

**Quality ID #226 (NQF 0028): Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention – National Quality Strategy Domain: Community / Population Health**

**2018 OPTIONS FOR INDIVIDUAL MEASURES:**  
**CLAIMS ONLY**

**MEASURE TYPE:**

Process

**DESCRIPTION:**

Percentage of patients aged 18 years and older who were screened for tobacco use one or more times within 24 months **AND** who received tobacco cessation intervention if identified as a tobacco user

**INSTRUCTIONS:**

This measure is to be submitted **once per performance period** for patients seen during the performance period. This measure is intended to reflect the quality of services provided for preventive screening for tobacco use. For the purposes of the measure, the denominator eligible encounter should be used to determine if the numerator action for each of the submission criteria was performed within the 24 month look back period from the date of the denominator eligible encounter.

**Measure Submission:**

The listed denominator criteria is used to identify the intended patient population. The numerator quality-data codes included in this specification are used to submit the quality actions allowed by the measure. All measure-specific coding should be submitted on the claim(s) representing the eligible encounter.

**THERE ARE THREE SUBMISSION CRITERIA FOR THIS MEASURE:**

1. Percentage of patients aged 18 years and older who were screened for tobacco use one or more times within 24 months
2. Percentage of patients aged 18 years and older who were screened for tobacco use and identified as a tobacco user who received tobacco cessation intervention
3. Percentage of patients aged 18 years and older who were screened for tobacco use one or more times within 24 months AND who received tobacco cessation intervention if identified as a tobacco user

**SUBMISSION CRITERIA 1: ALL PATIENTS WHO WERE SCREENED FOR TOBACCO USE**

**DENOMINATOR (SUBMISSION CRITERIA 1):**

All patients aged 18 years and older

***DENOMINATOR NOTE:*** \*Signifies that this CPT Category I code is a non-covered service under the PFS (Physician Fee Schedule). These non-covered services will not be counted in the denominator population for claims-based measures.

**Denominator Criteria (Eligible Cases):**

Patients aged  $\geq$  18 years on date of encounter

**AND**

**Patient encounter during the performance period (CPT or HCPCS):** 90791, 90792, 90832, 90834, 90837, 90845, 92002, 92004, 92012, 92014, 92521, 92522, 92523, 92524, 92540, 92557, 92625, 96150, 96151, 96152, 96160, 96161, 97165, 97166, 97167, 97168, 99201, 99202, 99203, 99204, 99205, 99212, 99213, 99214, 99215, 99341, 99342, 99343, 99344, 99345, 99347, 99348, 99349, 99350, 99385\*, 99386\*, 99387\*, 99395\*, 99396\*, 99397\*, 99401\*, 99402\*, 99403\*, 99404\*, 99411\*, 99412\*, 99429\*, G0438, G0439

**WITHOUT**

**Telehealth Modifier:** GQ, GT, 95, POS 02

**NUMERATOR (SUBMISSION CRITERIA 1):**

Patients who were screened for tobacco use at least once within 24 months

**Definitions:**

**Tobacco Use** – Includes any type of tobacco

**NUMERATOR NOTE:** *In the event that a patient is screened for tobacco use and tobacco status is unknown, submit G9905. Denominator Exception(s) are determined on the date of the most recent denominator eligible encounter for all submission criteria.*

**Numerator Quality-Data Coding Options:**

**Patient Screened for Tobacco Use, Identified as a Tobacco User or Tobacco Non-User**

**Performance Met: G9902:** Patient screened for tobacco use AND identified as a tobacco user

**OR**

**Performance Met: G9903:** Patient screened for tobacco use AND identified as a tobacco non-user

**OR**

**Tobacco Use Screening not Performed for Medical Reasons**

*(One G-code [G9904] is required on the claim form to submit documented circumstances when the action described in the numerator is not performed for medical reasons.)*

**Denominator Exception: G9904:** Documentation of medical reason(s) for not screening for tobacco use (e.g., limited life expectancy, other medical reason)

**OR**

**Tobacco Use Screening not Performed, Reason Not Given**

*(One G-code [G9905] is required on the claim form to submit circumstances when the action described in the numerator is not performed and the reason is not given.)*

**Performance Not Met: G9905:** Patient not screened for tobacco use, reason not given

**SUBMISSION CRITERIA 2: ALL PATIENTS WHO WERE IDENTIFIED AS A TOBACCO USER AND WHO RECEIVED TOBACCO CESSATION INTERVENTION**

**DENOMINATOR (SUBMISSION CRITERIA 2):**

All patients aged 18 years and older who were screened for tobacco use and identified as a tobacco user

**DENOMINATOR NOTE:** *\*Signifies that this CPT Category I code is a non-covered service under the PFS (Physician Fee Schedule). These non-covered services will not be counted in the denominator population for claims-based measures.*

**Denominator Criteria (Eligible Cases):**

Patients aged ≥ 18 years on date of encounter

**AND**

All eligible instances when (**G9902**) Patient screened for tobacco use AND identified as a tobacco user that are utilized in submission of Performance Met Patient Screened for Tobacco Use, Identified as a Tobacco User in the numerator for submission criteria one

**AND**

**Patient encounter during the performance period (CPT or HCPCS):** 90791, 90792, 90832, 90834, 90837, 90845, 92002, 92004, 92012, 92014, 92521, 92522, 92523, 92524, 92540, 92557, 92625, 96150, 96151, 96152, 96160, 96161, 97165, 97166, 97167, 97168, 99201, 99202, 99203, 99204, 99205, 99212, 99213, 99214, 99215, 99341, 99342, 99343, 99344, 99345, 99347, 99348, 99349, 99350, 99385\*, 99386\*

