

Quality ID #249 (NQF 1854): Barrett's Esophagus – National Quality Strategy Domain: Effective Clinical Care

2018 OPTIONS FOR INDIVIDUAL MEASURES:
REGISTRY ONLY

MEASURE TYPE:
Process

DESCRIPTION:
Percentage of esophageal biopsy reports that document the presence of Barrett's mucosa that also include a statement about dysplasia

INSTRUCTIONS:
This measure is to be submitted **each time** a patient's surgical pathology report demonstrates Barrett's Esophagus; however, only one quality-data code (ODC) per date of service for a patient is required. This measure may be submitted by eligible clinicians who perform the quality actions described in the measure based on the services provided and the measure-specific denominator coding.

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.

DENOMINATOR:
All surgical pathology biopsy reports for Barrett's Esophagus

Denominator Criteria (Eligible Cases):
Diagnosis for Barrett's esophagus (ICD-10-CM): K22.70, K22.710, K22.711, K22.719

AND
Patient procedure during the performance period (CPT): 88305

AND NOT
DENOMINATOR EXCLUSION:
Specimen site other than anatomic location of esophagus: G8797

NUMERATOR:
Esophageal biopsy report documents the presence of Barrett's mucosa and includes a statement about dysplasia

Numerator Options:
Performance Met: Esophageal biopsy reports with the histological finding of Barrett's mucosa that contains a statement about dysplasia (present, absent, or indefinite and if present, contains appropriate grading) (3126F)

OR
Denominator Exception: Documentation of medical reason(s) for not submitting the histological finding of Barrett's mucosa (e.g., malignant neoplasm or absence of intestinal metaplasia) (3126F with 1P)

OR

Performance Not Met:

Pathology report with the histological finding of Barrett's mucosa that does not contain a statement about dysplasia (present, absent, or indefinite, and if present, contains appropriate grading), reason not otherwise specified (3126F *with 8P*)

RATIONALE:

Endoscopy is the technique of choice used to identify suspected Barrett's esophagus and to diagnose complications of GERD. Biopsy must be added to confirm the presence of Barrett's epithelium and to evaluate for dysplasia (ACG, 2005).

There is a rapidly rising incidence of adenocarcinoma of the esophagus in the United States. A diagnosis of Barrett's esophagus increases a patient's risk for esophageal adenocarcinoma by 30 to 125 times that of people without Barrett's esophagus (although this risk is still small 0.4% to 0.5% per year). Esophageal adenocarcinoma is often not curable, partly because the disease is frequently discovered at a late stage and because treatments are not effective. A diagnosis of Barrett's esophagus could allow for appropriate screening of at risk patients as recommended by the American College of Gastroenterology.

Standard endoscopy with biopsy currently is the most reliable means of establishing a diagnosis of Barrett's esophagus. The definitive diagnosis of Barrett's esophagus requires a pathologist's review of an esophageal biopsy. Dysplasia is the first step in the neoplastic process, and information about dysplasia is crucial for clinical decision-making directing therapy. The presence and grade of dysplasia cannot be determined by routine endoscopy, and pathologist's review of a biopsy is essential for recognition of dysplasia. Endoscopic surveillance detects curable neoplasia in patients with Barrett's esophagus.

CLINICAL RECOMMENDATION STATEMENTS:

The diagnosis of Barrett's esophagus requires systematic biopsy of the abnormal-appearing esophageal mucosa to document intestinal metaplasia and to detect dysplasia.

COPYRIGHT:

