Measure #359: Optimizing Patient Exposure to Ionizing Radiation: Utilization of a Standardized Nomenclature for Computed Tomography (CT) Imaging Description – National Quality Strategy Domain: Communication and Care Coordination

2017 OPTIONS FOR INDIVIDUAL MEASURES:
REGISTRY ONLY

MEASURE TYPE:
Process

DESCRIPTION:
Percentage of computed tomography (CT) imaging reports for all patients, regardless of age, with the imaging study named according to a standardized nomenclature and the standardized nomenclature is used in institution's computer systems

INSTRUCTIONS:
This measure is to be reported each time a procedure for a CT imaging report is performed during the performance period. There is no diagnosis associated with this measure. 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 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-based submissions; however, these codes may be submitted for those registries that utilize claims data.

DENOMINATOR:
All final reports for patients, regardless of age, undergoing a CT procedure

*DENOMINATOR NOTE: *Signifies that this CPT Category I code is a non-covered service under the Medicare Part B Physician Fee Schedule (PFS). These non-covered services should be counted in the denominator population for registry-based measures.*

Denominator Criteria (Eligible Cases):
All patients regardless of age
AND
Patient procedure during the performance period (CPT): 70450, 70460, 70470, 70480, 70481, 70482, 70486, 70487, 70488, 70490, 70491, 70492, 70496, 70498, 71250, 71260, 71270, 71275, 72125, 72126, 72127, 72128, 72129, 72130, 72131, 72132, 72133, 72191, 72192, 72193, 72194, 73200, 73201, 73202, 73206, 73700, 73701, 73702, 73706, 74150, 74160, 74170, 74174, 74175, 74176, 74177, 74178, 74261, 74262, 74263*, 75571, 75572, 75573, 75574, 75635, 76380, 76497, 77011, 77012, 77013, 77078, 78072, 78814, 78815, 78816, 0042T

NUMERATOR:
CT imaging reports with the imaging study named according to a standardized nomenclature and the standardized nomenclature is used in institution's computer systems

Numerator Instructions: Standardized nomenclature is used in institution's computer systems, including but not limited:

- Computerized physician ordering system
- Charge master

- Radiology information system
- Electronic health record

NUMERATOR NOTE: Use of a standardized nomenclature is meant to enable reporting to a Dose Index Registry. There is no standard lexicon implemented across the board for naming CT exam procedures. To make like comparisons of sites reporting dose index data to a registry, it is necessary to use a specific CT exam name and standardize that across registry participants.

An example of a standardized nomenclature is RadLex®. Other standardized nomenclature may be available and would be acceptable for this measure. RadLex® is a controlled terminology for radiology—a single unified source of radiology terms that is designed to fill this need. The purpose of RadLex® is to provide a uniform structure for capturing, indexing, and retrieving a variety of radiology information sources, such as teaching files and research data. This may facilitate a first step toward structured reporting of radiology reports. This will also permit mining of data for participation in research projects, registries, patient outcomes and quality assurance.

Numerator Options:

Performance Met:	Imaging study named according to standardized nomenclature (G9318)

OR

Performance Not Met:	Imaging study not named according to standardized nomenclature, reason not given (G9319)

RATIONALE:
A uniform structure for capturing, indexing, and retrieving a variety of radiology information may facilitate the structured reporting of radiology reports. This will also permit mining of data for participation in research projects, registries, and quality improvement efforts. (RSNA/SIR, 2008)

CLINICAL RECOMMENDATION STATEMENTS:
The existence of a standardized lexicon for radiology would enable numerous improvements in the clinical practice of radiology, starting with the ordering of imaging exams, through the use of information in the resulting radiology report. It also makes possible more effective reuse of information for research and educational purposes. (RSNA, 2009)

THE MEASURES AND SPECIFICATIONS ARE PROVIDED "AS IS" WITHOUT WARRANTY OF ANY KIND.