99387\*, 99395\*, 99396\*, 99397\*, 99401\*, 99402\*, 99403\*, 99404\*, 99411\*, 99412\*, 99429\*, G0438, G0439  
**WITHOUT**  
**Telehealth Modifier:** GQ, GT, 95, POS 02

**NUMERATOR (SUBMISSION CRITERIA 2):**

Patients who received tobacco cessation intervention

**Definitions:**

**Tobacco Cessation Intervention** – Includes brief counseling (3 minutes or less), and/or pharmacotherapy.

Note: For the purpose of this measure, brief counseling (e.g., minimal and intensive advice/counseling interventions conducted both in person and over the phone) qualifies for the numerator. Written self-help materials (e.g., brochures, pamphlets) and complementary/alternative therapies do not qualify for the numerator.

**NUMERATOR NOTE:** *This measure defines tobacco cessation counseling as lasting 3 minutes or less. Services typically provided under CPT codes 99406 and 99407 satisfy the requirement of tobacco cessation intervention, as these services provide tobacco cessation counseling for 3-10 minutes. If a patient received these types of services, submit G-code G9906. Denominator Exception(s) are determined on the date of the most recent denominator eligible encounter for all submission criteria.*

**Numerator Quality-Data Coding Options:**

**Patient Identified as Tobacco User Received Tobacco Cessation Intervention**

**Performance Met: G9906:** Patient received tobacco cessation intervention (counseling and/or pharmacotherapy)

**OR**

**Patient Identified as Tobacco User Did Not Receive Tobacco Cessation Intervention for Medical Reasons**

*(Two G-codes [G9902 & G9907] are required on the claim form to submit documented circumstances when the action described in the numerator is not performed for medical reasons.)*

**Denominator Exception: G9907:** Documentation of medical reason(s) for not providing tobacco cessation intervention (e.g., limited life expectancy, other medical reason)

**OR**

**Patient Identified as Tobacco User Did Not Receive Tobacco Cessation Intervention, Reason Not Given**

*(Two G-codes [G9902 & G9908] are required on the claim form to submit circumstances when the action described in the numerator is not performed and the reason is not given.)*

**Performance Not Met: G9908:** Patient did not receive tobacco cessation intervention (counseling and/or pharmacotherapy), reason not given

**SUBMISSION CRITERIA 3: ALL PATIENTS WHO WERE SCREENED FOR TOBACCO USE AND, IF IDENTIFIED AS A TOBACCO USER, RECEIVED TOBACCO CESSATION INTERVENTION OR IDENTIFIED AS A TOBACCO NON-USER**

**DENOMINATOR (SUBMISSION CRITERIA 3):**

All patients aged 18 years and older

**DENOMINATOR NOTE:** *\*Signifies that this CPT Category I code is a non-covered service under the PFS (Physician Fee Schedule). These non-covered services will not be counted in the denominator population for claims-based measures.*

**Denominator Criteria (Eligible Cases):**

Patients aged ≥ 18 years on date of encounter

**AND**

**Patient encounter during the performance period (CPT or HCPCS):** 90791, 90792, 90832, 90834, 90837, 90845, 92002, 92004, 92012, 92014, 92521, 92522, 92523, 92524, 92540, 92557, 92625, 96150, 96151, 96152, 96160, 96161, 97165, 97166, 97167, 97168, 99201, 99202, 99203, 99204, 99205, 99212, 99213, 99214, 99215, 99341, 99342, 99343, 99344, 99345, 99347, 99348, 99349, 99350, 99385\*, 99386\*, 99387\*, 99395\*, 99396\*, 99397\*, 99401\*, 99402\*, 99403\*, 99404\*, 99411\*, 99412\*, 99429\*, G0438, G0439

**WITHOUT**

**Telehealth Modifier:** GQ, GT, 95, POS 02

**NUMERATOR (SUBMISSION CRITERIA 3):**

Patients who were screened for tobacco use at least once within 24 months **AND** who received tobacco cessation intervention if identified as a tobacco user

**Definitions:**

**Tobacco Use** – Includes any type of tobacco

**Tobacco Cessation Intervention** – Includes brief counseling (3 minutes or less), and/or pharmacotherapy. Note: For the purpose of this measure, brief counseling (e.g., minimal and intensive advice/counseling interventions conducted both in person and over the phone) qualifies for the numerator. Written self-help materials (e.g., brochures, pamphlets) and complementary/alternative therapies do not qualify for the numerator.

**NUMERATOR NOTE:** *In the event that a patient is screened for tobacco use and identified as a user but did not receive tobacco cessation intervention, or if tobacco status is unknown, submit 4004F with 8P. This measure defines tobacco cessation counseling as lasting 3 minutes or less. Services typically provided under CPT codes 99406 and 99407 satisfy the requirement of tobacco cessation intervention, as these services provide tobacco cessation counseling for 3-10 minutes. If a patient received these types of services, submit CPT II 4004F. Denominator Exception(s) are determined on the date of the most recent denominator eligible encounter for all submission criteria.*

**Numerator Quality-Data Coding Options:**

**Patient Screened for Tobacco Use, Identified as a Tobacco User and Received Tobacco Cessation Intervention**

**Performance Met: CPT II 4004F:** Patient screened for tobacco use AND received tobacco cessation intervention (counseling, pharmacotherapy, or both), if identified as a tobacco user

**OR**

**Patient Screened for Tobacco Use and Identified as a Tobacco Non-User**

**Performance Met: CPT II 1036F:** Current tobacco non-user

**OR**

**Tobacco Screening not Performed OR Tobacco Cessation Intervention not Provided for Medical Reasons**

Append a modifier (1P) to CPT Category II code 4004F OR submit a G-code (G9909) to submit documented circumstances that appropriately exclude patients from the denominator.

