

Oncology Care Model Measure Specifications

OCM-4a MIPS 143 (NQF 0384) Oncology: Medical and Radiation – Pain Intensity Quantified

The Composite measure OCM-4 consists of two measures: OCM-4a (MIPS 143 and NQF 0384) and OCM-4b (MIPS 144 and NQF 0383).

Note: This version of the OCM-4a Measure Specifications is to be used for reporting for the measurement period beginning 01/01/2019 and future measurement periods. If an updated version of this document is released, this version will be used for reporting until the effective date of the new version.

Disclaimer: Please note that this measure was adapted from an NQF-endorsed measure; the measure specifications were changed for use in the Oncology Care Model. NQF has not reviewed or approved the revised measure specifications.

SUMMARY OF CHANGES FROM MIPS 143 SPECIFICATIONS

- Remove **1125F with 8P**. This code is used in the MIPS program to support pay-for-reporting.
- Updated codes used for the qualifying provider encounter and chemotherapy (see “OCM Tech Spec Value Set” for specific codes).

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

Measure Scoring

Proportion

Measure Type

Process

Improvement Notation

Higher score indicates better quality

Definitions

None

Guidance

This measure is to be reported once per qualifying provider encounter for qualifying patients.

It is anticipated that clinicians providing care for patients with cancer will submit this measure.

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NOTE: For patients receiving radiation therapy, pain intensity should be quantified at each radiation treatment management encounter. For patients receiving chemotherapy, pain intensity should be quantified at each face-to-face encounter with the physician while the patient is receiving treatment. For purposes of calculating this measure, eligible encounters for patients receiving chemotherapy will include those encounters where the patient has been administered chemotherapy within 30 days prior to the encounter and also been administered chemotherapy within 30 days after the date of the encounter. For example, at every visit for patients with a diagnosis of cancer who are also receiving chemotherapy or radiation therapy, the patient should have pain intensity 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).

Initial Population

Not Applicable

Denominator

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

DENOMINATOR NOTE: Provider encounters with telehealth modifiers of GQ, GT, 95 or POS 02 will not be included in this measure.

Step(s)	Instructions	Data Element(s)	OCM Code Set(s)
Step 1	Active diagnosis of cancer during the qualifying provider encounter	<ul style="list-style-type: none">• Cancer Diagnosis• Cancer Diagnosis Start Date• Cancer Diagnosis End Date• Encounter Date	<ul style="list-style-type: none">• OCM Cancer Diagnosis

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Step(s)	Instructions	Data Element(s)	OCM Code Set(s)
Step 2	<p>Qualifying radiation treatment management encounter for radiation therapy during the measurement period</p> <p>OR</p> <p>Qualifying provider encounter (without telehealth modifiers GQ, GT, 95 or POS 02) during the measurement period</p> <p>AND</p> <p>Chemotherapy administration starts < = 30 days before the end of the qualifying provider encounter AND starts < = 30 days after the end of the qualifying provider encounter</p>	<ul style="list-style-type: none"> • Radiation Treatment Management Encounter • Radiation Treatment Management Encounter Date • Encounter • Encounter Date • Chemotherapy • Chemotherapy Date • Measurement Period Start Date • Measurement Period End Date 	<ul style="list-style-type: none"> • OCM Radiation Treatment Management Encounter • OCM Encounter • OCM 4 Chemotherapy

Denominator Exclusions

None

Numerator

Patient visits in which pain intensity is quantified

Step(s)	Instructions	Data Element(s)	OCM Code Set(s)
Step 1	Pain intensity quantified during qualifying provider encounter	<ul style="list-style-type: none"> • Pain Intensity Quantified Pain Present • Pain Intensity Quantified Pain Present Date • Pain Intensity Quantified No Pain • Pain Intensity Quantified No Pain Date • Radiation Treatment Management Encounter • Radiation Treatment Management Encounter Date • Encounter • Encounter Date 	<ul style="list-style-type: none"> • OCM Pain Intensity Quantified Pain Present • OCM Pain Intensity Quantified No Pain • OCM Radiation Treatment Management Encounter • OCM Encounter

