

Quality ID #224 (NOF 0562): Melanoma: Overutilization of Imaging Studies in Melanoma – National Quality Strategy Domain: Efficiency and Cost Reduction

2018 OPTIONS FOR INDIVIDUAL MEASURES:
REGISTRY ONLY

MEASURE TYPE:
Process

DESCRIPTION:

Percentage of patients, regardless of age, with a current diagnosis of Stage 0 through IIC melanoma or a history of melanoma of any stage, without signs or symptoms suggesting systemic spread, seen for an office visit during the one-year measurement period, for whom no diagnostic imaging studies were ordered

INSTRUCTIONS:

This measure is to be submitted **once per performance period** for patients with a current diagnosis of stage 0 through IIC melanoma or a history of melanoma who are seen for an office visit during the performance period. This measure is intended to reflect the quality of services provided for the primary management of patients with melanoma who have an office visit during the performance period.

Measure Submission:

The listed denominator criteria is used to identify the intended patient population. The numerator options included in this specification are used to submit the quality actions allowed by the measure. The quality-data codes listed do not need to be submitted for registry submissions; however, these codes may be submitted for those registries that utilize claims data.

THERE ARE TWO SUBMISSION CRITERIA FOR THIS MEASURE:

- 1) Patients with a diagnosis of Stage 0 through IIC melanoma without signs or symptoms suggesting systemic spread

OR

- 2) Patients with a history of any stage melanoma without signs or symptoms suggesting systemic spread

SUBMISSION CRITERIA 1: PATIENTS WITH A CURRENT DIAGNOSIS OF STAGE 0 THROUGH IIC MELANOMA WITHOUT SIGNS OR SYMPTOMS SUGGESTING SYSTEMIC SPREAD

DENOMINATOR (SUBMISSION CRITERIA 1):

All patients, regardless of age, with a current diagnosis of Stage 0 through IIC melanoma, without signs or symptoms suggesting systematic spread, seen for an office visit during the one-year measurement period

***DENOMINATOR NOTE:** *Signifies that this CPT Category I code is a non-covered service under the Medicare Part B Physician Fee Schedule (PFS). These non-covered services should be counted in the denominator population for registry-based measures.*

Definitions:

Signs – For the purposes of this measure, signs include tenderness, jaundice, localized neurologic signs such as weakness, or any other sign.

Symptoms – For the purposes of this measure, symptoms include cough, dyspnea, pain, paresthesia, or any other symptom suggesting the possibility of systemic spread.

Denominator Criteria (Eligible Cases) 1:

Diagnosis for melanoma (ICD-10-CM): C43.0, C43.10, C43.11, C43.12, C43.20, C43.21, C43.22, C43.30, C43.31, C43.39, C43.4, C43.51, C43.52, C43.59, C43.60, C43.61, C43.62, C43.70, C43.71, C43.72, C43.8, C43.9, D03.0, D03.10, D03.11, D03.12, D03.20, D03.21, D03.22, D03.30, D03.39, D03.4, D03.51, D03.52, D03.59, D03.60, D03.61, D03.62, D03.70, D03.71, D03.72, D03.8, D03.9

AND

Patient encounter during the performance period (CPT): 99201, 99202, 99203, 99204, 99205, 99212, 99213, 99214, 99215, 99241*, 99242*, 99243*, 99244*, 99245*

WITHOUT

Telehealth Modifier: GQ, GT, 95, POS 02

AND

AJCC Melanoma Cancer Stage 0 through IIC Melanoma: G8944

AND

Absence of signs of melanoma (cough, dyspnea, tenderness, localized neurologic signs such as weakness, jaundice, or any other sign suggesting systemic spread) or absence of symptoms of melanoma (pain, paresthesia, or any other symptom suggesting the possibility of systemic spread of melanoma): G8749

NUMERATOR (SUBMISSION CRITERIA 1):

Patients for whom no diagnostic imaging studies were ordered

Numerator Instructions: A higher score indicates appropriate treatment of patients with melanoma without additional signs or symptoms.