**Denominator Exception: 4004F with 1P:** Documentation of medical reason(s) for not screening for tobacco use (e.g., limited life expectancy, other medical reason)

**OR**

**Denominator Exception: G9909**

Documentation of medical reason(s) for not providing tobacco cessation intervention if identified as a tobacco user (e.g., limited life expectancy, other medical reason)

**OR**

**Tobacco Screening not Performed OR Tobacco Cessation Intervention not Provided, Reason Not Otherwise Specified**

Append a submission modifier (8P) to CPT Category II code 4004F to submit circumstances when the action described in the numerator is not performed and the reason is not otherwise specified.

**Performance Not Met: 4004F with 8P:**

Tobacco screening not performed OR tobacco cessation intervention not provided, reason not otherwise specified

**RATIONALE:**

This measure is intended to promote adult tobacco screening and tobacco cessation interventions for those who use tobacco products. There is good evidence that tobacco screening and brief cessation intervention (including counseling and/or pharmacotherapy) is successful in helping tobacco users quit. Tobacco users who are able to stop using tobacco lower their risk for heart disease, lung disease, and stroke.

**CLINICAL RECOMMENDATION STATEMENTS:**

The USPSTF recommends that clinicians ask all adults about tobacco use, advise them to stop using tobacco, and provide behavioral interventions and U.S. Food and Drug Administration (FDA) –approved pharmacotherapy for cessation to adults who use tobacco. (Grade A Recommendation) (U.S. Preventive Services Task Force, 2015)

The USPSTF recommends that clinicians ask all pregnant women about tobacco use, advise them to stop using tobacco, and provide behavioral interventions for cessation to pregnant women who use tobacco. (Grade A Recommendation) (U.S. Preventive Services Task Force, 2015)

The USPSTF concludes that the current evidence is insufficient to recommend electronic nicotine delivery systems for tobacco cessation in adults, including pregnant women. The USPSTF recommends that clinicians direct patients who smoke tobacco to other cessation interventions with established effectiveness and safety (previously stated). (Grade I Statement) (U.S. Preventive Services Task Force, 2015)

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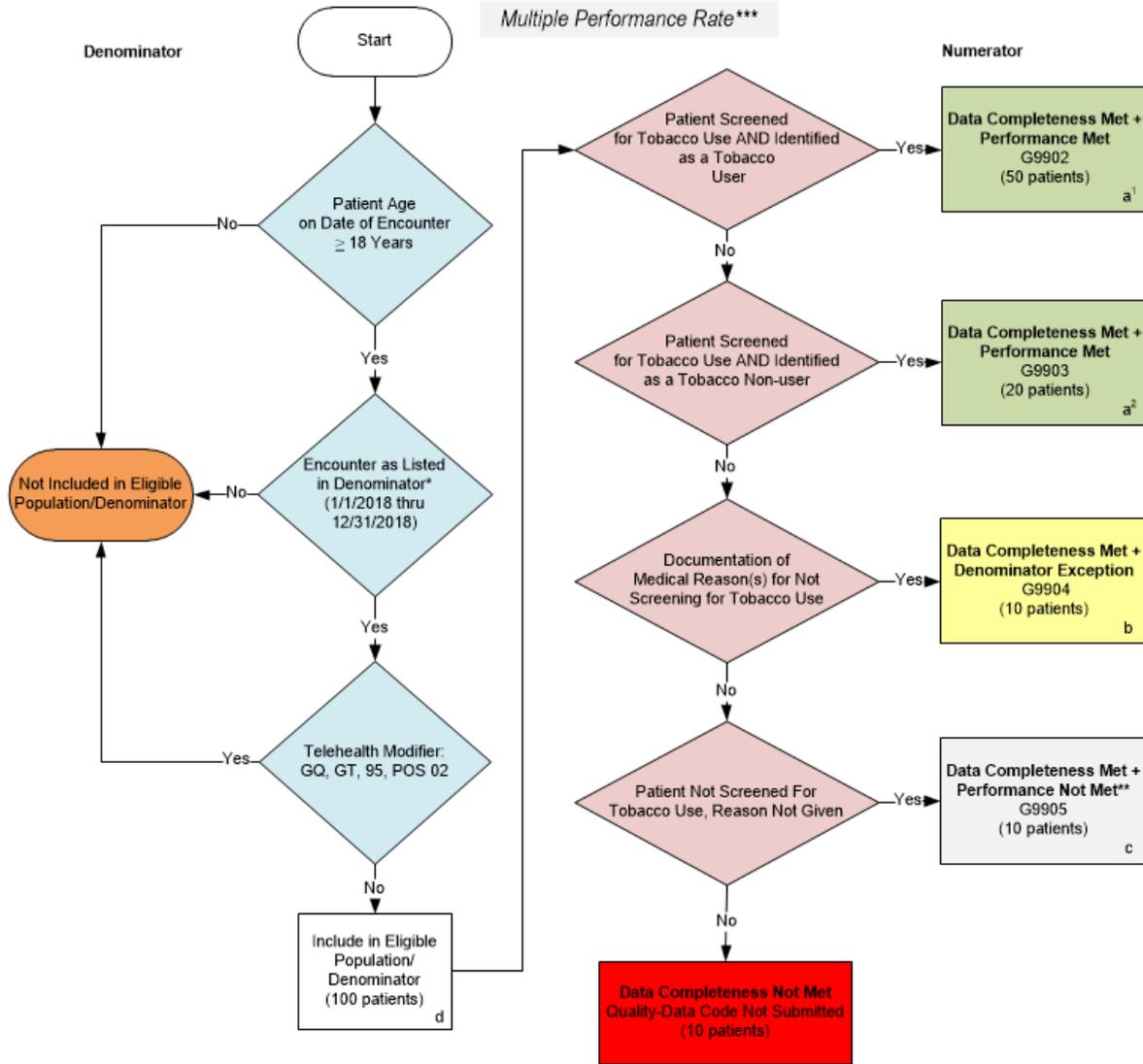
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**2018 Claims Flow for Quality ID #226 NQF #0028:  
Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention  
Submission Criteria One**



