Quality ID #440: Basal Cell Carcinoma (BCC)/Squamous Cell Carcinoma (SCC): Biopsy Reporting Time – Pathologist to Clinician

- National Quality Strategy Domain: Communication and Care Coordination
- Meaningful Measure Area: Transfer of Health Information and Interoperability

#### 2019 COLLECTION TYPE:

MIPS CLINICAL QUALITY MEASURES (CQMS)

#### **MEASURE TYPE:**

Process - High Priority

# **DESCRIPTION:**

Percentage of biopsies with a diagnosis of cutaneous Basal Cell Carcinoma (BCC) and Squamous Cell Carcinoma (SCC) (including in situ disease) in which the pathologist communicates results to the clinician within 7 days from the time when the tissue specimen was received by the pathologist

#### **INSTRUCTIONS:**

This measure is to be submitted <u>each time</u> a biopsy is performed during the performance period. It is anticipated that Merit-based Incentive Payment System (MIPS) eligible clinicians providing the pathology services for procedures will submit this measure.

**NOTE:** To be eligible for this measure, the denominator must be met during the measurement period of 01/01/2019 to 12/24/2019. This is to provide sufficient time for the pathology results to be received by the biopsying clinician and for the performance of the numerator to be met within the performance period.

# Measure Submission Type:

Measure data may be submitted by individual MIPS eligible clinicians, groups, or third party intermediaries. The listed denominator criteria are used to identify the intended patient population. The numerator options included in this specification are used to submit the quality actions as allowed by the measure. The quality-data codes listed do not need to be submitted by MIPS eligible clinicians, groups, or third party intermediaries that utilize this modality for submissions; however, these codes may be submitted for those third party intermediaries that utilize Medicare Part B claims data. For more information regarding Application Programming Interface (API), please refer to the Quality Payment Program (QPP) website.

# **DENOMINATOR:**

All pathology reports generated by the Pathologist/Dermatopathologist consistent with cutaneous basal cell carcinoma or squamous cell carcinoma (to include in situ disease)

#### **Denominator Criteria (Eligible Cases):**

Diagnosis for cutaneous basal carcinoma or squamous cell carcinoma (ICD-10-CM): C44.01, C44.02, C44.111, C44.1121, C44.1122, C44.1191, C44.1192, C44.121, C44.1221, C44.1222, C44.1291, C44.1292, C44.211, C44.212, C44.219, C44.221, C44.222, C44.229, C44.310, C44.311, C44.319, C44.319, C44.320, C44.321, C44.329, C44.41, C44.42, C44.510, C44.511, C44.519, C44.520, C44.521, C44.529, C44.611, C44.612, C44.619, C44.621, C44.622, C44.629, C44.711, C44.712, C44.719, C44.721, C44.722, C44.729, C44.81, C44.82, C44.91, C44.92, D04.0, D04.10, D04.111, D04.112, D04.121, D04.122, D04.20, D04.21, D04.22, D04.30, D04.39, D04.4, D04.5, D04.60, D04.61, D04.62, D04.70, D04.71, D04.72, D04.8, D04.9

Patient procedure during the performance period (CPT): 88304, 88305

AND NOT

#### **DENOMINATOR EXCLUSION:**

Pathologists/Dermatopathologists providing a second opinion on a biopsy: G9784

# <u>OR</u>

Pathologists/Dermatopathologists is the same clinician who performed the biopsy: G9939

#### **NUMERATOR:**

Number of final pathology reports diagnosing cutaneous basal cell carcinoma or squamous cell carcinoma (to include in situ disease) sent from the Pathologist/Dermatopathologist to the biopsying clinician for review within 7 days from the time when the tissue specimen was received by the pathologist

#### **Numerator Instructions:**

Requirements for calculating the numerator include the following documentation in the pathologist/dermopathologist's tracking system:

- Date tissue specimen received
- Date pathology report was sent to the biopsying clinician

### **Numerator Options:**

Performance Met: Pathology report diagnosing cutaneous basal cell

carcinoma or squamous cell carcinoma (to include in

situ disease) sent from the Pathologist/

Dermatopathologist to the biopsying clinician for review within 7 days from the time when the tissue specimen was received by the pathologist (G9785)

<u>OR</u>

Performance Not Met: Pathology report diagnosing cutaneous basal cell

carcinoma or squamous cell carcinoma (to include in situ disease) was not sent from the Pathologist/
Dermatopathologist to the biopsying clinician for review within 7 days from the time when the tissue specimen was received by the pathologist (G9786)

#### **RATIONALE:**

Effective communication through the biopsy report between pathologist and referring physician is essential; as delay may directly affect patient care. Furthermore, lack of timely delivery of results can increase the cost of medical care, error and the anxiety the patient experiences in waiting for results. This measure seeks to ensure timely communication and effective treatment for the patient.