NUMERATOR NOTE: For Denominator Exception(s), patients are ineligible for this measure if at the time of encounter there are patient or system reason(s) for ordering an imaging study (e.g. patient has co-morbid condition that warrant imaging or studies were ordered by another provider, etc.) as further specified below.

Definition:

Diagnostic Imaging Studies – Chest x-ray (CXR), Computed Tomography (CT), Ultrasound, Magnetic Resonance Imaging (MRI), Positron Emission Tomography (PET), and nuclear medicine scans. Ordering any of these imaging studies during the one year measurement period is considered a failure of the measure, unless a justified reason is documented through use of a medical or system reason for exception.

Numerator Options:

Performance Met:

None of the following diagnostic imaging studies ordered: chest x-ray, CT, Ultrasound, MRI, PET, or nuclear medicine scans **(3320F)**

OR

Denominator Exception:

Documentation of medical reason(s) for ordering diagnostic imaging studies (e.g., patient has co-morbid condition that warrants imaging, other medical reasons) **(3319F with 1P)**

OR

Denominator Exception:

Documentation of system reason(s) for ordering diagnostic imaging studies (e.g., requirement for clinical trial enrollment, ordered by another provider, other system reasons) **(3319F with 3P)**

OR

Performance Not Met:

One of the following diagnostic imaging studies ordered; chest x-ray, CT, Ultrasound, MRI, PET, or nuclear medicine scans (3319F)

OR

SUBMISSION CRITERIA 2: PATIENTS WITH A HISTORY OF ANY STAGE MELANOMA WITHOUT SIGNS OR SYMPTOMS SUGGESTING SYSTEMIC SPREAD

DENOMINATOR (SUBMISSION CRITERIA 2):

All patients, regardless of age, with a history of melanoma of any stage, without signs or symptoms suggesting systemic spread, seen for an office visit during the one-year measurement period

***DENOMINATOR NOTE:** *Signifies that this CPT Category I code is a non-covered service under the Medicare Part B Physician Fee Schedule (PFS). These non-covered services should be counted in the denominator population for registry-based measures.*

Definitions:

Signs – For the purposes of this measure, signs include tenderness, jaundice, localized neurologic signs such as weakness, or any other sign.

Symptoms – For the purposes of this measure, symptoms include cough, dyspnea, pain, paresthesia, or any other symptom suggesting the possibility of systemic spread.

Denominator Criteria (Eligible Cases) 2:

Diagnosis for history of melanoma (ICD-10-CM): Z85.820

AND

Patient encounter during the performance period (CPT): 99201, 99202, 99203, 99204, 99205, 99212, 99213, 99214, 99215, 99241*, 99242*, 99243*, 99244*, 99245*

WITHOUT

Telehealth Modifier: GQ, GT, 95, POS 02

AND

Absence of signs of melanoma (cough, dyspnea, tenderness, localized neurologic signs such as weakness, jaundice or any other sign suggesting systemic spread) or absence of symptoms of melanoma (pain, paresthesia, or any other symptom suggesting the possibility of systemic spread of melanoma): G8749

NUMERATOR (SUBMISSION CRITERIA 2):

Patients for whom no diagnostic imaging studies were ordered

Numerator Instructions: A higher score indicates appropriate treatment of patients with melanoma without additional signs or symptoms.

***NUMERATOR NOTE:** Denominator Exception(s), patients are ineligible for this measure if at the time of encounter there are patient or system reason(s) for ordering an imaging study (e.g. patient has co-morbid condition that warrant imaging or studies were ordered by another provider, etc.).*

Definition:

Diagnostic Imaging Studies – CXR, CT, Ultrasound, MRI, PET, and nuclear medicine scans. Ordering any of these imaging studies during the one year measurement period is considered a failure of the measure, unless a justified reason is documented through use of a medical or system reason for exception.

