Quality ID #439: Age Appropriate Screening Colonoscopy
– National Quality Strategy Domain: Efficiency and Cost Reduction
– Meaningful Measure Area: Appropriate Use of Healthcare

2020 COLLECTION TYPE:
MIPS CLINICAL QUALITY MEASURES (CQMS)

MEASURE TYPE:
Efficiency – High Priority

DESCRIPTION:
The percentage of patients greater than 85 years of age who received a screening colonoscopy from January 1 to December 31

INSTRUCTIONS:
This measure is to be submitted **each time** a colonoscopy is performed for all patients during the performance period. There is no diagnosis associated with this measure. This measure may be submitted by Merit-based Incentive Payment System (MIPS) eligible clinicians who perform the quality actions described in the measure based on the services provided and the measure-specific denominator coding.

Measure Submission Type:
Measure data may be submitted by individual MIPS eligible clinicians, groups, or third party intermediaries. The listed denominator criteria are used to identify the intended patient population. The numerator options included in this specification are used to submit the quality actions as allowed by the measure. The quality-data codes listed do not need to be submitted by MIPS eligible clinicians, groups, or third party intermediaries that utilize this modality for submissions; however, these codes may be submitted for those third party intermediaries that utilize Medicare Part B claims data. For more information regarding Application Programming Interface (API), please refer to the Quality Payment Program (QPP) website.

DENOMINATOR:
Colonoscopy examinations performed on patients greater than 85 years of age during the encounter period

> **Denominator Criteria (Eligible Cases):**
> All patients greater than 85 years of age on date of encounter receiving a colonoscopy for screening purposes only
> **AND**
> **Patient encounter during the performance period (CPT or HCPCS):** 45378, 45380, 45381, 45384, 45385, G0121

NUMERATOR:
All patients greater than 85 years of age included in the denominator who did NOT have a history of colorectal cancer or a valid medical reason for the colonoscopy, including: iron deficiency anemia, lower gastrointestinal bleeding, Crohn's Disease (i.e. regional enteritis), familial adenomatous polyposis, Lynch Syndrome (i.e., hereditary non-polyposis colorectal cancer), inflammatory bowel disease, ulcerative colitis, abnormal findings of gastrointestinal tract, or changes in bowel habits. Colonoscopy examinations performed for screening purposes only

> **Numerator Instruction:** INVERSE MEASURE - A lower calculated performance rate for this measure indicates better clinical care or control. The "Performance Not Met" numerator option for this measure is the representation of the better clinical quality or control. Submitting that numerator option will produce a performance rate that trends closer to 0%, as quality increases. For inverse measures, a rate of 100% means all of the denominator eligible patients did not receive the appropriate care or were not in proper control.

Numerator Options:

Performance Met: Patients greater than 85 years of age who did not have a history of colorectal cancer or valid medical reason for the colonoscopy, including: iron deficiency anemia, lower gastrointestinal bleeding, Crohn's Disease (i.e., regional enteritis), familial adenomatous polyposis, Lynch Syndrome (i.e., hereditary non-polyposis colorectal cancer), inflammatory bowel disease, ulcerative colitis, abnormal finding of gastrointestinal tract, or changes in bowel habits **(G9659)**

OR

Performance Not Met: Documentation of medical reason(s) for a colonoscopy performed on a patient greater than 85 years of age (e.g., last colonoscopy incomplete, last colonoscopy had inadequate prep, iron deficiency anemia, lower gastrointestinal bleeding, Crohn's Disease (i.e., regional enteritis), familial history of adenomatous polyposis, Lynch Syndrome (i.e., hereditary non-polyposis colorectal cancer), inflammatory bowel disease, ulcerative colitis, abnormal finding of gastrointestinal tract, or changes in bowel habits) **(G9660)**

OR

Performance Not Met: Patients greater than 85 years of age who received a routine colonoscopy for a reason other than the following: an assessment of signs/symptoms of GI tract illness, and/or the patient is considered high risk, and/or to follow-up on previously diagnosed advance lesions **(G9661)**

RATIONALE:

The benefit of colorectal cancer screening for an individual patient is dependent on that patient's life expectancy and probability of harm from colonoscopy. Individuals over age 85 have an average life expectancy of less than 5 years [Cho Ann Intern Med. 2013; 59:667-676] and are at increased risk for colonoscopy-related complications [Ann Intern Med. 2009; 150:849-857].

The population of individuals 85 years and older is projected to double by 2050, hence, the clinical and economic effects of inappropriate performance of colorectal cancer screening in this age group can be expected to increase in the coming decade (Goodwin, 2011).

CLINICAL RECOMMENDATION STATEMENTS:

The USPSTF (2008) recommends three screening regimens for individuals 50-75 years of age with average risk:

- Annual high-sensitivity FOBT.
- Sigmoidoscopy every 5 years, combined with high-sensitivity fecal occult blood testing every 3 years.
- Optical colonoscopy every 10 years

For individuals from 76–85 years of age, the Task Force recommends against routine performance of screening unless individuals have not been previously screened, in which case it should be considered in the context of health status and competing risks for each individual (USPSTF, 2008).For individuals older than 85 years, the Task Force recommends against screening when comparing overall benefits to harms (D Recommendation) (USPSTF, 2008). The Task Force based these recommendations on a systematic review of the literature, supplemented with modeling data (USPSTF, 2008; NCI 2013; USCR, 2011).

