Measure #263: Preoperative Diagnosis of Breast Cancer – National Quality Strategy Domain: Effective Clinical Care

2017 OPTIONS FOR INDIVIDUAL MEASURES:
REGISTRY ONLY

MEASURE TYPE:
Process

DESCRIPTION:
The percent of patients undergoing breast cancer operations who obtained the diagnosis of breast cancer preoperatively by a minimally invasive biopsy method

INSTRUCTIONS:
This measure is to be reported each time a patient aged 18 and older undergoes a breast cancer operation. This measure may be reported by eligible clinicians who perform the quality actions described in the measure based on the services provided and the measure-specific denominator coding.

Measure Reporting:
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-based submissions; however, these codes may be submitted for those registries that utilize claims data.

DENOMINATOR:
The number of patients aged 18 years and older on date of encounter undergoing breast cancer operations

> Denominator Criteria (Eligible Cases):
> Patients aged 18 and older on date of encounter
> AND
> Diagnosis for Female/Male Breast Cancer (ICD-10-CM): C50.011, C50.012, C50.019, C50.021, C50.022, C50.029, C50.111, C50.112, C50.119, C50.121, C50.122, C50.129, C50.211, C50.212, C50.219, C50.221, C50.222, C50.229, C50.311, C50.312, C50.319, C50.321, C50.322, C50.329, C50.411, C50.412, C50.419, C50.421, C50.422, C50.429, C50.511, C50.512, C50.519, C50.521, C50.522, C50.529, C50.611, C50.612, C50.619, C50.621, C50.622, C50.629, C50.811, C50.812, C50.819, C50.821, C50.822, C50.829, C50.911, C50.912, C50.919, C50.921, C50.922, C50.929, C79.81, D05.11, D05.12
> AND
> Patient encounter during the **performance period** (CPT): 19301, 19302, 19303, 19307
> AND NOT
> DENOMINATOR EXCLUSION:
> Minimally Invasive Biopsy Method attempted but not diagnostic of Breast Cancer (e.g., High Risk Lesion of Breast such as atypical ductal hyperplasia, lobular neoplasia, atypical lobular hyperplasia, lobular carcinoma in situ, atypical columnar hyperplasia, flat epithelial atypia, radial scar, complex sclerosing lesion, papillary lesion, or any lesion with spindle cells): G8946

NUMERATOR:
The number of patients aged 18 and older undergoing breast cancer operations who had breast cancer diagnosed preoperatively by a minimally invasive biopsy

> Definition:
> Minimally invasive biopsy methods – Includes fine needle aspiration, percutaneous core needle biopsy, percutaneous automated vacuum assisted rotating biopsy device, skin biopsy, skin shave or punch biopsy

Numerator Options:

Performance Met: Clinician diagnosed breast cancer preoperatively by a minimally invasive biopsy method (G8875)

OR

Denominator Exception: Documentation of reason(s) for not performing minimally invasive biopsy to diagnose breast cancer preoperatively (e.g., lesion too close to skin, implant, chest wall, etc., lesion could not be adequately visualized for needle biopsy, patient condition prevents needle biopsy [weight, breast thickness, etc.], duct excision without imaging abnormality, prophylactic mastectomy, reduction mammoplasty, excisional biopsy performed by another physician) (G8876)

OR

Performance Not Met: Clinician did not attempt to achieve the diagnosis of breast cancer preoperatively by a minimally invasive biopsy method, reason not given (G8877)

RATIONALE:

The preoperative diagnosis of breast cancer by minimally invasive methods is recommended by the American Society of Breast Surgeons, the National Comprehensive Cancer Network, the European Society of Breast Cancer Specialists, the American College of Radiology, a recent consensus conference on image detected breast cancer, and a panel of experts who conducted a comparative effectiveness study of needle biopsy compared to open biopsy that was funded by Agency for Healthcare Research and Quality (AHRQ).

