

Measure #429: Pelvic Organ Prolapse: Preoperative Screening for Uterine Malignancy – National Quality Strategy Domain: Patient Safety

2017 OPTIONS FOR INDIVIDUAL MEASURES:
CLAIMS ONLY

MEASURE TYPE:
Process

DESCRIPTION:
Percentage of patients who are screened for uterine malignancy prior to vaginal closure or obliterative surgery for pelvic organ prolapse

INSTRUCTIONS:
This measure is to be reported **each time** a prolapse organ repair surgery 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 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 patients undergoing surgery for pelvic organ prolapse involving vaginal closure/obliterative procedure

Denominator Criteria (Eligible Cases):

All patients, regardless of age

AND

Patient procedure during the **performance period** (CPT): 57106, 57110, 57120

NUMERATOR:
Number of patients screened for uterine malignancy or those that had an ultrasound and/or endometrial sampling of any kind

Numerator Quality-Data Coding Options:

Patient is not eligible for this measure because patient has had hysterectomy

Denominator Exclusion: G9774: Patients who have had a hysterectomy

OR

Documentation of Screening for Uterine Malignancy

Performance Met: G9618: Documentation of screening for uterine malignancy, or those that had an ultrasound and/or endometrial sampling of any kind

OR

Screening for Uterine Malignancy not Documented, Reason not Given

Performance Not Met: G9620: Patient not screened for uterine malignancy, or those that have not had an ultrasound and/or endometrial sampling of any kind, reason not given

RATIONALE:
This measure will promote screening of patients at risk for a uterine malignancy prior to obliterative vaginal surgery. The incidence of endometrial cancer found unsuspectingly in patients with POP ranges from 0.3- 3.2%. In a review of all

surgical pathology reports for patients undergoing a hysterectomy for pelvic organ prolapse, 644 women were evaluated and 2 were diagnosed with endometrial cancer (0.3%). Ensuring that providers ask about possible symptoms that may hint at the need for further evaluation would increase the quality of care provided to these patients.

CLINICAL RECOMMENDATION STATEMENTS:

This measure will help ensure that patients who do have a uterine malignancy are diagnosed prior to obliterative procedure and can be referred to a gynecologic oncologist for appropriate treatment for the malignancy. The incidence of endometrial cancer found unsuspectingly in patients with POP ranges from 0.3- 3.2%. In a review of all surgical pathology reports for patients undergoing a hysterectomy for pelvic organ prolapse, 644 women were evaluated and 2 were diagnosed with endometrial cancer (0.3%). Ensuring that providers ask about possible symptoms that may hint at the need for further evaluation would increase the quality of care provided to these patients.

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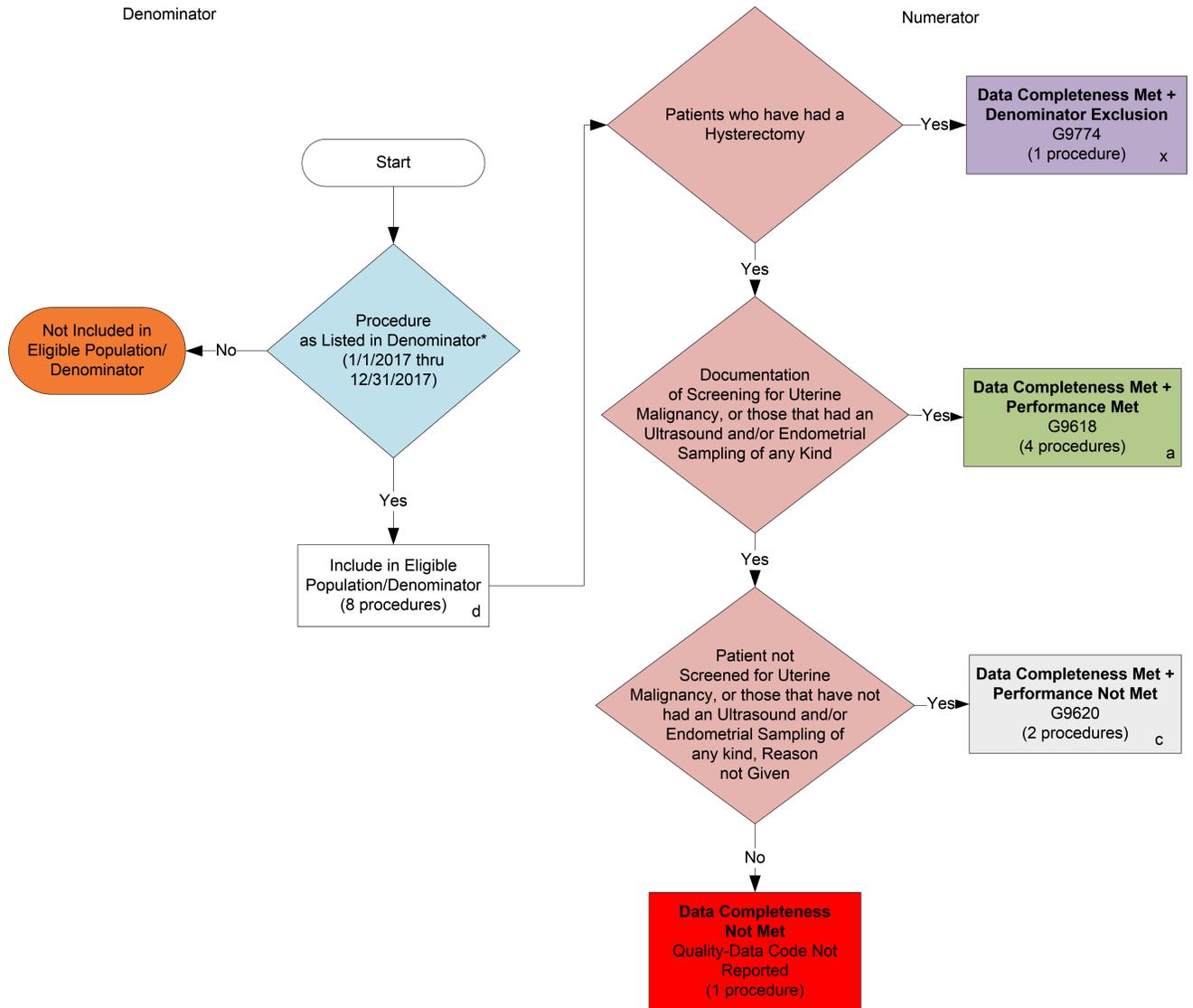
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2017 Claims Individual Measure Flow #429: Pelvic Organ Prolapse: Preoperative Screening for Uterine Malignancy



