

PREVENTIVE CARE QUALITY MEASURES GROUP
SuperBill Addendum
(Patients Age 50 and Older)

Patient Name: _____		Patient MRN: _____		Date of Service: _____		Physician: _____	
CPT Code:	<input type="checkbox"/> 99201	<input type="checkbox"/> 99203	<input type="checkbox"/> 99205	<input type="checkbox"/> 99212	<input type="checkbox"/> 99214		
	<input type="checkbox"/> 99202	<input type="checkbox"/> 99204		<input type="checkbox"/> 99213	<input type="checkbox"/> 99215		
Measure Number and Title	Action Performed		Action Not Performed / Reason Documented		Action Not Performed / Reason Not Documented		
110: Influenza Immunization for Patients ≥ 50 Years Old (September - February)	<input type="checkbox"/> G8482 Immunization ordered or given.		<input type="checkbox"/> G8483 Immunization not given for documented reason. (e.g., wrong season)		<input type="checkbox"/> G8484 Immunization not ordered or given. No reason noted.		
111: Pneumonia Vaccination for Patients 65 Years and Older	<input type="checkbox"/> 4040F Vaccine given or previously received.		<input type="checkbox"/> 4040F-1P Vaccine not given for medical reason.		<input type="checkbox"/> 4040F-8P Vaccine not given. No reason noted.		
113: Colorectal Cancer Screening (Patients 50 - 75 Years Old)	<input type="checkbox"/> 3017F Screening done and results reviewed.		<input type="checkbox"/> 3017F-1P Not done for medical reason.		<input type="checkbox"/> 3017F-8P Not done. No reason noted.		
114: Inquiry Regarding Tobacco Use (Patients 50 Years & Older)	<input type="checkbox"/> 1000F & 1034F Tobacco use assessed. Current Smoker.				<input type="checkbox"/> 1000F-8P Tobacco use not assessed. No reason noted.		
	<input type="checkbox"/> 1000F & 1035F Tobacco use assessed. Current Smokeless Tobacco User.						
	<input type="checkbox"/> 1000F & 1036F Tobacco use assessed. Current Non-smoker.						

<p>115: Advising Smokers to Quit (Patients 50 Years & Older)</p>	<p><input type="checkbox"/> G8455 & 4000F Smoker. Cessation Intervention – Counseling.</p> <p><input type="checkbox"/> G8455 & 4001F Smoker. Cessation Intervention – Medical Therapy.</p> <p><input type="checkbox"/> G8456 & 4000F Smokeless Tobacco User. Cessation Intervention – Counseling.</p> <p><input type="checkbox"/> G8456 & 4001F Smokeless Tobacco User. Cessation Intervention – Medical Therapy</p>	<p><input type="checkbox"/> G8457 Tobacco Non-user.</p>	<p><input type="checkbox"/> 4000F-8P Not counseled or tobacco use not assessed. No reason noted.</p>
<p>128: Universal Weight Screening and Follow-Up (Patients 50 Years & Older)</p> <p>Parameters: 65 & Older BMI ≥ 30 or < 22 18 – 64 BMI ≥ 25 or < 18.5</p>	<p><input type="checkbox"/> G8420 BMI < 30 and ≥ 22</p> <p><input type="checkbox"/> G8417 BMI ≥ 30 with follow-up plan documented.</p> <p><input type="checkbox"/> G8418 BMI < 22 with follow-up plan documented.</p>	<p><input type="checkbox"/> G8422 Patient not eligible for BMI calculation</p>	<p><input type="checkbox"/> G8421 BMI not calculated. No reason noted.</p> <p><input type="checkbox"/> G8419 BMI ≥ 30 or < 22. No follow-up plan documented.</p>
<p>173: Preventive Care and Screening: Unhealthy Alcohol Use – Screening (Patients 50 Years & Older)</p>	<p><input type="checkbox"/> 3016F Patient screened for unhealthy alcohol use.</p>	<p><input type="checkbox"/> 3016F-1P Patient not screened for unhealthy alcohol use for medical reason(s) (eg, limited life expectancy)</p>	<p><input type="checkbox"/> 3016F-8P Patient not screened for unhealthy alcohol use. No reason noted.</p>

The following Quality Measures should be answered for Female Patients only

Measure Number and Title	Action Performed	Action Not Performed / Reason Documented	Action Not Performed / Reason Not Documented
112: Screening Mammography (Patients 50 – 69 Years Old)	<input type="checkbox"/> 3014F Results documented and received	<input type="checkbox"/> 3014F-1P Not performed for medical reason. (e.g., mastectomy)	<input type="checkbox"/> 3014F-8P Not performed. No reason noted.
39: Screening or Therapy for Osteoporosis (Patients 65 Years and Older)	<input type="checkbox"/> G8399 DXA ordered, documented or patient on Rx treatment.	<input type="checkbox"/> G8401 DXA not ordered or patient not on meds for documented reason.	<input type="checkbox"/> G8400 DXA not ordered. No Rx treatment. No reason noted.
48: Assessment of Presence or Absence of Urinary Incontinence (Patients 65 Years and Older)	<input type="checkbox"/> 1090F Incontinence assessed within past 12 months.	<input type="checkbox"/> 1090F-1P Medical reason for not assessing incontinence.	<input type="checkbox"/> 1090F-8P Not assessed. No reason noted.