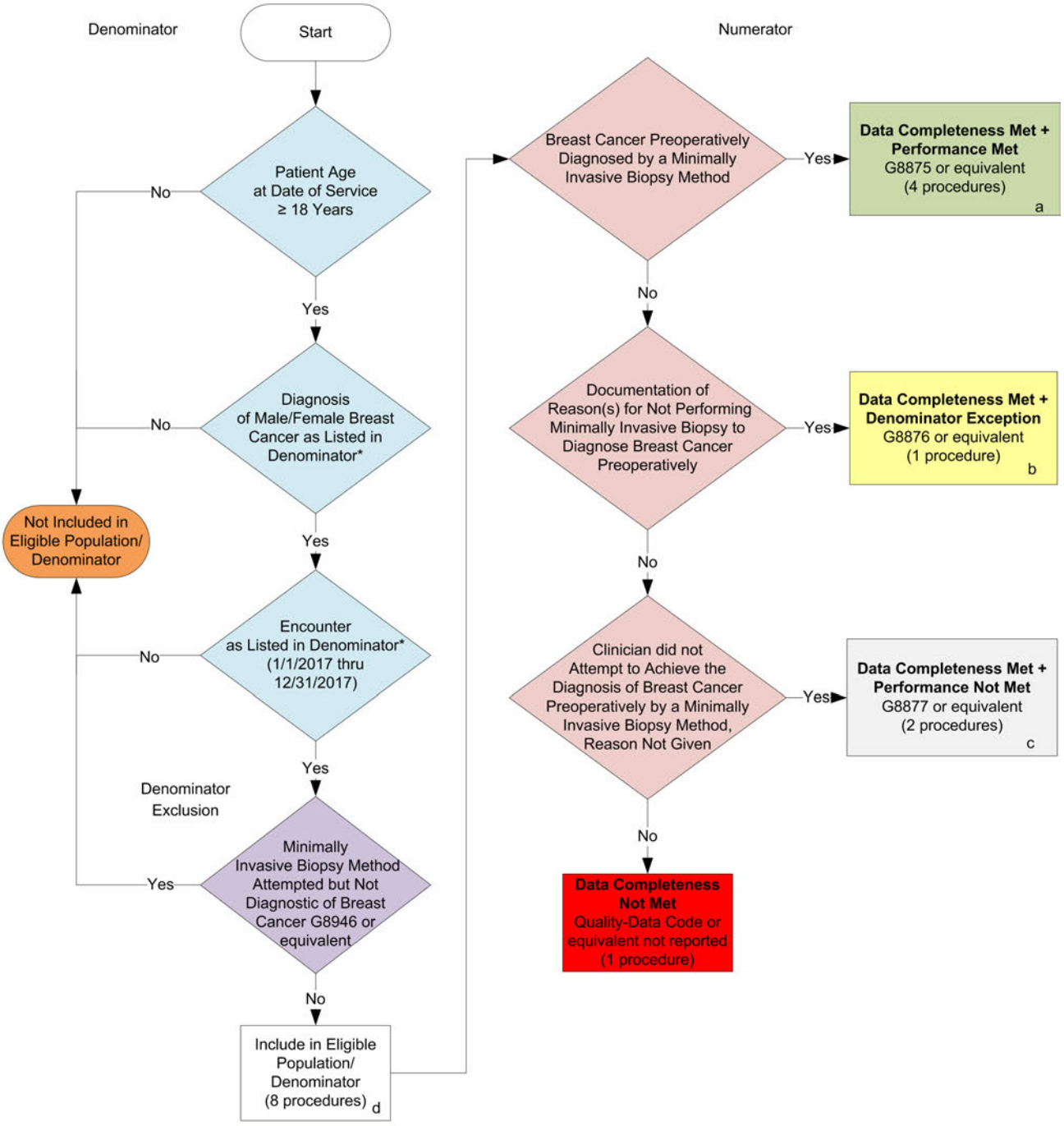
The policy of attempting to diagnose breast cancer by needle techniques has also been incorporated into quality measurement programs developed by the American Society of Breast Surgeons and the National Consortium of Breast Centers. (The American Society of Breast Surgeons, 2006)

The advantages of preoperative cancer diagnosis by minimally invasive method include the patient centered measures of a smaller scar, good cosmesis, timeliness, and good pain control. Other advantages include a greater likelihood of achieving negative lumpectomy surgical margins and allowing concurrent scheduling of axillary lymph node surgery, reducing the number of operations required to treat breast cancer.

CLINICAL RECOMMENDATION STATEMENTS:

A major goal of modern breast medicine is to minimize the number of patients with benign lesions who undergo open surgical breast biopsies for diagnosis. Image guided percutaneous needle biopsy is the diagnostic procedure of choice for image-detected breast abnormalities. Patients with a clearly palpable breast mass should also have a minimally invasive percutaneous biopsy with or without image guidance depending on the size of the mass. (The American Society of Breast Surgeons, 2006) It is not possible to achieve a 100% success rate for the diagnosis of breast cancer by a minimally invasive technique due to some technical issues described above or sampling issues with high risk lesions of the breast.

