

Quality ID #342: Pain Brought Under Control Within 48 Hours – National Quality Strategy Domain: Person and Caregiver-Centered Experience and Outcomes

2018 OPTIONS FOR INDIVIDUAL MEASURES:
REGISTRY ONLY

MEASURE TYPE:
Outcome

DESCRIPTION:
Patients aged 18 and older who report being uncomfortable because of pain at the initial assessment (after admission to palliative care services) who report pain was brought to a comfortable level within 48 hours

INSTRUCTIONS:
This measure is to be submitted a minimum of **once per performance period** for patients admitted for palliative care services during the performance period. This measure may be submitted by eligible clinicians who perform the quality actions described in the measure based on the services provided and the measure-specific denominator coding.

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-based submissions; however, these codes may be submitted for those registries that utilize claims data.

DENOMINATOR:
Patients aged 18 and older admitted to palliative care services who communicated and self-reported that they were uncomfortable due to pain at the initial assessment (by responding “yes” when asked if they were uncomfortable because of pain)

Denominator Criteria (Eligible Cases):

Patients aged 18 and older

AND

Patient encounter during performance period (CPT): 99221, 99222, 99223, 99231, 99232, 99233, 99324, 99325, 99326, 99337, 99341, 99342, 99343, 99344, 99345, 99347, 99348, 99349, 99350, 99327, 99328, 99334, 99335, 99336, 99490, 99495, 99496

AND

Patient able to Communicate and Understand the Language of the Person Asking

AND

Patient Self-Reported Uncomfortable due to Pain at the Initial Assessment

NUMERATOR:
Patients whose pain was brought to a comfortable level within 48 hours of initial assessment (after admission to palliative care services)

Definitions:

Comfortable Level – For the purpose of reporting this measure, achievement of comfort should be assessed as defined by the patient’s response (of “yes” or “no” when asked if their pain was brought to a comfortable level within 48 hours after the initial assessment).

Within 48 Hours – The look-back window for the pain management measure question is 48 hours. The follow up measure question should be asked between 48 to 72 hours from the initial evaluation. The follow up question should not be asked prior to 48 hours.

Numerator Options:

Performance Met:

Documentation of patient pain brought to a comfortable level within 48 hours from initial assessment (G9250)

OR

Performance Not Met:

Documentation of patient with pain not brought to a comfortable level within 48 hours from initial assessment (G9251)

RATIONALE:

Poorly controlled pain diminishes patient quality of life and functional status, and causes suffering for patients and family caregivers. Pain is highly prevalent in the palliative care population, so the timely evaluation and treatment of pain at the start of palliative services is a priority. This measure is particularly important because it ensures integration of patient choice for desired level of treatment with the care process by incorporating the patient's own pain goals and perception of his or her own degree of comfort. If pain is an individual experience with an individual response, then the decision of what is comfortable should be left up to the individual, not determined arbitrarily by a clinician. It's more consistent with patient-centered care to care to ask the patient to decide how comfortable he/she wants to be, rather than aim for a specific numeric pain intensity rating, even if that rating can be linked to functionality. The Comfortable Dying measure also allows for a broader conceptualization of pain than use of a measure that relies solely on a numeric intensity rating.

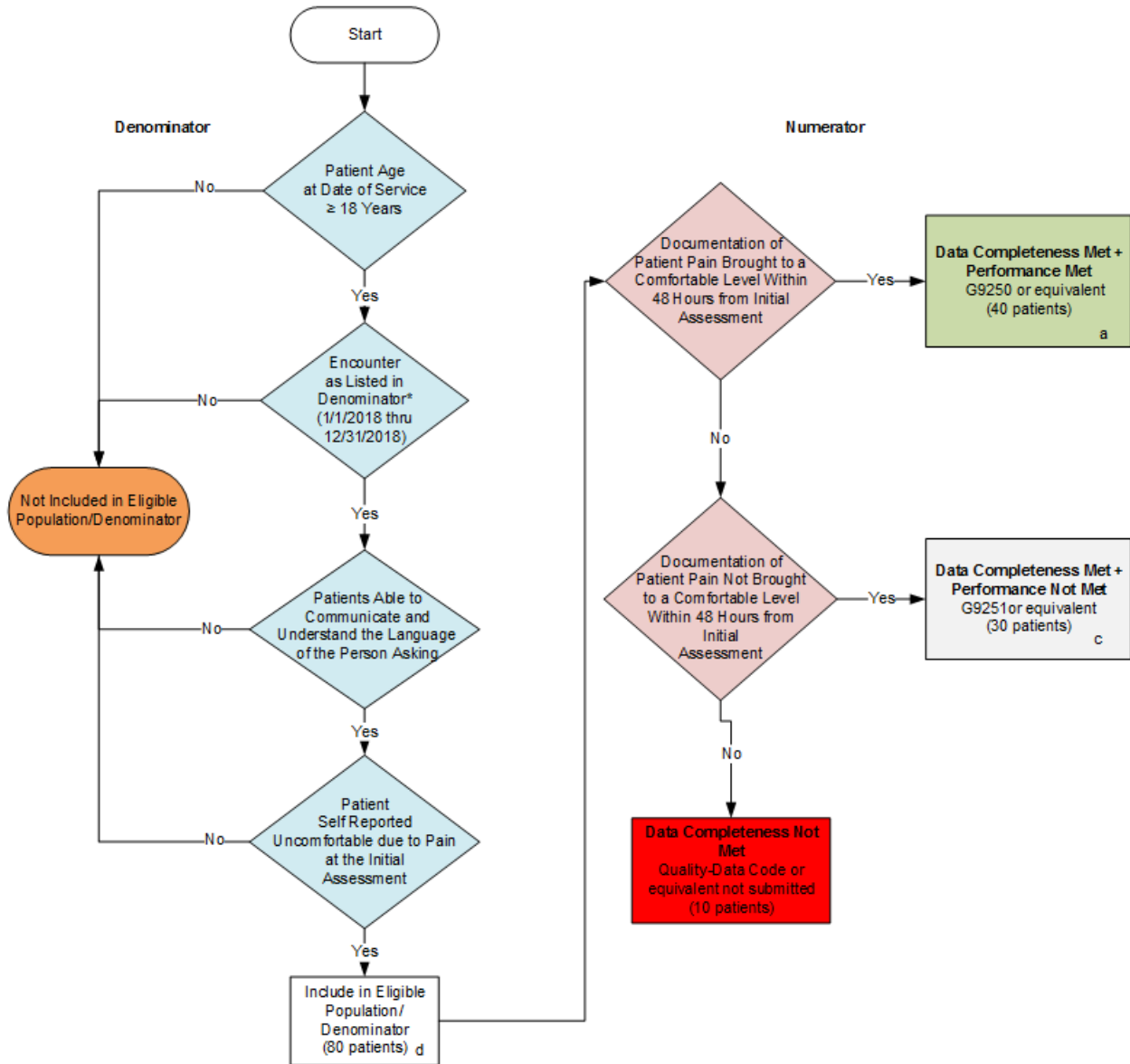
CLINICAL RECOMMENDATION STATEMENTS:

