DOCUMENTATION TIPS

Measure 265: Biopsy Follow-Up

Electronic health records (EHRs) collect and organize notes, medication lists, and patient information using various formats. With providers also documenting this information in unique ways, this can potentially cause confusion and an increased timeline for measure mapping with DataDerm. This tip sheet can help you manage reporting requirements for performance measures and streamline standard documentation practices to allow seamless data pull into DataDerm.

The DataDerm team will work with you to connect DataDerm with your EHR to extract data. To make the process as smooth as possible, it helps to document key elements of patient care. DataDerm cannot read scanned images of any kind, including scanned images for labs, letters to physicians, pathology reports, follow-up plans, and dates. If you have scanned images with information needed for your measures, please add a note in your chart with the date and required patient information for this data to be accurately collected.

This tip sheet can assist paper-based practices in standardizing documentation practices. Keeping notes in the patient's paper chart of all documentation requirements will assist you when reporting for this measure.

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For all patients, document clear language that states:

• Eligible patient codes:

CPT code for patient procedure during performance period

- 11102, 11104, 11106, 11755, 19081, 19083, 19085, 19100, 19101, 19125, 20200, 20205, 20206, 20220, 20225, 20240, 20245, 20250, 20251, 21550, 21920, 21925, 23065, 23066, 23100, 23101, 24065, 24066, 24100, 24101, 25065, 25066, 25100, 25101, 26100, 26105, 26110, 27040, 27041, 27050, 27052, 27323, 27324, 27330, 27331, 27613, 27614, 27620, 28050, 28052, 28054, 29800, 29805, 29830, 29840, 29860, 29870, 29900, 30100, 31050, 31051, 31237, 31510, 31535, 31536, 31576, 31625, 31628, 31629, 31632, 31633, 31717, 32096, 32097, 32098, 32400, 32405, 32604, 32606, 32607, 32608, 32609, 37200, 37609, 38221, 38500, 38505, 38510, 38520, 38525, 38530, 38570, 38572, 40490, 40808, 41100, 41105, 41108, 42100, 42400, 42405, 42800, 42804, 42806, 43193, 43197, 43198, 43202, 43239, 43261, 43605, 44010, 44020, 44025, 44100, 44322, 44361, 44377, 44382, 44386, 44389, 45100, 45305, 45331, 45380, 45392, 46606, 47000, 47001, 47100, 47553, 48100, 48102, 49000, 49010, 49180, 49321, 50200, 50205, 50555, 50557, 50574, 50576, 50955, 50957, 50974, 50976, 52007, 52204, 52224, 52250, 52354, 53200, 54100, 54105, 54500, 54505, 54800, 54865, 55700, 55705, 55706, 55812, 55842, 55862, 56605, 56821, 57100, 57105, 57421, 57454, 57455, 57460, 57500, 57520, 58100, 58558, 58900, 59015, 60100, 60540, 60545, 60650, 61140, 61575, 61576, 61750, 61751, 62269, 63275, 63276, 63277, 63278, 63280, 63281, 63282, 63283, 63285, 63286, 63287, 63290, 64795, 65410, 67346, 67400, 67450, 67810, 68100, 68510, 68525, 69100, 69105, 75970, 93505
- CPT code for patient encounter during performance period (99201, 99202, 99203, 99204, 99205, 99241, 99242, 99243, 99244, 99245)

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- Biopsy results reviewed, communicated, tracked, and documented:
 - Biopsy results were reviewed with the patient
 - Communication to the patient can include directly speaking to the patient or person designated to discuss the results, documented telephone message or voicemail, mailer/fax sent to the patient, or any HIPAA secure electronic communication with the patient.
 - Biopsy results communicated to the primary care/referring physician
 - All communication is in a biopsy tracking log and patient medical record
- Documented reason patient's biopsy results were not reviewed, include if applicable:
 - Patient does not have primary care/referring physician or if self-referred patient, or patient requests biopsy results not be communicated to primary care/referring physician

Additional Tips:

• Collect once per performance period for patients seen for an office visit and have a biopsy performed during the performance period.

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- See measure specifications for additional codes that can assist in seamless measure mapping from your EHR to DataDerm, if applicable (e.g. G8883).
- Biopsying physician must track communication in a log. Components of a tracking log include:
 - initials of physician performing biopsy
 - patient name
 - date of biopsy
 - type of biopsy
 - biopsy result
 - date of biopsy result
- GQ, GT, 95, and POS 02 telehealth modifiers make cases ineligible.

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