



## Complete Summary

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### TITLE

Tobacco cessation: percent of patients using tobacco who have been counseled three times in twelve months to cease tobacco use (mental health diagnosis cohort).

### SOURCE(S)

Office of Quality and Performance (10Q). FY2002 VHA performance measurement system. Technical Manual. Washington (DC): Veterans Health Administration (VHA); 2002 Mar 8. 137 p.

## Brief Abstract

### DESCRIPTION

This measure assesses the percentage of mental health patients who have been counseled three times in twelve months to cease tobacco use.

This measure is a component of a composite measure; it can also be used on its own.

### RATIONALE

Each year, about 400,000 Americans die because they smoke tobacco. Smoking accounts for one out of every five deaths in the United States (U.S.). It is the most important modifiable cause of premature death, responsible annually for an estimated 5 million years of potential life lost.

Practical interventions exist for controlling and preventing many chronic diseases. Implementing proven clinical smoking cessation interventions would cost an estimated \$2,587 for each year of life saved, the most cost-effective of all clinical preventive services.

### PRIMARY CLINICAL COMPONENT

Tobacco use; cessation counseling

### DENOMINATOR DESCRIPTION

The number of patients who use tobacco and who are seen at least once by a physician (MD or DO), physician assistant (PA), or nurse practitioner (NP) at a specified clinic, excluding those individuals who visited a tertiary clinic for a specialty consult

## NUMERATOR DESCRIPTION

The number of patients from the denominator who have been counseled three times in 12 months to cease tobacco use

### Evidence Supporting the Measure

#### PRIMARY MEASURE DOMAIN

Process

#### SECONDARY MEASURE DOMAIN

Not applicable

#### EVIDENCE SUPPORTING THE MEASURE

A clinical practice guideline or other peer-reviewed synthesis of the clinical evidence

#### NATIONAL GUIDELINE CLEARINGHOUSE LINK

- [Tobacco use cessation in the primary care setting.](#)

### Evidence Supporting Need for the Measure

#### NEED FOR THE MEASURE

Unspecified

### State of Use of the Measure

#### STATE OF USE

Current routine use

#### CURRENT USE

External oversight/Veterans Health Administration  
Internal quality improvement

### Application of Measure in its Current Use

#### CARE SETTING

Ambulatory Care  
Behavioral Health Care

## PROFESSIONALS RESPONSIBLE FOR HEALTH CARE

Advanced Practice Nurses  
Physician Assistants  
Physicians

## LOWEST LEVEL OF HEALTH CARE DELIVERY ADDRESSED

Single Health Care Delivery Organizations

## TARGET POPULATION AGE

Unspecified

## TARGET POPULATION GENDER

Either male or female

## STRATIFICATION BY VULNERABLE POPULATIONS

From the eligible universe, three groups will be selected, (a) random mental health diagnosis, (b) substance abuse diagnosis (excluding tobacco abuse), and (c) post traumatic stress disorder (PTSD) diagnosis. All groups will be aggregated to one group for reporting.

## Characteristics of the Primary Clinical Component

### INCIDENCE/PREVALENCE

Unspecified

### ASSOCIATION WITH VULNERABLE POPULATIONS

Unspecified

### BURDEN OF ILLNESS

Each year, about 400,000 Americans die because they smoke tobacco. Smoking accounts for one out of every five deaths in the United States. It is the most important modifiable cause of premature death, responsible annually for an estimated 5 million years of potential life lost.

### EVIDENCE FOR BURDEN OF ILLNESS

U.S. Preventive Services Task Force. Guide to clinical preventive services: report of the U.S. Preventive Services Task Force. 2nd ed. Baltimore (MD): Williams & Wilkins; 1996. Counseling to prevent tobacco use. p. 597-609. [123 references]

### UTILIZATION

Unspecified

## COSTS

Implementing proven clinical smoking cessation interventions would cost an estimated \$2,587 for each year of life saved, the most cost-effective of all clinical preventive services.

## EVIDENCE FOR COSTS

About CDC's chronic disease center. [internet]. Atlanta (GA): Centers for Disease Control and Prevention; 2002 Aug 30 [cited 2002 Sep 13]. [1 p].

## Institute of Medicine National Healthcare Quality Report Categories

### IOM CARE NEED

Staying Healthy

### IOM DOMAIN

Effectiveness

## Data Collection for the Measure

### CASE FINDING

Users of care only

### DESCRIPTION OF CASE FINDING

All patients not already reviewed during the 12-month period who visited any clinic, had a qualifying event with a Mental Health diagnosis (see the related "Denominator Inclusions and Exclusions" field in this summary), and whose medical record documents that the patient was using tobacco. If conflicting documentation exists (tobacco user and non-tobacco user both documented), the most recent documentation is used.

