

**Measure #249 (NQF 1854): Barrett's Esophagus – National Quality Strategy Domain: Effective Clinical Care**

**2017 OPTIONS FOR INDIVIDUAL MEASURES:**  
**CLAIMS ONLY**

**MEASURE TYPE:**  
Process

**DESCRIPTION:**  
Percentage of esophageal biopsy reports that document the presence of Barrett's mucosa that also include a statement about dysplasia

**INSTRUCTIONS:**  
This measure is to be reported **each time** a patient's surgical pathology report demonstrates Barrett's Esophagus; however, only one quality-data code (ODC) per date of service for a patient is required. This measure may be reported by eligible clinicians who perform the quality actions described in the measure based on the services provided and the measure-specific denominator coding.

**Measure Reporting:**  
The listed denominator criteria is used to identify the intended patient population. The numerator quality-data codes included in this specification are used to submit the quality actions allowed by the measure. All measure-specific coding should be reported on the claim(s) representing the eligible encounter.

**DENOMINATOR:**  
All surgical pathology biopsy reports for Barrett's Esophagus

**Denominator Criteria (Eligible Cases):**  
**Diagnosis for Barrett's esophagus (ICD-10-CM):** K22.70, K22.710, K22.711, K22.719  
**AND**  
**Patient procedure during the performance period (CPT):** 88305

**NUMERATOR:**  
Esophageal biopsy report documents the presence of Barrett's mucosa and includes a statement about dysplasia

***NUMERATOR NOTE:** Report quality data codes once per patient for each date-of-service.*

**Numerator Quality-Data Coding Options:**  
**If Patient is not Eligible for this Measure because the Specimen is not of Esophageal Origin Report:**  
**Denominator Exclusion:** G8797: Specimen site other than anatomic location of esophagus

**OR**

**Esophageal Biopsy Reports with the Histological Finding of Barrett's Mucosa that Contains a Statement about Dysplasia (present, absent, or indefinite and if present, contains appropriate grading)**  
**Performance Met:** CPT II 3126F: Esophageal biopsy reports with the histological finding of Barrett's mucosa that contains a statement about dysplasia (present, absent, or indefinite and if present, contains appropriate grading)

**OR**

**Esophageal Biopsy Reports with the Histological Finding of Barrett's Mucosa that Contains a Statement about Dysplasia (present, absent, or indefinite) not Performed for Medical Reasons**  
Append a modifier (1P) to Category II code 3126F to report documented circumstances that appropriately exclude patients from the denominator

**Denominator Exception: 3126F with 1P:**

Documentation of medical reason(s) for not reporting the histological finding of Barrett's mucosa (eg, malignant neoplasm or absence of intestinal metaplasia)

**OR**

**Esophageal Biopsy Reports with the Histological Finding of Barrett's Mucosa that does not Contain a Statement about Dysplasia (present, absent, or indefinite), Reason not Otherwise Specified**

Append a reporting modifier (8P) to CPT Category II code 3126F to report circumstances when the action described in the numerator is not performed and the reason is not otherwise specified

**Performance Not Met: 3126F with 8P:**

Pathology report with the histological finding of Barrett's mucosa that does not contain a statement about dysplasia (present, absent, or indefinite, and if present, contains appropriate grading), reason not otherwise specified

**RATIONALE:**

Endoscopy is the technique of choice used to identify suspected Barrett's esophagus and to diagnose complications of GERD. Biopsy must be added to confirm the presence of Barrett's epithelium and to evaluate for dysplasia (ACG, 2005).

There is a rapidly rising incidence of adenocarcinoma of the esophagus in the United States. A diagnosis of Barrett's esophagus increases a patient's risk for esophageal adenocarcinoma by 30 to 125 times that of people without Barrett's esophagus (although this risk is still small 0.4% to 0.5% per year). Esophageal adenocarcinoma is often not curable, partly because the disease is frequently discovered at a late stage and because treatments are not effective. A diagnosis of Barrett's esophagus could allow for appropriate screening of at risk patients as recommended by the American College of Gastroenterology.

Standard endoscopy with biopsy currently is the most reliable means of establishing a diagnosis of Barrett's esophagus. The definitive diagnosis of Barrett's esophagus requires a pathologist's review of an esophageal biopsy. Dysplasia is the first step in the neoplastic process, and information about dysplasia is crucial for clinical decision-making directing therapy. The presence and grade of dysplasia cannot be determined by routine endoscopy, and pathologist's review of a biopsy is essential for recognition of dysplasia. Endoscopic surveillance detects curable neoplasia in patients with Barrett's esophagus.

