Quality ID #143 (NQF 0384): Oncology: Medical and Radiation – Pain Intensity Quantified

- National Quality Strategy Domain: Person and Caregiver-Centered Experience and Outcomes
- Meaningful Measure Area: Management of Chronic Conditions

#### **2019 COLLECTION TYPE:**

MIPS CLINICAL QUALITY MEASURES (CQMS)

#### **MEASURE TYPE:**

Process – High Priority

#### **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 Merit-based Incentive Payment System (MIPS) 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 where the patient and physician have a face-to-face interaction. Due to the nature of some applicable coding related to the radiation therapy (eg, delivered in multiple fractions), the billing date for certain codes may or may not be the same as the face-to-face encounter date. For patients receiving chemotherapy, pain intensity should be quantified at each face-to-face encounter with the physician while the patient is currently receiving chemotherapy. For purposes of identifying eligible encounters, patients "currently receiving chemotherapy" refers to patients administered chemotherapy within 30 days prior to the encounter AND administered chemotherapy within 30 days after the date of the encounter.

#### **Measure Submission Type:**

Measure data may be submitted by individual MIPS eligible clinicians, groups, or third party intermediaries. The listed denominator criteria are used to identify the intended patient population. The numerator options included in this specification are used to submit the quality actions as allowed by the measure. The quality-data codes listed do not need to be submitted by MIPS eligible clinicians, groups, or third party intermediaries that utilize this modality for submissions; however, these codes may be submitted for those third party intermediaries that utilize Medicare Part B claims data. For more information regarding Application Programming Interface (API), please refer to the Quality Payment Program (QPP) website.

#### THERE ARE TWO SUBMISSION CRITERIA FOR THIS MEASURE:

1) All patient visits for patients with a diagnosis of cancer currently receiving chemotherapy

OR

2) All patient visits for patients with a diagnosis of cancer currently receiving radiation therapy

