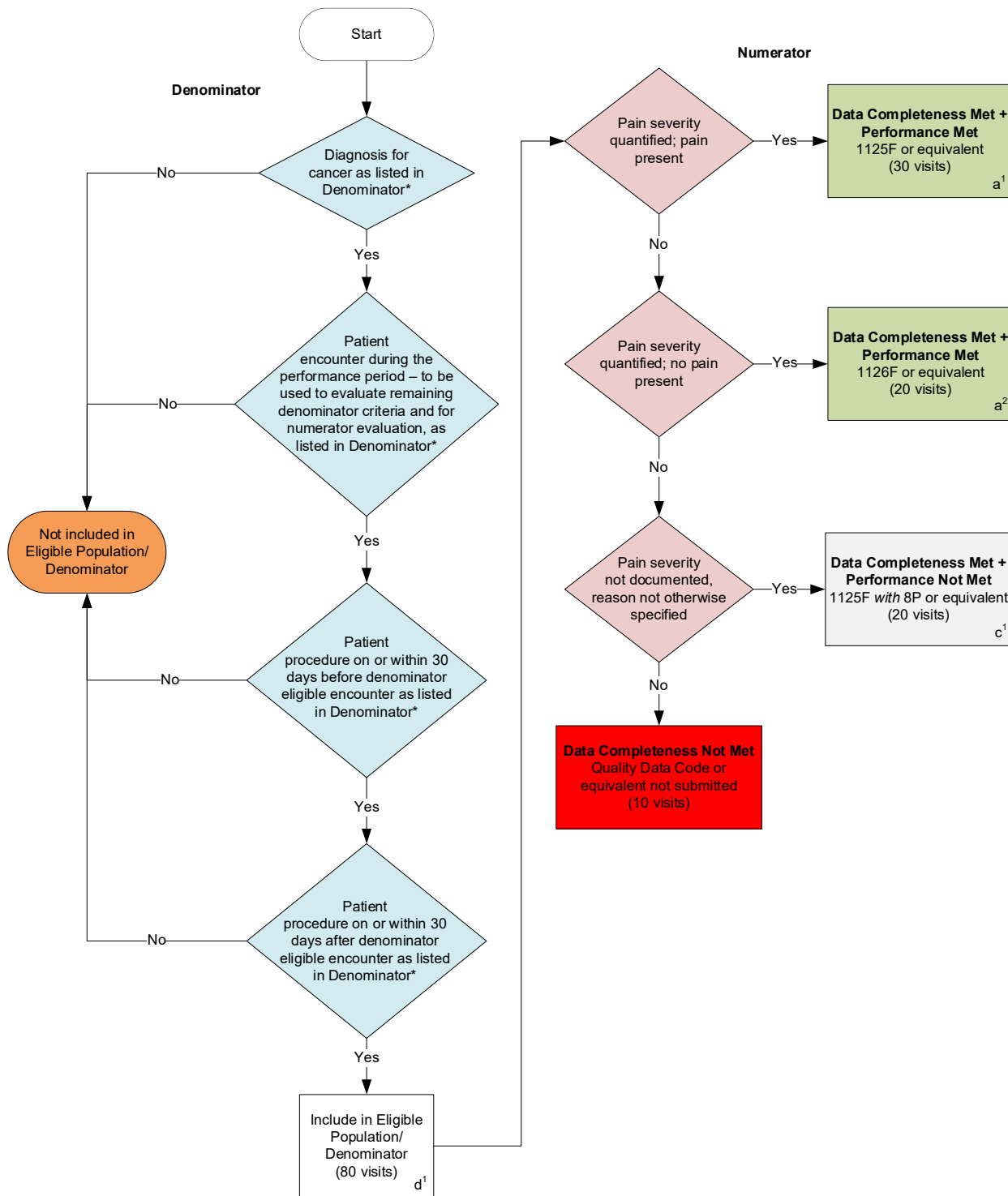