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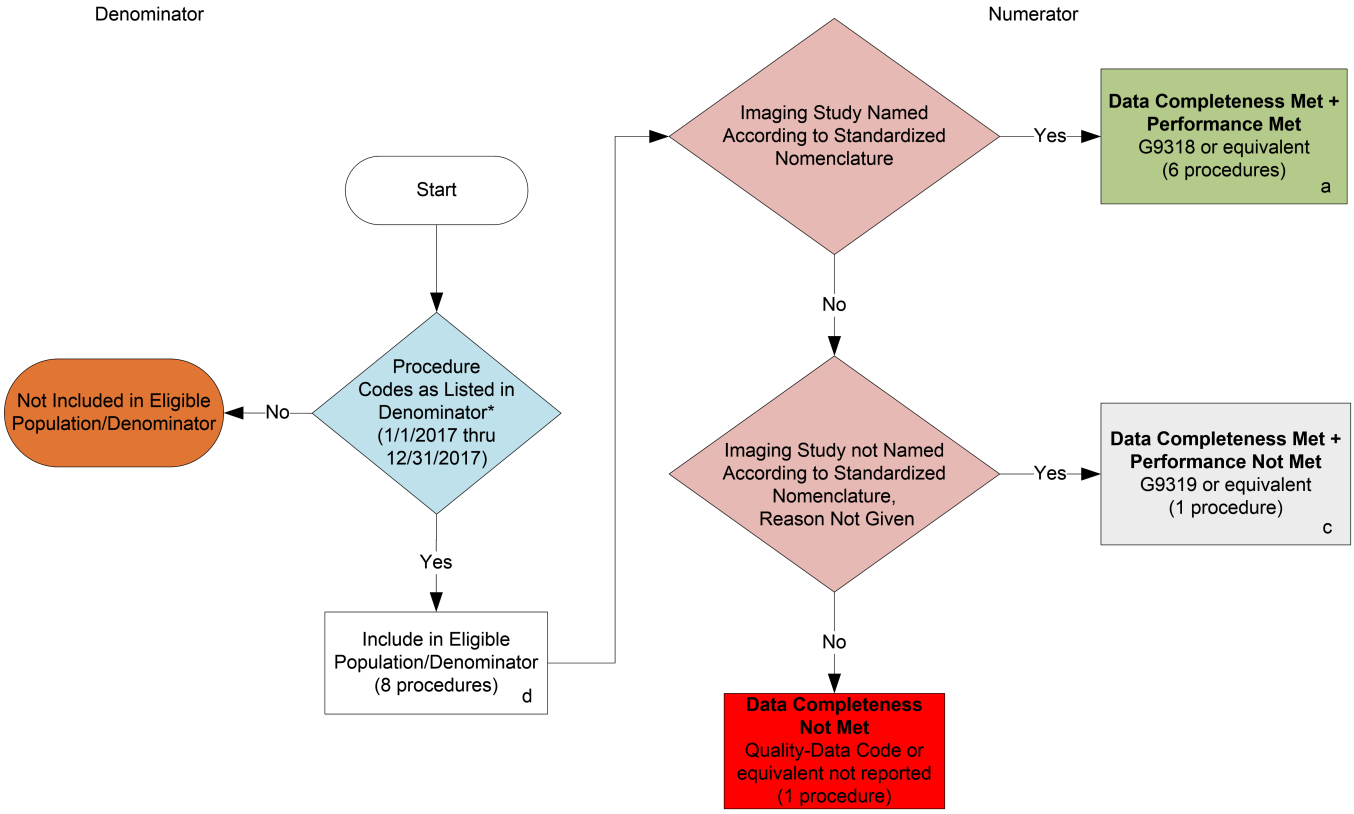
2017 Registry Individual Measure Flow
#359: Optimizing Patient Exposure to Ionizing Radiation: Utilization of a Standardized Nomenclature for Computed Tomography (CT) Imaging Description



SAMPLE CALCULATIONS:

Data Completeness=
Performance Met (a=6 procedures) + Performance Not Met (c=1 procedure) = 7 procedures = **87.50%**
Eligible Population / Denominator (d=8 procedures) = 8 procedures

Performance Rate=
Performance Met (a=6 procedures) = 6 procedures = **85.71%**
Data Completeness Numerator (7 procedures) = 7 procedures

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

NOTE: Reporting Frequency: Patient-process

v1

2017 Registry Individual Measure Flow
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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 Procedure
    a. If Procedure as Listed in the Denominator equals No, do not include in Eligible Population or Denominator. Stop Processing.
    b. If Procedure as Listed in the Denominator equals Yes, proceed to Telehealth Modifier, include in the Eligible population or Denominator.
3. Denominator Population:
    a. Eligible population or Denominator 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 8 procedures in the sample calculation.
4. Start Numerator
5. Check Imaging Study Named According to Standardized Nomenclature:
    a. If Imaging Study Named According to Standardized Nomenclature 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 6 procedures in Sample Calculation.
    c. If Imaging Study Named According to Standardized Nomenclature equals No, proceed to Check Imaging Study not Named According to Standardized Nomenclature, Reason Not Given.
6. Check Imaging Study not Named According to Standardized Nomenclature, Reason Not Given:
    a. If Check Imaging Study not Named According to Standardized Nomenclature, 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 1 procedure in the Sample Calculation.
    c. If Check Imaging Study not Named According to Standardized Nomenclature, Reason Not Given equals No, proceed to Data Completeness Not Met.
7. Check Data Completeness Not Met:
    a. If Data Completeness Not Met, the Quality Data Code or equivalent was not reported. 1 patient has been subtracted from the data completeness numerator in sample calculation.

SAMPLE CALCULATIONS:

Data Completeness=

Performance Met (a=6 procedures) + Performance Not Met (c=1 procedure) = 7 procedures = **87.50%**

Eligible Population / Denominator (d=8 procedures) = 8 procedures

Performance Rate=

Performance Met (a=6 procedures) = 6 procedures = **85.71%**

Data Completeness Numerator (7 procedures) = 7 procedures