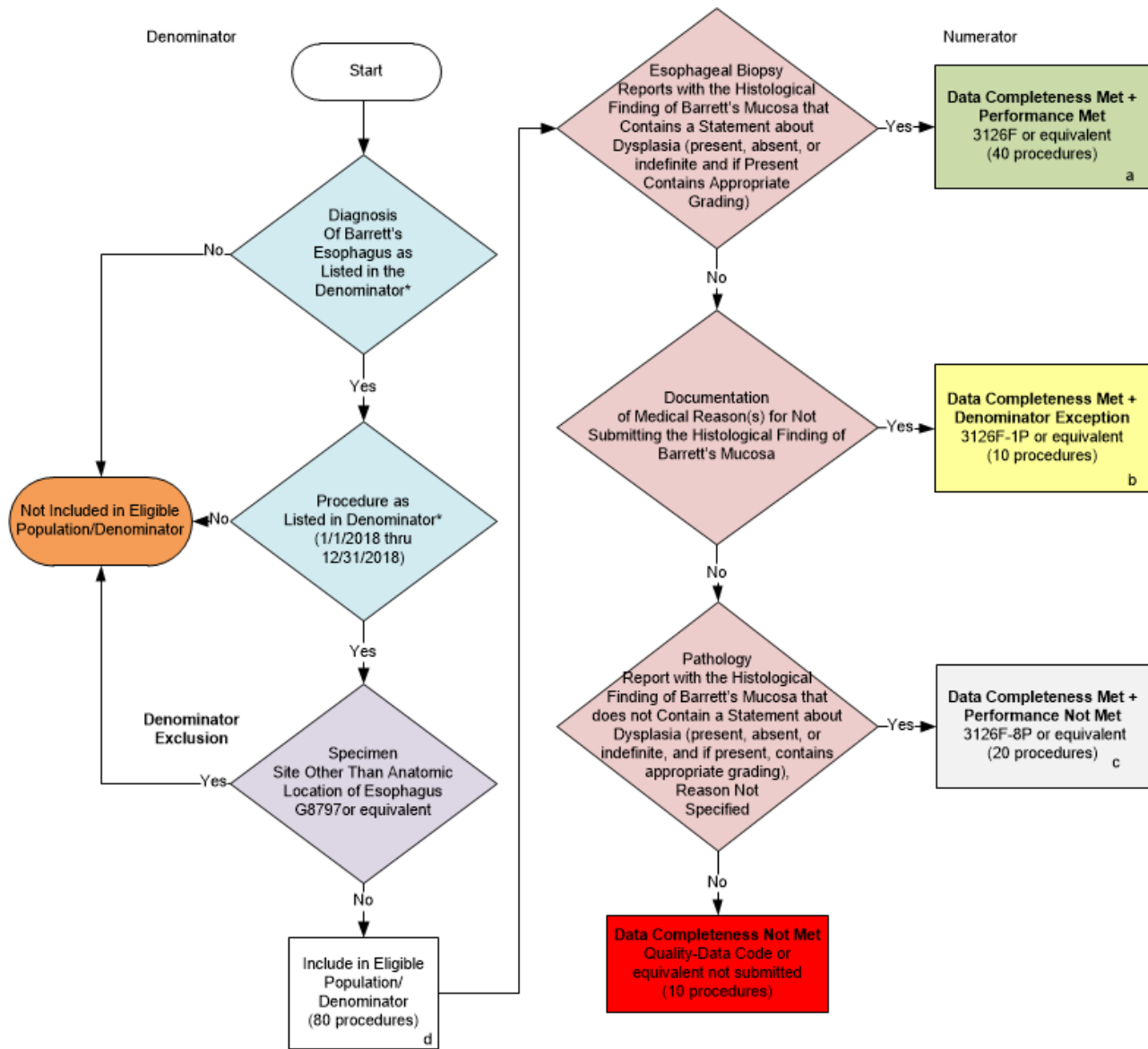
THE MEASURES ARE PROVIDED "AS IS" WITHOUT WARRANTY OF ANY KIND.

© 2007 and © 2012 College of American Pathologists. All Rights Reserved

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 College of American Pathologists disclaims 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 2004-2017 American Medical Association.

2018 Registry Flow for Quality ID #249 NQF #1854: Barrett's Esophagus



SAMPLE CALCULATIONS:

Data Completeness=

$$\frac{\text{Perf. Met (a=40 procedures)} + \text{Denominator Exception (b=10 procedures)} + \text{Perf. Not Met (c=20 procedures)}}{\text{Eligible Population / Denominator (d=80 procedures)}} = \frac{70 \text{ procedures}}{80 \text{ procedures}} = 87.50\%$$

Performance Rate=

$$\frac{\text{Performance Met (a=40 procedures)}}{\text{Data Completeness Numerator (70 procedures) - Denominator Exception (b=10 procedures)}} = \frac{40 \text{ procedures}}{60 \text{ procedures}} = 66.67\%$$

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

NOTE: Submission Frequency: Procedure

CPT only copyright 2017 American Medical Association. All rights reserved. The measure diagrams were developed by CMS as a supplemental resource to be used in conjunction with the measure specifications. They should not be used alone or as a substitution for the measure specification.

v2

**2018 Registry Flow for Quality ID
#249: NQF #1854: Barrett's Esophagus**

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.

