Value Based Reimbursement Toolkit

Smoking Measures – Abstraction

The purpose of this document is to provide smoking metric language for use in EHR review or by clinical data abstractors. This document is intended for use in conjunction with the **Smoking Data Dictionary** which has additional detail on our recommendations for variable categorizations and definitions.

Below you will find three sections (baseline, intervention, and outcome) with three levels of metrics (**gold standard**, **intermediate**, and **minimum**). We recommend using these to guide your own measure development related to understanding your population at baseline and any future improvement assessments.

> *Note:* achieving all **intermediate** and **gold standard** metrics may not be possible using EHR or abstraction data as it may be limited in the granularity of details on items like cigarettes/day or year and quit dates.

Gold standard: Smoking status at 30 days prior to hospitalization/procedure, cigarettes/day (former and current) and years (former and current)

    1. In the 30 days prior to the hospitalization at [location] on [date] did the patient smoke cigarettes? (y/n)

        1.1. If yes, how many cigarettes a day did were smoked on average? AND For how many years did they smoke?

        1.2. If no, have they ever smoked? (y/n)

            1.2.1. If yes, when did they stop [date]?

            1.2.2. If yes, how many cigarettes did they smoke a day on average? AND For how many years did they smoke?

Intermediate: Smoking status at 30 days prior, cigarettes/day or years

    1. In the 30 days prior to the hospitalization at [location] on [date] did the patient smoke cigarettes? (y/n)

        1.1. If yes, how many cigarettes a day did were smoked on average? OR For how many years did they smoke?

        1.2. If no, have they ever smoked? (y/n)

            1.2.1. If yes, when did they stop [date]?

            1.2.2. If yes, how many cigarettes did they smoke a day on average? OR For how many years did they smoke?

Minimum: Smoking status at 30 days prior

    1. In the 30 days prior to the hospitalization at [location] on [date] did the patient smoke cigarettes? (y/n)

        1.1. If no, have they ever smoked? (y/n)

Gold standard: y/n counseling, type of service offered (nicotine replacement therapy, referrals, etc.)
 1. During the hospitalization [or pre-op] did a doctor or other healthcare worker counsel the patient about quitting cigarettes? (y/n)
   1.1. If yes, did a doctor or healthcare worker offer nicotine replacement therapy, medication to help reduce cravings (e.g. Bupropion or Chantix), or a referral to a smoking cessation program? (y/n)
     1.1.1. If yes, what did they offer?
       1.1.1.1. Nicotine replacement therapy
       1.1.1.2. Medications to help reduce cravings
       1.1.1.3. Referral to a smoking cessation program

Intermediate: y/n counseling, y/n any service offered
 1. During your hospitalization [or pre-op] did a doctor or other healthcare worker counsel the patient about quitting cigarettes? (y/n)
   1.1. If yes, did a doctor or healthcare worker offer nicotine replacement therapy, medication to help reduce cravings (e.g. Bupropion or Chantix), or a referral to a smoking cessation program? (y/n)

Minimum: y/n counseling
 1. During the hospitalization [or pre-op] did a doctor or other healthcare worker counsel the patient about quitting cigarettes? (y/n)

Gold standard: Smoking status at 30 days, 90 days, and 1 year, cigarettes/day and years; **repeat evaluation below at 30, 90, and 1 year**
    1. Does the patient currently smoke cigarettes? (y/n)
        1.1. If yes, how many cigarettes a day do they smoke on average?
        AND For how many years have they smoked?
        1.2. If no, when did they stop [date]?

    1. *If assessing 30-day smoking at 90-day timepoint:* In the first 30 days after the hospitalization [or procedure] did the patient smoke cigarettes? (y/n)
        1.1. If yes, how many cigarettes a day did they smoke on average?
        AND For how many years have they smoked?
        1.2. If no, when did they stop [date]?

Intermediate: Smoking status at 30 and 90 days; **repeat evaluation below at 30 and 90 days**
    1. Does the patient currently smoke cigarettes? (y/n)
        1.1. If no, when did they stop [date]?

    1. *If assessing 30-day smoking at 90-day timepoint:* In the first 30 days after the hospitalization [or procedure] did the patient smoke cigarettes? (y/n)
        1.1. If no, when did they stop [date]?

Minimum: Smoking status at 30 days
    1. Does the patient currently smoke cigarettes? (y/n)
        1.1. If no, when did they stop [date]?