# IT-1.27: Pain Assessment and Follow-up

| **Measure Title** | **IT-1.27 Pain Assessment and Follow-Up** |
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| **Description** | Percentage of patients aged 18 years and older with documentation of a pain assessment through discussion with the patient including the use of a standardized tool(s) on each visit AND documentation of a follow-up plan when pain is present. |
| **NQF Number** | 0420 |
| **Measure Steward** | Centers for Medicare and Medicaid Services |
| **Link to measure citation** | <http://www.qualityforum.org/QPS/0420> |
| **Measure type** | Non Stand-Alone (NSA) |
| **Performance and Achievement Type** | Pay for Performance (P4P) – Improvement Over Self (IOS)   |  |  |  | | --- | --- | --- | |  | DY4 | DY5 | | Achievement Level Calculation | Baseline + 5% \*(performance gap)  =  Baseline + 5% \*(100% – Baseline rate) | Baseline + 10% \*(performance gap)  =  Baseline + 10% \*(100% – Baseline rate) | |
| **DSRIP-specific modifications to Measure Steward’s specification** | None |
| **Denominator Description** | Patients 18 years of age and older on the date of the encounter. |
| **Denominator Inclusions** | The Measure Steward does not identify specific denominator inclusions beyond what is described in the denominator description. |
| **Denominator Exclusions** | * Severe mental and/or physical incapacity where the person is unable to express himself/herself in a manner understood by others. For example, cases where pain cannot be accurately assessed through use of nationally recognized standardized pain assessment tools. * Patient is in an urgent or emergent situation where time is of the essence and to delay treatment would jeopardize the patient’s health status. |
| **Denominator Size** | Providers must report a minimum of 30 cases per measure during a 12-month measurement period (15 cases for a 6-month measurement period)   * For a measurement period (either 6 or 12 months) where the denominator size is less than or equal to 75, providers must report on all cases. No sampling is allowed. * For a measurement period (either 6 or 12 months) where the denominator size is less than or equal to 380 but greater than 75, providers must report on all cases (preferred, particularly for providers using an electronic health record) or a random sample of not less than 76 cases. * For a measurement period (either 6 or 12-months) where the denominator size is greater than 380, providers must report on all cases (preferred, particularly for providers using an electronic health record) or a random sample of cases that is not less than 20% of all cases; however, providers may cap the total sample size at 300 cases. |
| **Numerator Description** | Patient’s pain assessment is documented through discussion with the patient including the use of a standardized tool(s) AND a follow-up plan is documented when pain is present. |
| **Numerator Inclusions** | The standardized pain assessment tool to be selected by the provider |
| **Numerator Exclusions** | The Measure Steward does not identify specific numerator exclusions beyond what is described in the numerator description. |
| **Setting** | Multiple |
| **Data Source** | Administrative/Clinical data sources |
| **Allowable Denominator Sub-sets** | All denominator subsets are permissible for this outcome |