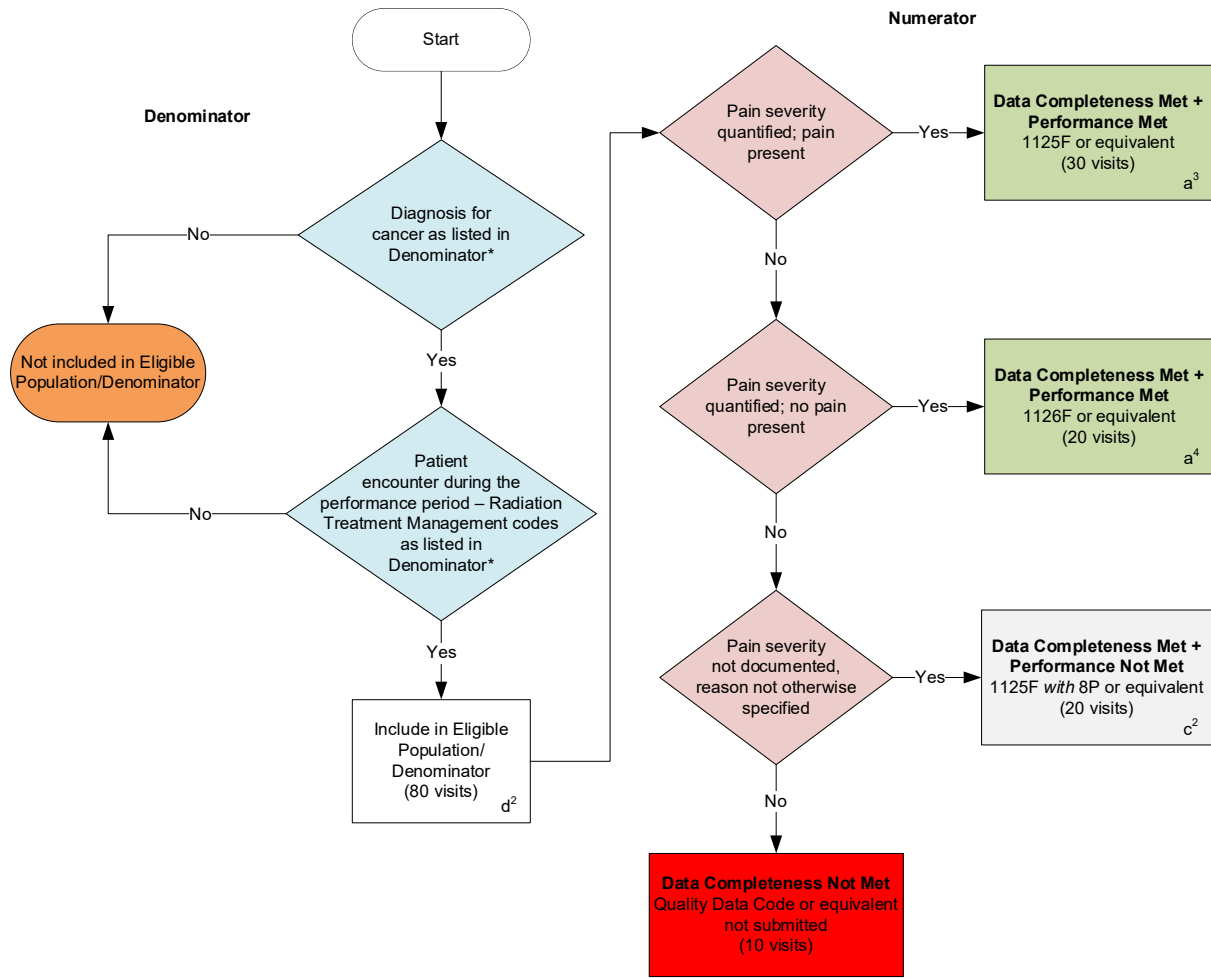