## SUBMISSION CRITERIA 1: ALL PATIENT VISITS FOR PATIENTS WITH A DIAGNOSIS OF CANCER CURRENTLY RECEIVING CHEMOTHERAPY

#### **DENOMINATOR (SUBMISSION CRITERIA 1):**

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

**Denominator Criteria (Eligible Cases) 1:** 

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, C43.111, C43.112, C43.121, C43.122, 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, C44.1021, C44.1022, C44.1091, C44.1092, C44.111, C44.1121, C44.1122, C44.1191, C44.1192, C44.121, C44.1221, C44.1222, C44.1291, C44.1292, C44.191, C44.1921, C44.1922, C44.1991, C44.1992, C44.201, C44.202, C44.209, C44.211, C44.212, C44.219, C44.221, C44.222, C44.229, C44.291, C44.292, C44.299, C44.300, C44.301, C44.309, C44.310, C44.311, C44.319, C44.320, C44.321, C44.329, C44.390, C44.391, C44.399, C44.40, C44.41, C44.42, C44.49, C44.500, C44.501, C44.509, C44.510, C44.511, C44.519, C44.520, C44.521, C44.529, C44.590, C44.591, C44.599, C44.601, C44.602, C44.609, C44.611, C44.612, C44.619, C44.621, C44.622, C44.629, C44.691, C44.692, C44.699, C44.701, C44.702, C44.709, C44.711, C44.712, C44.719, C44.721, C44.722, C44.729, C44.791, C44.792, C44.799, C44.80, C44.81, C44.82, C44.89, C44.90, C44.91, C44.92, C44.99, C45.0, C45.1, C45.2, C45.7, C45.9, C46.0, C46.1, C46.2, C46.3, C46.4, C46.50, C46.51, C46.52, C46.7, C46.9, C47.0, C47.10, C47.11, C47.12, C47.20, C47.21, C47.22, C47.3, C47.4, C47.5, C47.6, C47.8, C47.9, C48.0, C48.1, C48.2, C48.8, C49.0, C49.10, C49.11, C49.12, C49.20, C49.21, C49.22, C49.3, C49.4, C49.5, C49.6, C49.8, C49.9, C49.A0, C49.A1, C49.A2, C49.A3, C49.A4, C49.A5, C49.A9, C4A.0, C4A.10, C4A.111, C4A.112, C4A.121, C4A.122, C4A.20, C4A.21, C4A.22, C4A.30, C4A.31, C4A.39, C4A.4, C4A.51, C4A.52, C4A.59, C4A.60, C4A.61, C4A.62, C4A.70, C4A.71, C4A.72, C4A.8, C4A.9, C50.011, C50.012, C50.019, C50.021, C50.022, C50.029, C50.111, C50.112, C50.119, C50.121, C50.122, C50.129, C50.211, C50.212, C50.219, C50.221, C50.222, C50.229, C50.311, C50.312, C50.319, C50.321, C50.322, C50.329, C50.411, C50.412, C50.419, C50.421, C50.422, C50.429, C50.511, C50.512, C50.519, C50.521, C50.522, C50.529, C50.611, C50.612, C50.619, C50.621, C50.622, C50.629, C50.811, C50.812, C50.819, C50.821, C50.822, C50.829, C50.911, C50.912, C50.919, C50.921, C50.922, C50.929, C51.0, C51.1, C51.2, C51.8, C51.9, C52, C53.0, C53.1, C53.8, C53.9, C54.0, C54.1, C54.2, C54.3, C54.8, C54.9, C55, C56.1, C56.2, C56.9, C57.00, C57.01, C57.02, C57.10, C57.11, C57.12, C57.20, C57.21, C57.22, C57.3, C57.4, C57.7, C57.8, C57.9, C58, C60.0, C60.1, C60.2, C60.8, C60.9, C61, C62.00, C62.01, C62.02, C62.10, C62.11, C62.12, C62.90, C62.91, C62.92, C63.00, C63.01, C63.02, C63.10, C63.11, C63.12, C63.2, C63.7, C63.8, C63.9, C64.1, C64.2, C64.9, C65.1, C65.2, C65.9, C66.1, C66.2, C66.9, C67.0, C67.1, C67.2, C67.3, C67.4, C67.5, C67.6, C67.7, C67.8, C67.9, C68.0, C68.1, C68.8, C68.9, C69.00, C69.01, C69.02, C69.10, C69.11. C69.12, C69.20, C69.21, C69.22, C69.30, C69.31, C69.32, C69.40, C69.41, C69.42, C69.50, C69.51, C69.52, C69.60, C69.61, C69.62, C69.80, C69.81, C69.82, C69.90, C69.91, C69.92, C70.0, C70.1, C70.9, C71.0, C71.1, C71.2, C71.3, C71.4, C71.5, C71.6, C71.7, C71.8, C71.9, C72.0, C72.1, C72.20, C72.21, C72.22, C72.30, C72.31, C72.32, C72.40, C72.41, C72.42, C72.50, C72.59, C72.9, C73, C74.00, C74.01, C74.02, C74.10, C74.11, C74.12, C74.90, C74.91, C74.92, C75.0, C75.1, C75.2, C75.3, C75.4, C75.5, C75.8, C75.9, C76.0, C76.1, C76.2, C76.3, C76.40, C76.41, C76.42, C76.50, C76.51, C76.52, C76.8, C77.0, C77.1, C77.2, C77.3, C77.4, C77.5, C77.8, C77.9, C78.00, C78.01, C78.02, C78.1, C78.2, C78.30, C78.39, C78.4, C78.5, C78.6, C78.7, C78.80, C78.89, C79.00, C79.01, C79.02, C79.10, C79.11, C79.19, C79.2, C79.31, C79.32, C79.40, C79.49, C79.51, C79.52, C79.60, C79.61, C79.62, C79.70, C79.71,

