CMS Measure ID/CMS QCDR ID: CAP 22
Measure Title: Biopsy Reporting Time to Clinician

Measure Specifications

Measure Description	Percentage of final pathology reports for biopsies that meet the maximum 2 business day turnaround time (TAT) requirement (Report Date – Accession Date ≤ 2 business days).
Denominator Statement	All final pathology reports for patients, regardless of age, who undergo a biopsy -Any biopsy (i.e., CPT®[1]: 88305, HCPCS: G0416, G0417, G0418, G0419), The denominator must be met between 01/01 and 12/26 of the performance year. This is to provide sufficient time for the performance of the numerator to be met and documented within the performance period.
Denominator Exclusions	1. Biopsy associated with any other specimen type (i.e., CPT©: 88304, 88307, 88309). 2. Cytopathology cases (i.e., Cell blocks) (CPT©: 88173, 88112, 88108). 3. Cases requiring decalcification (CPT©: 88311). 4. Cases whose turnaround time is captured by other measures: biopsies for gastritis and urinary bladder carcinoma (ICD-10 K29.30, K29.31, K29.40, K29.41, K29.50, K29.51, K29.60, K29.61, K29.70, K29.71, C67.0, C67.1, C67.2, C67.3, C67.4, C67.5, C67.6, C67.8, C67.9)
Denominator Exceptions	1. Cases requiring intra-departmental or extra-departmental consultation. 2. Wide excisions, re-excisions or skin excisions with margins coded as 88305
Numerator Statement	Final pathology reports for biopsies in the laboratory/hospital information system with result verified and reported by the laboratory, available to the requesting physician(s) within 2 business days.
Numerator Exclusions	None
Guidance	This measure is to be reported each time a biopsy is received during the performance period. It is anticipated that eligible clinicians providing the pathology services for procedures will submit this measure. Numerator definitions: 1. Turnaround Time (TAT): The day the specimen is accessioned in the lab to the day the final report is signed out. Business days counted only. 2. Accession Date: The date recorded in the laboratory/hospital information system that documents when a specimen was received by the laboratory. 3. Report Date: The date recorded in the laboratory/hospital information system that documents when a result is verified (i.e. released with a final diagnosis) by the pathologist, reported by the laboratory information system and available to the requesting physician(s)
Measure Information	
NQS Domain	Communication and Care Coordination

