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

2016 PHYSICIAN QUALITY REPORTING OPTIONS FOR INDIVIDUAL MEASURES
REGISTRY ONLY

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

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

Measure Reporting via Registry:
CPT codes and patient demographics are used to identify patients who are included in the measure’s denominator. The listed numerator options are used to report the numerator of 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. There are no allowable performance exclusions for this measure.

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 reporting 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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2016 Registry Individual Measure Flow
PQRS #342: Pain Brought Under Control Within 48 Hours

Start

Denominator

Patient Age at Date of Service ≥ 18 Years

Yes

Encounter as Listed in Denominator* (1/1/2016 thru 12/31/2016)

No

No

Not Included in Eligible Population/Denominator

Yes

Patients Able to Communicate and Understand the Language of the Person Asking

Yes

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

No

Yes

Include in Eligible Population/Denominator (8 patients)

Numerator

Documentation of Patient Pain Brought to a Comfortable Level Within 48 Hours from Initial Assessment

Yes

Reporting Met + Performance Met G9250 or equivalent (4 patients)

a

No

Reporting Met + Performance Not Met G9251 for equivalent (3 patients)

c

Yes

Reporting Not Met Quality-Data Code or equivalent not reported (1 patient)

SAMPLE CALCULATIONS:

Reporting Rate:
Performance Met (n=4 patients) + Performance Not Met (n=3 patients) = 7 patients = 87.50%
Eligible Population / Denominator (n=8 patients) = 8 patients

Performance Rate:
Performance Met (n=4 patients) = 4 patients = 57.14%
Reporting Numerator (7 patients) = 7 patients

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

NOTE: Reporting Frequency: Patient-process
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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 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 8 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 Reporting Met and Performance Met.
b. Reporting Met and Performance Met letter is represented in the Reporting Rate and Performance Rate in the Sample Calculation listed at the end of this document. Letter a equals 4 patients in 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 Reporting Met and Performance Not Met.

   b. Reporting Met and Performance Not Met letter is represented in the Reporting Rate in the Sample Calculation listed at the end of this document. Letter c equals 3 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 Reporting Not Met.

10. Check Reporting Not Met:

    a. If Reporting Not Met, the Quality Data Code or equivalent was not reported. 1 patient has been subtracted from the reporting numerator in sample calculation.

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| Reporting Rate= | Performance Met (a=4 patients) + Performance Not Met (c=3 patients) = 7 patients = 87.50% |
|                | Eligible Population / Denominator (d=8 patients) = 8 patients |

| Performance Rate= | Performance Met (a=4 patients) = 4 patients = 57.14% |
|                   | Reporting Numerator (7 patients) = 7 patients |
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