#### **CLINICAL RECOMMENDATION STATEMENTS:**

"[Pathology] reports should be issued in a timely manner. Failure to report results promptly may delay patient care (thus uselessly adding to the cost of medical care), [and] lead to error and confusion..." (Holland Frei Cancer Medicine Vol. 8, 2010)

#### **COPYRIGHT:**

This Measure is not a clinical guideline, does not establish a standard of medical care, and has not been tested for all potential applications.

This Measure, while copyrighted, can be reproduced and distributed, without modification, for noncommercial purposes, eg, use by health care providers in connection with their practices. Commercial use is defined as the sale, license, or distribution of the Measure for commercial gain, or incorporation of the Measure into a product or service that is sold, licensed or distributed for commercial gain.

Commercial use of this measure requires a license agreement between the user and the American Academy of Dermatology (AAD). Neither the AAD nor its members shall be responsible for any use of the Measure.

AAD encourages use of this Measure by other health care professionals, where appropriate.

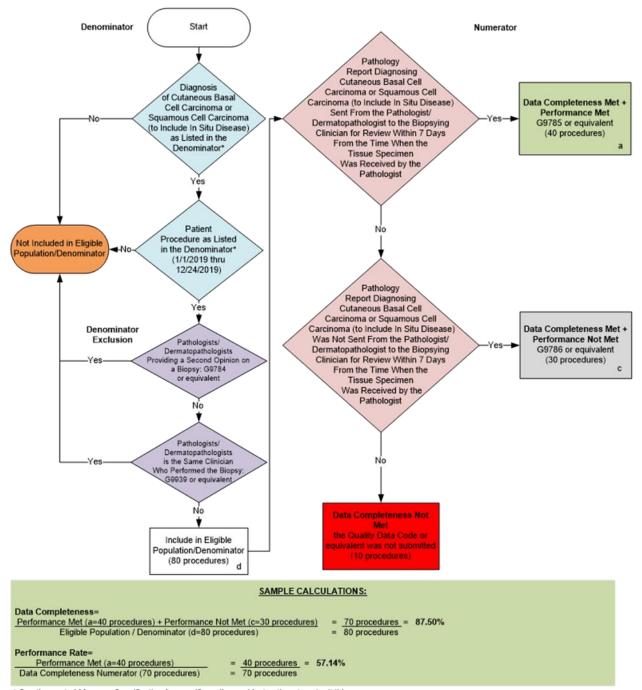
# THE MEASURES AND SPECIFICATIONS ARE PROVIDED "AS IS" WITHOUT WARRANTY OF ANY KIND.

© 2017 American Academy of Dermatology. All Rights Reserved. Applicable FARS/DFARS Restrictions Apply to Government Use.

Limited proprietary coding is contained in the Measure specifications for convenience. Users of the proprietary code sets should obtain all necessary licenses from the owners of these code sets. The AAD and its members disclaim all liability for use or accuracy of any Current Procedural Terminology (CPT®) or other coding contained in the specifications.

CPT® contained in the Measures specifications is copyright 2004-2018 American Medical Association. LOINC® copyright 2004-2018 Regenstrief Institute, Inc. SNOMED CLINICAL TERMS (SNOMED CT®) copyright 2004-2018 College of American Pathologists. All Rights Reserved.

## 2019 Registry Flow for Quality ID #440: Basal Cell Carcinoma (BCC)/Squamous Cell Carcinoma: Biopsy Reporting Time – Pathologist to Clinician



<sup>\*</sup> See the posted Measure Specification for specific coding and instructions to submit this measure.

NOTE: Submission Frequency: Procedure

# 2019 Clinical Quality Measure Flow for Quality ID #440: Basal Cell Carcinoma (BCC)/Squamous Cell Carcinoma (SCC): Biopsy Reporting Time – Pathologist to Clinician

Please refer to the specific section of the specification to identify the denominator and numerator information for use in submitting this Individual Specification.

