Measure #225 (NQF 0509): Radiology: Reminder System for Screening Mammograms – National Quality Strategy Domain: Communication and Care Coordination

2016 PQRS OPTIONS FOR INDIVIDUAL MEASURES: CLAIMS, REGISTRY

DESCRIPTION:
Percentage of patients undergoing a screening mammogram whose information is entered into a reminder system with a target due date for the next mammogram

INSTRUCTIONS:
This measure is to be reported each time a screening mammogram is performed during the reporting period for patients seen during the reporting period. This measure is intended to reflect the quality of services provided for reminding patients when follow-up mammograms are due.

Measure Reporting via Claims:
ICD-10-CM diagnosis codes, CPT or HCPCS codes, and patient demographics are used to identify patients who are included in the measure’s denominator. CPT Category II codes are used to report the numerator of the measure.

When reporting the measure via claims, submit the appropriate ICD-10-CM diagnosis codes, CPT or HCPCS codes, and the appropriate CPT Category II code OR the CPT Category II code with the modifier. The modifier allowed for this measure is: 8P- reasons not otherwise specified. There are no allowable performance exclusions for this measure. All measure-specific coding should be reported on the claim(s) representing the eligible encounter.

Measure Reporting via Registry:
ICD-10-CM diagnosis codes, CPT or HCPCS codes, and patient demographics are used to identify patients who are included in the measure’s denominator. The listed numerator options are used to report the numerator of the measure.

The quality-data codes listed do not need to be submitted for registry-based submissions; however, these codes may be submitted for those registries that utilize claims data.

DENOMINATOR:
All patients undergoing a screening mammogram

Denominator Criteria (Eligible Cases):
All patients, regardless of age

AND

Diagnosis for mammogram screening (ICD-10-CM): Z12.31

AND

Patient encounter during the reporting period (CPT or HCPCS): 77057, G0202

NUMERATOR:
Patients whose information is entered into a reminder system with a target due date for the next mammogram

Numerator Instructions: The reminder system should be linked to a process for notifying patients when their next mammogram is due and should include the following elements at a minimum: patient identifier, patient contact information, dates(s) of prior screening mammogram(s) (if known), and the target due date for the next mammogram.

Numerator Quality-Data Coding Options for Reporting Satisfactorily:
Patient Information Entered into a Reminder System with Target Due Date for the Next Mammogram
**Performance Met: CPT II 7025F:**  
Patient information entered into a reminder system with a target due date for the next mammogram

**OR**

**Patient Information not Entered into a Reminder System for Medical Reasons**  
Append a reporting modifier (1P) to CPT Category II code 7025F to report circumstances when the action described in the numerator is not performed for medical reasons.  

**Medical Performance Exclusion: 7025F with 1P:**  
Documentation of medical reason(s) for not entering patient information into a reminder system [(eg, further screening mammograms are not indicated, such as patients with a limited life expectancy, other medical reason(s)]]

**OR**

**Patient Information not Entered into a Reminder System, Reason not Otherwise Specified**  
Append a reporting modifier (8P) to CPT Category II code 7025F to report circumstances when the action described in the numerator is not performed and the reason is not otherwise specified.

**Performance Not Met: 7025F with 8P:**  
Patient Information not entered into a reminder system, reason not otherwise specified

**RATIONALE:**
Although screening mammograms can reduce breast cancer mortality by 20-35% in women aged 40 years and older, recent evidence shows that only 72% of women are receiving mammograms based on current guideline recommendations. The use of patient reminders is associated with an increase in screening mammography. Encouraging the implementation of a reminder system could lead to an increase in mammography screening at appropriate intervals.

**CLINICAL RECOMMENDATION STATEMENTS:**
The Community Preventive Services Task Force recommends the use of client reminders to increase screening for breast and cervical cancers on the basis of strong evidence of effectiveness (CPSTF, 2010)

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2016 Claims/Registry Individual Measure Flow
PQRS #225  NQF # 0509: Radiology: Reminder System for Screening Mammograms

**Sample Calculations:**

**Reporting Rate**
\[
\text{Performance Met (a=4 procedures) + Performance Exclusion (b=1 procedure) + Performance Not Met (c=2 procedures) = 7 procedures, } \frac{87.50\%}{\text{Eligible Population / Denominator (d=6 procedures) = 8 procedures}}
\]

**Performance Rate**
\[
\text{Performance Met (a=4 procedures) - Performance Exclusion (b=1 procedure) = 4 procedures, } \frac{66.66\%}{\text{Reporting Numerator (7 procedures) - Performance Exclusion (b=1 procedure) = 6 procedures}}
\]

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

**NOTE:** Reporting Frequency: Procedure

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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.
2016 Claims/Registry Individual Measure Flow

PQRS #225 NQF #0509: Radiology: Reminder System for Screening Mammograms

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

1. Start with Denominator

2. Check Patient Age:
   a. If the All patients, Regardless of Age equals No during the measurement period, do not include in Eligible Patient Population. Stop Processing.
   b. If the All patient, Regardless of Age equals Yes during the measurement period, proceed to check Patient Diagnosis.

3. Check Patient Diagnosis:
   a. If Diagnosis for Mammogram Screening as Listed in the Denominator equals No, do not include in Eligible Patient Population. Stop Processing.
   b. If Diagnosis for Mammogram Screening as Listed in the Denominator equals Yes, proceed to check Encounter Performed.

4. 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, include in the Eligible population.

5. 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 8 procedures in the sample calculation.

6. Start Numerator

7. Check Patient Information Entered into a Reminder System with Target Due Date for the Next Mammogram:
   a. If Patient Information Entered into a Reminder System with Target Due Date for the Next Mammogram equals Yes, include in Reporting Met and Performance Met.
   b. Reporting Met and Performance Met letter is represented in the Reporting Rate and Performance Rate in the Sample Calculation listed at the end of this document. Letter a equals 4 procedures in Sample Calculation.
   c. If Patient Information Entered into a Reminder System with Target Due Date for the Next Mammogram equals No, proceed to Documentation of Medical Reason(s) for Not Entering Patient Information into a Reminder System.

8. Check Documentation of Medical Reason(s) for Not Entering Patient Information into a Reminder System:
a. If Documentation of Medical Reason(s) for Not Entering Patient Information into a Reminder System equals Yes, include in Reporting Met and Performance Exclusion.

b. Reporting Met and Performance Exclusion letter is represented in the Reporting Rate and Performance Rate in the Sample Calculation listed at the end of this document. Letter b equals 1 procedures in Sample Calculation.

c. If Documentation of Medical Reason(s) for Not Entering Patient Information into a Reminder System equals No, proceed to Patient Information Not Entered into a Reminder System, Reason Not Otherwise Specified.

9. Check Patient Information Not Entered into a Reminder System, Reason Not Otherwise Specified:

a. If Patient Information Not Entered into a Reminder System, Reason Not Otherwise Specified equals Yes, include in Reporting Met and Performance Not Met.

b. Reporting Met and Performance Not Met letter is represented in the Reporting Rate in the Sample Calculation listed at the end of this document. Letter c equals 2 procedures in the Sample Calculation.

c. If Patient Information Not Entered into a Reminder System, Reason Not Otherwise Specified equals No, proceed to Reporting Not Met.

10. Check Reporting Not Met

a. If Reporting Not Met equals No, Quality Data Code or equivalent not reported. 1 procedure has been subtracted from the reporting numerator in the sample calculation.

**SAMPLE CALCULATIONS:**

<table>
<thead>
<tr>
<th>Reporting Rate</th>
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