

**Quality ID #262: Image Confirmation of Successful Excision of Image-Localized Breast Lesion**  
– National Quality Strategy Domain: Patient Safety  
– Meaningful Measure Area: Preventable Healthcare Harm

**2019 COLLECTION TYPE:**

**MIPS CLINICAL QUALITY MEASURES (CQMS)**

**MEASURE TYPE:**

Process – High Priority

**DESCRIPTION:**

Image confirmation of lesion(s) targeted for image guided excisional biopsy or image guided partial mastectomy in patients with nonpalpable, image-detected breast lesion(s). Lesions may include: microcalcifications, mammographic or sonographic mass or architectural distortion, focal suspicious abnormalities on magnetic resonance imaging (MRI) or other breast imaging amenable to localization such as positron emission tomography (PET) mammography, or a biopsy marker demarcating site of confirmed pathology as established by previous core biopsy

**INSTRUCTIONS:**

This measure is to be submitted **each time** an image guided excisional biopsy or wire localized partial mastectomy is performed in patients with non-palpable, image-detected breast lesions. This measure may be submitted by Merit-based Incentive Payment System (MIPS) eligible clinicians who perform the quality actions described in the measure based on the services provided and the measure-specific denominator coding.

**Measure Submission Type:**

Measure data may be submitted by individual MIPS eligible clinicians, groups, or third party intermediaries. The listed denominator criteria are used to identify the intended patient population. The numerator options included in this specification are used to submit the quality actions as allowed by the measure. The quality-data codes listed do not need to be submitted by MIPS eligible clinicians, groups, or third party intermediaries that utilize this modality for submissions; however, these codes may be submitted for those third party intermediaries that utilize Medicare Part B claims data. For more information regarding Application Programming Interface (API), please refer to the Quality Payment Program (QPP) website.

**DENOMINATOR:**

Number of patients aged 18 years and older on date of encounter with non-palpable, image-detected (by mammogram, ultrasound, or breast MRI, PET mammography or other imaging modality) breast lesion requiring localization of lesion (benign or malignant) for targeted resection (either excisional biopsy or partial mastectomy)

**Denominator Criteria (Eligible Cases):**

Patients aged  $\geq$  18 years on date on encounter

**AND**

**Diagnosis for Breast Lesion (ICD-10-CM):** C50.011, C50.012, C50.019, C50.021, C50.022, C50.029, C50.111, C50.112, C50.119, C50.121, C50.122, C50.129, C50.211, C50.212, C50.219, C50.221, C50.222, C50.229, C50.311, C50.312, C50.319, C50.321, C50.322, C50.329, C50.411, C50.412, C50.419, C50.421, C50.422, C50.429, C50.511, C50.512, C50.519, C50.521, C50.522, C50.529, C50.611, C50.612, C50.619, C50.621, C50.622, C50.629, C50.811, C50.812, C50.819, C50.821, C50.822, C50.829, C50.911, C50.912, C50.919, C50.921, C50.922, C50.929, C79.81, D05.01, D05.02, D05.11, D05.12, D24.1, D24.2, D24.9, D48.61, D48.62, D49.3, N60.01, N60.02, N60.09, N60.11, N60.12, N60.19, N60.21, N60.22, N60.29, N60.31, N60.32, N60.39, N60.41, N60.42, N60.49, N60.81, N60.82, N60.89, N60.91, N60.92, N60.99, N61.0, N61.1, N62, N63.0, N63.10, N63.11, N63.12, N63.13, N63.14, N63.20, N63.21, N63.22, N63.23, N63.24, N63.31, N63.32, N63.41, N64.0, N64.1, N64.2, N64.3, N64.4, N64.51, N64.52, N64.53, N64.59, N64.81, N64.82, N64.89, N64.9, R92.0, R92.1, R92.2, R92.8, T85.44XA, T85.44XD, T85.44XS

**AND**

**Patient encounter during the performance period (CPT):** 19125, 19301, 19302

**AND NOT**

**DENOMINATOR EXCLUSION:**

Patients with needle localization specimens which are not amenable to intraoperative imaging such as MRI needle wire localization, or targets which are tentatively identified on mammogram or ultrasound which do not contain a biopsy marker but which can be verified on intraoperative inspection or pathology (e.g., needle biopsy site where the biopsy marker is remote from the actual biopsy site):

G8873

**NUMERATOR:**

Patients undergoing excisional biopsy or partial mastectomy of a non-palpable lesion whose excised breast tissue was evaluated by imaging (x-ray, ultrasound, MRI, PET mammography or other imaging modality) intraoperatively to confirm successful inclusion of targeted lesion

**Numerator Options:**

***Performance Met:***

Excised tissue evaluated by imaging intraoperatively to confirm successful inclusion of targeted lesion (**G8872**)

**OR**

***Performance Not Met:***

Excised tissue not evaluated by imaging intraoperatively to confirm successful inclusion of targeted lesion, reason not given (**G8874**)

**RATIONALE:**

Many benign breast lesions and breast cancers are image-detected and will involve some form of image localization. Specimen radiography or specimen ultrasonography should routinely be performed for all excisions of image-detected abnormalities to document success of the procedure in excising the target.