**SAMPLE CALCULATIONS SUBMISSION CRITERIA ONE:**

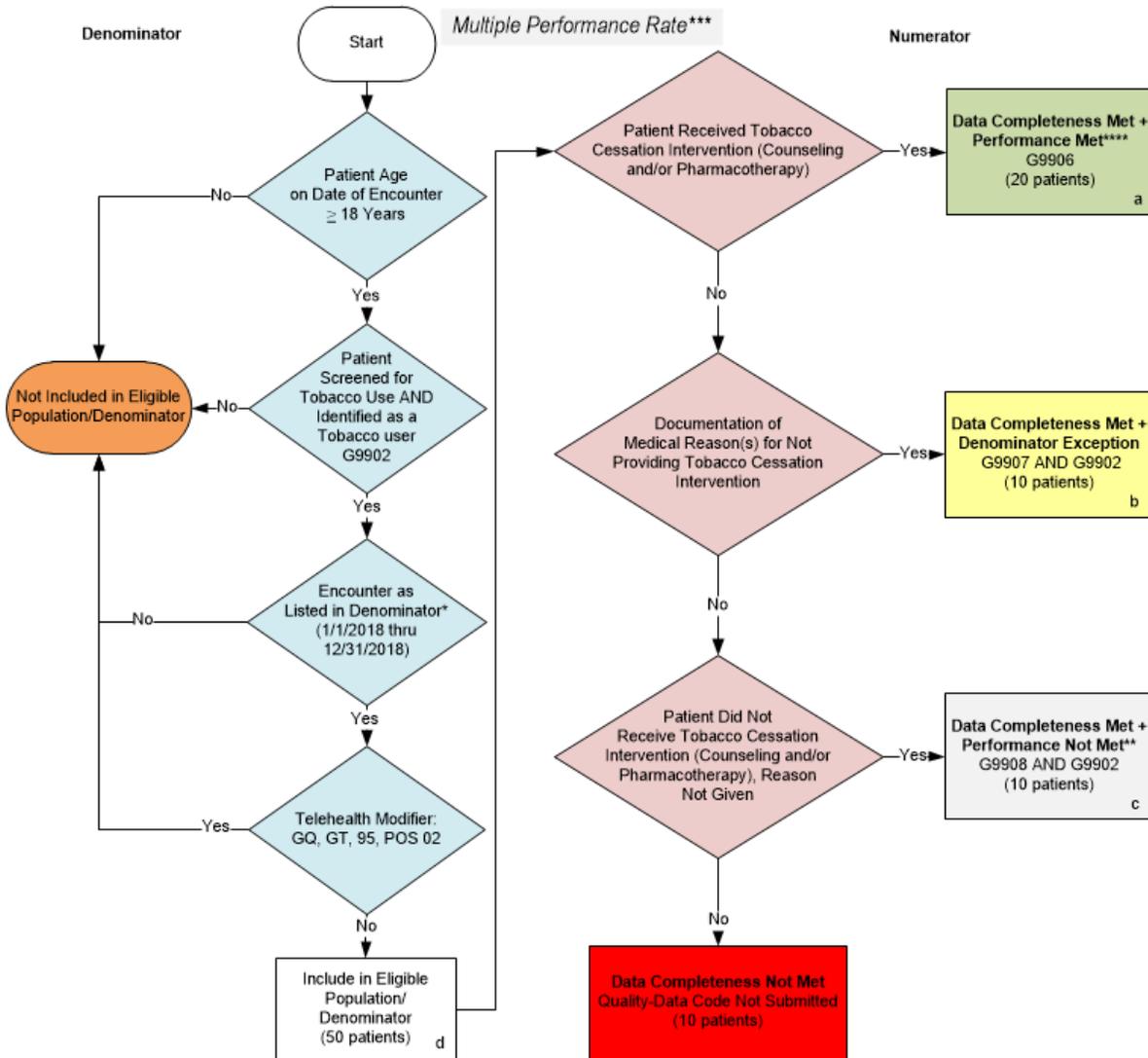
**Data Completeness=**  
 Performance Met (a<sup>1</sup>+a<sup>2</sup>=70 patients) + Denominator Exception (b=10 patients) + Performance Not Met (c=10 patients) = 90 patients = 90.00%  
 Eligible Population / Denominator (d=100 patients) = 100 patients

**Performance Rate=**  
 Performance Met (a<sup>1</sup>+a<sup>2</sup>=70 patients) = 70 patients = 87.50%  
 Data Completeness Numerator (90 patients) – Denominator Exception (b=10 patients) = 80 patients