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C83.92, C83.93, C83.94, C83.95, C83.96, C83.97, C83.98, C83.99, C84.00, C84.01, C84.02, C84.03,
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C84.A4, C84.A5, C84.A6, C84.A7, C84.A8, C84.A9, C84.Z0, C84.Z1, C84.Z2, C84.Z3, C84.Z4, C84.Z5,
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C85.80, C85.81, C85.82, C85.83, C85.84, C85.85, C85.86, C85.87, C85.88, C85.89, C85.90, C85.91,
C85.92, C85.93, C85.94, C85.95, C85.96, C85.97, C85.98, C85.99, C86.0, C86.1, C86.2, C86.3, C86.4.
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C90.12, C90.20, C90.21, C90.22, C90.30, C90.31, C90.32, C91.00, C91.01, C91.02, C91.10, C91.11,
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C91.62, C91.90, C91.91, C91.92, C91.A0, C91.A1, C91.A2, C91.Z0, C91.Z1, C91.Z2, C92.00, C92.01,
C92.02, C92.10, C92.11, C92.12, C92.20, C92.21, C92.22, C92.30, C92.31, C92.32, C92.40, C92.41,
C92.42, C92.50, C92.51, C92.52, C92.60, C92.61, C92.62, C92.90, C92.91, C92.92, C92.A0, C92.A1,
C92.A2, C92.Z0, C92.Z1, C92.Z2, C93.00, C93.01, C93.02, C93.10, C93.11, C93.12, C93.30, C93.31,
C93.32, C93.90, C93.91, C93.92, C93.Z0, C93.Z1, C93.Z2, C94.00, C94.01, C94.02, C94.20, C94.21,
C94.22, C94.30, C94.31, C94.32, C94.40, C94.41, C94.42, C94.6, C94.80, C94.81, C94.82, C95.00,
C95.01, C95.02, C95.10, C95.11, C95.12, C95.90, C95.91, C95.92, C96.0, C96.20, C96.21, C96.22,
C96.29, C96.4, C96.5, C96.6, C96.9, C96.A, C96.Z, D37.01, D37.02, D37.030, D37.031, D37.032,
D37.039, D37.04, D37.05, D37.09, D37.1, D37.2, D37.3, D37.4, D37.5, D37.6, D37.8, D37.9, D38.0, D38.1,
D38.2, D38.3, D38.4, D38.5, D38.6, D39.0, D39.10, D39.11, D39.12, D39.2, D39.8, D39.9, D40.0, D40.10,
D40.11, D40.12, D40.8, D40.9, D41.00, D41.01, D41.02, D41.10, D41.11, D41.12, D41.20, D41.21, D41.22,
D41.3, D41.4, D41.8, D41.9, D42.0, D42.1, D42.9, D43.0, D43.1, D43.2, D43.3, D43.4, D43.8, D43.9,
D44.0, D44.10, D44.11, D44.12, D44.2, D44.3, D44.4, D44.5, D44.6, D44.7, D44.9, D45, D46.0, D46.1,
D46.20, D46.21, D46.22, D46.4, D46.9, D46.A, D46.B, D46.C, D46.Z, D47.1, D47.2, D47.3, D47.4, D47.9,
D47.Z1, D47.Z2, D47.Z9, D48.0, D48.1, D48.2, D48.3, D48.4, D48.5, D48.60, D48.61, D48.62, D48.7,
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D48.9, D49.0, D49.1, D49.2, D49.3, D49.4, D49.511, D49.512, D49.519, D49.59, D49.6, D49.7, D49.81, D49.89, D49.9, Q85.00, Q85.01, Q85.02, Q85.03, Q85.09

#### AND

Patient encounter during the performance period (CPT) – to be used to evaluate remaining denominator criteria and for numerator evaluation: 99201, 99202, 99203, 99204, 99205, 99212, 99213, 99214, 99215

### **WITHOUT**

Telehealth Modifier: GQ, GT, 95, POS 02

#### AND

**Patient procedure within 30 days before denominator eligible encounter:** 51720, 96401, 96402, 96405, 96406, 96409, 96411, 96413, 96415, 96416, 96417, 96420, 96422, 96423, 96425, 96440, 96446, 96450, 96521, 96522, 96523, 96542, 96549

#### AND

Patient procedure within 30 days after denominator eligible encounter: 51720, 96401, 96402, 96405, 96406, 96409, 96411, 96413, 96415, 96416, 96417, 96420, 96422, 96423, 96425, 96440, 96446, 96450, 96521, 96522, 96523, 96542, 96549

#### **NUMERATOR (SUBMISSION CRITERIA 1):**

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)

OR

## SUBMISSION CRITERIA 2: ALL PATIENT VISITS FOR PATIENTS WITH A DIAGNOSIS OF CANCER CURRENTLY RECEIVING RADIATION THERAPY

#### **DENOMINATOR (SUBMISSION CRITERIA 2):**

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

**DENOMINATOR NOTE:** For the reporting purposes for this measure, in instances where CPT code 77427 is reported, the billing date, which may or may not be the same date as the face-to-face encounter with the physician, should be used to pull the appropriate patient population into the denominator. It is expected, though, that the numerator criteria would be performed at the time of the actual face-to-face encounter during the series of treatments.

#### Denominator Criteria (Eligible Cases) 2:

**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,

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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.
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D49.89, D49.9, Q85.00, Q85.01, Q85.02, Q85.03, Q85.09
AND
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Patient procedure during the performance period (CPT) – Procedure codes: 77427, 77431, 77432, 77435

#### **NUMERATOR (SUBMISSION CRITERIA 2):**

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 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)

<u>OR</u>

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, 2017)

#### **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 including 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 impact on function, and any special issues for the patient relevant to pain treatment. If necessary, get additional information from the family/caregiver regarding pain and impact on function.
- -Evaluate the patient for risk factors of opioid abuse/misuse/diversion.