Numerator Options:

<i>Performance Met:</i>	None of the following diagnostic imaging studies ordered: chest x-ray, CT, Ultrasound, MRI, PET, or nuclear medicine scans (3320F)
OR	
<i>Denominator Exception:</i>	Documentation of medical reason(s) for ordering diagnostic imaging studies (e.g., patient has co-morbid condition that warrants imaging, other medical reasons) (3319F with 1P)
OR	
<i>Denominator Exception:</i>	Documentation of system reason(s) for ordering diagnostic imaging studies (e.g., requirement for clinical trial enrollment, ordered by another provider, other system reasons) (3319F with 3P)
OR	
<i>Performance Not Met:</i>	One of the following diagnostic imaging studies ordered; chest x-ray, CT, Ultrasound, MRI, PET, or nuclear medicine scans (3319F)

RATIONALE:

There is no valid indication for expensive imaging studies in early stage melanoma in the absence of signs or symptoms. There is a perception that radiologic studies are being administered for grade 0 and grade I melanoma that are clinically unnecessary and create economic burden to the patient and payer. While diagnostic imaging is also inappropriate for patients with higher stages of melanoma as well, this measure is a first step in addressing the over-utilization of diagnostic imaging studies in patients with melanoma.

Diagnostic imaging is the fastest growing medical expenditure in the United States with an annual 9% growth rate - more than twice that of general medical expenditures. Studies have found overuse of diagnostic imaging and duplication of other types of scans add little or no value. Unnecessary or inappropriate tests not only incur excess expenditures, but may also expose patients to extra risk. For example, the radiation exposure of a CT scan can be several hundred times that of a chest X-ray. The advances in cardiac imaging have resulted in the inappropriate application of these imaging modalities resulting in substantial, unexplained regional variability and increased attendant costs.

CLINICAL RECOMMENDATION STATEMENTS:

In asymptomatic patients with localized cutaneous melanoma of any thickness, baseline blood tests and imaging studies are generally not recommended and should only be performed as clinically indicated for suspicious signs and symptoms. (AAD, 2011)

Routine cross-sectional imaging (CT, PET, MRI) is not recommended for patient with localized melanoma. For patients with stage IA melanoma, this is consistent with the National Institutes of Health guideline. For patients with stage IB to IIC, this recommendation is based on the very low yield of detection of subclinical disease. In patients with stage IIB-IIC, chest x-ray is optional. In any patient with localized melanoma, cross-sectional imaging should only be used to investigate specific signs or symptoms. (NCCN, 2011)

