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

2017 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 reported at each denominator eligible visit occurring during the measurement period for patients with a diagnosis of cancer who are seen during the measurement 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 Reporting:
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-based 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, C43.60, C43.61, C43.62, C43.70, C43.71, C43.72, C43.8, C43.9, C44.00, C44.01, C44.02, C44.09, C44.101, C44.102, C44.109, C44.111, C44.112, C44.119, C44.121, C44.122,
AND

Patient procedure during the performance period (CPT) – Procedure codes: 77427, 77431, 77432, 77435, 77470

OR

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

WITHOUT

Telehealth Modifier: GQ, GT

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)

OR

Performance Not Met: Pain severity not documented, reason not otherwise specified (1125F with 8P)

RATIONALE:
Inadequate cancer pain management is widely prevalent, harmful to the patient and costly.

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.

-If necessary, get additional information for family/ caregiver regarding pain and impact of function. (Category 2A) (NCCN, 2015)

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, 2015)

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2017 Registry Individual Measure Flow

#143 NQF #0384: Oncology: Medical and Radiation – Pain Intensity Quantified

Start

Denominator

Not Included in Eligible Population/Denominator

No

Diagnosis of Cancer as Listed in Denominator*

No

Radiation Therapy Encounter as Listed in Denominator* (1/1/2017 thru 12/31/2017)

No

Office Visit Encounter Codes as Listed in Denominator* (1/1/2017 thru 12/31/2017)

No

Telehealth Modifier: GQ, GT

Yes

Chemotherapy Encounter as Listed in Denominator* (1/1/2017 thru 12/31/2017)

No

Include in Eligible Population/Denominator (8 visits)

Yes

Numerator

Data Completeness Met + Performance Met 1125F or equivalent (3 visits)

Yes

Pain Severity Quantified: Pain Present

No

Pain Severity Quantified: No Pain Present

Yes

Pain Severity Not Documented, Reason Not Specified

No

Data Completeness Not Met Quality-Data Code or equivalent not reported (1 visit)

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*See the posted Measure Specification for specific coding and instructions to report this measure.

NOTE: Reporting Frequency: Visit

The measure diagrams were developed by CMS as a supplemental resource to be used in conjunction with the measure specifications. They should not be used alone or as a substitution for the measure specification.
SAMPLE CALCULATIONS:

**Data Completeness**

\[
\text{Performance Met (a^2+na^2=5 visits) + Performance Not Met (a^2=2 visits)} = \frac{7 \text{ visits}}{8 \text{ visits}} = 87.50\%
\]

**Performance Rate**

\[
\text{Performance Met (a^2+na^2=5 visits) = 5 visits} = 71.43\%
\]

\[
\text{Data Completeness Numerator (7 visits) = 7 visits.}
\]
2017 Registry Individual Measure Flow
#143 NQF #0384: Oncology: Medical and Radiation – Pain Intensity Quantified

Please refer to the specific section of the Measure Specification to identify the denominator and numerator information for use in reporting this Individual Measure.

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.
   b. If Diagnosis of Cancer as Listed in the Denominator equals Yes, proceed to check Encounter Performed for Patient Visit.

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, do not include in Eligible Patient Population. Stop Processing.
   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 8 visits in the sample calculation.

8. Start Numerator

9. Check Pain Severity Quantified; Pain Present:
   a. 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 3 visits in Sample Calculation.

c. 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 2 visits in Sample Calculation.

c. If Pain Severity Quantified; No Pain Present equals No, Pain Severity Not Documented, Reason Not Specified.

11. Check Pain Severity Not Documented, Reason Not Specified:

a. If Pain Severity Not Documented, Reason Not 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 2 visits in the Sample Calculation.

c. If Pain Severity Not Documented, Reason Not 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 reported. 1 visit has been subtracted from the data completeness numerator in the sample calculation.

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**SAMPLE CALCULATIONS:**

<table>
<thead>
<tr>
<th>Data Completeness</th>
<th>Performance Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Performance Met (a1=a2=5 visits)+ Performance Not Met (c=2 visits)</td>
<td>Eligible Population / Denominator (d=8 visits)</td>
</tr>
<tr>
<td>= 7 visits</td>
<td>= 8 visits</td>
</tr>
<tr>
<td>Data Completeness numerator (7 visits)</td>
<td>Performance Rate numerator (5 visits)</td>
</tr>
<tr>
<td>= 7 visits</td>
<td>= 71.43%</td>
</tr>
</tbody>
</table>