Quality ID #397: Melanoma Reporting – National Quality Strategy Domain: Communication and Care Coordination

2018 OPTIONS FOR INDIVIDUAL MEASURES:
CLAIMS ONLY

MEASURE TYPE:
Outcome

DESCRIPTION:
Pathology reports for primary malignant cutaneous melanoma that include the pT category and a statement on thickness and ulceration and for pT1, mitotic rate

INSTRUCTIONS:
This measure is to be submitted each time a patient’s pathology report addresses specimens with a diagnosis of malignant cutaneous melanoma; however, only one quality-data code (QDC) 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 quality-data codes included in this specification are used to submit the quality actions allowed by the measure. All measure-specific coding should be submitted on the claim(s) representing the eligible encounter.

DENOMINATOR:
All melanoma pathology reports for primary malignant cutaneous melanoma

Denominator Criteria (Eligible Cases):
Patients ≥ 18 years of age on date of encounter
AND
Diagnosis for malignant cutaneous melanoma (ICD-10-CM): C43.0, C43.20, C43.21, C43.22, C43.30, C43.31, C43.39, C43.4, C43.51, C43.52, C43.59, C43.60, C43.61, C43.62, C43.70, C43.71, C43.72, C43.8, C43.9
AND
Patient procedure during performance period (CPT): 88305

NUMERATOR:
Pathology reports for primary malignant cutaneous melanoma that include the pT category and a statement on thickness and ulceration and for pT1, mitotic rate

Numerator Quality-Data Coding Options:
If Patient is not Eligible for this Measure because the Specimen is not of Cutaneous Origin
Denominator Exclusion: G9430: Specimen site other than anatomic cutaneous location

OR
Pathology Reports that Include the pT Category and a Statement on Thickness and Ulceration and for pT1, mitotic rate
Performance Met: G9428: Pathology report includes the pT Category and a statement on thickness and ulceration and for pT1, mitotic rate

OR
Pathology Reports that does not Include the pT Category and a Statement on Thickness and Ulceration and for pT1, mitotic rate, not Documented for Medical Reasons

**Denominator Exception: G9429:**

Documentation of medical reason(s) for not including pT Category and a statement on thickness and ulceration and for pT1, mitotic rate (e.g., negative skin biopsies in a patient with a history of melanoma or other documented medical reasons)

OR

Pathology Reports that does not Include the pT Category and a Statement on Thickness and Ulceration and for pT1, mitotic rate, Reason not given

**Performance Not Met: G9431:**

Pathology report does not include the pT Category and a statement on thickness and ulceration and for pT1, mitotic rate

**RATIONALE:**

In the evidence-based derivation of the 2010 AJCC staging system, mitotic rate greater than or equal to 1 per mm² was independently associated with worse disease-specific survival, especially in patients with melanoma less than or equal to 1.0 mm thick. As such, mitotic rate has replaced Clark level as a criterion for upstaging patients with melanomas less than or equal to 1.0 mm in thicknesses from IA to IB.

Until now, routine histopathologic reporting of primary melanomas has infrequently included an assessment of mitotic rate. Even in a geographic area with a high melanoma incidence, such as Queensland, Australia, fewer than 50% of pathology reports on primary melanomas documented mitotic rate in a recent study assessing the completeness of histopathologic reporting of melanoma. Similarly, in another recently published study undertaken at the H. Lee Moffitt Cancer Center in Florida, 47% of outside pathology reports for patients with thin (≤1 mm) or in situ melanoma did not mention mitotic rate. Moreover, clinicians involved in the care of patients with primary melanomas have not generally considered mitotic rate as an important factor to be considered when discussing prognosis with patients and planning their treatment.

In addition to the specific gap noted above, recent research and the publication of new guidelines in 2012 indicate newer tumor characteristics for more precise staging with implications for treatment outcomes. For these reasons, we believe there is a gap in reporting of these new characteristics in melanoma pathology reports. (CAP Performance Measures Working Group)


**CLINICAL RECOMMENDATION STATEMENTS:**

In patients with localized melanoma (Stage I or II), Breslow tumor thickness, ulceration and mitotic rate are the three most important characteristics of the primary tumor predicting outcome.

