

## Consideration for Antiviral Therapy in HCV Patients

### PQRI Data Collection Sheet

|                                    |                                      |                             |  |
|------------------------------------|--------------------------------------|-----------------------------|--|
| Patient's Name                     | Practice Medical Record Number (MRN) | Birth Date (mm/dd/yyyy) / / | Gender <input type="checkbox"/> Male <input type="checkbox"/> Female |
| National Provider Identifier (NPI) |                                      | Date of Service             |  |

#### Clinical Information

#### Billing Information

| Step 1 Is patient eligible for this measure?  |                          |                          |  |
|---|--------------------------|--------------------------|--|
|   | Yes                      | No                       | Code Required on Claim Form  |
| Patient is aged 18 years and older.   | <input type="checkbox"/> | <input type="checkbox"/> | Verify date of birth on claim form.  |
| Patient has a diagnosis of hepatitis C.   | <input type="checkbox"/> | <input type="checkbox"/> | Refer to coding specifications document for list of applicable codes.  |
| There is a CPT E/M Service Code for this visit.   | <input type="checkbox"/> | <input type="checkbox"/> |  |
| If <b>No</b> is checked for any of the above, STOP. Do not report a CPT category II code. |                          |                          |  |
| Step 2 Does patient meet the measure?   |                          |                          |  |
| Combination Peginterferon and Ribavirin Therapy   | Yes                      | No                       | Code to be Reported on Line 24D of Paper Claim Form, if Yes (or Service Line 24 of Electronic Claim Form)  |
| Considered  | <input type="checkbox"/> | <input type="checkbox"/> | 4152F  |
| Prescribed  | <input type="checkbox"/> | <input type="checkbox"/> | 4153F  |
|   |                          |                          | If <b>No</b> is checked for <b>all</b> of the above, report 4152F-8P (Combination peginterferon and ribavirin therapy was not considered or prescribed, reason not otherwise specified.) |