2, C13.8, C13.9, C14.0, C14.2, C14.8, C15.3, C15.4, C15.5, C15.8, C15.9, C16.0, C16.1, C16.2, C16.3, C16.4, C16.5, C16.6, C16.8, C16.9, C17.0, C17.1, C17.2, C17.3, C17.8, C17.9, C18.0, C18.1, C18.2, C18.3, C18.4, C18.5, C18.6, C18.7, C18.8, C18.9, C19, C20, C21.0, C21.1, C21.2, C21.8, C22.0, C22.1, C22.2, C22.3, C22.4, C22.7, C22.8, C22.9, C23, C24.0, C24.1, C24.8, C24.9, C25.0, C25.1, C25.2, C25.3, C25.4, C25.7, C25.8, C25.9, C26.0, C26.1, C26.9, C30.0, C30.1, C31.0, C31.1, C31.2, C31.3, C31.8, C31.9, C32.0, C32.1, C32.2, C32.3, C32.8, C32.9, C33, C34.00, C34.01, C34.02, C34.10, C34.11, C34.12, C34.2, C34.30, C34.31, C34.32, C34.80, C34.81, C34.82, C34.90, C34.91, C34.92, C37, C38.0, C38.1, C38.2, C38.3, C38.4, C38.8, C39.0, C39.9, C40.00, C40.01, C40.02, C40.10, C40.11, C40.12, C40.20, C40.21, C40.22, C40.30, C40.31, C40.32, C40.80, C40.81, C40.82, C40.90, C40.91, C40.92, C41.0, C41.1, C41.2, C41.3, C41.4, C41.9, C43.0, C43.10, C43.11, C43.12, C43.20, C43.21, C43.22, C43.30, C43.31, C43.39, C43.4, C43.51, C43.52, C43.59,

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Q85.03, Q85.09
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AND

Patient procedure during the performance period (CPT) – Procedure codes: 77427, 77431, 77432, 77435

<u>OR</u>

Patient encounter during the performance period (CPT) – Service codes: 99201, 99202, 99203, 99204, 99205, 99212, 99213, 99214, 99215

WITHOUT

Telehealth Modifier: GQ, GT, 95, POS 02

AND

Patient procedure during the performance period (CPT) – Procedure codes: 51720, 96401, 96402, 96405, 96406, 96409, 96411, 96413, 96415, 96416, 96417, 96420, 96422, 96423, 96425, 96440, 96446, 96450, 96521, 96522, 96523, 96542, 96549

NUMERATOR:

Patient visits in which pain intensity is quantified

Numerator Instructions: Pain intensity should be quantified using a standard instrument, such as a 0-10 numerical rating scale, visual analog scale, a categorical scale, or the pictorial scale. Examples include the Faces Pain Rating Scale and the Brief Pain Inventory (BPI).

Numerator Options:

Performance Met: Pain severity quantified; pain present (1125F)

OR

Performance Met: Pain severity quantified; no pain present (1126F)

<u>OR</u>

Performance Not Met: Pain severity not documented, reason not otherwise

specified (1125F with 8P)

RATIONALE:

Initial and ongoing pain assessments are essential to ensure proper pain management among patients with cancer. An inadequate assessment of pain is linked to poor pain control. Unrelieved pain has a significant impact on patients' quality of life, denying them comfort and greatly affecting their activities, motivation, and interactions with family and friends. Additionally, there is growing evidence that cancer survival is associated with effective pain management. (NCCN, 2016)

CLINICAL RECOMMENDATION STATEMENTS:

- -All patients must be screened for pain at each contact.
- -Pain intensity must be quantified and quality must be characterized by the patient (whenever possible based on patient communication capacity).
- -Comprehensive pain assessment must be performed if new or worsening pain is present and regularly performed for persisting pain.
- -Pain assessment is essential with a rating scale but also includes patient reporting of qualities of the pain, breakthrough pain, treatments used and their impact on pain, patient reporting of adequate comfort, satisfaction with pain relief, provider assessment of adequacy of function, and any special issues for the patient relevant to pain treatment. If necessary, get additional information for family/ caregiver regarding pain and impact of function.
- -Evaluate the patient for risk factors of opioid misuse.

(Category 2A) (NCCN, 2016)

Various methods and tools exist to assess pain severity. Intensity of pain should be quantified using a numerical rating scale (ie, 0-10), visual analog scale, categorical scale, or pictorial scale (eg, The Faces Pain Rating Scale). (Category 2A) (NCCN, 2016)

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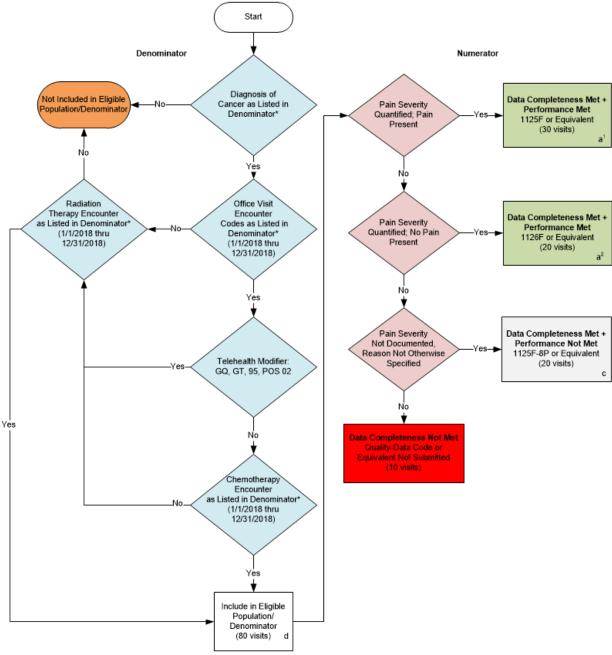
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2018 Registry Flow for Quality ID #143 NQF #0384: Oncology: Medical and Radiation – Pain Intensity Quantified