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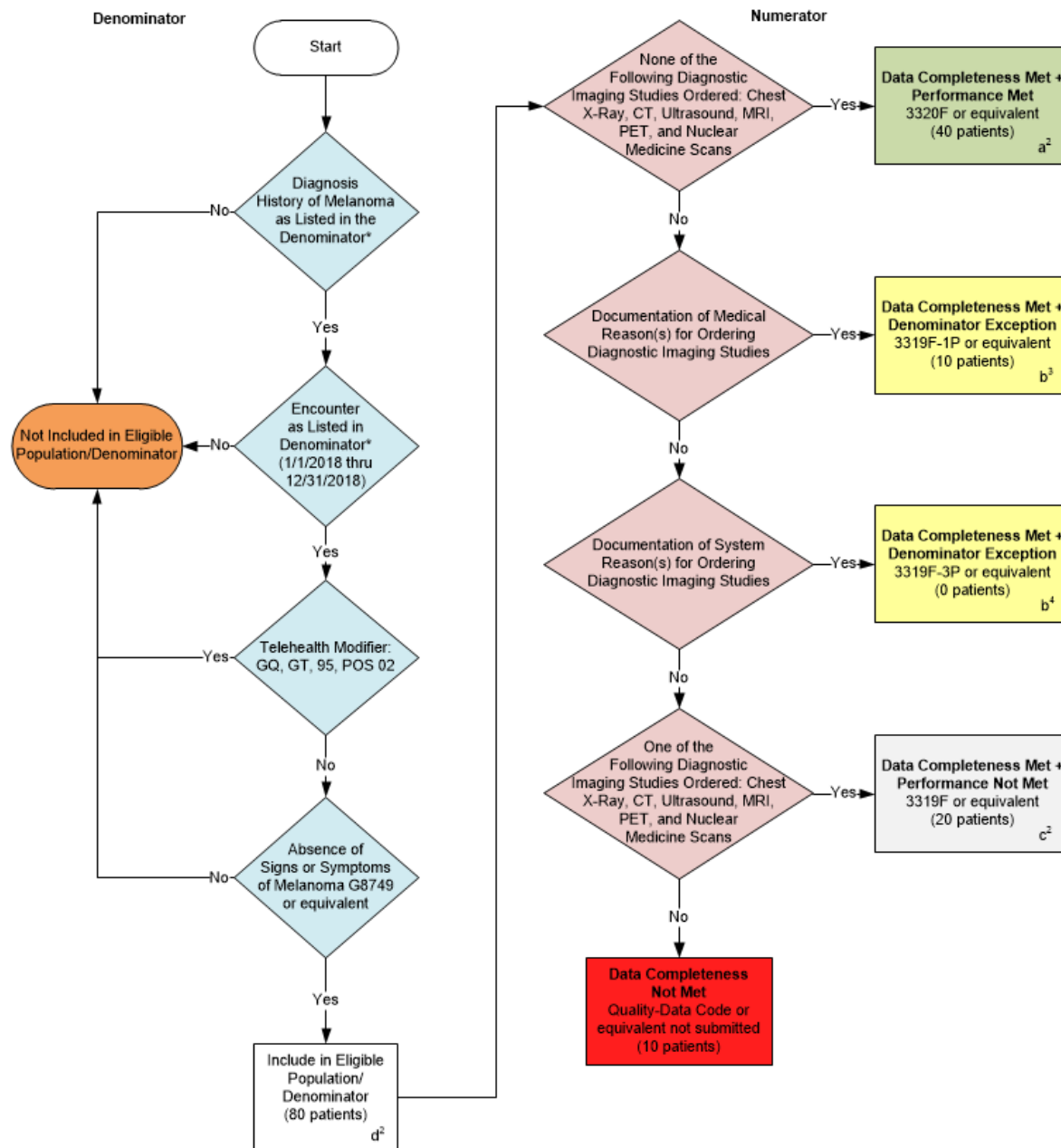
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**2018 Registry Flow for Quality ID #224 NQF #0562:
Melanoma: Overutilization of Imaging Studies in Melanoma
Submission Criteria Two**