**2023 Clinical Quality Measure Flow for Quality ID #143 (NQF 0384):
Oncology: Medical and Radiation – Pain Intensity Quantified
Submission Criteria One**

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



Submission Criteria Two



SAMPLE CALCULATIONS

Data Completeness=
 Performance Met ($a^1+a^2+a^3+a^4=100$ visits) + Performance Not Met ($c^1+c^2=40$ visits) = 140 visits = 87.50%
 Eligible Population / Denominator ($d^1+d^2=160$ visits) = 160 visits

Performance Rate=
 Performance Met ($a^1+a^2+a^3+a^4=100$ visits) = 100 visits = 71.43%
 Data Completeness Numerator (140 visits) = 140 visits

*See the posted measure specification for specific coding and instructions to submit this measure.
 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.
 NOTE: Submission Frequency: Visit

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 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.

**2023 Clinical Quality Measure Flow Narrative for Quality ID #143 (NQF 0384):
Oncology: Medical and Radiation – Pain Intensity Quantified**

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

Submission Criteria One:

1. Start with Denominator
2. 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 – to be used to evaluate remaining denominator criteria and for numerator evaluation, as listed in Denominator**.
3. Check *Patient encounter during the performance period – to be used to evaluate remaining denominator criteria and for numerator evaluation, as listed in Denominator**:
 - a. If *Patient encounter during the performance period – to be used to evaluate remaining denominator criteria and for numerator evaluation, as listed in Denominator** equals No, do not include in *Eligible Population/Denominator*. Stop processing.
 - b. If *Patient encounter during the performance period – to be used to evaluate remaining denominator criteria and for numerator evaluation, as listed in Denominator** equals Yes, proceed to check *Patient procedure on or within 30 days before denominator eligible encounter as listed in Denominator**.
4. Check *Patient procedure on or within 30 days before denominator eligible encounter as listed in Denominator**:
 - a. If *Patient procedure on or within 30 days before denominator eligible encounter as listed in Denominator** equals No, do not include in *Eligible Population/Denominator*. Stop processing.
 - b. If *Patient procedure on or within 30 days before denominator eligible encounter as listed in Denominator** equals Yes, proceed to check *Patient procedure on or within 30 days after denominator eligible encounter as listed in Denominator**.
5. Check *Patient procedure on or within 30 days after denominator eligible encounter as listed in Denominator**:
 - a. If *Patient procedure on or within 30 days after denominator eligible encounter as listed in Denominator** equals No, do not include in *Eligible Population/Denominator*. Stop processing.
 - b. If *Patient procedure on or within 30 days after denominator eligible encounter 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 d¹ equals 80 visits in the Sample Calculation.

7. Start Numerator
8. Check *Pain severity quantified; pain present*:
 - a. If *Pain severity quantified; pain present* 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 a¹ equals 30 visits in the Sample Calculation.
 - b. If *Pain severity quantified; pain present* equals No, proceed to check *Pain severity quantified; no pain present*.
9. 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*.
 - *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.
 - b. If *Pain severity quantified; no pain present* equals No, proceed to check *Pain severity not documented, reason not otherwise specified*.
10. 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*.
 - *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.
 - b. If *Pain severity not documented, reason not otherwise specified* equals No, proceed to check *Data Completeness Not Met*.
11. 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

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

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.

NOTE: Submission Frequency: Visit

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Submission Criteria Two:

1. Start with Denominator

2. 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 – Radiation Treatment Management codes as listed in Denominator**.
3. Check *Patient encounter during the performance period – Radiation Treatment Management codes as listed in Denominator**:
 - a. If *Patient encounter during the performance period – Radiation Treatment Management codes as listed in Denominator** equals No, do not include in *Eligible Population/Denominator*. Stop processing.
 - b. If *Patient encounter during the performance period – Radiation Treatment Management codes as listed in Denominator** equals Yes, include in *Eligible Population/Denominator*.
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 d² 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*.
 - *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 a³ equals 30 visits in the Sample Calculation.
 - b. If *Pain severity quantified; pain present* equals No, proceed to check *Pain severity quantified; no pain present*.
7. 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*.
 - *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 a⁴ equals 20 visits in the Sample Calculation.
 - b. If *Pain severity quantified; no pain present* equals No, proceed to check *Pain severity not documented, reason not otherwise specified*.
8. 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.

- *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.
- b. *If Pain severity not documented, reason not otherwise specified* equals No, proceed to check *Data Completeness Not Met*.
9. 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.

Sample Calculations

Data Completeness equals Performance Met (a¹ plus a² plus a³ plus a⁴ equals 100 visits) plus Performance Not Met (c¹ plus c² equals 40 visits) divided by Eligible Population/Denominator (d¹ plus d² equals 160 visits). All equals 140 visits divided by 160 visits. All equals 87.50 percent.

Performance Rate equals Performance Met (a¹ plus a² plus a³ plus a⁴ equals 100 visits) divided by Data Completeness Numerator (140 visits). All equals 100 visits divided by 140 visits. All equals 71.43 percent.

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

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.

NOTE: Submission Frequency: Visit

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