**CLINICAL RECOMMENDATION STATEMENTS:**

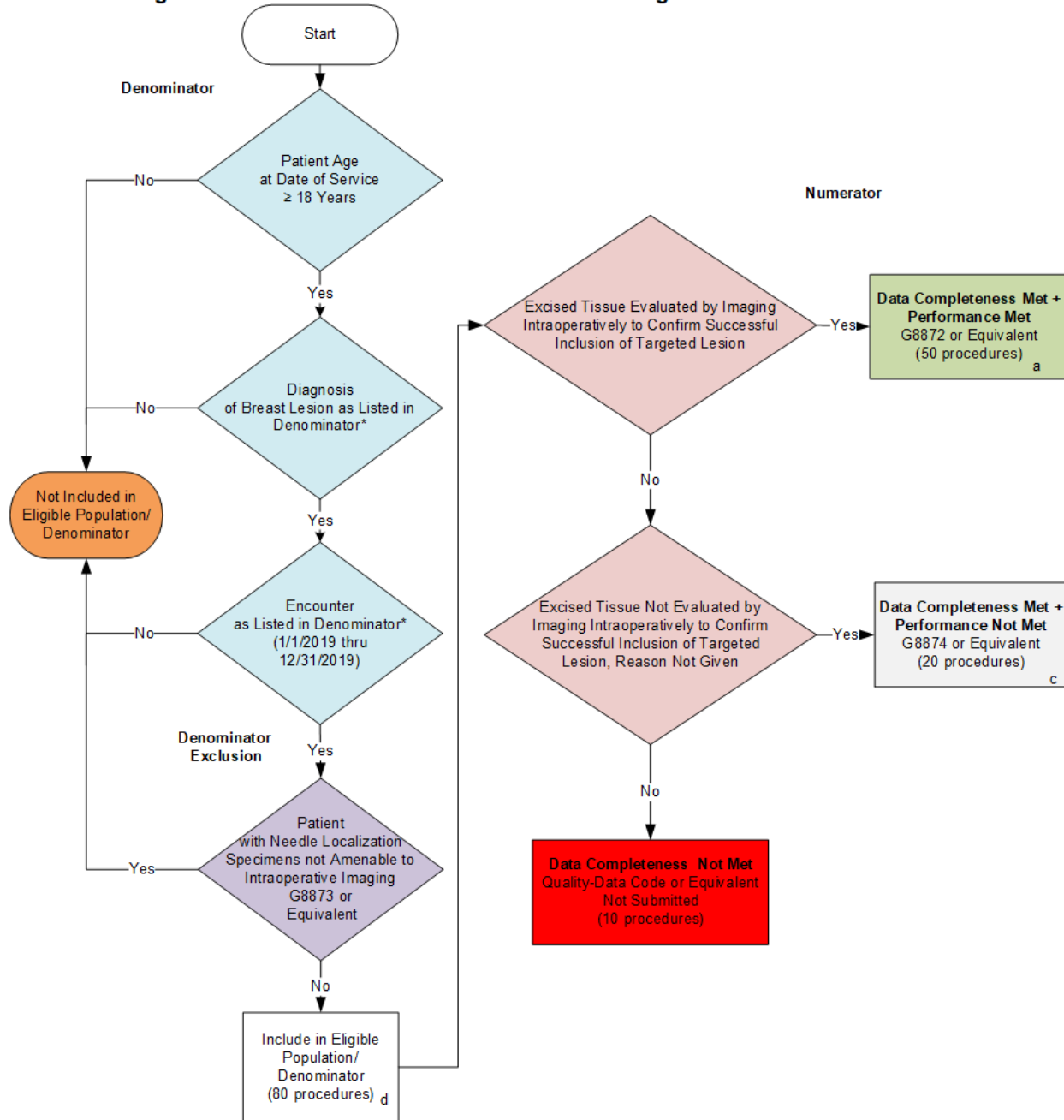
Specimen radiography or specimen ultrasonography should be routinely performed for all excisions of image-detected abnormalities to help document the success of the procedure in finding the target. Specimen radiography should use two 90-degree orthogonal views. (The American Society of Breast Surgeons, 2001)