**CLINICAL RECOMMENDATION STATEMENTS:**

The diagnosis of Barrett's esophagus requires systematic biopsy of the abnormal-appearing esophageal mucosa to document intestinal metaplasia and to detect dysplasia.

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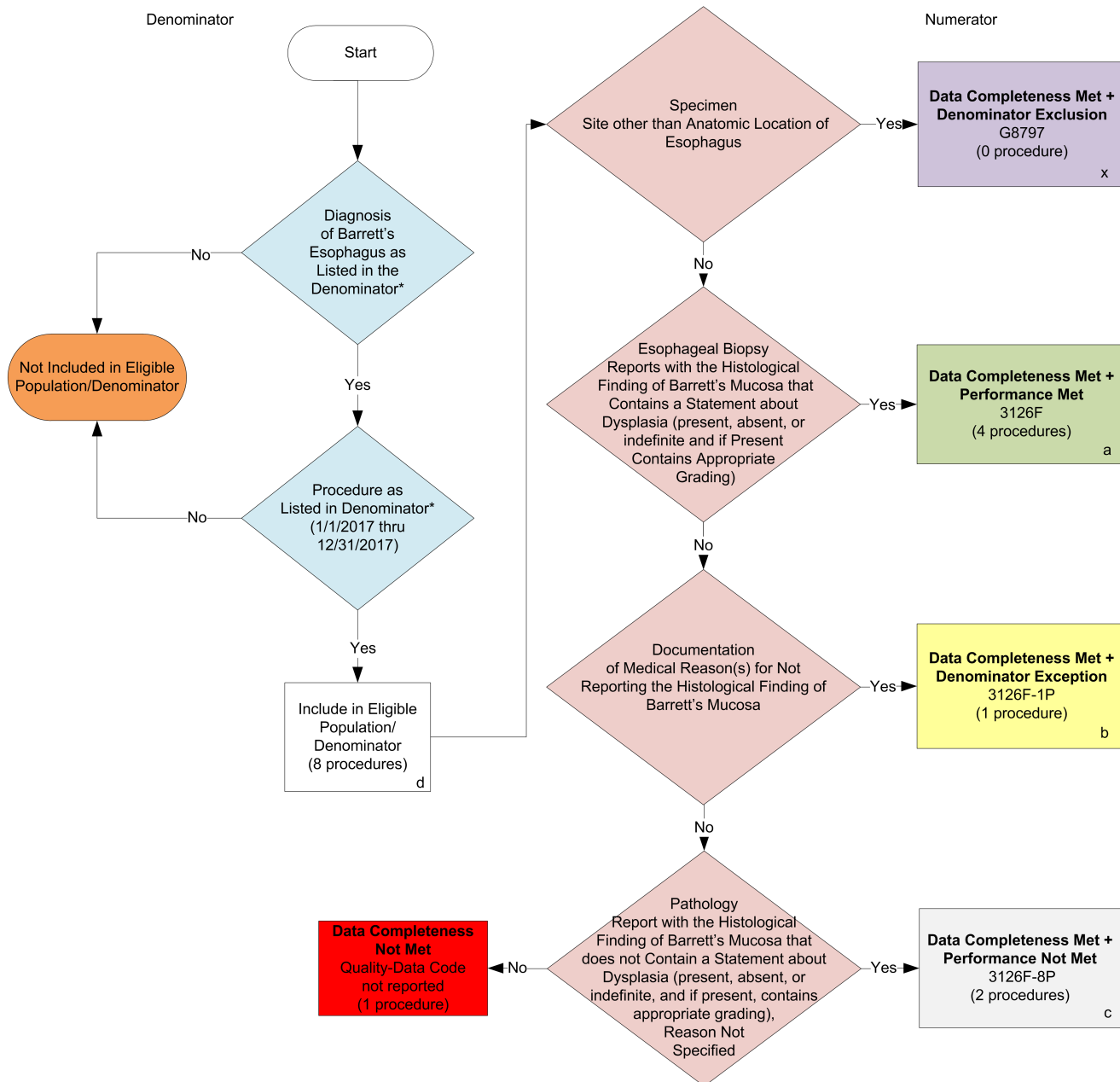
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## 2017 Claims Individual Measure Flow

### #249 NQF #1854: Barrett's Esophagus



**SAMPLE CALCULATIONS:**

**Data Completeness=**

Denominator Exclusion (x=0 procedures)+ Performance Met (a=4 procedures)+Denominator Exception (b=1 procedure)+Performance Not Met (c=2 procedures) = 7 procedures = 87.50%  
Eligible Population / Denominator (d=8 procedures) = 8 procedures

**Performance Rate=**

Performance Met (a=4 procedures)	= 4 procedures	= 66.67%
Data Completeness Numerator (7 procedures) - Denominator Exclusion (x=0 procedures) - Denominator Exception (b=1 procedure)	= 6 procedures	

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

NOTE: Reporting 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.