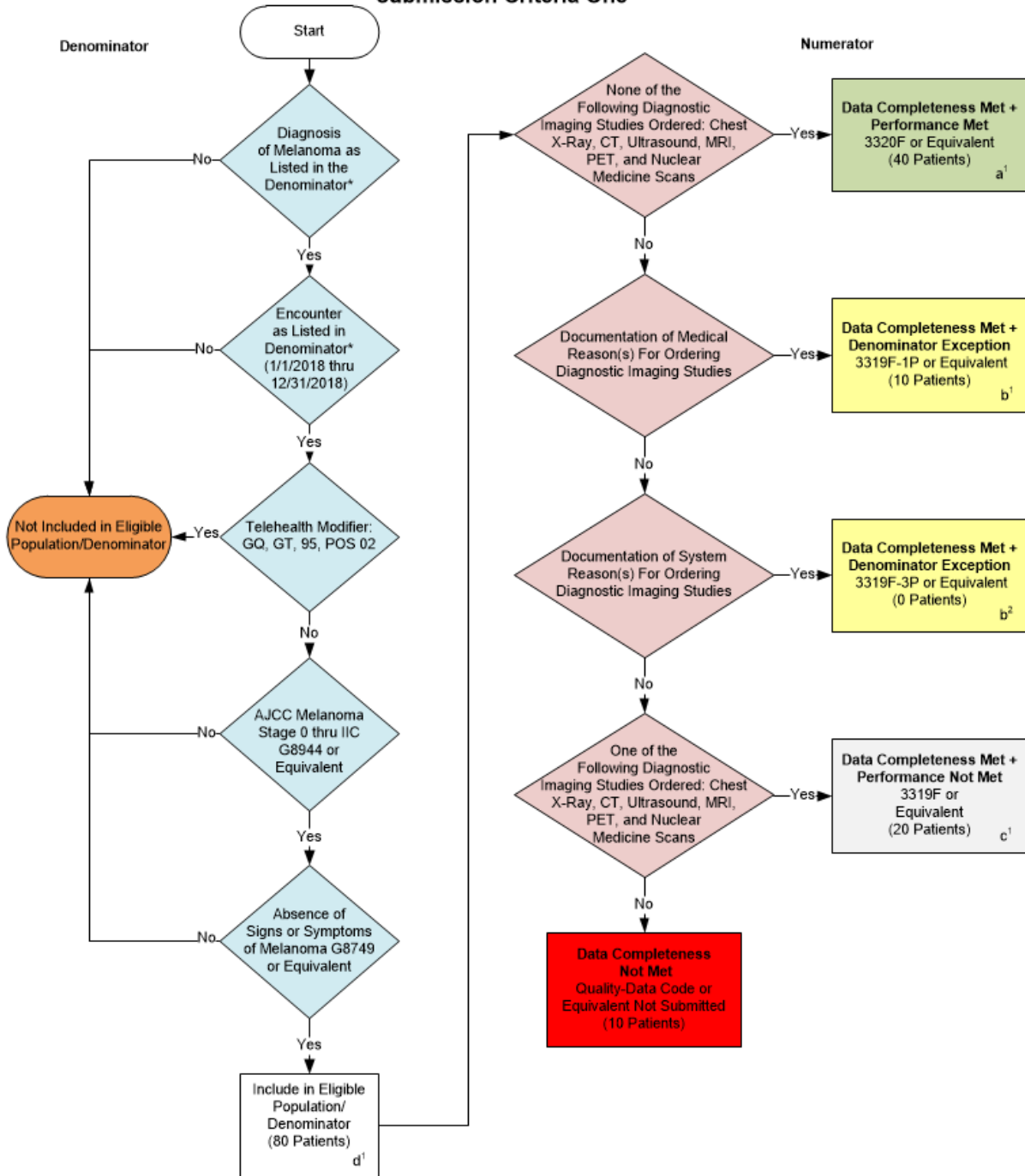


*See the posted Measure Specification for specific coding and instructions to submit this measure.
NOTE: Submission Frequency: Patient-process

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**2018 Registry Flow for Quality ID #224 NQF #0562:
Melanoma: Overutilization of Imaging Studies in Melanoma
Submission Criteria One**



*See the posted Measure Specification for specific coding and instructions to submit this measure.
NOTE: Submission Frequency: Patient-process

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v2

**2018 Registry Flow for Quality ID #224 NQF #0562:
Melanoma: Overutilization of Imaging Studies in Melanoma**

SAMPLE CALCULATIONS:

Data Completeness=

$$\frac{\text{Performance Met (a}^1+\text{a}^2=80 \text{ patients)} + \text{Denominator Exception (b}^1+\text{b}^2+\text{b}^3+\text{b}^4=20 \text{ patients)} + \text{Performance Not Met (c}^1+\text{c}^2=40 \text{ patients)}}{\text{Eligible Population / Denominator (d}^1+\text{d}^2=16 \text{ patients)}} = \frac{140 \text{ patients}}{160 \text{ patients}} = 87.50\%$$

Performance Rate=

$$\frac{\text{Performance Met (a}^1+\text{a}^2=80 \text{ patients)}}{\text{Data Completeness Numerator (140 patients) - Denominator Exception (b}^1+\text{b}^2+\text{b}^3+\text{b}^4=20 \text{ patients)}} = \frac{80 \text{ patients}}{120 \text{ patients}} = 66.67\%$$

*See the posted Measure Specification for specific coding and instructions to submit this measure.

This measure contains 2 Submission Criteria, although as the Sample Calculation indicates, there is **ONLY** one submission rate and one performance rate for this measure.