2017 Registry Individual Measure Flow
#263: Preoperative Diagnosis of Breast Cancer



SAMPLE CALCULATIONS:

Data Completeness=

Performance Met (a=4 procedures) + Denominator Exception (b=1 procedure) + Performance Not Met (c=2 procedures) = 7 procedures = **87.50%**
Eligible Population / Denominator (d=8 procedures) = 8 procedures

Performance Rate=

Performance Met (a=4 procedures) = 4 procedures = **66.67%**
Data Completeness Numerator (7 procedures) – Denominator Exception (b=1 procedure) = 6 procedures

*See the posted Measure Specification for specific coding and instructions to report this measure.
NOTE: Reporting Frequency: Procedure

v1

2017 Registry Individual Measure Flow
#263: Preoperative Diagnosis of Breast Cancer

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 Age is greater than or equal 18 years of age on Date of Service and equals No during the measurement period, do not include in Eligible Patient Population. Stop Processing.
    b. If the Age is greater than or equal to 18 years of age on Date of Service and equals Yes during the measurement period, proceed to check Patient Diagnosis.
3. Check Patient Diagnosis:
    a. If Diagnosis of Male/Female Breast Cancer as Listed in Denominator equals No, do not include in Eligible Patient Population. Stop Processing.
    b. If Diagnosis of Male/Female Breast Cancer as Listed in 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, proceed to Denominator Exclusion.
5. Check Denominator Exclusion:
    a. If Denominator Exclusion as listed equals Yes, do not include in Eligible Denominator Patient Population. Stop Processing.
    b. If Denominator Exclusion as listed equals No, proceed to Eligible Denominator 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 8 procedures in the sample calculation.
7. Start Numerator
8. Check Breast Cancer Preoperatively Diagnosed by a Minimally Invasive Biopsy Method:
    a. If Breast Cancer Preoperatively Diagnosed by a Minimally Invasive Biopsy Method 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 4 procedures in Sample Calculation.

c. If Breast Cancer Preoperatively Diagnosed by a Minimally Invasive Biopsy Method equals No, proceed to Documentation of Reason(s) for Not Performing Minimally Invasive Biopsy to Diagnose Breast Cancer Preoperatively.

9. Check Documentation of Reason(s) for Not Performing Minimally Invasive Biopsy to Diagnose Breast Cancer Preoperatively:

   a. If Documentation of Reason(s) for Not Performing Minimally Invasive Biopsy to Diagnose Breast Cancer Preoperatively 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 1 procedures in the Sample Calculation.

   c. If Documentation of Reason(s) for Not Performing Minimally Invasive Biopsy to Diagnose Breast Cancer Preoperatively equals No, proceed to Clinician did Not Attempt to Achieve the Diagnosis of Breast Cancer Preoperatively by a Minimally Invasive Biopsy Method, Reason Not Given.

10. Check Clinician did Not Attempt to Achieve the Diagnosis of Breast Cancer Preoperatively by a Minimally Invasive Biopsy Method, Reason Not Given:

    a. If to Clinician did Not Attempt to Achieve the Diagnosis of Breast Cancer Preoperatively by a Minimally Invasive Biopsy Method, Reason Not Given 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 2 procedures in the Sample Calculation.

    c. If Clinician did Not Attempt to Achieve the Diagnosis of Breast Cancer Preoperatively by a Minimally Invasive Biopsy Method, Reason Not Given equals No, proceed to Data Completeness Not Met

11. Check Data Completeness Not Met:

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

SAMPLE CALCULATIONS:

Data Completeness=

$$\frac{\text{Performance Met (a=4 procedures) + Denominator Exception (b=1 procedure) + Performance Not Met (c=2 procedures)}}{\text{Eligible Population / Denominator (d=8 procedures)}} = \frac{\text{7 procedures}}{\text{8 procedures}} = \mathbf{87.50\%}$$

Performance Rate=

$$\frac{\text{Performance Met (a=4 procedures)}}{\text{Data Completeness Numerator (7 procedures) – Denominator Exception (b=1 procedure)}} = \frac{\text{4 procedures}}{\text{6 procedures}} = \mathbf{66.67\%}$$