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2018 Claims Flow for Quality ID
#397: Melanoma Reporting

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 claims data submission.

1. Start with Denominator

2. Check Patient Age:
   a. If the Age is greater than or equal to 18 years of age at 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 at Date of Service and equals Yes during the measurement period, proceed to check Patient Diagnosis.

3. Check Patient Diagnosis:
   a. If Diagnosis of Malignant Cutaneous Melanoma as Listed in the Denominator equals No, do not include in Eligible Patient Population. Stop Processing.
   b. If Diagnosis of Malignant Cutaneous Melanoma as Listed in the Denominator equals Yes, proceed to check Procedure Performed.

4. Check Procedure Performed:
   a. If Procedure as Listed in Denominator equals No, do not include in Eligible Patient Population. Stop Processing.
   b. If Procedure as Listed in 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 80 procedures in the Sample Calculation.

6. Start Numerator

7. Check Specimen Site Other than Anatomic Cutaneous Location:
   a. If Specimen Site Other than Anatomic Cutaneous Location equals Yes, include in the Data Completeness Met and Denominator Exclusion.
   b. Data Completeness Met and Patient Denominator Exclusion letter is represented in the Data Completeness and Performance Rate in the Sample Calculation listed at the end of this document. Letter x equals 0 procedures in the Sample Calculation.
   c. If Specimen Site Other than Anatomic Cutaneous Location equals No, proceed to Pathology Report Includes the pT Category and a Statement on Thickness and Ulceration for pT1 Mitotic Rate.

8. Check Pathology Report Includes the pT Category and a Statement on Thickness and Ulceration for pT1 Mitotic Rate:
   a. If Pathology Report Includes the pT Category and a Statement on Thickness and Ulceration for pT1 Mitotic Rate 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 Pathology Report Includes the pT Category and a Statement on Thickness and Ulceration for pT1 Mitotic Rate equals No, proceed to Documentation of Medical Reasons for Not including pT Category and a Statement on Thickness and Ulceration and for pT1 Mitotic Rate.

9. Check Documentation of Medical Reasons for Not including pT Category and a Statement on Thickness and Ulceration and for pT1 Mitotic Rate:

a. If Documentation of Medical Reasons for Not including pT Category and a Statement on Thickness and Ulceration and for pT1 Mitotic Rate equals Yes, include in the 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 Reasons for Not including pT Category and a Statement on Thickness and Ulceration and for pT1 Mitotic Rate equals No, proceed to Pathology Report Does Not Include the pT Category and a Statement on Thickness and Ulceration and for pT1 Mitotic Rate.

10. Pathology Report Does Not Include the pT Category and a Statement on Thickness and Ulceration and for pT1, Mitotic Rate:

a. If Pathology Report Does Not Include the pT Category and a Statement on Thickness and Ulceration and for pT1, Mitotic Rate equals Yes, include in 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 Does Not Include the pT Category and a Statement on Thickness and Ulceration and for pT1, Mitotic Rate equals No, proceed to Data Completeness Not Met.

11. 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.

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**SAMPLE CALCULATIONS:**

- **Data Completeness:**
  - Denominator Exclusion \( x(10 \text{ procedures}) \)
  - Performance Met \( y(40 \text{ procedures}) \)
  - Denominator Exception \( b(10 \text{ procedures}) \)
  - Performance Not Met \( c(20 \text{ procedures}) \)
  - Eligible Population \( = 70 \text{ procedures} \)
  - Denominator \( = 60 \text{ procedures} \)

- **Performance Rate:**
  - Performance Met \( y(40 \text{ procedures}) \)
  - Performance Not Met \( c(20 \text{ procedures}) \)
  - Data Completeness Numerator \( = 50 \text{ procedures} \)
  - Denominator Exclusion \( x(10 \text{ procedures}) \)
  - Denominator Exception \( b(10 \text{ procedures}) \)
  - Denominator \( = 60 \text{ procedures} \)

- **Results:**
  - Data Completeness Met and Performance Met = 40 procedures = 66.67%
  - Data Completeness Met and Denominator Exception = 10 procedures = 16.67%
  - Data Completeness Met and Performance Not Met = 20 procedures = 33.33%
  - Data Completeness Not Met = 10 procedures