NOTE: Submission Frequency: Patient-process

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2018 Registry Flow for Quality ID
#224 NQF #0562: Melanoma: Overutilization of Imaging Studies in Melanoma

Please refer to the specific section of the specification to identify the denominator and numerator information for use in submitting this Individual Specification. This flow is for registry data submission.

Submission Criteria One

1. Start with Denominator
2. Check Patient Diagnosis:
 - a. If Diagnosis of Melanoma as Listed in the Denominator equals No, do not include in Eligible Patient Population. Stop Processing.
 - b. If Diagnosis of Melanoma as Listed in the Denominator equals Yes, proceed to check Encounter Performed.
3. Check Encounter Performed:
 - a. If Encounter as Listed in the Denominator equals No, do not include in Eligible Patient Population. Stop Processing.
 - b. If Encounter as Listed in the Denominator equals Yes, proceed to check Telehealth Modifier.
4. Check Telehealth Modifier:
 - a. If Telehealth Modifier equals Yes, do not include in Eligible Patient Population. Stop Processing.
 - b. If Telehealth Modifier equals No, check AJCC Melanoma Stage 0 through IIC.
5. Check AJCC Melanoma Stage 0 through IIC:
 - a. If Diagnosis of Melanoma and AJCC Melanoma Stage 0 through IIC as Listed in the Denominator equals No, do not include in Eligible Patient Population. Stop Processing.
 - b. If Diagnosis of Melanoma and AJCC Melanoma Stage 0 through IIC as Listed in the Denominator equals Yes, proceed to check Absence of Signs or Symptoms of Melanoma.
6. Check Absence of Signs or Symptoms of Melanoma:
 - a. If Absence of Signs or Symptoms of Melanoma equals No, do not include in Eligible Patient Population. Stop Processing.
 - b. If Absence of Signs or Symptoms of Melanoma equals Yes, include in the Eligible Population.
7. Denominator Population:
 - a. Denominator population is all Eligible Patients in the denominator. Denominator is represented as Denominator in the Sample Calculation listed at the end of this document. Letter d1 equals 80 patients in the Sample Calculation.
8. Start Numerator

9. Check None of the Following Diagnostic Imaging Studies Ordered: Chest X-Ray, CT, Ultrasound, MRI, PET, and Nuclear Medicine Scans:
 - a. If None of the Following Diagnostic Imaging Studies Ordered: Chest X-Ray, CT, Ultrasound, MRI, PET, and Nuclear Medicine Scans equals Yes, include in Data Completeness Met and Performance Met.
 - b. Data Completeness Met and Performance Met letter is represented in the Data Completeness and Performance Rate in the Sample Calculation listed at the end of this document. Letter a1 equals 40 patients in the Sample Calculation.
 - c. If None of the Following Diagnostic Imaging Studies Ordered: Chest X-Ray, CT, Ultrasound, MRI, PET, and Nuclear Medicine Scans equals No, proceed to Documentation of Medical Reason(s) for Ordering Diagnostic Imaging Studies.
10. Check Documentation of Medical Reason(s) for Ordering Diagnostic Imaging Studies:
 - a. If Documentation of Medical Reason(s) for Ordering Diagnostic Imaging Studies equals Yes, include in Data Completeness Met and Denominator Exception.
 - b. Data Completeness Met and Denominator Exception letter is represented in the Data Completeness and Performance Rate in the Sample Calculation listed at the end of this document. Letter b1 equals 10 patients in the Sample Calculation.
 - c. If Documentation of Medical Reason(s) for Ordering Diagnostic Imaging Studies equals No, proceed to Documentation of System Reason(s) for Ordering Diagnostic Imaging Studies.
11. Check Documentation of System Reason(s) for Ordering Diagnostic Imaging Studies:
 - a. If Documentation of System Reason(s) for Ordering Diagnostic Imaging Studies equals Yes, include in Data Completeness Met and Denominator Exception.
 - b. Data Completeness Met and Denominator Exception letter is represented in the Data Completeness and Performance Rate in the Sample Calculation listed at the end of this document. Letter b2 equals 0 patients in the Sample Calculation.
 - c. If Documentation of System Reason(s) for Ordering Diagnostic Imaging Studies equals No, proceed to One of the Following Diagnostic Imaging Studies Ordered: Chest X-Ray, CT, Ultrasound, MRI, PET, and Nuclear Medicine Scans.
12. Check One of the Following Diagnostic Imaging Studies Ordered: Chest X-Ray, CT, Ultrasound, MRI, PET, and Nuclear Medicine Scans:
 - a. If One of the Following Diagnostic Imaging Studies Ordered: Chest X-Ray, CT, Ultrasound, MRI, PET, and Nuclear Medicine Scans equals Yes, include in the Data Completeness Met and Performance Not Met.
 - b. Data Completeness Met and Performance Not Met letter is represented in the Data Completeness in the Sample Calculation listed at the end of this document. Letter c1 equals 20 patients in the Sample Calculation.
 - c. If One of the Following Diagnostic Imaging Studies Ordered: Chest X-Ray, CT, Ultrasound, MRI, PET, and Nuclear Medicine Scans equals No, proceed to Data Completeness Not Met.
13. Check Data Completeness Not Met

