

# Preventive Care and Screening

## Tobacco Use Screening and Cessation Intervention

### Physician Quality Reporting System 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
<b>Step 1 Is patient eligible for this measure?</b>			
	<b>Yes</b>	<b>No</b>	<b>Code Required on Claim Form</b>
Patient is aged 18 years and older on date of encounter.	<input type="checkbox"/>	<input type="checkbox"/>	Verify date of birth on claim form.
There is a CPT Code for this visit.	<input type="checkbox"/>	<input type="checkbox"/>	Refer to coding specifications document for list of applicable codes. Codes determining a patient's eligibility must be reported on the same claim as the quality code(s) identified below.
If <b>No</b> is checked for any of the above, STOP. Do not report a CPT category II code.			
<b>Step 2 Does patient also have the other requirements for this measure?</b>			
	<b>Yes</b>	<b>No</b>	<b>Code to be Reported on Line 24D of Paper Claim Form (or Service Line 24 of Electronic Claim Form)</b>
Does patient use any type of tobacco (smoke, smokeless, chew, snuff)?	<input type="checkbox"/>	<input type="checkbox"/>	If <b>No</b> , report only code 1036F and STOP. If <b>Yes</b> , proceed to Step 3.
<b>Step 3 Does patient meet the measure?</b>			
<b>Tobacco Use<sup>1</sup> Screening and Cessation Intervention<sup>2</sup></b>	<b>Yes</b>	<b>No</b>	<b>Code to be Reported on Line 24D of Paper Claim Form, if Yes (or Service Line 24 of Electronic Claim Form)</b>
Performed	<input type="checkbox"/>	<input type="checkbox"/>	4004F
Not Performed for the following reason: • Medical (eg, limited life expectancy, other medical reasons )	<input type="checkbox"/>	<input type="checkbox"/>	4004F-1P
			If <b>No</b> is checked for all of the above, report 4004F-8P (Tobacco screening or cessation not performed, reason not otherwise specified.)

<sup>1</sup>For the purposes of this measure "tobacco use" includes any type of tobacco

<sup>2</sup>For the purpose of this measure "cessation counseling intervention" includes counseling or pharmacotherapy