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

2018 OPTIONS FOR INDIVIDUAL MEASURES:
REGISTRY 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 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 submissions; however, these codes may be submitted for those registries that utilize claims data.

DENOMINATOR:
All melanoma pathology reports for primary malignant cutaneous melanoma

\[
\text{Denominator Criteria (Eligible Cases):} \\
\text{Patients} \geq 18 \text{ years of age on date of encounter} \\
\text{AND} \\
\text{Diagnosis for malignant cutaneous melanoma (ICD-10-CM):} \ C43.0, C43.20, C43.21, C43.22, C43.30, C43.31, C43.39, C43.4, C43.51, C43.52, C43.59, C43.60, C43.61, C43.62, C43.70, C43.71, C43.72, C43.8, C43.9 \\
\text{AND} \\
\text{Patient encounter during performance period (CPT):} \ 88305 \\
\text{AND NOT} \\
\text{DENOMINATOR EXCLUSION:} \\
\text{Specimen site other than anatomic cutaneous location:} \ G9430
\]

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

\[
\text{Numerator Options:} \\
\text{Performance Met:} \\
\text{Pathology report includes the pT Category and a statement on thickness and ulceration and for pT1, mitotic rate (G9428)}
\]

OR
**Denominator Exception:**

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) (G9429)

**OR**

**Performance Not Met:**

Pathology report does not include the pT Category and a statement on thickness and ulceration and for pT1, mitotic rate (G9431)

**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 Registry Flow for Quality ID #397: Melanoma Reporting

**DENOMINATOR**

- Start
- **Patient Age at Date of Service > 19 years**
  - Yes
  - Diagnosis For Malignant Cutaneous Melanoma as Listed in Denominator
  - Yes
  - Procedure Listed in Denominator* (1/1/2018 thru 12/31/2018)
    - Yes
    - Specimen Site Other than Anatomic Cutaneous Location G9430 or equivalent
      - Yes
      - Denominator Exclusion
        - Yes
        - Not Included in Eligible Population/Denominator (30 procedures)
      - No
      - Include in Eligible Population/Denominator (30 procedures)
    - No
  - No

**NUMERATOR**

- Pathology Report includes the pT Category and a Statement on Thickness and Ulceration for pT1 Mitiotic Rate
  - Yes
  - Documentation of Medical Reason(s) for Not Including pT Category and a Statement on Thickness and Ulceration and for pT1 Mitiotic Rate
    - Yes
    - Pathology Report Does Not Include the pT Category and a Statement on Thickness and Ulceration and for pT1 Mitiotic Rate
      - Yes
      - Data Completeness Met + Performance Met G9429 or equivalent (10 procedures)
    - No
    - Data Completeness Met + Denominator Exception G9429 or equivalent (10 procedures)
  - No
  - Data Completeness Met + Performance Not Met G9431 or equivalent (20 procedures)

**SAMPLE CALCULATIONS:**

<table>
<thead>
<tr>
<th>Data Completeness</th>
<th>Performance Met (a=40 procedures) + Denominator Exception (b=10 procedures) + Performance Not Met (c=20 procedures) = 70 procedures</th>
<th>87.50%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Eligible Population / Denominator (d=80 procedures) = 80 procedures</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Performance Rate**

\[
\text{Performance Rate} = \frac{\text{Performance Met (a=40 procedures)}}{\text{Eligible Population (d=80 procedures)}} = \frac{40}{80} = 66.67\%
\]

**Data Completeness Numerator (70 procedures) - Denominator Exception (10 procedures) = 60 procedures**

*See the posted Measure Specification for specific coding and instructions to submit this measure.

**NOTE:** Submission Frequency: Procedure

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2018 Registry 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 registry 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 Encounter Performed.

4. Check Encounter Performed:
   a. If Encounter as Listed in Denominator equals No, do not include in Eligible Patient Population. Stop Processing.
   b. If Encounter as Listed in Denominator equals Yes, proceed to check Specimen Site Other than Anatomic Cutaneous Location.

5. Check Specimen Site Other than Anatomic Cutaneous Location:
   a. If Specimen Site Other than Anatomic Cutaneous Location equals Yes, do not include in Eligible Patient Population. Stop Processing.
   b. If Specimen Site Other than Anatomic Cutaneous Location equals No, include in the Eligible 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 80 procedures in the Sample Calculation.

7. Start Numerator

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, Reason Not Given.

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

a. If Pathology Report Does Not Include the pT Category and a Statement on Thickness and Ulceration and for pT1, Mitotic Rate, Reason Not Given 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. Pathology Report Does Not Include the pT Category and a Statement on Thickness and Ulceration and for pT1, Mitotic Rate, Reason Not Given 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 Sample Calculation.

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**SAMPLE CALCULATIONS:**

<table>
<thead>
<tr>
<th>Data Completeness=</th>
<th>Performance Met (a=40 procedures) + Denominator Exception (b=10 procedures) + Performance Not Met (c=20 procedures) = 70 procedures</th>
<th>[= \frac{\text{Eligible Population}}{\text{Denominator}} \times 100]</th>
<th>[= \frac{70}{80} \times 100 = 87.50%]</th>
</tr>
</thead>
<tbody>
<tr>
<td>Performance Rate=</td>
<td>Performance Met (a=40 procedures)</td>
<td>= 40 procedures</td>
<td>[= \frac{\text{Performance Met}}{\text{Eligible Population}} \times 100]</td>
</tr>
<tr>
<td>Data Completeness Numerator (70 procedures) – Denominator Exception (b=10 procedures) = 60 procedures</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>