- a. If Data Completeness Not Met equals No, Quality Data Code or equivalent not submitted. 10 patients have been subtracted from Data Completeness Numerator in the Sample Calculation.

SAMPLE CALCULATIONS:

Data Completeness=

$$\frac{\text{Performance Met (a}^1+\text{a}^2=80 \text{ patients)} + \text{Denominator Exception (b}^1+\text{b}^2+\text{b}^3+\text{b}^4=20 \text{ patients)} + \text{Performance Not Met (c}^1+\text{c}^2=40 \text{ patients)}}{\text{Eligible Population / Denominator (d}^1+\text{d}^2=16 \text{ patients)}} = \frac{140 \text{ patients}}{160 \text{ patients}} = 87.50\%$$

Performance Rate=

$$\frac{\text{Performance Met (a}^1+\text{a}^2=80 \text{ patients)}}{\text{Data Completeness Numerator (140 patients) - Denominator Exception (b}^1+\text{b}^2+\text{b}^3+\text{b}^4=20 \text{ patients)}} = \frac{80 \text{ patients}}{120 \text{ patients}} = 66.67\%$$

2018 Registry For Quality ID

#224 NQF #0562: Melanoma: Overutilization of Imaging Studies in Melanoma

Please refer to the specific section of the specification to identify the denominator and numerator information for use in submitting this Individual Specification. This flow is for registry data submission.

Submission Criteria Two

1. Start with Denominator
2. Check Patient Diagnosis:
 - a. If Diagnosis History of Melanoma as Listed in the Denominator equals No, do not include in Eligible Patient Population. Stop Processing.
 - b. If Diagnosis History of Melanoma as Listed in the Denominator equals Yes, proceed to check Encounter Performed.
3. Check Encounter Performed:
 - a. If Encounter as Listed in the Denominator equals No, do not include in Eligible Patient Population. Stop Processing.
 - b. If Encounter as Listed in the Denominator equals Yes, proceed to check Telehealth Modifier.
4. Check Telehealth Modifier:
 - a. If Telehealth Modifier equals Yes, do not include in Eligible Patient Population. Stop Processing.
 - b. If Telehealth Modifier equals No, proceed to check Absence of Signs or Symptoms of Melanoma
5. Check Absence of Signs or Symptoms of Melanoma:
 - a. If Absence of Signs or Symptoms of Melanoma equals No, do not include in Eligible Patient Population. Stop Processing.
 - b. If Absence of Signs or Symptoms of Melanoma equals Yes, include in the Eligible Population.
6. Denominator Population:
 - a. Denominator population is all Eligible Patients in the denominator. Denominator is represented as Denominator in the Sample Calculation listed at the end of this document. Letter d2 equals 80 patients in the Sample Calculation.
7. Start Numerator
8. Check None of the Following Diagnostic Imaging Studies Ordered: Chest X-Ray, CT, Ultrasound, MRI, PET, and Nuclear Medicine Scans:
 - a. If None of the Following Diagnostic Imaging Studies Ordered: Chest X-Ray, CT, Ultrasound, MRI, PET, and Nuclear Medicine Scans equals Yes, include in Data Completeness Met and Performance Met.
 - b. Data Completeness Met and Performance Met letter is represented in the Data Completeness and Performance Rate in the Sample Calculation listed at the end of this document. Letter a1 equals 40 patients in the Sample Calculation.