SAMPLE CALCULATIONS:

Data Completeness=

$$\frac{\text{Denominator Exclusion (x=1 procedure) + Performance Met (a=4 procedures)+Performance Not Met (c=2 procedures)}}{\text{Eligible Population / Denominator (d=8 procedures)}} = \frac{7 \text{ procedures}}{8 \text{ procedures}} = 87.50\%$$

Performance Rate=

$$\frac{\text{Performance Met (a=4 procedures)}}{\text{Data Completeness Numerator (7 procedures) – Denominator Exclusion (x=1 procedure)}} = \frac{4 \text{ procedures}}{6 \text{ procedures}} = 66.66\%$$

*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
#429: Pelvic Organ Prolapse: Preoperative Screening for Uterine Malignancy

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 Encounter Performed:
 - a. If Encounter as Listed in the Denominator equals No, do not include in Eligible Patient Population. Stop Processing.
 - b. If Encounter as Listed in the Denominator equals Yes, include in Eligible Population.
3. 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 8 procedures in the sample calculation.
4. Start Numerator
5. Check Patients who have had a Hysterectomy:
 - a. If Patients who have had a Hysterectomy 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 1 procedures in Sample Calculation.
 - c. If Patients who have had a Hysterectomy equals No, proceed to Documentation of Screening for Uterine Malignancy, or those that had an Ultrasound and/or Endometrial Sampling of any Kind.
6. Check Documentation of Screening for Uterine Malignancy, or those that had an Ultrasound and/or Endometrial Sampling of any Kind:
 - a. If Documentation of Screening for Uterine Malignancy, or those that had an Ultrasound and/or Endometrial Sampling of any Kind 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 Documentation of Screening for Uterine Malignancy, or those that had an Ultrasound and/or Endometrial Sampling of any Kind equals No, proceed to Patient not Screened for Uterine Malignancy, or those that have not had an Ultrasound and/or Endometrial Sampling of any kind, Reason not Given.
7. Check Patient not Screened for Uterine Malignancy, or those that have not had an Ultrasound and/or Endometrial Sampling of any kind, Reason not Given:
 - a. If Patient not Screened for Uterine Malignancy, or those that have not had an Ultrasound and/or Endometrial Sampling of any kind, 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 and Performance Rate in the Sample Calculation listed at the end of this document. Letter c equals 2 procedures in the Sample Calculation.
 - c. If Patient not Screened for Uterine Malignancy, or those that have not had an Ultrasound and/or Endometrial Sampling of any kind, Reason not Given equals No, proceed to Data Completeness Not Met.
8. Check Data Completeness Not Met:
- a. If Data Completeness Not Met equals No, Quality Data Code not reported. 1 procedure has been subtracted from the data completeness numerator in the sample calculation.

SAMPLE CALCULATIONS:

Data Completeness=

$$\frac{\text{Denominator Exclusion (x=1 procedure) + Performance Met (a=4 procedures)+Performance Not Met (c=2 procedures)}{\text{Eligible Population / Denominator (d=8 procedures)}} = \frac{7 \text{ procedures}}{8 \text{ procedures}} = 87.50\%$$

Performance Rate=

$$\frac{\text{Performance Met (a=4 procedures)}}{\text{Data Completeness Numerator (7 procedures) – Denominator Exclusion (x=1 procedure)}} = \frac{4 \text{ procedures}}{6 \text{ procedures}} = 66.66\%$$