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

2018 OPTIONS FOR INDIVIDUAL MEASURES:
REGISTRY ONLY

MEASURE TYPE:
Process

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 each time a biopsy is performed during the performance period. It is anticipated that eligible clinicians providing the pathology services for procedures will submit this measure.

NOTE: To be eligible for this measure, the denominator and numerator criteria must be met during the performance period of 01/01/2018 to 12/24/2018. This is to provide sufficient time for the pathology results to be received by the biopsying clinician.

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 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, C44.112, C44.119, C44.121, C44.122, C44.129, C44.211, C44.212, C44.219, C44.221, C44.222, C44.229, C44.310, C44.311, C44.319, C44.320, C44.321, C44.329, C44.41, C44.42, CC44.510, 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, D04.11, D04.12, 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

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

AND NOT
DENOMINATOR EXCLUSION:
Pathologists/Dermatopathologists providing a second opinion on a biopsy: G9784

OR
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/dermatopathologist’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)

**OR**

**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, e.g., 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.

2018 Registry Flow for Quality ID #440 Basal Cell Carcinoma (BCC)/Squamous Cell Carcinoma: Biopsy Reporting Time – Pathologist to Clinician

SAMPLE CALCULATIONS:

Data Completeness:
- Performance Met (n=40 procedures) + Performance Not Met (n=30 procedures) = 70 procedures - 87.86%
- Eligible Population / Denominator (n=50 procedures) = 50 procedures

Performance Rate:
- Performance Met (n=40 procedures) = 40 procedures = 57.14%
- Data Completeness Numerator (n=70 procedures) = 70 procedures

* 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 measure to be used in conjunction with the measure specifications. They should not be used alone or as a substitution for the measure specifications.
2018 Registry 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. This flow is for registry data submission.

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 Patient 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 Encounter.

3. Check Patient Encounter:
   a. If Patient Encounter as Listed in Denominator equals No, do not include in Eligible Patient Population. Stop Processing.
   b. If Patient Encounter as Listed in Denominator equals Yes, proceed to check Denominator Exclusion Pathologist/Dermatopathologist Providing a Second Opinion on a Biopsy.

4. Check Denominator Exclusion, Pathologist/Dermatopathologist Providing a Second Opinion on a Biopsy:
   a. If Pathologist/Dermatopathologist Providing a Second Opinion on Biopsy equals Yes, do not include in Eligible Patient Population. Stop Processing.
   b. If Pathologist/Dermatopathologist Providing a Second Opinion on Biopsy equals No, proceed to check Denominator Pathologist/Dermatopathologist Is The Same Clinician Who Performed The Biopsy.

5. Check Denominator Exclusion, Pathologist/Dermatopathologist Is The Same Clinician Who Performed The Biopsy
   a. If Pathologist/Dermatopathologist Is The Same Clinician Who Performed The Biopsy, equals Yes, do not include in Eligible Patient Population. Stop Processing.
   b. If Pathologist/Dermatopathologist Is The Same Clinician Who Performed The Biopsy, equals No, include in Eligible Patient 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 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 by 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 by 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 by 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 to 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 to 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 to 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 and Performance Rate 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 to 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 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 the Data Completeness Numerator in the Sample Calculation.

   

   **SAMPLE CALCULATIONS:**

   **Data Completeness**

   \[
   \text{Data Completeness} = \frac{\text{Performance Met (a=40 procedures)} - \text{Performance Not Met (c=30 procedures)}}{\text{Eligible Population} / \text{Denominator (d=60 procedures)}} = \frac{70 \text{ procedures}}{90 \text{ procedures}} = 77.78% 
   \]

   **Performance Rate**

   \[
   \text{Performance Rate} = \frac{\text{Data Completeness Numerator (70 procedures)}}{\text{Data Completeness Met (a=40 procedures)}} = \frac{46 \text{ procedures}}{70 \text{ procedures}} = 57.44% 
   \]