

**\*Measure #56: Vital Signs for Community-Acquired Bacterial Pneumonia**

**DESCRIPTION:**

Percentage of patients aged 18 years and older with a diagnosis of community-acquired bacterial pneumonia with vital signs documented and reviewed

**INSTRUCTIONS:**

This measure is to be reported once for each occurrence of community-acquired bacterial pneumonia during the reporting period. Each unique occurrence is defined as a 45-day period from onset of community-acquired bacterial pneumonia. Claims data will be analyzed to determine unique occurrences. All patients 18 years and older with a diagnosis of community acquired bacterial pneumonia should have documentation in the medical record of having vital signs recorded and reviewed. It is anticipated that clinicians who provide care in the emergency department or office setting will submit this measure. Clinicians utilizing the critical care code must indicate the emergency department place-of-service code in order to be counted in the measure's denominator.

**This measure is reported using CPT Category II codes:**

ICD-9 diagnosis codes, CPT E/M service codes, and patient demographics (age, gender, etc.) are used to identify patients who are included in the measure's denominator. CPT Category II codes are used to report the numerator of the measure.

When reporting the measure, submit the listed ICD-9 diagnosis codes, CPT E/M service codes, and the appropriate CPT Category II code **OR** the CPT Category II code **with** the modifier. The reporting modifier allowed for this measure is: 8P- reasons not otherwise specified. There are no allowable performance exclusions for this measure.

**NUMERATOR:**

Patients with vital signs (temperature, pulse, respiratory rate, and blood pressure) documented and reviewed

**Definition:** Medical record may include one of the following: clinician documentation that vital signs were reviewed, dictation by the clinician including vital signs, clinician initials in the chart that vital signs were reviewed, or other indication that vital signs had been acknowledged by the clinician

**Numerator Coding:**

**Vital Signs Documented and Reviewed**

**CPT II 2010F:** Vital signs (temperature, pulse, respiratory rate, and blood pressure) documented and reviewed

**OR**

**Vital Signs not Documented and Reviewed, Reason not Specified**

Append a reporting modifier (8P) to CPT Category II code 2010F to report circumstances when the action described in the numerator is not performed and the reason is not otherwise specified.

- 8P: Vital signs (temperature, pulse, respiratory rate, and blood pressure) not documented and reviewed, reason not otherwise specified

**DENOMINATOR:**

All patients aged 18 years and older with a diagnosis of community-acquired bacterial pneumonia

**Denominator Coding:**

An ICD-9 diagnosis code for community-acquired bacterial pneumonia and a CPT E/M service code are required to identify patients for denominator inclusion.

**ICD-9 diagnosis codes:** 481, 482.0, 482.1, 482.2, 482.30, 482.31, 482.32, 482.39, 482.40, 482.41, 482.49, 482.81, 482.82, 482.83, 482.84, 482.89, 482.9, 483.0, 483.1, 483.8, 485, 486, 487.0

**AND**

**CPT E/M service codes:** 99201, 99202, 99203, 99204, 99205, 99212, 99213, 99214, 99215, 99241, 99242, 99243, 99244, 99245, 99281, 99282, 99283, 99284, 99285, 99291\*

*\* Clinicians utilizing the critical care code must indicate the emergency department place-of-service (23) on the Part B claim form in order to report this measure.*

**RATIONALE:**

Each of the vital signs should be recorded in the emergency department. While vital signs may be routinely recorded, there likely is a gap in care on acting on those values that warrant further evaluation. Moreover, it is important for physicians to review the vital signs to ensure continuous quality improvement and consistent patient care.

**CLINICAL RECOMMENDATION STATEMENTS:**

It is necessary to assess the severity of illness. This includes the radiographic findings (multilobar pneumonia or pleural effusion) and physical findings (respiratory rate, systolic and diastolic blood pressure, signs of dehydrations and mental status). (ATS) (Level II Evidence)