Universal Influenza Vaccine Screening and Counseling

PQRI Data Collection Sheet

		/ /	🗆 Male 🛛 Female
nt's Name Practice Medical Record Number (MRN)		Birth Date (mm/dd/yyyy)	Gender
		Date of Service	
		Billing Information	
Yes	No	Code Required on Claim Form	
		Verify date of birth on claim form.	
		Refer to coding specifications document for list of applicable codes.	
ort			
Step 2 Does patient meet or have an acceptable reason for not meeting the measure?			
Yes	No	Code to be Reported on Line 2 ⁴ if <i>Yes</i> (or Service Line 24 of El	
		G8423	
		G8426	
		If No is checked for all of the a G8424 (Influenza vaccine status was n G8425 (Influenza vaccine status scree and counseling was not provide	not screened.) OR ned, patient not current
	Yes Free States Yes Free States Yes Free States Free S	Yes No I I I I I I I I I I I I I I I I I I I I I I I I I I I I I I	Date of Service Billing Information Yes No Code Required on Claim Form Output Output Refer to coding specifications of applicable codes. ort Able reason Yes No Code to be Reported on Line 24 of El Output G8423 Image: Service Image: Service Line 24 of El Image: Service Service Service Service Line 24 of El Image: Service Service Line 24 of El

¹If influenza vaccination status is not current. Counseling includes providing information or advice related to the applicable measure such as including ways to stay healthy, implementing lifestyle modifications, and/or improving health status. In this measure, the advice constitutes recommendation to receive vaccine unless contraindicated.