



2023 Pathology Quality Measures FAQ

QPP Measures

QPP 249: Barrett's Esophagus

I have a case that was incorrectly coded as K22.710 but it's not an esophageal sample at all. My billing company sent the data to the registry because of the K22.710 code but the measure doesn't apply. What should I do?

Incorrect coding of samples happens sometimes. Because this case is not from the esophagus, it should not fall under the denominator of QPP 249 but should be considered a denominator exclusion (Specimen site other than anatomic location of esophagus). The practice should request that the billing company add the G code G8797 to this case and it will be removed from the population.

I was unable to determine whether Barrett's mucosa is present in a sample because so little tissue was present. Therefore, my pathology report doesn't contain a statement about dysplasia. Does this case fail measure QPP 249?

No, this case does not count as Performance Not Met. Because there is a medical reason that a statement about dysplasia was not included (insufficient tissue provided), this case would be considered a denominator exception and should be coded as G3126F with 1P. It will not count against the practice's performance score.

Our practice sometimes gets gastroesophageal junction biopsies to examine for Barrett's instead of esophageal samples. Are GE junction samples included in this measure?

Yes, GE junction biopsies for cases with a pathologic diagnosis of Barrett's/intestinal metaplasia are acceptable as well as esophageal.

Does it matter whether we use the phrase "Barrett's esophagus" or "Barrett's mucosa"?

No. Both are acceptable. If the practice is not sending codes but is identifying cases by keyword search, it will be easier if the terminology is consistent, but it either one is fine.



Why are biopsies that aren't from the esophagus getting picked up as part of this measure? How do I avoid that?

As long as a diagnosis of Barrett's is included on a biopsy case, that case will be picked up for this measure because the system looks for the combination of a Barrett's ICD-10 code + CPT 88305. Cases which are not esophageal biopsies (i.e. historical diagnoses of Barrett's) should be coded with G8797, Specimen Site Other than Anatomic Location of Esophagus. I can add that to the document.

Why are my Barrett's cases with multiple specimens falling into the Denominator Exclusion when each specimen has an assigned QDC codes (i.e. 3126F (Esophagus) and G8797 (other specimen site))?

If multiple CAT II/QDC codes are added to the case, the exclusion code trumps all others. If there are multiple specimens in one case and only one esophagus tissue, the only one CAT II/QDC code should be attached.