

Measure specifications may be modified based on recommendations issued by the National Quality Forum

Quality of Care Measure

PNE-6: Adult Smoking Cessation Advice/Counseling

Description: Pneumonia patients with a history of smoking cigarettes who are given smoking cessation advice or counseling during hospital stay. For the purposes of this measure, a smoker is defined as someone who has smoked cigarettes anytime during the year prior to hospital arrival.

Type of Measure: CMS Core
JCAHO Core (CAP-4a)

Rationale: Tobacco use is the single largest cause of disease in the United States today. Smoking accounts for one out of every five deaths in the United States and is the most important modifiable cause of premature death. Smoking cessation treatments ranging from brief clinician advice to specialist-delivered intensive programs, including pharmacotherapy, are not only clinically effective, but are also extremely cost effective relative to other commonly used disease prevention interventions and medical treatments. Hospitalization can be an ideal opportunity for a patient to stop smoking, and smoking cessation may promote the patient's medical recovery. Patients who receive even brief smoking-cessation advice from their physicians are more likely to quit than those who receive no counseling whatsoever.

Denominator Statement: Pneumonia patients with a history of smoking cigarettes anytime during the year prior to hospital arrival.

Included Populations: All discharges regardless of payer:

- A principal diagnosis of pneumonia (refer to the Appendix for ICD-9-CM codes) **OR**
- A principal diagnosis of septicemia, or respiratory failure (acute or chronic) **AND** a secondary diagnosis of pneumonia (refer to the Appendix for ICD-9-CM codes)
- A history of smoking cigarettes anytime during the year prior to hospital arrival.

Excluded Populations:

- Patients who are less than 18 years of age
- Patients who have no working diagnosis of pneumonia at the time of admission
- Patients who received comfort measures only
- Patients who expired in the hospital
- Patients who left against medical advice (AMA)
- Patients who are discharged to hospice
- Patients transferred to another short term general hospital for inpatient care

Numerator Statement: Number of pneumonia patients (cigarette smokers) who received smoking cessation advice or counseling during the hospital stay.

Selected References:

- Fiore MC, Bailey WC, Cohen SJ, et al. Treating Tobacco Use and Dependence. Clinical Practice Guideline. Rockville, MD: U.S. Department of Health and Human Services. Public Health Service. June 2000.
- Kikano GE, et al. The value of brief, targeted smoking cessation advice. *Family Practice Management*. pp.50:2000.

Appendix:

- Principal diagnosis ICD-9-CM code of 480-483.8, 485-486, **OR** 487.0 (pneumonia); **OR**
- Principal diagnosis ICD-9-CM code of 038.XX (septicemia) **OR** 518.81(respiratory failure) **AND** a secondary diagnosis code of pneumonia

Note: Principal diagnosis code 518.84 (acute and chronic respiratory failure) can be added to 518.81 for collection of data by hospitals. This code occurs infrequently (0.2% of Medicare pneumonia records as a secondary diagnosis, compared with 3.0% for the 518.81 code) and can be included in the population for individual hospitals without substantially affecting rate comparability.