(Category 2A) (NCCN, 2017)

Various methods and tools exist to assess pain severity. Intensity of pain should be quantified using a numerical rating scale (i.e., 0-10), visual analog scale, categorical scale, or pictorial scale (eg, The Faces Pain Rating Scale). (Category 2A) (NCCN, 2017)

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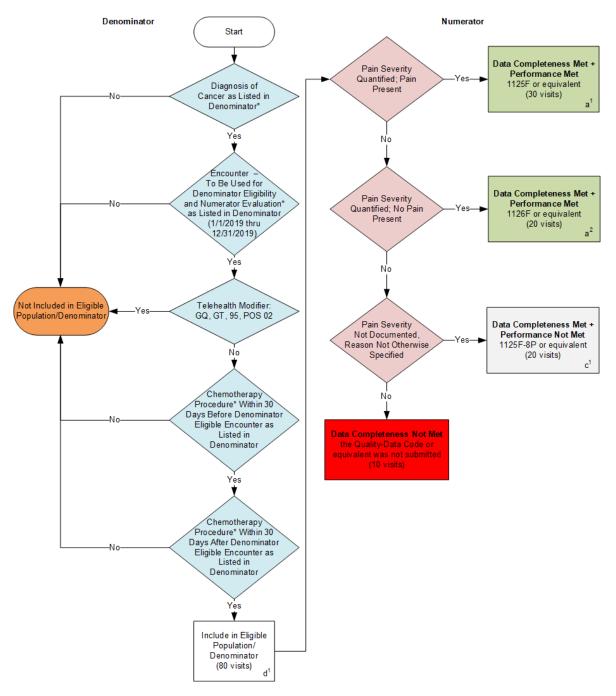
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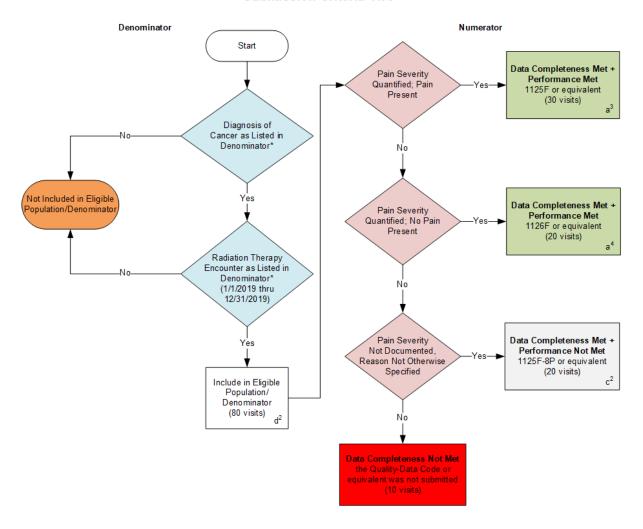
#### 2019 Clinical Quality Measure Flow for Quality ID #143 NQF #0384: Oncology: Medical and Radiation – Pain Intensity Quantified Submission Criteria One



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

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#### 2019 Clinical Quality Measure Flow for Quality ID #143 NQF #0384: Oncology: Medical and Radiation – Pain Intensity Quantified Submission Criteria Two



<sup>\*</sup>See the posted Measure Specification for specific coding and instructions to submit this measure. NOTE: Submission Frequency – Visit

### 2019 Clinical Quality Measure Flow for Quality ID #143 NQF #0384: Oncology: Medical and Radiation - Pain Intensity Quantified

#### SAMPLE CALCULATIONS:

Data Completeness=

Performance Met ( $a^1+a^2+a^3+a^4=100 \text{ visits}$ ) + Performance Not Met ( $c^1+c^2=40 \text{ visits}$ ) = 140 visits = 87.50%

Eligible Population / Denominator ( $d^1+d^2=160 \text{ visits}$ ) = 160 visits

 Performance Rate=

 Performance Met (a¹+a²+a³+a⁴=100 visits)
 =
 100 visits
 =
 71.43%

 Data Completeness Numerator (140 visits)
 =
 140 visits
 =
 71.43%

NOTE: Submission Frequency - Visit

<sup>\*</sup>This measure contains two Submission Criteria, although as the Sample Calculation indicates, there is ONLY one data completeness and one performance rate for this measure.

