

FACT SHEET
Summary of Pneumonia (PN) Measure Changes for 4/1/11+ Discharges

PN 3a, PN 3b and PN 5 Measure Information Forms (MIFs) - Changed the reference in the rationale from Community Acquired Pneumonia to pneumonia to reflect that the studies cited in these rationales included hospital acquired/ nosocomial pneumonia cases and community acquired pneumonia cases.

PN-2, PN-3b, PN-4, PN-5, PN-5c and PN-7 Measure Information Forms (MIFs) - Excluded populations changed to reflect the allowable value exclusions for the new data element *Discharge Disposition*.

PN-6, PN-6a, PN-6 -

- Added Tigecycline to the Non-ICU regimen. Two recent studies have demonstrated Level 1 evidence for administration of Tigecycline. Even though there are few patients that have allergies to both beta-lactams and quinolones, this offers another option for the non ICU patient who cannot take a quinolone regimen.
- Clarification for abstractor that ICU patients require two antibiotics (a quinolone and a beta-lactam)
- Regimen numbers from the PN 6 algorithm added after each recommendation in the table for clarification.
- Regimen variables in the logic were removed from the PN 6 algorithm for the Non-ICU patient. The changes from the clinical impacts to the algorithms now no longer warrant the need for using internal variables in the logic. This eliminates the need for unnecessary code.

Imm 1 and Imm 2 - The Prevention Measures for Immunization have been updated to reflect changes in the Advisory Committee on Immunization Practices/Centers for Disease Control (ACIP/CDC) vaccination recommendations. These measures still remain “Informational Only.”

Appendix A - No changes

Appendix C - Prevpac added to Antimicrobial Table; Tigecycline added to Tetracycline Table

Summary of Pneumonia Measure Changes

The information below consists of new changes in abstraction and changes provided for clarification only.

Data Element:	Adult Smoking History
Change:	Clarification
	Add: Smoking/Tobacco Use assessment forms to ONLY ACCEPTABLE SOURCES

Data Element: Another Source of Infection**Change: Clarification**

- Documentation from lab results does not have to be physician documentation.

Data Element: Antibiotic Administration Date**Change: Clarification**

- Removed an example in the Notes for Abstraction. Note for Abstraction the way it was lead to confusion and the example was not correct.

Data Element: Comfort Measures Only**Change: New**

- Suggested Data Source list changed to “Only Acceptable Sources” list:
 - Discharge summary
 - DNR/MOLST/POLST forms
 - Physician orders
 - Progress notes
- Abstraction guideline added which allows the abstractor to now disregard an inclusion term not clearly selected on an order form signed by the physician/APN/PA. Examples:
 - “DNR-Comfort Care” order form - The only option checked is “DNR/Allow Natural Death” (option “Comfort Care” remains unchecked)
 - “Home Health/Hospice” order form – “Hospice” has not been circled in the title or selected on the form
 - Inclusion term listed in pre-printed instruction for completing the form
- Inclusion added: DNR-CC. Documented clarification that CC is acronym for comfort care is no longer needed.

Clarification

- Exclusion list wording was clarified to reinforce that the list is all-inclusive:
 - DNR-CCA
 - DNR-Comfort Care Arrest
 - DNRCC-A
 - DNRCC-Arrest
 - DNRCCADisregard these terms. Note that other arrest terminology would still count – e.g., “Comfort Care Protocol will be implemented in the event of a cardiac arrest or a respiratory arrest.”
- Abstraction guidelines changed to clarify that if there is documentation of an Inclusion term clearly described as negative in one source and an Inclusion term NOT described as negative in another source, that second source would still count. Multiple examples of “negative” context Inclusion terms added.
- Additional changes in structure, order, and wording of some abstraction guidelines were made to help clarify abstraction.

Data Element: Compromised**Change: Clarification**

- Added therapies back into the inclusion list: radiation and chemotherapy, systemic immunosuppressant therapy and systemic corticosteroid/prednisone therapy.

Data Element: Diagnostic Uncertainty**Change: Clarification**

- Due to practitioner and physician feedback, documentation of a delay in antibiotic administration will now be accepted.

Data Element: Healthcare Associated PN**Change: Clarification**

- Changed the words in Note for Abstraction from 'length of stay' to 'admission or hospitalization'. Documentation of length of stay is not required. If there is documentation of a hospitalization or admission, assume it was an acute care hospitalization unless there is documentation that states otherwise.

Data Element: Pneumococcal Vaccination Status**Change: Clarification**

- If there is documentation the patient received the shingles vaccine (Zostavax) within the last 4 weeks the abstractor can select value 4.

Data Element: Pneumonia Diagnosis: ED/Direct Admit**Change: Clarification**

- ED face sheets can only be used to abstract a diagnosis if signed by a physician/APN/PA.
- Will accept pneumonia admission diagnosis codes if they are documented by a physician/APN/PA on one of the ONLY ACCEPTABLE SOURCES.

For a complete list of changes please see the "Release Notes," located in the Specifications Manual for National Hospital Quality Measures for discharges 4/1/2011. The manual can be found at:

<http://www.qualitynet.org/dcs/ContentServer?cid=1192804535739&pagename=QnetPublic%2FPage%2FQnetTier3&c=Page>

This material was prepared by Oklahoma Foundation for Medical Quality, the Medicare Quality Improvement Organization for Oklahoma, under contract with the Centers for Medicare & Medicaid Services (CMS), an agency of the U.S. Department of Health and Human Services. The contents presented do not necessarily reflect CMS policy. 4-1179-OK-0211