

▲Measure #92: Acute Otitis Externa (AOE): Pain Assessment

DESCRIPTION:

Percentage of patient visits for those patients aged 2 years and older with a diagnosis of AOE with assessment for auricular or periauricular pain

INSTRUCTIONS:

This measure is to be reported at each visit for patients with AOE during the reporting period. This measure may be reported by clinicians who perform the quality actions described in the measure based on the services provided and the measure-specific denominator coding.

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 appropriate 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 modifiers allowed for this measure are: 1P- medical reasons, 8P- reasons not otherwise specified.

NUMERATOR:

Patient visits with assessment for auricular or periauricular pain

Numerator Coding:

Auricular or Periauricular Pain Assessed

CPT II 1116F: Auricular or periauricular pain assessed

OR

Auricular or Periauricular Pain not Assessed for Medical Reasons

Append a modifier (1P) to CPT Category II code 1116F to report documented circumstances that appropriately exclude patients from the denominator.

- 1P: Documentation of medical reason(s) for not assessing auricular or periauricular pain

OR

Auricular or Periauricular Pain not Assessed, Reason not Specified

Append a reporting modifier (8P) to CPT Category II code 1116F to report circumstances when the action described in the numerator is not performed and the reason is not otherwise specified.

- 8P: Auricular or periauricular pain not assessed, reason not otherwise specified

DENOMINATOR:

All patient visits for those patients aged 2 years and older with a diagnosis of AOE

Denominator Coding:

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

ICD-9 diagnosis codes: 380.10, 380.11, 380.12, 380.13, 380.22

AND

CPT E/M service codes: 99201, 99202, 99203, 99204, 99205, 99212, 99213, 99214, 99215, 99241, 99242, 99243, 99244, 99245

RATIONALE:

Pain relief is a major goal in the management of AOE. Frequent use of analgesics is often necessary to permit patients to achieve comfort, rest, and to resume normal activities. Ongoing assessment of the severity of discomfort is essential for proper management.

CLINICAL RECOMMENDATION STATEMENTS:

The management of diffuse AOE should include an assessment of pain. The clinician should recommend analgesic treatment based on the severity of pain. (Strong recommendation based on well-designed randomized trials with a preponderance of benefit over harm. [Aggregate evidence quality – Grade B]) (AAO-HNSF)