This measure is designed to evaluate the effectiveness and timeliness of initial pain management after the start of palliative care services. Pain control may be immediate but pain management occurs over time. Therefore, the look-back window for follow-up after the initial pain assessment is 48 hours. The clinician should contact the patient the number of times and at intervals as clinically appropriate for good pain management practice. But the patient should not be asked the follow-up question for the purpose of data collection to inform the measure numerator until at least 48 hours after the initial assessment.

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2018 Registry Flow for Quality ID #342: Pain Brought Under Control Within 48 Hours



SAMPLE CALCULATIONS:

Data Completeness=

$$\frac{\text{Performance Met (a=40 patients)} + \text{Performance Not Met (c=30 patients)}}{\text{Eligible Population / Denominator (d=80 patients)}} = \frac{70 \text{ patients}}{80 \text{ patients}} = 87.50\%$$

Performance Rate=

$$\frac{\text{Performance Met (a=40 patients)}}{\text{Data Completeness Numerator (70 patients)}} = \frac{40 \text{ patients}}{70 \text{ patients}} = 57.14\%$$

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

NOTE: Submission Frequency: Patient-process

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**2018 Registry Flow for Quality ID
#342: Pain Brought Under Control Within 48 Hours**

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 Age:
 - a. If Patient Age is greater than or equal to 18 Years of age at Date of Service and equals No, do not include in Eligible Population or Denominator. Stop Processing.
 - b. If Patient Age is greater than or equal to 18 Years of age at Date of Service and equals Yes, proceed to check Encounter Performed.
3. Check Encounter Performed:
 - a. If Encounter as Listed in the Denominator equals No, do not include in Eligible Population or Denominator. Stop Processing.
 - b. If Encounter as Listed in the Denominator equals Yes, proceed to check Patient able to Communicate and Understand the Language of the Person Asking.
4. Check Patient Able to Communicate and Understand the Language of the Person Asking:
 - a. If Patient Able to Communicate and Understand the Language of the Person Asking equals No, do not include in Eligible Population or Denominator. Stop Processing.
 - b. If Patient Able to Communicate and Understand the Language of the Person Asking equals Yes, proceed to check Patient Self-Reported Uncomfortable Due to Pain at the Initial Assessment.
5. Check Patient Self-Reported Uncomfortable Due to Pain at the Initial Assessment:
 - a. If Patient Self-Reported Uncomfortable Due to Pain at the Initial Assessment equals No, do not include in Eligible Population or Denominator. Stop Processing.
 - b. If Patient Self-Reported Uncomfortable Due to Pain at the Initial Assessment equals Yes, include in Eligible Population or Denominator.
6. 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 patients in the Sample Calculation.
7. Start Numerator
8. Check Documentation of Patient Pain Brought to a Comfortable Level Within 48 Hours from Initial Assessment:
 - a. If Documentation of Patient Pain Brought to a Comfortable Level Within 48 Hours from Initial Assessment 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 a equals 40 patients in the Sample Calculation.

- c. If Documentation of Patient Pain Brought to a Comfortable Level Within 48 Hours from Initial Assessment equals No, proceed to check Documentation of Patient Pain Not Brought to a Comfortable Level Within 48 Hours From Initial Assessment.
9. Check Documentation of Patient Pain Not Brought to a Comfortable Level Within 48 Hours From Initial Assessment:
- a. If Documentation of Patient Pain Not Brought to a Comfortable Level Within 48 Hours From Initial Assessment 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 30 patients in the Sample Calculation.
 - c. If Documentation of Patient Pain not Brought to a Comfortable Level Within 48 Hours from Initial Assessment equals No, proceed to check Data Completeness Not Met.
10. Check Data Completeness Not Met:
- a. If Data Completeness Not Met, the Quality Data Code or equivalent was not submitted. 10 patients have been subtracted from the Data Completeness Numerator in the Sample Calculation.

SAMPLE CALCULATIONS:

Data Completeness=

$$\frac{\text{Performance Met (a=40 patients)} + \text{Performance Not Met (c=30 patients)}}{\text{Eligible Population / Denominator (d=80 patients)}} = \frac{70 \text{ patients}}{80 \text{ patients}} = 87.50\%$$

Performance Rate=

$$\frac{\text{Performance Met (a=40 patients)}}{\text{Data Completeness Numerator (70 patients)}} = \frac{40 \text{ patients}}{70 \text{ patients}} = 57.14\%$$