*See the posted Measure Specification for specific coding and instructions to submit this measure. NOTE: Submission Frequency: Visit

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V2

2018 Registry Flow for Quality ID #143 NQF #0384: Oncology: Medical and Radiation - Pain Intensity Quantified

SAMPLE CALCULATIONS:

Data Completeness=
Performance Met (a¹+a²=50 visits) + Performance Not Met (c=20 visits) = 70 visits = 87.50%
Eligible Population / Denominator (d=80 visits) = 80 visits

*See the posted Measure Specification for specific coding and instructions to submit this measure. NOTE: Submission Frequency - Visit

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2018 Registry Flow for Quality ID #143 NQF #0384: Oncology: Medical and Radiation – Pain Intensity Quantified

Please refer to the specific section of the specification to identify the denominator and numerator information for use in submitting this Individual Specification. This flow is for registry data submission.

- 1. Start with Denominator
- 2. Check Patient Diagnosis:
 - a. If Diagnosis of Cancer as Listed in the Denominator equals No, do not include in Eligible Patient Population. Stop Processing.
 - If Diagnosis of Cancer as Listed in the Denominator equals Yes, proceed to check Office Visit Encounter Performed.
- 3. Check Office Visit Encounter Performed:
 - a. If Office Visit Encounter Performed as Listed in the Denominator equals No, proceed to check Radiation Therapy Encounter Performed.
 - b. If Office Visit Encounter Performed as Listed in the Denominator equals Yes, proceed to check Telehealth Modifier.
- 4. Check Telehealth Modifier:
 - a. If Telehealth Modifier equals Yes, proceed to check Radiation Therapy Encounter Performed.
 - b. If Telehealth Modifier equals No, proceed to check Chemotherapy Encounter Performed.
- 5. Check Chemotherapy Encounter Performed:
 - a. If Chemotherapy Encounter Performed as Listed in the Denominator equals No, proceed to check Radiation Therapy Encounter Performed.
 - b. If Chemotherapy Encounter Performed as Listed in the Denominator equals Yes, include in Eligible Population.
- 6. Check Radiation Therapy Encounter Performed:
 - a. If Radiation Therapy Encounter Performed as Listed in the Denominator equals No, do not include in Eligible Population. Stop Processing.
 - b. If Encounter Performed for Radiation Therapy as Listed in the Denominator equals Yes, include in Eligible Population.
- 7. Denominator Population:
 - a. Denominator Population is all Eligible Patients in the Denominator. Denominator is represented as Denominator in the Sample Calculation listed at the end of this document. Letter d equals 80 visits in the Sample Calculation.
- 8. Start Numerator
- 9. Check Pain Severity Quantified; Pain Present:

- If Pain Severity Quantified; Pain Present equals Yes, include in Data Completeness Met and Performance Met.
- b. Data Completeness Met and Performance Met letter is represented in the Data Completeness and Performance Rate in the Sample Calculation listed at the end of this document. Letter a¹ equals 30 visits in the Sample Calculation.
- If Pain Severity Quantified; Pain Present equals No, proceed to Pain Severity Quantified; No Pain Present.
- 10. Check Pain Severity Quantified; No Pain Present:
 - a. If Pain Severity Quantified; No Pain Present equals Yes, include in Data Completeness Met and Performance Met.
 - b. Data Completeness Met and Performance Met letter is represented in the Data Completeness and Performance Rate in the Sample Calculation listed at the end of this document. Letter a² equals 20 visits in the Sample Calculation.
 - If Pain Severity Quantified; No Pain Present equals No, proceed to Pain Severity Not Documented, Reason Not Otherwise Specified.
- 11. Check Pain Severity Not Documented, Reason Not Otherwise Specified:
 - If Pain Severity Not Documented, Reason Not Otherwise Specified equals Yes, include in Data Completeness Met and Performance Not Met.
 - b. Data Completeness Met and Performance Not Met letter is represented in the Data Completeness in the Sample Calculation listed at the end of this document. Letter c equals 20 visits in the Sample Calculation.
 - If Pain Severity Not Documented, Reason Not Otherwise Specified equals No, proceed to Data Completeness Not Met.
- 12. Check Data Completeness Not Met:
 - a. If Data Completeness Not Met equals No, Quality Data Code or equivalent not submitted. 10 visits have been subtracted from the Data Completeness Numerator in the Sample Calculation.

```
SAMPLE CALCULATIONS:

Data Completeness=

Performance Met (a^1+a^2=50 visits) + Performance Not Met (c=20 visits) = 70 visits

Eligible Population / Denominator (d=80 visits) = 80 visits

Performance Rate=

Performance Met (a^1+a^2=50 visits) = 50 visits = 71.43\%

Data Completeness Numerator (70 visits) = 70 visits
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