For this subgroup, the Task Force concluded that the utility of screening is limited, given the time it takes for a polyp to develop into a clinically observable malignancy (10–26 years) (USPSTF, 2008; NCI 2013; USCR, 2011).

Moreover, individuals older than 85 are likely to have multiple comorbidities that influence any potential life-year gain (USPSTF, 2008; NCI 2013; USCR, 2011). They are also at increased risk of suffering from adverse events related to performance of a colonoscopy; with the rate of adverse events being 2.8 per 1,000 procedures and increased by seven-fold if a polypectomy is performed (USPSTF, 2008; CDC 2012; NCI, 2013).
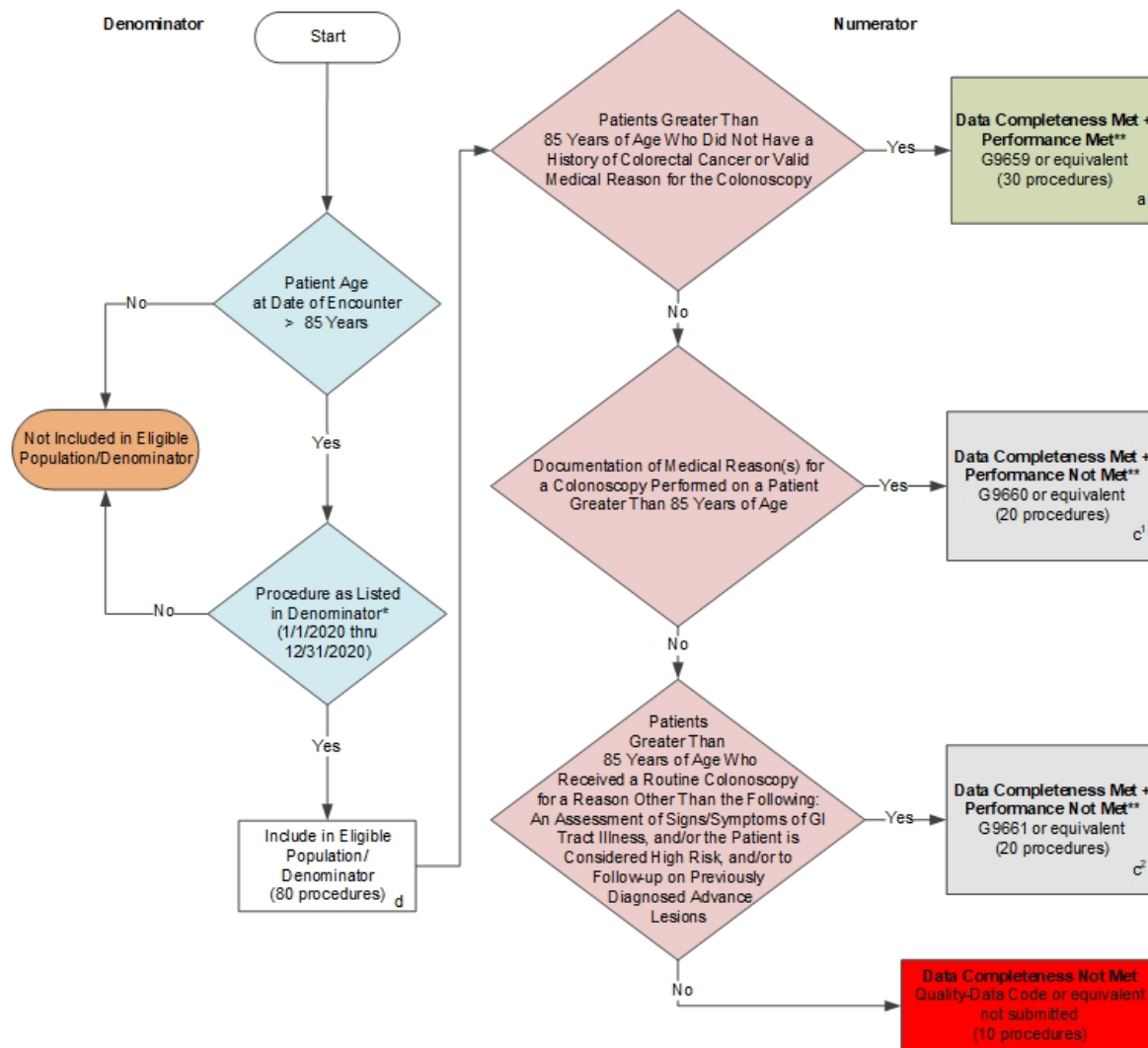
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2020 Clinical Quality Measure Flow for Quality ID #439:
Age Appropriate Screening Colonoscopy

Disclaimer: Refer to the measure specification for specific coding and instructions to submit this measure.