\* See the posted Measure Specification for specific coding and instructions to submit this measure.  
 \*\* In the event that the tobacco status is unknown submit G9905  
 NOTE: Submission Frequency: Patient-process

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**2018 Claims Flow for Quality ID #226 NQF #0028:  
Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention  
Submission Criteria Two**



**SAMPLE CALCULATIONS SUBMISSION CRITERIA TWO:**

**Data Completeness=**  

$$\frac{\text{Performance Met (a=20 patients)} + \text{Denominator Exception (b=10 patients)} + \text{Performance Not Met (c=10 patients)}}{\text{Eligible Population / Denominator (d=50 patients)}} = \frac{40 \text{ patients}}{50 \text{ patients}} = 80.00\%$$

**Performance Rate=**  

$$\frac{\text{Performance Met (a=20 patients)}}{\text{Data Completeness Numerator (40 patients) - Denominator Exception (b=10 patients)}} = \frac{20 \text{ patients}}{30 \text{ patients}} = 66.67\%$$

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

\*\* In the event that a patient is identified as a user but did not receive tobacco cessation intervention submit G9908

\*\*\*\* This measure defines tobacco cessation counseling as lasting 3 minutes or less. Services typically provided under

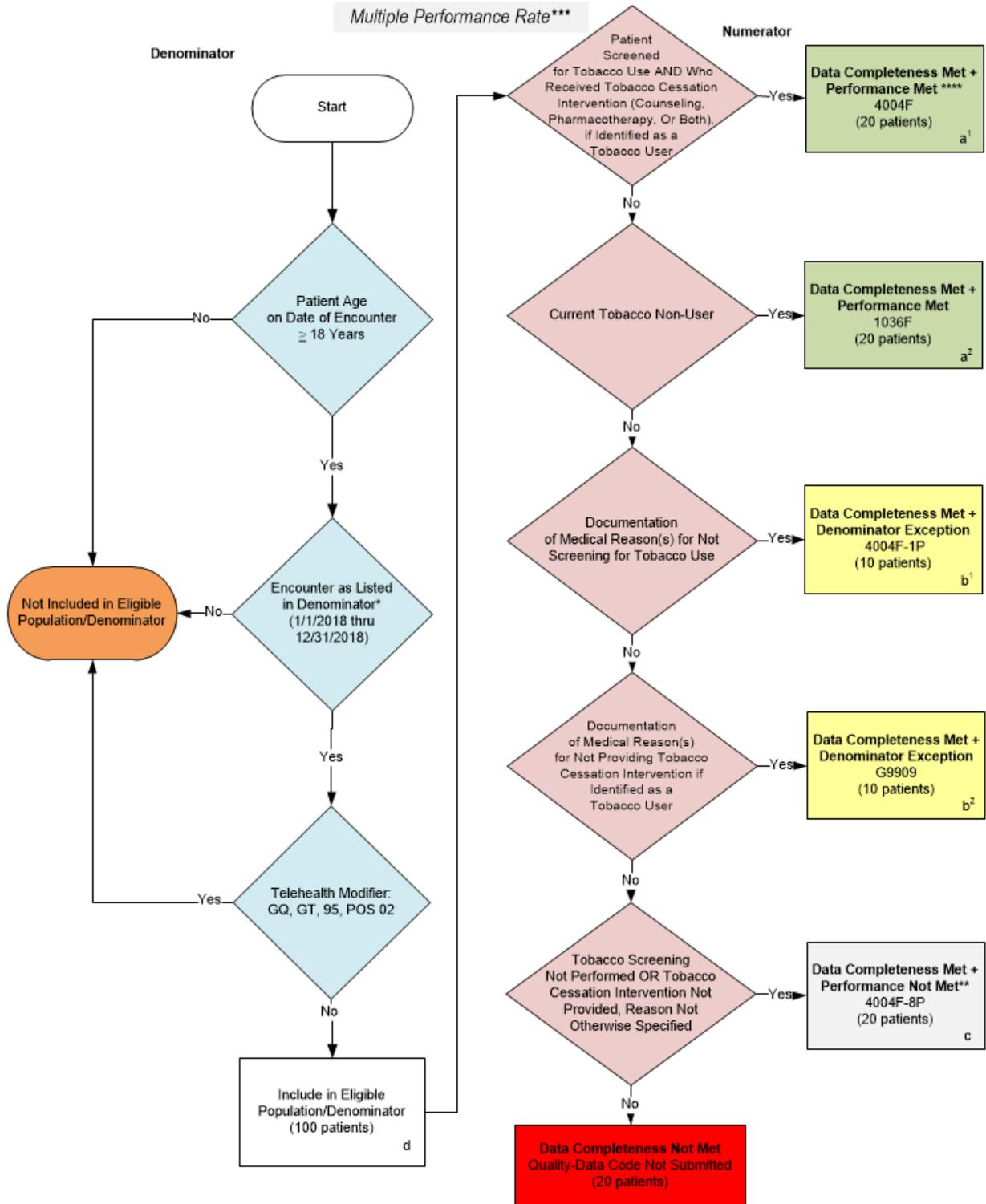
CPT codes 99406 and 99407 satisfy the requirement of tobacco cessation intervention, as these services provide tobacco cessation counseling for 3-10 minutes.

If a patient received these types of services, submit G-code G9908.

