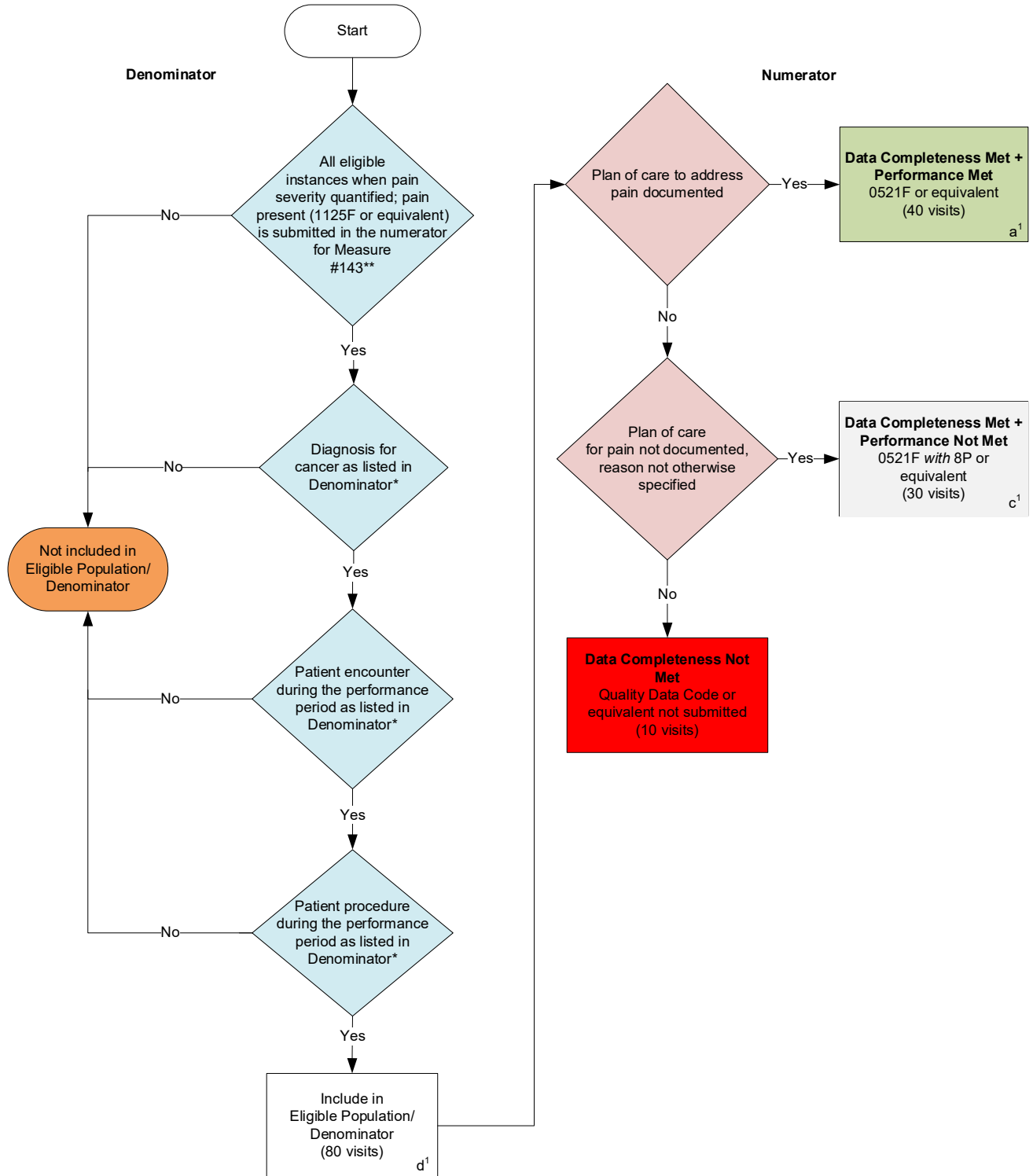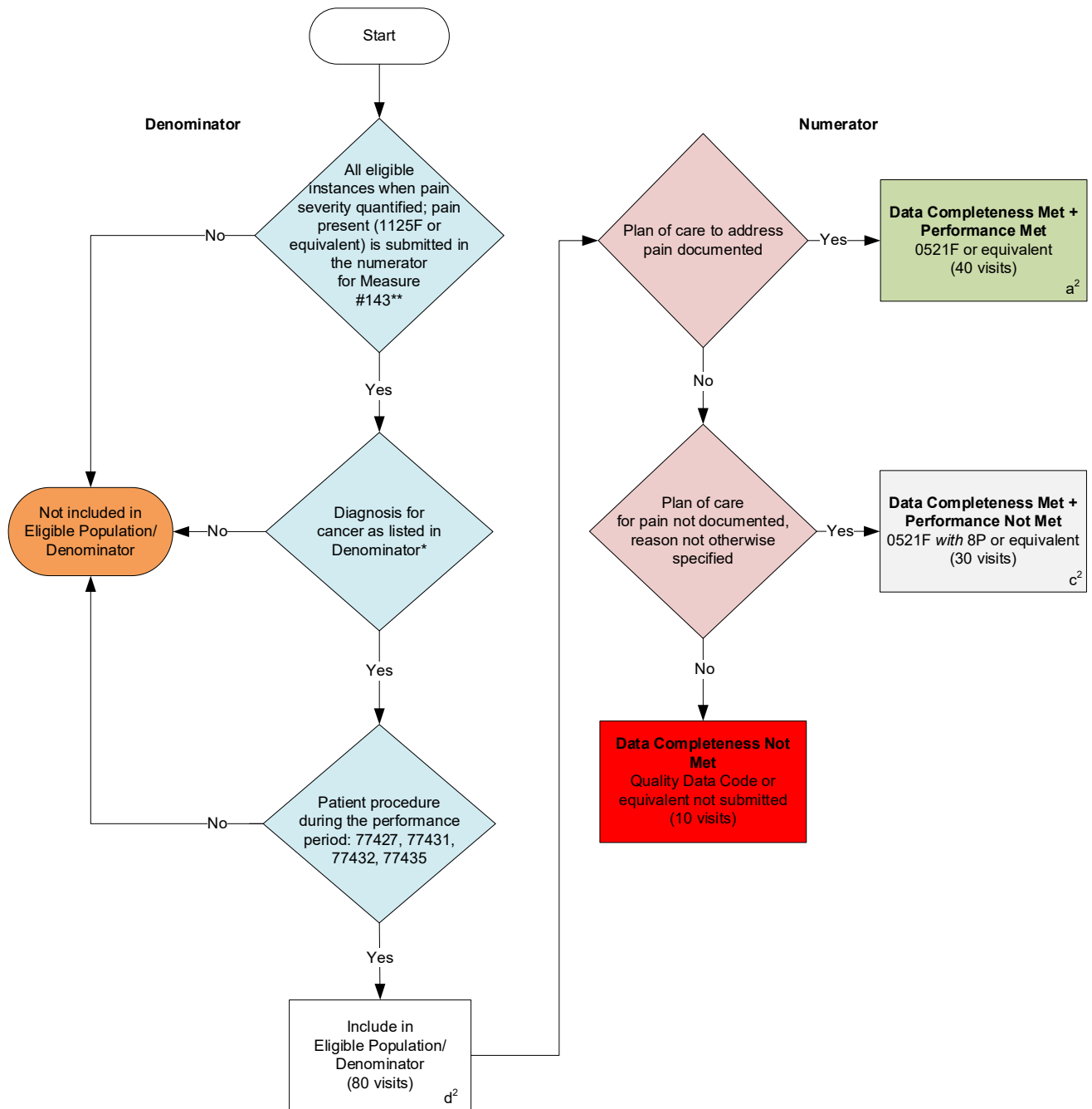# 2023 Clinical Quality Measure Flow for Quality ID #144 (NQF 0383):
Oncology: Medical and Radiation – Plan of Care for Pain
Submission Criteria One