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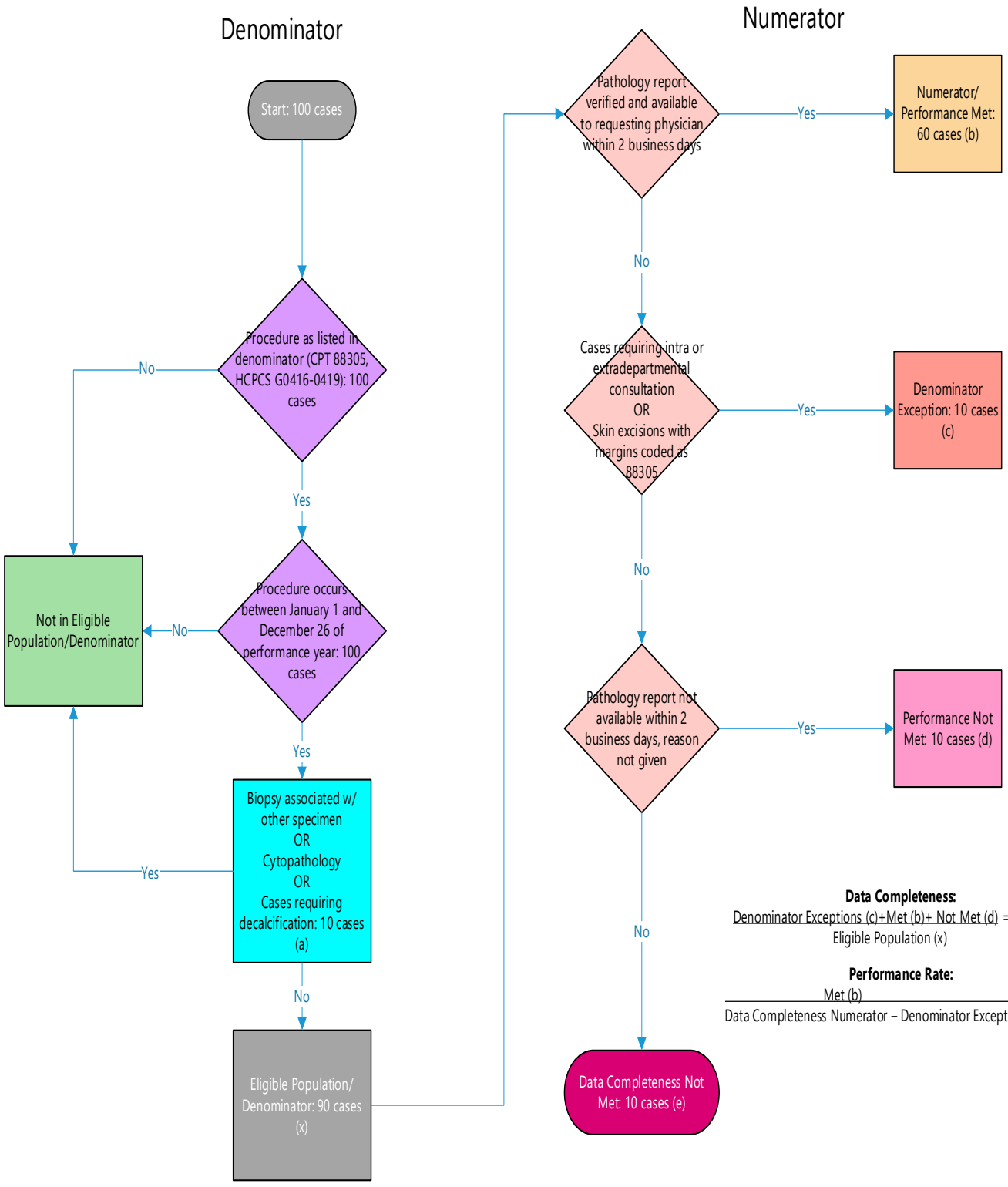
Meaningful Measures Area(s)	Transfer of Health Information and Interoperability
Meaningful Measure Rationale	Turnaround time (TAT) is an indicator of efficiency in anatomic pathology and may affect coordination of patient care. Measuring report timeliness, or TAT, is an indicator of efficiency in the completion of many complex and interdependent laboratory, technical, clerical, and human interpretive processes that each result in the pathology diagnostic report. Timely pathology reports are one of the most important tools physicians use to adequately manage the quality and safety of patient care. The implication of surgical pathology report delay, as shown in research evidence, is that prolonged turnaround time can play a major role in disease complications, including raising morbidity and mortality rates. Therefore, verifying pathology reports in an appropriate timeframe helps healthcare practitioners with timely diagnosis and more effective treatment planning. The accuracy of diagnosis and providing timely complete reports is one of the main quality indicators in surgical pathology. Turnaround time is considered a key daily quality performance evaluation element since it can easily be assessed with laboratory information systems (1-6). 1. Alshieban S. and Al-Surimi K. Reducing turnaround time of surgical pathology reports in pathology and laboratory medicine departments. BMJ Qual Improv Rep. 2015 Nov 24;4(1). pii: u209223.w3773. doi: 10.1136/bmjquality.u209223.w3773. eCollection 2015. 2. Morales, Azorides R. et al. Rapid-Response, Molecular-Friendly Surgical Pathology: A Radical Departure from the Century-Old Routine Practice. Journal of the American College of Surgeons , Volume 207 , Issue 3 , 320 - 325 2008. 3. Robin T. Vollmer; Analysis of Turnaround Times in Pathology: An Approach Using Failure Time Analysis, American Journal of Clinical Pathology, Volume 126, Issue 2, 1 August 2006, Pages 215–220, https://doi.org/10.1309/YTEKD0CNUBKJVFTW. 4. Novis DA1, Zarbo RJ, Saladino AJ. Arch Pathol Lab Med. Interinstitutional comparison of surgical biopsy diagnosis turnaround time: A College of American Pathologists Q-Probes study of 5384 surgical biopsies in 157 small hospitals. 1998 Nov;122(11):951-6. 5. Volmar, KE et al. Turnaround Time for Large or Complex Specimens in Surgical Pathology: A College of American Pathologists Q-Probes Study of 56 Institutions. Archives of pathology & laboratory medicine. 139. 171-7. 10.5858/arpa.2013-0671-CP. 2015. 6. Patel, S. et al. Factors that impact turnaround time of surgical pathology specimens in an academic institution. Hum Pathol. 2012 Sep;43(9):1501-5. doi: 10.1016/j.humpath.2011.11.010. Epub 2012 Mar 8.
Measure Type	Process
Data Source	Laboratory Information Systems; pathology reports
Summary of Performance	For performance year 2021, 27 reporting entities submitted data on this measure to CMS, ranging from 243 cases to 77,940 cases. Performance scores range from 68.5% to 100% with an average performance of 91.27%.

Gap Evidence	For January 1st- July 1st 2022, 13 reporting entities have entered data on this measure, ranging from 41 cases to 56,151 cases. Performance scores range from 77.29% to 100% with an average performance of 96.55% Few reports quantify turnaround time for all biopsies across practice settings. Smaller studies have examined turnaround times at specific institutions and/or for certain specimen types. For instance, a 2021 study at Washington University School of Medicine found that the turnaround time for core breast biopsies was just over 2.5 days. (1). Similarly, the University of Wisconsin Health notes that in-lab turnaround time for surgical pathology biopsy specimens is "2-5 days", in excess of recommendations. Additionally, a 2021 study at Washington University School of Medicine found that the turnaround time for core breast biopsies was just over 2.5 days. (2). 1. Varney RC, Karmo N, Copeland J, and Zarbo R. Lean optimization of breast core biopsy process in a core surgical pathology laboratory. Lab Invest 2018; 98:797 2. Arudra, S.K.C., Garvey, L.C. & Hagemann, I.S. In-laboratory breast specimen radiography reduces tissue block utilization and improves turnaround time of pathologic examination. BMC Med Imaging 21, 59 (2021).
Measure Owner	College of American Pathologists
NQF ID	N/A
Number of Performance Rates	1
Overall Performance Rate	1st Performance Rate
High-priority	Yes
Improvement Notation	Inverse Measure: No **Proportional Measure: Yes (Higher score indicates better quality)** Continuous Variable Measure: No Ratio Measure: No Risk-adjusted: No
Care Setting and Specialty	Care Setting: Other—Laboratories; Telehealth not applicable Specialty: Pathology
Submission Pathway	Traditional MIPS only

Measure Flow



Data Completeness:

$$\frac{\text{Denominator Exceptions (c)+Met (b)+ Not Met (d)}}{\text{Eligible Population (x)}} = \frac{10+60+10}{90}$$

Performance Rate:

$$\frac{\text{Met (b)}}{\text{Data Completeness Numerator} - \text{Denominator Exceptions (c)}} = \frac{60}{70}$$