1. Start with Denominator
2. Check Patient Diagnosis:
 - a. If Diagnosis of Barrett's Esophagus as Listed in the Denominator equals No, do not include in Eligible Patient Population. Stop Processing.
 - b. If Diagnosis of Barrett's Esophagus as Listed in the Denominator equals Yes, proceed to check Procedure Performed.
3. Check Procedure Performed:
 - a. If Procedure as Listed in the Denominator equals No, do not include in Eligible Patient Population. Stop Processing.
 - b. If Procedure as Listed in the Denominator equals Yes, proceed to Specimen Site other than Anatomic Location of Esophagus.
4. Check Specimen Site other than Anatomic Location of Esophagus:
 - a. If Specimen Site other than Anatomic Location of Esophagus equals Yes, do not include in Eligible Patient Population. Stop Processing.
 - b. If Specimen Site other than Anatomic Location of Esophagus equals No, include in the Eligible Population.
5. 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.
6. Start Numerator
7. Check Esophageal Biopsy Reports with the Histological Finding of Barrett's Mucosa that Contains a Statement about Dysplasia (present, absent, or indefinite and if Present Contains Appropriate Grading):
 - a. If Esophageal Biopsy Reports with the Histological Finding of Barrett's Mucosa that Contains a Statement about Dysplasia (present, absent, or indefinite and if Present Contains Appropriate Grading) 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 a equals 40 procedures in Sample Calculation.
 - c. If Esophageal Biopsy Reports with the Histological Finding of Barrett's Mucosa that Contains a Statement about Dysplasia (present, absent, or indefinite and if Present Contains Appropriate Grading) equals No, proceed to Documentation of Medical Reason(s) for Not Submitting the Histological Finding of Barrett's Mucosa.
8. Check Documentation of Medical Reason(s) for Not Submitting the Histological Finding of Barrett's Mucosa:

- a. If Documentation of Medical Reason(s) for Not Submitting the Histological Finding of Barrett's Mucosa 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 b equals 10 procedures in the Sample Calculation.
 - c. If Documentation of Medical Reason(s) for Not Submitting the Histological Finding of Barrett's Mucosa equals No, proceed to Pathology Report with the Histological Finding of Barrett's Mucosa that does not Contain a Statement about Dysplasia (present, absent, or indefinite, and if present, contains appropriate grading), Reason Not Specified.
9. Check Pathology Report with the Histological Finding of Barrett's Mucosa that does not Contain a Statement about Dysplasia (present, absent, or indefinite, and if present, contains appropriate grading), Reason Not Specified:
- a. If Pathology Report with the Histological Finding of Barrett's Mucosa that does not Contain a Statement about Dysplasia (present, absent, or indefinite, and if present, contains appropriate grading), Reason Not Specified 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 c equals 20 procedures in the Sample Calculation.
 - c. If Pathology Report with the Histological Finding of Barrett's Mucosa that does not Contain a Statement about Dysplasia (present, absent, or indefinite, and if present, contains appropriate grading), Reason Not Specified equals No, proceed to Data Completeness Not Met.
10. Check Data Completeness Not Met
- a. If Data Completeness Not Met equals No, Quality Data Code or equivalent not submitted. 10 procedures have been subtracted from Data Completeness Numerator in the Sample Calculation.

SAMPLE CALCULATIONS:

Data Completeness=

$$\frac{\text{Perf. Met (a=40 procedures) + Denominator Exception (b=10 procedures) + Perf. Not Met (c=20 procedures)}}{\text{Eligible Population / Denominator (d=80 procedures)}} = \frac{70 \text{ procedures}}{80 \text{ procedures}} = 87.50\%$$

Performance Rate=

$$\frac{\text{Performance Met (a=40 procedures)}}{\text{Data Completeness Numerator (70 procedures) – Denominator Exception (b=10 procedures)}} = \frac{40 \text{ procedures}}{60 \text{ procedures}} = 66.67\%$$