

**PPS-Exempt Cancer Hospital Quality Reporting (PCHQR) Program  
Oncology Care Measures (OCM) Paper-Based Form  
Online Data Entry Tool Content for FY 2017 and Subsequent Years**

CCN

Hospital Name

**Instructions:** For each measure, (1) Please enter the Total Initial Patient Population and indicate the total Medicare and Non-Medicare populations. (2) Provide the Sample size information. **Note:** When not sampled, provide only Total Initial Patient Population – Not Sampled.

**NQF 0382 Oncology-Radiation Dose Limits to Normal Tissues**

**NQF 0382 - Sample Frequency: Not Sampled**

Not Sampled Patient Population	Number
Total Initial Patient Population	
Medicare Initial Patient Population	
Non-Medicare Initial Patient Population	

**NQF 0382 - Sample Frequency: Quarterly**

**Initial Inpatient Population**

Initial Inpatient Population	Quarte r 1	Quarte r 2	Quarte r 3	Quarte r 4	Total
Medicare					
Non-Medicare					
Total					

**Sample Size**

Sample Size	Quarte r 1	Quarte r 2	Quarte r 3	Quarte r 4	Total
Medicare					
Non-Medicare					
Total					

**NQF 0383 Oncology: Plan of Care for Pain**

NQF 0383 - Sample Frequency: **Not Sampled**

Not Sampled Patient Population	Number
Total Initial Patient Population	
Medicare Initial Patient Population	
Non-Medicare Initial Patient Population	

NQF 0383 - Sample Frequency: **Quarterly**

**Initial Inpatient Population**

Initial Inpatient Population	Quarte r 1	Quarte r 2	Quarte r 3	Quarte r 4	Total
Medicare					
Non-Medicare					
Total					

**Sample Size**

Sample Size	Quarte r 1	Quarte r 2	Quarte r 3	Quarte r 4	Total
Medicare					
Non-Medicare					
Total					

**NQF 0384 Oncology: Pain Intensity Quantified**

NQF 0384 - Sample Frequency: **Not Sampled**

Not Sampled Patient Population	Number
Total Initial Patient Population	
Medicare Initial Patient Population	
Non-Medicare Initial Patient Population	

NQF 0384 - Sample Frequency: **Quarterly**

**Initial Inpatient Population**

Initial Inpatient Population	Quarte r 1	Quarte r 2	Quarte r 3	Quarte r 4	Total
Medicare					
Non-Medicare					
Total					

**Sample Size**

Sample Size	Quarte r 1	Quarte r 2	Quarte r 3	Quarte r 4	Total
Medicare					
Non-Medicare					
Total					

**NQF 0389 Prostate Cancer-Avoidance of Overuse Measure-Bone Scan for Staging Low-Risk Patients**

NQF 0389 - Sample Frequency: **Not Sampled**

Not Sampled Patient Population	Number
Total Initial Patient Population	
Medicare Initial Patient Population	
Non-Medicare Initial Patient Population	

NQF 0389 - Sample Frequency: **Quarterly**

**Initial Inpatient Population**

Initial Inpatient Population	Quarte r 1	Quarte r 2	Quarte r 3	Quarte r 4	Total
Medicare					
Non-Medicare					
Total					

**Sample Size**

Sample Size	Quarte r 1	Quarte r 2	Quarte r 3	Quarte r 4	Total
Medicare					
Non-Medicare					
Total					

**NQF 0390 Prostate Cancer-Adjuvant Hormonal Therapy for High-Risk Patients**

**NQF 0390 - Sample Frequency: Not Sampled**

Not Sampled Patient Population	Number
Total Initial Patient Population	
Medicare Initial Patient Population	
Non-Medicare Initial Patient Population	

**NQF 0390 - Sample Frequency: Quarterly**

**Initial Inpatient Population**

Initial Inpatient Population	Quarter 1	Quarter 2	Quarter 3	Quarter 4	Total
Medicare					
Non-Medicare					
Total					

**Sample Size**

Sample Size	Quarter 1	Quarter 2	Quarter 3	Quarter 4	Total
Medicare					
Non-Medicare					
Total					

Please refer to specifications on the PQRS web site:

<http://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/PQRS/index.html?redirect=/PQRS>.

Complete and submit the Oncology Care Measures Paper-Based Form via email to:

[PCHQualityReporting@hcqis.org](mailto:PCHQualityReporting@hcqis.org).

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