NOTE: Submission Frequency: Patient-process

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**2018 Claims Flow for Quality ID #226 NQF #0028:  
Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention  
Submission Criteria Three**



**2018 Claims Flow for Quality ID #226 NQF #0028:  
Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention  
Submission Criteria Three**

*Multiple Performance Rate\*\*\**

**SAMPLE CALCULATIONS SUBMISSION CRITERIA THREE:**

**Data Completeness=**

$$\frac{\text{Performance Met (a}^1\text{+a}^2\text{=40 patients) + Denominator Exception (b}^1\text{+b}^2\text{=20 patients) + Performance Not Met (c=20 patients)}}{\text{Eligible Population / Denominator (d=100 patients)}} = \frac{.80 \text{ patients}}{100 \text{ patients}} = 80.00\%$$

**Performance Rate=**

$$\frac{\text{Performance Met (a}^1\text{+a}^2\text{=40 patients)}}{\text{Data Completeness Numerator (80 patients) – Denominator Exception (b}^1\text{+b}^2\text{=20 patients)}} = \frac{40 \text{ patients}}{60 \text{ patients}} = 66.67\%$$

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

\*\* In the event that a patient is identified as a user but did not receive tobacco cessation intervention submit 4004F-8P

\*\*\*\* This measure defines tobacco cessation counseling as lasting 3 minutes or less. Services typically provided under CPT codes 99406 and 99407 satisfy the requirement of tobacco cessation intervention, as these services provide tobacco cessation counseling for 3-10 minutes. If a patient received these types of services, submit 4004F .

NOTE: Submission Frequency: Patient-process

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v2

**2018 Claims Flow for Quality ID #226 NQF #0028:  
Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention**

This Measure Has Three Submission Criteria. All Performance Rates Must Be Submitted if Patient Is Identified as a Tobacco User.

*Multiple Performance Rate\*\*\**

**Submission Criteria #1 All Patients Who Were Screened for Tobacco Use**

SAMPLE CALCULATIONS SUBMISSION CRITERIA ONE:

**Data Completeness=**  

$$\frac{\text{Performance Met (a}^1+\text{a}^2=70 \text{ patients)} + \text{Denominator Exception (b=10 patients)} + \text{Performance Not Met (c=10 patients)}}{\text{Eligible Population / Denominator (d=100 patients)}} = \frac{90 \text{ patients}}{100 \text{ patients}} = 90.00\%$$

**Performance Rate=**  

$$\frac{\text{Performance Met (a}^1+\text{a}^2=70 \text{ patients)}}{\text{Data Completeness Numerator (90 patients) – Denominator Exception (b=10 patients)}} = \frac{70 \text{ patients}}{80 \text{ patients}} = 87.50\%$$

**Submission Criteria #2 All Patients Who Were Identified as a Tobacco User Who Received Tobacco Cessation Intervention**

SAMPLE CALCULATIONS SUBMISSION CRITERIA TWO:

**Data Completeness=**  

$$\frac{\text{Performance Met (a=20 patients)} + \text{Denominator Exception (b=10 patients)} + \text{Performance Not Met (c=10 patients)}}{\text{Eligible Population / Denominator (d=50 patients)}} = \frac{40 \text{ patients}}{50 \text{ patients}} = 80.00\%$$

**Performance Rate=**  

$$\frac{\text{Performance Met (a=20 patients)}}{\text{Data Completeness Numerator (40 patients) – Denominator Exception (b=10 patients)}} = \frac{20 \text{ patients}}{30 \text{ patients}} = 66.67\%$$

**Submission Criteria #3 Patients Screened for Tobacco Use AND Who Received Tobacco Cessation Intervention if Identified as a Tobacco User**

SAMPLE CALCULATIONS SUBMISSION CRITERIA THREE:

**Data Completeness=**  

$$\frac{\text{Performance Met (a}^1+\text{a}^2=40 \text{ patients)} + \text{Denominator Exception (b}^1+\text{b}^2=20 \text{ patients)} + \text{Performance Not Met (c=20 patients)}}{\text{Eligible Population / Denominator (d=100 patients)}} = \frac{80 \text{ patients}}{100 \text{ patients}} = 80.00\%$$

**Performance Rate=**  

$$\frac{\text{Performance Met (a}^1+\text{a}^2=40 \text{ patients)}}{\text{Data Completeness Numerator (80 patients) – Denominator Exception (b}^1+\text{b}^2=20 \text{ patients)}} = \frac{40 \text{ patients}}{60 \text{ patients}} = 66.67\%$$

## 2018 Claims Flow for Quality ID #226 NQF #0028:

### Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention

Please refer to the specific section of the specification to identify the denominator and numerator information for use in submitting this Individual Specification. This flow is for claims data submission.

#### Submission Criteria #1

1. Start with Denominator
2. Check Patient Age:
  - a. If the Age is greater than or equal to 18 years on Date of Encounter equals No during the measurement period, do not include in Eligible Patient Population. Stop Processing.
  - b. If the Age is greater than or equal to 18 years on Date of Encounter equals Yes during the measurement period, proceed to check Encounter Performed.
3. Check Encounter Performed:
  - a. If Encounter as Listed in the Denominator equals No, do not include in Eligible Patient Population. Stop Processing.
  - b. If Encounter 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 Patient Population. Stop Processing.
  - b. If Telehealth Modifier equals No, include in the Eligible Population.
5. 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 100 patients in the Sample Calculation.
6. Start Numerator
7. Check Patient Screened for Tobacco Use At Least Once Within the Last 24 Months.
  - a. If Patient Screened for Tobacco Use At Least Once Within the Last 24 Months AND Determined to be a Tobacco User 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>1</sup> equals 50 patients in the Sample Calculation.
  - c. If Patient Screened for Tobacco Use At Least Once Within the Last 24 Months AND Determined to be a Tobacco Non-user equals Yes, include in Data Completeness Met and Performance Met.
  - d. 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>2</sup> equals 20 patients in the Sample Calculation.