Denominator Exceptions

None

Numerator Exclusions

Not Applicable

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Risk Adjustment

None

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, 2016)

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 with a rating scale but also includes 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 adequacy of function, and any special issues for the patient relevant to pain treatment. If necessary, get additional information for family/ caregiver regarding pain and impact of function.
- Evaluate the patient for risk factors of opioid misuse.
(Category 2A) (NCCN, 2016)
- Various methods and tools exist to assess pain severity. Intensity of pain should be quantified using a numerical rating scale (ie, 0-10), visual analog scale, categorical scale, or pictorial scale (eg, The Faces Pain Rating Scale). (Category 2A) (NCCN, 2016)

References

American Cancer Society. Cancer Facts & Figures 2011. Atlanta, GA: American Cancer Society; 2011.

Howlander N, Noone AM, Krapcho M, Neyman N, Aminou R, Waldron W, Altekruse SF, Kosary CL, Ruhl J, Tatalovich Z, Cho H, Mariotto A, Eisner MP, Lewis DR, Chen HS, Feuer EJ, Cronin KA, Edwards BK (eds). SEER Cancer Statistics Review, 1975-2008, National Cancer Institute. Bethesda, MD, http://seer.cancer.gov/csr/1975_2008/, based on November 2010 SEER data submission, posted to the SEER web site, 2011.

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National Comprehensive Cancer Network (NCCN). Clinical Practice Guidelines in Oncology: Adult Cancer Pain. Version 2, 2011. Available at: <http://www.nccn.org>.

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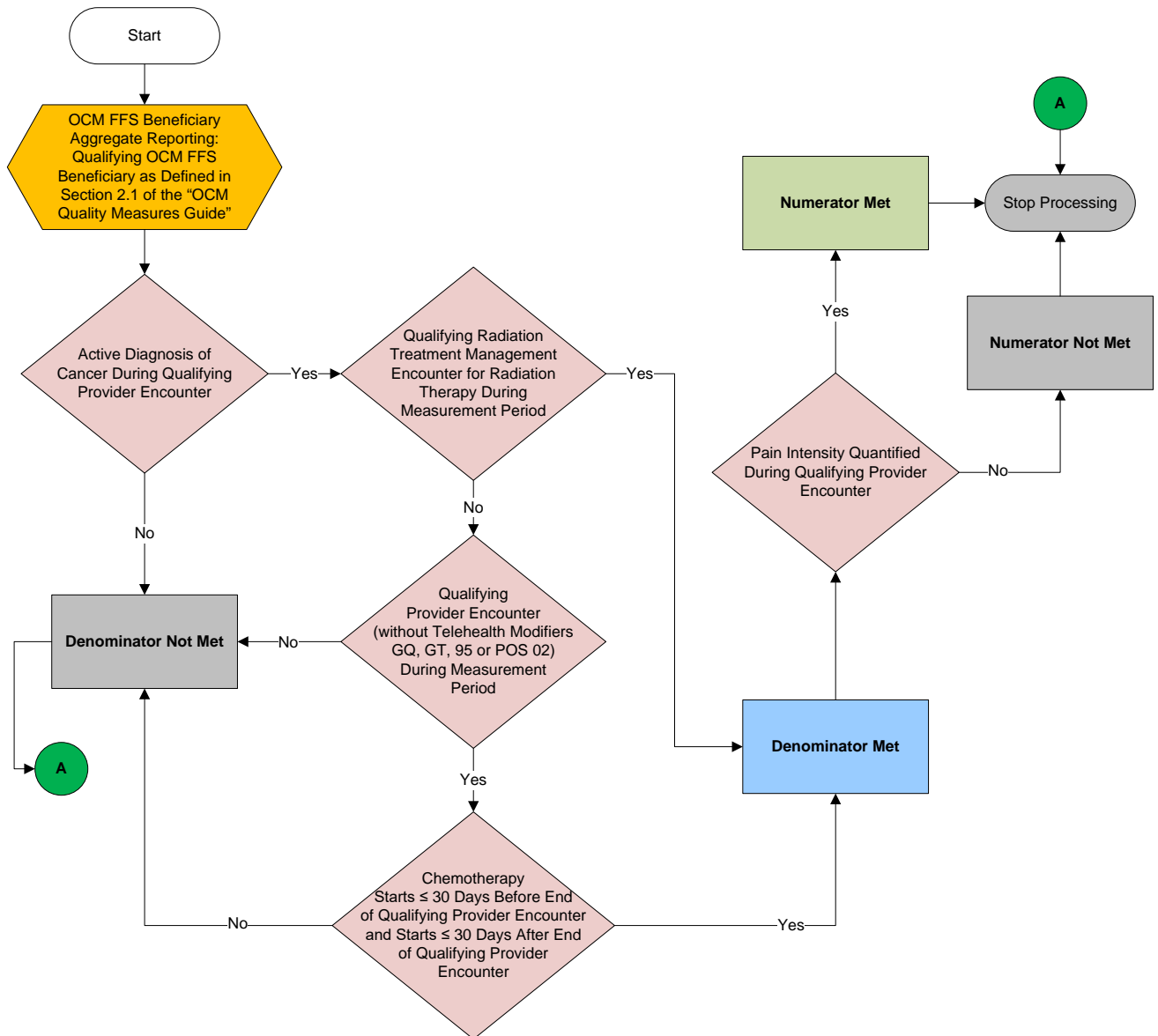
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Please refer to the OCM Measure Specification to identify the data elements and OCM code sets to be used for reporting this measure.