- c. If None of the Following Diagnostic Imaging Studies Ordered: Chest X-Ray, CT, Ultrasound, MRI, PET, and Nuclear Medicine Scans equals No, proceed to Documentation of Medical Reason(s) for Ordering Diagnostic Imaging Studies.
9. Check Documentation of Medical Reason(s) for Ordering Diagnostic Imaging Studies:
 - a. If Documentation of Medical Reason(s) for Ordering Diagnostic Imaging Studies equals Yes, include in Data Completeness Met and Denominator Exception.
 - b. Data Completeness Met and Denominator Exception letter is represented in the Data Completeness and Performance Rate in the Sample Calculation listed at the end of this document. Letter b1 equals 10 patients in the Sample Calculation.
 - c. If Documentation of Medical Reason(s) for Ordering Diagnostic Imaging Studies equals No, proceed to Documentation of System Reason(s) for Ordering Diagnostic Imaging Studies.
 10. Check Documentation of System Reason(s) for Ordering Diagnostic Imaging Studies:
 - a. If Documentation of System Reason(s) for Ordering Diagnostic Imaging Studies equals Yes, include in Data Completeness Met and Denominator Exception.
 - b. Data Completeness Met and Denominator Exception letter is represented in the Data Completeness and Performance Rate in the Sample Calculation listed at the end of this document. Letter b2 equals 0 patients in the Sample Calculation.
 - c. If Documentation of System Reason(s) for Ordering Diagnostic Imaging Studies equals No, proceed to One of the Following Diagnostic Imaging Studies Ordered: Chest X-Ray, CT, Ultrasound, MRI, PET, and Nuclear Medicine Scans.
 11. Check One of the Following Diagnostic Imaging Studies Ordered: Chest X-Ray, CT, Ultrasound, MRI, PET, and Nuclear Medicine Scans:
 - a. If One of the Following Diagnostic Imaging Studies Ordered: Chest X-Ray, CT, Ultrasound, MRI, PET, and Nuclear Medicine Scans equals Yes, include in the Data Completeness Met and Performance Not Met.
 - b. Data Completeness Met and Performance Not Met letter is represented in the Data Completeness in the Sample Calculation listed at the end of this document. Letter c1 equals 20 patients in the Sample Calculation.
 - c. If One of the Following Diagnostic Imaging Studies Ordered: Chest X-Ray, CT, Ultrasound, MRI, PET, and Nuclear Medicine Scans equals No, proceed to Data Completeness Not Met.
 12. Check Data Completeness Not Met
 - a. If Data Completeness Not Met equals No, Quality Data Code or equivalent not submitted. 10 patients have been subtracted from Data Completeness Numerator in the Sample Calculation.

SAMPLE CALCULATIONS:

Data Completeness=

$$\frac{\text{Performance Met (a}^1\text{+a}^2\text{=80 patients) + Denominator Exception (b}^1\text{+b}^2\text{+b}^3\text{+b}^4\text{=20 patients) + Performance Not Met (c}^1\text{+c}^2\text{=40 patients)}}{\text{Eligible Population / Denominator (d}^1\text{+d}^2\text{=16 patients)}} = \frac{140 \text{ patients}}{160 \text{ patients}} = \mathbf{87.50\%}$$

Performance Rate=

$$\frac{\text{Performance Met (a}^1\text{+a}^2\text{=80 patients)}}{\text{Data Completeness Numerator (140 patients) – Denominator Exception (b}^1\text{+b}^2\text{+b}^3\text{+b}^4\text{=20 patients)}} = \frac{80 \text{ patients}}{120 \text{ patients}} = \mathbf{66.67\%}$$