SAMPLE CALCULATIONS:

Data Completeness=

$$\frac{\text{Performance Met (a=30 procedures) + Performance Not Met (}c^1+c^2=40\text{ procedures)}}{\text{Eligible Population / Denominator (d=80 procedures)}} = \frac{70 \text{ procedures}}{80 \text{ procedures}} = 87.50\%$$

Performance Rate=

$$\frac{\text{Performance Met (a=30 procedures)}}{\text{Data Completeness Numerator (70 procedures)}} = \frac{30 \text{ procedures}}{70 \text{ procedures}} = 42.86\%$$

* See the posted measure specification for specific coding and instructions to submit this measure.
**A lower calculated performance rate for this measure indicates better clinical care or control.
NOTE : Submission 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.

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2020 Clinical Quality Measure Flow Narrative for Quality ID #439:
Age Appropriate Screening Colonoscopy

Disclaimer: Refer to the measure specification for specific coding and instructions to submit this measure.

1. Start with Denominator

2. Check Patient Age:

   a. If Patient Age at Date of Encounter is greater than 85 Years equals No during the measurement period, do not include in Eligible Population. Stop Processing.

   b. If Patient Age at Date of Encounter is greater than 85 Years equals Yes during the measurement period, proceed to check Patient Procedure.

3. Check Procedure Performed:

   a. If Procedure as Listed in Denominator equals No, do not include in Eligible Population. Stop Processing.

   b. If Procedure as Listed in Denominator equals Yes, include in Eligible Population.

4. 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.

5. Start Numerator

6. Check Patients Greater Than 85 Years of Age Who Did Not Have a History of Colorectal Cancer or Valid Medical Reason for the Colonoscopy:

   a. If Patients Greater Than 85 Years of Age Who Did Not Have a History of Colorectal Cancer or Valid Medical Reason for the Colonoscopy 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 30 procedures in Sample Calculation.

   c. If Patients Greater Than 85 Years of Age Who Did Not Have a History of Colorectal Cancer or Valid Medical Reason for the Colonoscopy equals No, proceed to check Documentation of Medical Reason(s) for a Colonoscopy Performed on a Patient Greater Than 85 Years of Age.

7. Check Documentation of Medical Reason(s) for a Colonoscopy Performed on a Patient Greater Than 85 Years of Age:

   a. If Documentation of Medical Reason(s) for a Colonoscopy Performed on a Patient Greater Than 85 Years of Age equals Yes, include in Data Completeness Met and Performance Not Met.

    b.   Data Completeness Met and Performance Not Met is represented as Data Completeness in the Sample Calculation listed at the end of this document. Letter c^1 equals 20 procedures in the Sample Calculation.

    c.   If Documentation of Medical Reason(s) for a Colonoscopy Performed on a Patient Greater Than 85 Years of Age equals No, proceed to check Patients Greater Than 85 Years of Age Who Received a Routine Colonoscopy for a Reason Other Than the Following: An Assessment of Signs/Symptoms of GI Tract Illness, and/or the Patient is Considered High Risk, and/or to Follow-up on Previously Diagnosed Advance Lesions.

8.   Check Patients Greater Than 85 Years of Age Who Received a Routine Colonoscopy for a Reason Other Than the Following: An Assessment of Signs/Symptoms of GI Tract Illness, and/or the Patient is Considered High Risk, and/or to Follow-up on Previously Diagnosed Advance Lesions:

    a.   If Patients Greater Than 85 Years of Age Who Received a Routine Colonoscopy for a Reason Other Than the Following: An Assessment of Signs/Symptoms of GI Tract Illness, and/or the Patient is Considered High Risk, and/or to Follow-up on Previously Diagnosed Advance Lesions equals Yes, include in Data Completeness Met and Performance Not Met.

    b.   Data Completeness Met and Performance Not Met is represented as Data Completeness in the Sample Calculation listed at the end of this document. Letter c^2 equals 20 procedures in the Sample Calculation.

    c.   Patients Greater Than 85 Years of Age Who Received a Routine Colonoscopy for a Reason Other Than the Following: An Assessment of Signs/Symptoms of GI Tract Illness, and/or the Patient is Considered High Risk, and/or to Follow-up on Previously Diagnosed Advance Lesions equals No, proceed to check Data Completeness Not Met.

9.   Check Data Completeness Not Met:

    a.   If Data Completeness Not Met, the Quality Data Code or equivalent was not submitted. 10 procedures have been subtracted from the Data Completeness Numerator in the Sample Calculation.

<u>SAMPLE CALCULATIONS:</u>

Data Completeness=

$$\frac{\text{Performance Met (a=30 procedures) + Performance Not Met } (c^1+c^2 \text{=40 procedures})}{\text{Eligible Population / Denominator (d=80 procedures)}} = \frac{70 \text{ procedures}}{80 \text{ procedures}} = 87.50\%$$

Performance Rate=

$$\frac{\text{Performance Met (a=30 procedures)}}{\text{Data Completeness Numerator (70 procedures)}} = \frac{30 \text{ procedures}}{70 \text{ procedures}} = 42.86\%$$