1. For OCM FFS Beneficiary Aggregate Reporting:
 - a. If patient is a Qualifying OCM FFS Beneficiary as Defined in Section 2.1 of the “OCM Quality Measures Guide,” include the patient in aggregate results that are reported in the OCM Data Registry. Proceed to check Patient Diagnosis of Cancer.
 - b. If patient is not a Qualifying OCM FFS Beneficiary as Defined in Section 2.1 of the “OCM Quality Measures Guide,” stop processing. Patient does not qualify as an OCM FFS Beneficiary and should not be included in aggregate results that are reported to the OCM Data Registry.
2. Check Patient Diagnosis of Cancer:
 - a. If Active Diagnosis of Cancer During Qualifying Provider Encounter equals No, do not include in Denominator. Stop processing.
 - b. If Active Diagnosis of Cancer During Qualifying Provider Encounter equals Yes, proceed to check Qualifying Radiation Treatment Management Encounter.
3. Check Qualifying Radiation Treatment Management Encounter:
 - a. If Qualifying Radiation Treatment Management Encounter for Radiation Therapy During Measurement Period equals Yes, include in Denominator. Proceed to check Pain Intensity Quantified.
 - b. If Qualifying Radiation Treatment Management Encounter for Radiation Therapy During Measurement Period equals No, check Qualifying Provider Encounter.
4. Check Qualifying Provider Encounter:
 - a. If Qualifying Provider Encounter (without Telehealth Modifiers GQ, GT, 95 or POS 02) During Measurement Period equals No, do not include in Denominator. Stop processing.
 - b. If Qualifying Provider Encounter (without Telehealth Modifiers GQ, GT, 95 or POS 02) During Measurement Period equals Yes, check Chemotherapy.
5. Check Chemotherapy:
 - a. If Chemotherapy Starts \leq 30 Days Before End of Qualifying Provider Encounter and Starts \leq 30 Days After End of Qualifying Provider Encounter equals No, do not include in Denominator. Stop processing.

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- b. If Chemotherapy Starts \leq 30 Days Before End of Qualifying Provider Encounter and Starts \leq 30 Days After End of Qualifying Provider Encounter equals Yes, include in Denominator. Proceed to check Pain Intensity Quantified.
- 6. Check Pain Intensity Quantified:
 - a. If Pain Intensity Quantified During Qualifying Provider Encounter equals Yes, include in Numerator. Stop processing.
 - b. If Pain Intensity Quantified During Qualifying Provider Encounter equals No, do not include in Numerator. Stop processing.