- 1. Start with Denominator
- 2. Check Diagnosis:
  - a. If Diagnosis of Cutaneous Basal Cell Carcinoma or Squamous Cell Carcinoma (to Include In Situ Disease) as Listed in the Denominator equals No during the measurement period, do not include in Eligible Population. Stop Processing.
  - b. If Diagnosis of Cutaneous Basal Cell Carcinoma or Squamous Cell Carcinoma (to Include In Situ Disease) as Listed in the Denominator equals Yes during the measurement period, proceed to check Patient Procedure.
- 3. Check Patient Procedure:
  - a. If Patient Procedure as Listed in the Denominator equals No, do not include in Eligible Population. Stop Processing.
  - b. If Patient Procedure as Listed in the Denominator equals Yes, proceed to check Pathologists/Dermatopathologists Providing a Second Opinion on a Biopsy.
- 4. Check Pathologists/Dermatopathologists Providing a Second Opinion on a Biopsy:
  - a. If Pathologists/Dermatopathologists Providing a Second Opinion on a Biopsy equals Yes, do not include in Eligible Population. Stop Processing.
  - b. If Pathologists/Dermatopathologists Providing a Second Opinion on a Biopsy equals No, proceed to check Pathologists/Dermatopathologists is the Same Clinician Who Performed the Biopsy.
- 5. Check Pathologists/Dermatopathologists is the Same Clinician Who Performed the Biopsy:
  - a. If Pathologists/Dermatopathologists is the Same Clinician Who Performed the Biopsy equals Yes, do not include in Eligible Population. Stop Processing.
  - b. If Pathologists/Dermatopathologists is the Same Clinician Who Performed the Biopsy equals No, include in Eligible Population.
- 6. Denominator Population:
  - a. Denominator Population is all Eligible Procedures in the Denominator. Denominator is represented as Denominator in the Sample Calculation listed at the end of this document. Letter d equals 80 procedures in the Sample Calculation.
- 7. Start Numerator
- 8. Check Pathology Report Diagnosing Cutaneous Basal Cell Carcinoma or Squamous Cell Carcinoma (to Include In Situ Disease) Sent From the Pathologist/Dermatopathologist to the Biopsying Clinician for Review Within 7 Days From the Time When the Tissue Specimen Was Received by the Pathologist:

- a. If Pathology Report Diagnosing Cutaneous Basal Cell Carcinoma or Squamous Cell Carcinoma (to Include In Situ Disease) Sent From the Pathologist/Dermatopathologist to the Biopsying Clinician for Review Within 7 Days From the Time When the Tissue Specimen Was Received by the Pathologist equals Yes, include in Data Completeness Met and Performance Met.
- b. Data Completeness Met and Performance Met is represented as Data Completeness and Performance Rate in the Sample Calculation listed at the end of this document. Letter a equals 40 procedures in the Sample Calculation.
- c. If Pathology Report Diagnosing Cutaneous Basal Cell Carcinoma or Squamous Cell Carcinoma (to Include In Situ Disease) Sent From the Pathologist/Dermatopathologist to the Biopsying Clinician for Review Within 7 Days From the Time When the Tissue Specimen Was Received by the Pathologist equals No, proceed to check Pathology Report Diagnosing Cutaneous Basal Cell Carcinoma or Squamous Cell Carcinoma (to Include In Situ Disease) Was Not Sent From the Pathologist/Dermatopathologist to the Biopsying Clinician for Review Within 7 Days From the Time When the Tissue Specimen Was Received by the Pathologist.
- 9. Check Pathology Report Diagnosing Cutaneous Basal Cell Carcinoma or Squamous Cell Carcinoma (to Include In Situ Disease) Was Not Sent From the Pathologist/Dermatopathologist to the Biopsying Clinician for Review Within 7 Days From the Time When the Tissue Specimen Was Received by the Pathologist:
  - a. If Pathology Report Diagnosing Cutaneous Basal Cell Carcinoma or Squamous Cell Carcinoma (to Include In Situ Disease) Was Not Sent From the Pathologist/Dermatopathologist to the Biopsying Clinician for Review Within 7 Days From the Time When the Tissue Specimen Was Received by the Pathologist equals Yes, include in Data Completeness Met and Performance Not Met.
  - b. Data Completeness Met and Performance Not Met is represented as Data Completeness in the Sample Calculation listed at the end of this document. Letter c equals 30 procedures in the Sample Calculation.
  - c. If Pathology Report Diagnosing Cutaneous Basal Cell Carcinoma or Squamous Cell Carcinoma (to Include In Situ Disease) Was Not Sent From the Pathologist/Dermatopathologist to the Biopsying Clinician for Review Within 7 Days From the Time When the Tissue Specimen Was Received by the Pathologist equals No, proceed to check Data Completeness Not Met.
- 10. Check Data Completeness Not Met:
  - a. If Data Completeness Not Met, the Quality Data Code or equivalent was not submitted. 10 procedures have been subtracted from the Data Completeness Numerator in the Sample Calculation.

# SAMPLE CALCULATIONS: Data Completeness= Performance Met (a=40 procedures) + Performance Not Met (c=30 procedures) Eligible Population / Denominator (d=80 procedures) Performance Rate= Performance Met (a=40 procedures) Data Completeness Numerator (70 procedures) = 40 procedures 70 procedures = 57.14%