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**2019 Clinical Quality Measure Flow for Quality ID #262:  
Image Confirmation of Successful Excision of Image-Localized Breast Lesion**



**SAMPLE CALCULATIONS:**

**Data Completeness=**  

$$\frac{\text{Performance Met (a=50 procedures)} + \text{Performance Not Met (c=20 procedures)}}{\text{Eligible Population / Denominator (d=80 procedures)}} = \frac{70 \text{ procedures}}{80 \text{ procedures}} = 87.50\%$$

**Performance Rate=**  

$$\frac{\text{Performance Met (a=50 procedures)}}{\text{Data Completeness Numerator (70 procedures)}} = \frac{50 \text{ procedures}}{70 \text{ procedures}} = 71.43\%$$

\*See the posted Measure Specification for specific coding and instructions to submit this measure  
 NOTE: Submission Frequency-Procedure

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 The measure diagrams were developed by CMS as a supplemental resource to be used in conjunction with the measure specifications. They should not be used alone or as a substitution for the measure specification.

**2019 Clinical Quality Measure Flow Narrative for Quality ID #262:  
Image Confirmation of Successful Excision of Image-Localized Breast Lesion**

Please refer to the specific section of the Measure Specification to identify the denominator and numerator information for use in submitting this Individual Specification.

1. Start with Denominator
2. Check Patient Age:
  - a. If Patient Age is greater than or equal to 18 Years on date of service equals No during the measurement period, do not include in Eligible Population. Stop Processing.
  - b. If Patient Age is greater than or equal to 18 Years on date of service equals Yes during the measurement period, proceed to check Patient Diagnosis.
3. Check Patient Diagnosis:
  - a. If Diagnosis of Breast Lesion as Listed in the Denominator equals No, do not include in Eligible Population. Stop Processing.
  - b. If Diagnosis of Breast Lesion as Listed in the Denominator equals Yes, proceed to check Encounter.
4. Check Encounter:
  - a. If Encounter as Listed in the Denominator equals No, do not include in Eligible Population. Stop Processing.
  - b. If Encounter as Listed in the Denominator equals Yes, proceed to check Patient with Needle Localization Specimens not Amenable to Intraoperative Imaging.
5. Check Patient with Needle Localization Specimens not Amenable to Intraoperative Imaging:
  - a. If Patient with Needle Localization Specimens not Amenable to Intraoperative Imaging equals Yes, do not include in Eligible Population. Stop Processing.
  - b. If Patient with Needle Localization Specimens not Amenable to Intraoperative Imaging equals No, include in Eligible Population.
6. Denominator Population:
  - a. Denominator Population is all Eligible Procedures 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 Excised Tissue Evaluated by Imaging Intraoperatively to Confirm Successful Inclusion of Targeted Lesion:
  - a. If Excised Tissue Evaluated by Imaging Intraoperatively to Confirm Successful Inclusion of Targeted Lesion 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 50 procedures in the Sample Calculation.

- c. If Excised Tissue Evaluated by Imaging Intraoperatively to Confirm Successful Inclusion of Targeted Lesion equals No, proceed to check Excised Tissue Not Evaluated by Imaging Intraoperatively to Confirm Successful Inclusion of Targeted Lesion, Reason Not Given.
9. Check Excised Tissue Not Evaluated by Imaging Intraoperatively to Confirm Successful Inclusion of Targeted Lesion, Reason Not Given:
- a. If Excised Tissue Not Evaluated by Imaging Intraoperatively to Confirm Successful Inclusion of Targeted Lesion, Reason Not Given equals Yes, include in the 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 Excised Tissue Not Evaluated by Imaging Intraoperatively to Confirm Successful Inclusion of Targeted Lesion, Reason Not Given equals No, proceed to check Data Completeness Not Met.
10. 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 Data Completeness Numerator in the Sample Calculation.

**SAMPLE CALCULATIONS:**

**Data Completeness=**

$$\frac{\text{Performance Met (a=50 procedures) + Performance Not Met (c=20 procedures)}}{\text{Eligible Population / Denominator (d=80 procedures)}} = \frac{70 \text{ procedures}}{80 \text{ procedures}} = 87.50\%$$

**Performance Rate=**

$$\frac{\text{Performance Met (a=50 procedures)}}{\text{Data Completeness Numerator (70 procedures)}} = \frac{50 \text{ procedures}}{70 \text{ procedures}} = 71.43\%$$