ASCP NPQR

NATIONAL PATHOLOGY QUALITY REGISTRY

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Harness Your Lab Data to Improve Patient Care and Fulfill CMS Requirements

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Discover How Your Lab Could Benefit from NPQR

The National Pathology Quality Registry (NPQR) is a national quality and benchmarking program led by the American Society for Clinical Pathology (ASCP). NPQR captures data that measure adherence to clinical practice guideline recommendations, quality and performance standards, and appropriate utilization of laboratory testing. NPQR has been recognized by the Centers for Medicare and Medicaid Services (CMS) for the second year in a row and granted renewed Qualified Clinical Data Registry (QCDR) status for 2019, meaning pathologists and laboratories can harness their laboratory data to both improve patient care and fulfill 2019 MIPS requirements.

ENSURING
patient safety through comprehensive education

MONITORING
appropriate utilization of laboratory testing

IMPROVING
pre-analytical processes

ESTABLISHING
best practices through national and peer group comparisons

OPTIMIZING
turnaround time and critical value reporting

ASSESSING
analytical and diagnostic accuracy

PARTICIPATING
in pay-for-performance programs to meet CMS requirements

CONFIRMING
credentialing and professional regulatory standards

Quick Program Facts

Developed as a tool for pathologists and laboratory professionals to promote best practices within laboratory medicine, this tool will also benefit our clinical colleagues and ultimately improve patient care.

Designed with laboratory information system providers, the Registry supports integration with multiple LIS and includes quality and performance measures spanning the categories outlined above.

For more information, contact Ali Brown, MD, FASCP, Chief Officer, Medical Quality, at **NPQR@ascp.org**

NPQR Performance Measures

Below is a sample of the quality and performance measures included in NPQR version 1. Additional topics and measures will be included in future releases of the registry.

Appropriate Use Measures

1. **Notification To The Ordering Provider Requesting Myoglobin Or CK-MB In The Diagnosis Of Suspected Acute Myocardial Infarction (AMI).**

   Measure Description: Percentage of ordering providers who have ordered a Myoglobin or CK-MB for greater than 10% of the patients who have a diagnosis of suspected AMI, that were informed by the laboratory these tests are not beneficial for patients with a diagnosis of suspected AMI.

2. **Notification to the Ordering Provider Requesting Amylase Testing in the Diagnosis of Suspected Acute Pancreatitis**

   Measure Description: Percentage of ordering providers who ordered an amylase test in greater than 10% of their patients for the evaluation of a patient with acute pancreatitis, who were informed by the laboratory this test is not beneficial for the diagnosis of pancreatitis.

Pre-Analytical Measures

1. **Test Not Performed or Results Canceled**

   Measure Description: The percentage of tests that were not performed or results not available due to any of the following reasons: inadequate container, inappropriate volume, and others.

2. **Test Not Reordered After Cancellation Due to Pre-Analytical Issue or Error**

   Measure Description: Percentage of tests that were reordered as a result of that test not being performed or results not available due to any of the following reasons: inadequate container, and others. (within 24 hours inpatient and within 60 days outpatient)

Critical Value Reporting and Turnaround Time Measures

1. **Time Interval: Sample Received to Results Verified (Clinical Pathology)**

   Measure Description: Time interval of tests recorded from time received until results verified.

2. **Time Interval: Critical Value Reporting**

   Measure Description: Measurement of the time interval beginning with the time results are verified until the critical value is reported.

Diagnostic Accuracy and Anatomic Pathology Turnaround Time Measures

1. **Total Discrepancies Overall Rate**

   Measure Description: Rate of major and minor discrepancies per overall cases evaluated.

2. **Major (Only) Discrepancy Rate**

   Measure Description: Rate of major discrepancies per overall cases evaluated.

Qualified Clinical Data Registry Measures

1. **Rate of Cytopathology Case Review**

   Measure Description: Rate of retrospective review for all cytopathology cases.

2. **Rate of Notification to Clinical Provider of a New Diagnosis of Malignancy**

   Measure Description: The rate of reporting to a responsible clinical provider from the pathologist when there is a new diagnosis of malignancy (other than squamous or basal cell carcinoma of the skin) from a pathology specimen.

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FREQUENTLY ASKED QUESTIONS

Why is NPQR needed?

The NPQR planning process revealed that among laboratories and institutions, there is a need for a guidelines-driven, national quality measurement platform.

Who participated in the design of NPQR?

NPQR is designed with guidance from your peers. An ASCP-appointed NPQR Registry Steering Committee, along with input from several task forces focusing on specific clinical focus areas, has been designing the first version of the Registry. The planning phase of NPQR included interviews with stakeholders, surveys of ASCP membership priorities, and additional research.

Who can participate?

Any US-based clinical pathology (CP), anatomic pathology (AP), or combined AP/CP laboratory can participate in the program. Laboratories can participate individually, or as part of a hospital system, reference lab network, or other group entity.

How will the Registry benefit physicians who participate?

NPQR provides pathologists and laboratory professionals with guidelines-driven performance measurement, benchmarking, and quality improvement capabilities. It enables laboratories to identify areas for improvement, participate in government-required pay for performance programs, integrate results into educational programs, and measure appropriate utilization of laboratory testing.

Do I need to manually enter data, or can I use automated feeds from my existing laboratory systems?

In order to minimize manual data entry, ASCP is working with laboratory systems vendors to integrate the Registry directly in their products. Additionally, laboratories that wish to connect their lab systems using their existing information technology capabilities have the option to do so.

What reports and other features does NPQR provide?

The Registry provides participants with standard reports as well as interactive dashboards that allow laboratories to analyze their performance across tests, indications, responsible staff, and other dimensions.

Is the data my laboratory provides secure and/or anonymous?

Yes, NPQR is compliant with the Health Information Portability and Accountability Act of 1996 (HIPAA) and Health Information Technology for Economic and Clinical Health (HITECH) Act.

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