# 2019 Clinical Quality Measure Flow Narrative 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.

#### **Submission Criteria One:**

- Start with Denominator
- 2. Check Patient Diagnosis:
  - a. If Diagnosis of Cancer as Listed in the Denominator equals No, do not include in Eligible Population. Stop Processing.
  - b. If Diagnosis of Cancer as Listed in the Denominator equals Yes, proceed to check Encounter To Be Used for Denominator Eligibility and Numerator Evaluation.
- 3. Check Encounter To Be Used for Denominator Eligibility and Numerator Evaluation:
  - a. If Encounter To Be Used for Denominator Eligibility and Numerator Evaluation as Listed in the Denominator equals No, do not include in Eligible Population. Stop Processing.
  - b. If Encounter To Be Used for Denominator Eligibility and Numerator Evaluation 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 Population. Stop Processing.
  - b. If Telehealth Modifier equals No, proceed to check Chemotherapy Procedure Within 30 Days Before Denominator Eligible Encounter.
- 5. Check Chemotherapy Procedure Within 30 Days Before Denominator Eligible Encounter:
  - a. If Chemotherapy Procedure Within 30 Days Before Denominator Eligible Encounter as Listed in the Denominator equals No, do not include in Eligible Population. Stop Processing.
  - b. If Chemotherapy Procedure Within 30 Days Before Denominator Eligible Encounter as Listed in the Denominator equals Yes, proceed to check Chemotherapy Procedure Within 30 Days After Denominator Eligible Encounter.
- 6. Check Chemotherapy Procedure Within 30 Days After Denominator Eligible Encounter:
  - a. If Chemotherapy Procedure Within 30 Days After Denominator Eligible Encounter as Listed in the Denominator equals No, do not include in Eligible Population. Stop Processing.
  - b. If Chemotherapy Procedure Within 30 Days After Denominator Eligible Encounter as Listed in the Denominator equals Yes, include in Eligible Population.
- 7. Denominator Population:
  - a. Denominator Population is all Eligible Visits in the Denominator. Denominator is represented as Denominator in the Sample Calculation listed at the end of this document. Letter d¹ 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.
  - c. If Pain Severity Quantified; Pain Present equals No, proceed to check 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.
  - c. If Pain Severity Quantified; No Pain Present equals No, proceed to check Pain Severity Not Documented, Reason Not Otherwise Specified.
- 11. Check Pain Severity Not Documented, Reason Not Otherwise Specified:
  - a. 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 c¹ equals 20 visits in the Sample Calculation.
  - c. If Pain Severity Not Documented, Reason Not Otherwise Specified equals No, proceed to check Data Completeness Not Met.

#### 12. Check Data Completeness Not Met:

a. If Data Completeness Not Met, the Quality Data Code or equivalent was not submitted. 10 visits have been subtracted from the Data Completeness Numerator in the Sample Calculation.

# 2019 Clinical Quality Measure Flow Narrative 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.

#### **Submission Criteria Two:**

- Start with Denominator
- 2. Check Patient Diagnosis:
  - a. If Diagnosis of Cancer as Listed in the Denominator equals No, do not include in Eligible Population. Stop Processing.
  - b. If Diagnosis of Cancer as Listed in the Denominator equals Yes, proceed to check Radiation Therapy Encounter.
- 3. Check Radiation Therapy Encounter:
  - a. If Radiation Therapy Encounter as Listed in the Denominator equals No, do not include in Eligible Population. Stop Processing.
  - b. If Radiation Therapy Encounter as Listed in the Denominator equals Yes, include in Eligible Population.
- 4. Denominator Population:
  - a. Denominator population is all Eligible Visits in the denominator. Denominator is represented as Denominator in the Sample Calculation listed at the end of this document. Letter d<sup>2</sup> equals 80 patients in the Sample Calculation.
- 5. Start Numerator:
- 6. 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 a<sup>3</sup> equals 30 visits in the Sample Calculation.
  - c. If Pain Severity Quantified; Pain Present equals No, proceed to check Pain Severity Quantified; No Pain Present.
- 13. 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 a<sup>4</sup> equals 20 visits in the Sample Calculation.
- c. If Pain Severity Quantified; No Pain Present equals No, proceed to check Pain Severity Not Documented, Reason Not Otherwise Specified.
- 14. Check Pain Severity Not Documented, Reason Not Otherwise Specified:
  - a. 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 c² equals 20 visits in the Sample Calculation.
  - If Pain Severity Not Documented, Reason Not Otherwise Specified equals No, proceed to check Data Completeness Not Met.
- 15. Check Data Completeness Not Met:
  - a. If Data Completeness Not Met, the Quality Data Code or equivalent was not submitted. 10 visits have been subtracted from the Data Completeness Numerator in the Sample Calculation.

This measure contains two Submission Criteria, although as the Sample Calculation indicates, there is ONLY one Data Completeness and one Performance Rate for this measure.