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**2017 Claims Individual Measure Flow**  
**#249: NQF #1854: Barrett's Esophagus**

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

1. Start with Denominator
2. Check Patient Diagnosis:
  - a. If Diagnosis of Barrett's Esophagus as Listed in the Denominator equals No, do not include in Eligible Patient Population. Stop Processing.
  - b. If Diagnosis of Barrett's Esophagus as Listed in the Denominator equals Yes, proceed to check Procedure Performed.
3. Check Procedure Performed:
  - a. If Procedure as Listed in the Denominator equals No, do not include in Eligible Patient Population. Stop Processing.
  - b. If Procedure as Listed in the Denominator equals Yes, include in the Eligible population.
4. 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 8 procedures in the sample calculation.
5. Start Numerator
6. Specimen Site other than Anatomic Location of Esophagus:
  - a. If Specimen Site other than Anatomic Location of Esophagus equals Yes, include in Data Completeness Met and Denominator Exclusion.
  - b. Data Completeness Met and Denominator Exclusion letter is represented in the Data Completeness and Performance Rate in the Sample Calculation listed at the end of this document. Letter x equals 0 procedures in the Sample Calculation.
  - c. If Specimen Site other than Anatomic Location of Esophagus equals No, proceed to Esophageal Biopsy Reports with the Histological Finding of Barrett's Mucosa that Contains a Statement about Dysplasia (present, absent, or indefinite and if Present Contains Appropriate Grading).
7. Check Esophageal Biopsy Reports with the Histological Finding of Barrett's Mucosa that Contains a Statement about Dysplasia (present, absent, or indefinite and if Present Contains Appropriate Grading):
  - a. If Esophageal Biopsy Reports with the Histological Finding of Barrett's Mucosa that Contains a Statement about Dysplasia (present, absent, or indefinite and if Present Contains Appropriate Grading) 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 4 procedures in Sample Calculation.

- c. If Esophageal Biopsy Reports with the Histological Finding of Barrett's Mucosa that Contains a Statement about Dysplasia (present, absent, or indefinite and if Present Contains Appropriate Grading) equals No, proceed to Documentation of Medical Reason(s) for Not Reporting the Histological Finding of Barrett's Mucosa.
8. Check Documentation of Medical Reason(s) for Not Reporting the Histological Finding of Barrett's Mucosa:
  - a. If Documentation of Medical Reason(s) for Not Reporting the Histological Finding of Barrett's Mucosa equals Yes, include in 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 1 procedure in the Sample Calculation.
  - c. If Documentation of Medical Reason(s) for Not Reporting the Histological Finding of Barrett's Mucosa equals No, proceed to Pathology Report with the Histological Finding of Barrett's Mucosa that does not Contain a Statement about Dysplasia (present, absent, or indefinite, and if present, contains appropriate grading), Reason Not Specified.
9. Check Pathology Report with the Histological Finding of Barrett's Mucosa that does not Contain a Statement about Dysplasia (present, absent, or indefinite, and if present, contains appropriate grading), Reason Not Specified:
  - a. If Pathology Report with the Histological Finding of Barrett's Mucosa that does not Contain a Statement about Dysplasia (present, absent, or indefinite, and if present, contains appropriate grading), Reason Not Specified 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 2 procedures in the Sample Calculation.
  - c. If Pathology Report with the Histological Finding of Barrett's Mucosa that does not Contain a Statement about Dysplasia (present, absent, or indefinite, and if present, contains appropriate grading), Reason Not Specified equals No, proceed to Data Completeness Not Met.
10. Check Data Completeness Not Met
  - a. If Data Completeness Not Met equals No, Quality Data Code not reported. 1 procedure has been subtracted from data completeness numerator in the sample calculation.

#### **SAMPLE CALCULATIONS:**

##### **Data Completeness=**

Denominator Exclusion (x=0 procedures)+ Performance Met (a=4 procedures)+Denominator Exception (b=1 procedure)+Performance Not Met (c=2 procedures) = 7 procedures = 87.50%  
 Eligible Population / Denominator (d=8 procedures) = 8 procedures

##### **Performance Rate=**

Performance Met (a=4 procedures) = 4 procedures = 66.67%  
 Data Completeness Numerator (7 procedures) - Denominator Exclusion (x=0 procedures) - Denominator Exception (b=1 procedure) = 6 procedures