- e. If Patient Screened for Tobacco Use At Least Once Within the Last 24 Months equals No, proceed to Documentation of Medical Reason(s) for not Screening for Tobacco Use.
8. Check Documentation of Medical Reason(s) for not Screening for Tobacco Use:
    - a. If Documentation of Medical Reason(s) for not Screening for Tobacco Use equals Yes, include in Data Completeness Met and Denominator Exception.
    - b. Data Completeness Met and Denominator Exception letter is represented in the Data Completeness and Performance Rate in the Sample Calculation listed at the end of this document. Letter b equals 10 patients in the Sample Calculation.
    - c. If Documentation of Medical Reason(s) for not Screening for Tobacco Use equals No, proceed to Tobacco Screening Not Performed, Reason Not Given.
  9. Check Tobacco Screening Not Performed, Reason Not Given:
    - a. If Tobacco Screening Not Performed, Reason Not Given equals Yes, include in the 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 c equals 10 patients in the Sample Calculation.
    - c. If Tobacco Screening Not Performed, Reason Not Given equals No, proceed to Data Completeness Not Met.
  10. Check Data Completeness Not Met:
    - a. If Data Completeness Not Met equals No, Quality Data Code not submitted. 10 patients have been subtracted from the Data Completeness Numerator in the Sample Calculation.

**SAMPLE CALCULATIONS SUBMISSION CRITERIA ONE:**

**Data Completeness=**

$$\frac{\text{Performance Met (a}^1\text{+a}^2\text{=70 patients) + Denominator Exception (b=10 patients) + Performance Not Met (c=10 patients)}}{\text{Eligible Population / Denominator (d=100 patients)}} = \frac{90 \text{ patients}}{100 \text{ patients}} = 90.00\%$$

**Performance Rate=**

$$\frac{\text{Performance Met (a}^1\text{+a}^2\text{=70 patients)}}{\text{Data Completeness Numerator (90 patients) – Denominator Exception (b=10 patients)}} = \frac{70 \text{ patients}}{80 \text{ patients}} = 87.50\%$$

## 2018 Claims Flow for Quality ID #226 NQF #0028:

### Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention

Please refer to the specific section of the specification to identify the denominator and numerator information for use in submitting this Individual Specification. This flow is for claims data submission.

#### Submission Criteria #2

1. Start with Denominator
2. Check Patient Age:
  - a. If the Age is greater than or equal to 18 years on Date of Encounter equals No, do not include in Eligible Patient Population. Stop Processing.
  - b. If the Age is greater than or equal to 18 years on Date of Encounter equals Yes, proceed to check Patient Screened For Tobacco Use AND Identified as a Tobacco User.
3. Check Patient Screened For Tobacco Use AND Identified as a Tobacco User:
  - a. If Patient Screened For Tobacco Use AND Identified as a Tobacco User equals Yes, proceed to check Encounter Performed.
  - b. If Patient Screened For Tobacco Use AND Identified as a Tobacco User equals No, do not include in Eligible Patient Population. Stop Processing.
4. Check Encounter Performed:
  - a. If Encounter as Listed in the Denominator equals No, do not include in Eligible Patient Population. Stop Processing.
  - b. If Encounter as Listed in the Denominator equals Yes, proceed to check Telehealth Modifier.
5. Check Telehealth Modifier:
  - a. If Telehealth Modifier equals Yes, do not include in Eligible Patient Population. Stop Processing.
  - b. If Telehealth Modifier equals No, include in the Eligible Population.
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 50 patients in the Sample Calculation.
7. Start Numerator
8. Check Patient Received Tobacco Cessation Intervention (counseling and/or pharmacotherapy):
  - a. If Patient Received Tobacco Cessation Intervention (counseling and/or pharmacotherapy) 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 equals 20 patients in the Sample Calculation.

- c. If Patient Received Tobacco Cessation Intervention (counseling and/or pharmacotherapy) equals No, proceed to Documentation of Medical Reason(s) for not providing Tobacco Cessation Intervention.
9. Check Documentation of Medical Reason(s) for not providing Tobacco Cessation Intervention:
- a. If Documentation of Medical Reason(s) for not providing Tobacco Cessation Intervention equals Yes, include in Data Completeness Met and Denominator Exception.
  - b. Data Completeness Met and Denominator Exception letter is represented in the Data Completeness and Performance Rate in the Sample Calculation listed at the end of this document. Letter b equals 10 patients in the Sample Calculation.
  - c. If Documentation of Medical Reason(s) for not providing Tobacco Cessation Intervention equals No, proceed to Tobacco Cessation Intervention Not Provided, Reason Not Given.
10. Check Tobacco Cessation Intervention Not Provided, Reason Not Given:
- a. If Tobacco Cessation Intervention Not Provided, Reason Not Given equals Yes, include in the 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 c equals 10 patients in the Sample Calculation.
  - c. If Tobacco Cessation Intervention Not Provided, Reason Not Given equals No, proceed to Data Completeness Not Met.
11. Check Data Completeness Not Met:
- a. If Data Completeness Not Met equals No, Quality-Data Code not submitted. 10 patients have been subtracted from the Data Completeness Numerator in the Sample Calculation.