Disclaimer: Refer to the measure specification for specific coding and instructions to submit this measure.

Start

Denominator

Numerator

All eligible instances when pain severity quantified; pain present (1125F or equivalent) is submitted in the numerator for Measure #143** — No

Yes ↓

Diagnosis for cancer as listed in Denominator* — No

Yes ↓

Patient encounter during the performance period as listed in Denominator* — No

Yes ↓

Patient procedure during the performance period as listed in Denominator* — No

Yes ↓

Include in Eligible Population/ Denominator (80 visits) d[1]

Not included in Eligible Population/ Denominator

Plan of care to address pain documented — Yes → **Data Completeness Met + Performance Met** 0521F or equivalent (40 visits) a[1]

No ↓

Plan of care for pain not documented, reason not otherwise specified — Yes → **Data Completeness Met + Performance Not Met** 0521F *with* 8P or equivalent (30 visits) c[1]

No ↓

Data Completeness Not Met Quality Data Code or equivalent not submitted (10 visits)

Submission Criteria Two

Start

Denominator

All eligible instances when pain severity quantified; pain present (1125F or equivalent) is submitted in the numerator for Measure #143** → No → Not included in Eligible Population/Denominator

Yes ↓

Diagnosis for cancer as listed in Denominator* → No → Not included in Eligible Population/Denominator

Yes ↓

Patient procedure during the performance period: 77427, 77431, 77432, 77435 → No → Not included in Eligible Population/Denominator

Yes ↓

Include in Eligible Population/Denominator (80 visits) d^2

Numerator

Plan of care to address pain documented → Yes → **Data Completeness Met + Performance Met** 0521F or equivalent (40 visits) a^2

No ↓

Plan of care for pain not documented, reason not otherwise specified → Yes → **Data Completeness Met + Performance Not Met** 0521F *with* 8P or equivalent (30 visits) c^2

No ↓

Data Completeness Not Met Quality Data Code or equivalent not submitted (10 visits)

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

**Submitting Measure #143 is a precursor for submitting this measure. Patients where 1125F without modifier or equivalent (pain is present) is submitted in Measure #143 are pulled into the denominator for Measure #144.

NOTE: Submission Frequency: Visit

**2023 Clinical Quality Measure Flow Narrative for Quality ID #144 (NQF 0383):
Oncology: Medical and Radiation – Plan of Care for Pain**

Disclaimer: Refer to the measure specification for specific coding and instructions to submit this measure.

Submission Criteria One:

1. Start with Denominator

2. Check *All eligible instances when pain severity quantified; pain present is submitted in the numerator for Measure #143**:*

    a. If *All eligible instances when pain severity quantified; pain present is submitted in the numerator for Measure #143*** equals No, do not include in *Eligible Population/Denominator*. Stop processing.

    b. If *All eligible instances when pain severity quantified; pain present is submitted in the numerator for Measure #143*** equals Yes, proceed to check *Diagnosis for cancer as listed in Denominator**.

3. Check *Diagnosis for cancer as listed in Denominator**:

    a. If *Diagnosis for cancer as listed in Denominator** equals No, do not include in *Eligible Population/Denominator*. Stop processing.

    b. If *Diagnosis for cancer as listed in Denominator** equals Yes, proceed to check *Patient encounter during the performance period as listed in Denominator**.

4. Check *Patient encounter during the performance period as listed in Denominator*:*

    a. If *Patient encounter during the performance period as listed in Denominator** equals No, do not include in *Eligible Population/Denominator*. Stop processing.

    b. If *Patient encounter during the performance period as listed in Denominator** equals Yes, proceed to check *Patient procedure during the performance period as listed in Denominator**.

5. Check *Patient procedure during the performance period as listed in Denominator*:*

    a. If *Patient procedure during the performance period as listed in Denominator** equals No, do not include in *Eligible Population/Denominator*. Stop processing.

    b. If *Patient procedure during the performance period as listed in Denominator** equals Yes, include in *Eligible Population/Denominator*.

6. 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[1] equals 80 visits in the Sample Calculation.