### DENOMINATOR (INDEX) EVENT

Encounter

### DENOMINATOR INCLUSIONS/EXCLUSIONS

Inclusions

- Have a qualifying event with a mental health diagnosis.\* A qualifying event could be either:

- Have one of a specified list of mental health diagnosis on at least two separate outpatient clinic visits, or
- One inpatient admission (with a primary or secondary mental health diagnosis) anywhere within the Veterans Health Administration (VHA) within the six months prior to the study interval review period

AND

- Seen at the facility in any clinic for any diagnosis during the review period

\* See the original measure documentation for a list of mental health diagnosis International Classification of Diseases, Ninth Revision (ICD-9) codes used in sample selection.

#### Exclusions

Patients who have:

- Documented diagnosis of cancer of the esophagus, liver, or pancreas
- Enrolled in a Veterans Healthcare Administration (VHA) or community-based Hospice program
- Life expectancy less than 6 months as documented in the Medical Record

#### NUMERATOR INCLUSIONS/EXCLUSIONS

##### Inclusions

The number of times seen in any clinic for tobacco cessation counseling in the past 12 months, with a maximum of 3 and a minimum of 2 (patient had to have at least 2 visits to be in the sample)

Counseling consists of:

- Documentation the patient is advised to stop smoking cigarettes, cigars, pipe, chewing tobacco or using snuff
- Referred to, or already attending a tobacco cessation class or program
- A maximum of one counseling is attributed to one visit
- Attendance at a smoking cessation program counts as one counseling for one visit

##### Exclusions

Unspecified

#### DENOMINATOR TIME WINDOW

Time window precedes index event

#### NUMERATOR TIME WINDOW

Fixed time period

#### DATA SOURCE

Administrative and medical records data

#### LEVEL OF DETERMINATION OF QUALITY

Individual Case

#### PRE-EXISTING INSTRUMENT USED

Unspecified

### Computation of the Measure

#### SCORING

Rate

#### INTERPRETATION OF SCORE

Better quality is associated with a higher score

#### ALLOWANCE FOR PATIENT FACTORS

Unspecified

#### STANDARD OF COMPARISON

Internal time comparison  
Prescriptive standard

#### PRESCRIPTIVE STANDARD

Fiscal year (FY) 2002 tobacco counseling X3 indicator component target:

- Fully successful: 68%
- Exceptional: 76%

#### EVIDENCE FOR PRESCRIPTIVE STANDARD

Office of Quality and Performance (10Q). FY2002 VHA performance measurement system. Technical Manual. Washington (DC): Veterans Health Administration (VHA); 2002 Mar 8. 137 p.

### Evaluation of Measure Properties

#### EXTENT OF MEASURE TESTING

Unspecified

## Identifying Information

### ORIGINAL TITLE

CPG-tobacco cessation: counseling X3 (mental health diagnosis cohort).

### MEASURE COLLECTION

[Fiscal Year \(FY\) 2002: Veterans Health Administration \(VHA\) Performance Measurement System](#)

### MEASURE SET NAME

[Clinical Practice Guidelines \(FY 2002\)](#)

### COMPOSITE MEASURE NAME

[Tobacco Use Cessation](#)

### DEVELOPER

Veterans Health Administration

### ADAPTATION

Measure was not adapted from another source.

### RELEASE DATE

2001 Nov

### REVISION DATE

2002 Mar

### MEASURE STATUS

Please note: This measure has been updated. The National Quality Measures Clearinghouse is working to update this summary.

### SOURCE(S)

Office of Quality and Performance (10Q). FY2002 VHA performance measurement system. Technical Manual. Washington (DC): Veterans Health Administration (VHA); 2002 Mar 8. 137 p.

### MEASURE AVAILABILITY

The individual measure, "CPG-Tobacco Cessation: Counseling X3 (Mental Health Diagnosis Cohort)," is published in "FY 2002 VHA Performance Measurement System: Technical Manual." This document is available in Word format from the [Veterans Health Administration Web site](#).

For more information, contact Department of Veterans Affairs, Office of Quality and Performance 10Q, ATTN: Stanlie Daniels, Bonny Collins, and or Lynnette Nilan. E-mail: [stanlie.daniels@hq.med.va.gov](mailto:stanlie.daniels@hq.med.va.gov) or [bonny.collins@hq.med.va.gov](mailto:bonny.collins@hq.med.va.gov) or [lynette.nilan@hq.med.va.gov](mailto:lynette.nilan@hq.med.va.gov)

#### NQMC STATUS

This NQMC summary was completed by ECRI on September 27, 2002. The information was verified by the Veterans Health Administration on October 29, 2002.

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