**SAMPLE CALCULATIONS SUBMISSION CRITERIA TWO:**

**Data Completeness=**

$$\frac{\text{Performance Met (a=20 patients) + Denominator Exception (b=10 patients) + Performance Not Met (c=10 patients)}}{\text{Eligible Population / Denominator (d=50 patients)}} = \frac{40 \text{ patients}}{50 \text{ patients}} = 80.00\%$$

**Performance Rate=**

$$\frac{\text{Performance Met (a=20 patients)}}{\text{Data Completeness Numerator (40 patients) - Denominator Exception (b=10 patients)}} = \frac{20 \text{ patients}}{30 \text{ patients}} = 66.67\%$$

## 2018 Claims Flow for Quality ID #226 NQF #0028:

### Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention

Please refer to the specific section of the specification to identify the denominator and numerator information for use in submitting this Individual Specification. This flow is for claims data submission.

#### Submission Criteria #3

1. Start with Denominator
2. Check Patient Age:
  - a. If the Age is greater than or equal to 18 years on Date of Encounter equals No, do not include in Eligible Patient Population. Stop Processing.
  - b. If the Age is greater than or equal to 18 years on Date of Encounter 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 Patient Population. Stop Processing.
  - b. If Encounter 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, include in the Eligible Population.
5. 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 100 patients in the Sample Calculation.
6. Start Numerator
7. Check Patient Screened for Tobacco Use At Least Once Within the Last 24 Months.
  - a. If Patient Screened for Tobacco Use At Least Once Within the Last 24 Months AND Determined to be a Tobacco User equals Yes, proceed to Patient Received Tobacco Cessation Intervention (counseling and/or pharmacotherapy) if Identified as a Tobacco User.
  - b. If Patient Screened for Tobacco Use At Least Once Within the Last 24 Months AND Determined to be a Tobacco Non-user equals Yes, include in Data Completeness Met and Performance Met.
  - c. 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>1</sup> equals 20 patients in the Sample Calculation.
  - d. If Patient Screened for Tobacco Use At Least Once Within the Last 24 Months equals No, proceed to Documentation of Medical Reason(s) for not Screening for Tobacco Use.

8. Check Documentation of Medical Reason(s) for not Screening for Tobacco Use:
  - a. If Documentation of Medical Reason(s) for not Screening for Tobacco Use equals Yes, include in Data Completeness Met and Denominator Exception.
  - b. Data Completeness Met and Denominator Exception letter is represented in the Data Completeness and Performance Rate in the Sample Calculation listed at the end of this document. Letter b<sup>1</sup> equals 10 patients in the Sample Calculation.
  - c. If Documentation of Medical Reason(s) for not Screening for Tobacco Use equals No, proceed to Tobacco Screening Not Performed OR Tobacco Cessation Intervention Not Provided, Reason Not Specified.
9. Check Patient Received Tobacco Cessation Intervention (counseling and/or pharmacotherapy) if Identified as a Tobacco User:
  - a. If Patient Received Tobacco Cessation Intervention (counseling and/or pharmacotherapy) if Identified as a Tobacco User 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>2</sup> equals 20 patients in the Sample Calculation.
  - c. If Patient Received Tobacco Cessation Intervention (counseling and/or pharmacotherapy) if Identified as a Tobacco User equals No, proceed to Documentation of Medical Reason(s) for not providing Tobacco Cessation Intervention.
10. Check Documentation of Medical Reason(s) for not providing Tobacco Cessation Intervention:
  - a. If Documentation of Medical Reason(s) for not providing Tobacco Cessation Intervention equals Yes, include in Data Completeness Met and Denominator Exception.
  - b. Data Completeness Met and Denominator Exception letter is represented in the Data Completeness and Performance Rate in the Sample Calculation listed at the end of this document. Letter b<sup>2</sup> equals 10 patients in the Sample Calculation.
  - c. If Documentation of Medical Reason(s) for not providing Tobacco Cessation Intervention equals No, proceed to Tobacco Screening Not Performed OR Tobacco Cessation Intervention Not Provided, Reason Not Otherwise Specified.
11. Check Tobacco Screening Not Performed OR Tobacco Cessation Intervention Not Provided, Reason Not Otherwise Specified:
  - a. If Tobacco Screening Not Performed OR Tobacco Cessation Intervention Not Provided, Reason Not Otherwise Specified equals Yes, include in the 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 c equals 20 patients in the Sample Calculation.
  - c. If Tobacco Screening Not Performed OR Tobacco Cessation Intervention Not Provided, Reason Not Otherwise Specified equals No, proceed to Data Completeness Not Met.
12. Check Data Completeness Not Met:

- a. If Data Completeness Not Met equals No, Quality-Data Code not submitted. 20 patients have been subtracted from the Data Completeness Numerator in the Sample Calculation.

**SAMPLE CALCULATIONS SUBMISSION CRITERIA THREE:**

**Data Completeness=**

$$\frac{\text{Performance Met (a}^1+\text{a}^2=40 \text{ patients)} + \text{Denominator Exception (b}^1+\text{b}^2=20 \text{ patients)} + \text{Performance Not Met (c=20 patients)}}{\text{Eligible Population / Denominator (d=100 patients)}} = \frac{80 \text{ patients}}{100 \text{ patients}} = 80.00\%$$

**Performance Rate=**

$$\frac{\text{Performance Met (a}^1+\text{a}^2=40 \text{ patients)}}{\text{Data Completeness Numerator (80 patients) - Denominator Exception (b}^1+\text{b}^2=20 \text{ patients)}} = \frac{40 \text{ patients}}{60 \text{ patients}} = 66.67\%$$