7. Start Numerator

8. Check *Plan of care to address pain documented*:

    a. If *Plan of care to address pain documented* equals Yes, include in *Data Completeness Met and Performance Met.*

- *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[1] equals 40 visits in the Sample Calculation.

   b. If *Plan of care to address pain documented* equals No, proceed to *Plan of care for pain not documented, reason not otherwise specified.*

9. Check *Plan of care for pain not documented, reason not otherwise specified*:

   a. If *Plan of care for pain not documented, reason not otherwise specified* equals Yes, include in *Data Completeness Met and Performance Not Met*.

      - *Data Completeness Met and Performance Not Met* letter is represented in the Data Completeness and Performance Rate in the Sample Calculation listed at the end of this document. Letter c[1] equals 30 visits in the Sample Calculation.

   b. If *Plan of care for pain not documented, reason not otherwise specified* equals No, proceed to *Data Completeness Not Met*.

10. Check *Data Completeness Not Met*:

    - 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.

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

**Submitting Measure #143 is a precursor for submitting this measure. Patients where 1125 F without modifier or equivalent (pain is present) is submitted in Measure #143 are pulled into the denominator for Measure #144.

NOTE: Submission 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.

Submission Criteria Two:

1. Start with Denominator

2. Check *All eligible instances when pain severity quantified; pain present is submitted in the numerator for Measure #143**:*

   a. If *All eligible instances when pain severity quantified; pain present is submitted in the numerator for Measure #143** equals No, do not include *in Eligible Population/Denominator*. Stop processing.

   b. If *All eligible instances when pain severity quantified; pain present is submitted in the numerator for Measure #143** equals Yes, proceed to check *Diagnosis for cancer as listed in Denominator*.*

3. Check *Diagnosis for cancer as listed in Denominator*:*

   a. If *Diagnosis for cancer as listed in Denominator** equals No, do not include in *Eligible Population/Denominator*. Stop processing.

b. If *Diagnosis for cancer as listed in Denominator** equals Yes, proceed to check *Patient procedure during the performance period.*

4. Check *Patient procedure during the performance period:*

   a. If *Patient procedure during the performance period* equals No, do not include in *Eligible Population/Denominator.* Stop processing.

   b. If *Patient procedure during the performance period* equals Yes, include in *Eligible Population/Denominator.*

5. 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_2 equals 80 visits in the Sample Calculation.

6. Start Numerator

7. Check *Plan of care to address pain documented*:

   a. If *Plan of care to address pain documented* equals Yes, include in *Data Completeness Met and Performance Met.*

      • *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_2 equals 40 visits in the Sample Calculation.

   b. If *Plan of care to address pain documented* equals No, proceed to *Plan of care for pain not documented, reason not otherwise specified.*

8. Check *Plan of care for pain not documented, reason not otherwise specified*:

   a. If *Plan of care for pain not documented, reason not otherwise specified* equals Yes, include in *Data Completeness Met and Performance Not Met.*

      • *Data Completeness Met and Performance Not Met* letter is represented in the Data Completeness and Performance Rate in the Sample Calculation listed at the end of this document. Letter c_2 equals 30 visits in the Sample Calculation.

   b. If *Plan of care for pain not documented, reason not otherwise specified* equals No, proceed to *Data Completeness Not Met*.

9. Check *Data Completeness Not Met*:

      • 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.

Sample Calculations

Data Completeness equals Performance Met (a_1 plus a_2 equals 80 visits) plus Performance Not Met (c_1 plus c_2 equals 60 visits) divided by Eligible Population/Denominator (d_1 plus d_2 equals 160 visits). All equals 140 visits

divided by 160 visits. All equals 87.50 percent.

Performance Rate equals Performance Met (a[1] plus a[2] equals 80 visits) divided by Data Completeness Numerator (140 visits). All equals 80 visits divided by 140 visits. All equals 57.14 percent.

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

**Submitting Measure #143 is a precursor for submitting this measure. Patients where 1125 F without modifier or equivalent (pain is present) is submitted in Measure #143 are pulled into the denominator for Measure #144.

NOTE: Submission 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.