

Quality ID #439: Age Appropriate Screening Colonoscopy

2024 COLLECTION TYPE: MIPS CLINICAL QUALITY MEASURES (CQMS)

MEASURE TYPE:
Efficiency – High Priority

DESCRIPTION:
The percentage of screening colonoscopies performed in patients greater than or equal to 86 years of age from January 1 to December 31.

INSTRUCTIONS:
This measure is to be submitted **each time** a colonoscopy is performed for all patients during the performance period. There is no diagnosis associated with this measure. 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:
All screening colonoscopy examinations performed on patients greater than or equal to 45 years of age during the encounter period

Denominator Criteria (Eligible Cases):
All patients greater than or equal to 45 years of age on date of encounter receiving a colonoscopy for screening purposes only

AND
Patient encounter during the performance period (CPT or HCPCS): 45378, 45380, 45381, 45384, 45385, G0121

WITHOUT
Telehealth Modifier (including but not limited to): GQ, GT, 95, POS 02, POS 10

NUMERATOR:
Screening colonoscopies performed in patients greater than or equal to 86 years of age

Numerator Instructions:
INVERSE MEASURE - A lower calculated performance rate for this measure indicates better clinical care or control. The "Performance Not Met" numerator option for this measure is the representation of the better clinical quality or control. Submitting that numerator option will produce a performance rate that trends closer to 0%, as quality increases. For inverse measures, a rate of 100% means all of the denominator eligible patients did not receive the appropriate care or were not in proper control.

Numerator Options:

Performance Met:

Patients greater than or equal to 86 years of age who underwent a screening colonoscopy and did not have a history of colorectal cancer or other valid medical reason for the colonoscopy, including: iron deficiency anemia, lower gastrointestinal bleeding, Crohn's Disease (i.e., regional enteritis), familial adenomatous polyposis, Lynch Syndrome (i.e., hereditary non-polyposis colorectal cancer), inflammatory bowel disease, ulcerative colitis, abnormal finding of gastrointestinal tract, or changes in bowel habits (**G9659**)

OR

Performance Not Met:

Documentation of medical reason(s) for a colonoscopy performed on a patient greater than or equal to 86 years of age (e.g., iron deficiency anemia, lower gastrointestinal bleeding, Crohn's Disease (i.e., regional enteritis), familial history of adenomatous polyposis, Lynch Syndrome (i.e., hereditary non-polyposis colorectal cancer), inflammatory bowel disease, ulcerative colitis, abnormal finding of gastrointestinal tract, or changes in bowel habits) (**G9660**)

OR

Performance Not Met:

Patients greater than or equal to 86 years of age who received a colonoscopy for an assessment of signs/symptoms of GI tract illness, and/or because the patient meets high risk criteria, and/or to follow-up on previously diagnosed advanced lesions (**G9661**)

OR

Performance Not Met:

Patients between 45 and 85 years of age who received a screening colonoscopy during the performance period (**G2204**)

RATIONALE:

The benefit of colorectal cancer screening for an individual patient is dependent on that patient's life expectancy and probability of harm from colonoscopy. Individuals aged 86 and older have an average life expectancy of less than 5 years [Cho Ann Intern Med. 2013; 59:667-676] and are at increased risk for colonoscopy-related complications [Ann Intern Med. 2009; 150:849-857].

The population of individuals aged 86 years and older is projected to double by 2050, hence, the clinical and economic effects of inappropriate performance of colorectal cancer screening in this age group can be expected to increase in the coming decade (Goodwin, 2011).

CLINICAL RECOMMENDATION STATEMENTS:

The USPSTF (2021) recommends the following screening strategies for individuals 45-75 years of age who are average risk for colorectal cancer (Grade B recommendation for ages 45-49; Grade A recommendation for ages 50-75):

- Annual high-sensitivity fecal occult blood test (FOBT).
- Annual fecal immunochemical test (FIT).
- Multitarget stool DNA test every 1 or 3 years (interval based on manufacturer).
- Sigmoidoscopy every 5 years.
- Sigmoidoscopy every 10 years with annual FIT.
- Optical colonoscopy every 10 years.
- CT colonography every 5 years.

For individuals from 76–85 years of age, the Task Force recommends that the decision to screen should be personalized--based on overall health status, prior screening history, and preferences (USPSTF, 2021). For individuals aged 86 years and older, the Task Force does not recommend screening when comparing overall benefits to harms (USPSTF, 2021). The Task Force based these recommendations on a systematic review of the literature, supplemented with modeling data (USPSTF, 2021; ACS 2018; NCI 2013; USCR, 2011).

For this subgroup, the Task Force concluded that the utility of screening is limited, given the time it takes for a polyp to develop into a clinically observable malignancy (10–26 years) (USPSTF, 2021; NCI 2013; USCR, 2011).

Moreover, individuals aged 86 and older are likely to have multiple comorbidities that influence any potential life-year gain (USPSTF, 2021; ACS 2018; NCI 2013; USCR, 2011). They are also at increased risk of suffering from adverse events related to performance of a colonoscopy; with the rate of adverse events being 2.8 per 1,000 procedures and increased by seven-fold if a polypectomy is performed (USPSTF, 2016; CDC 2012; NCI, 2013).

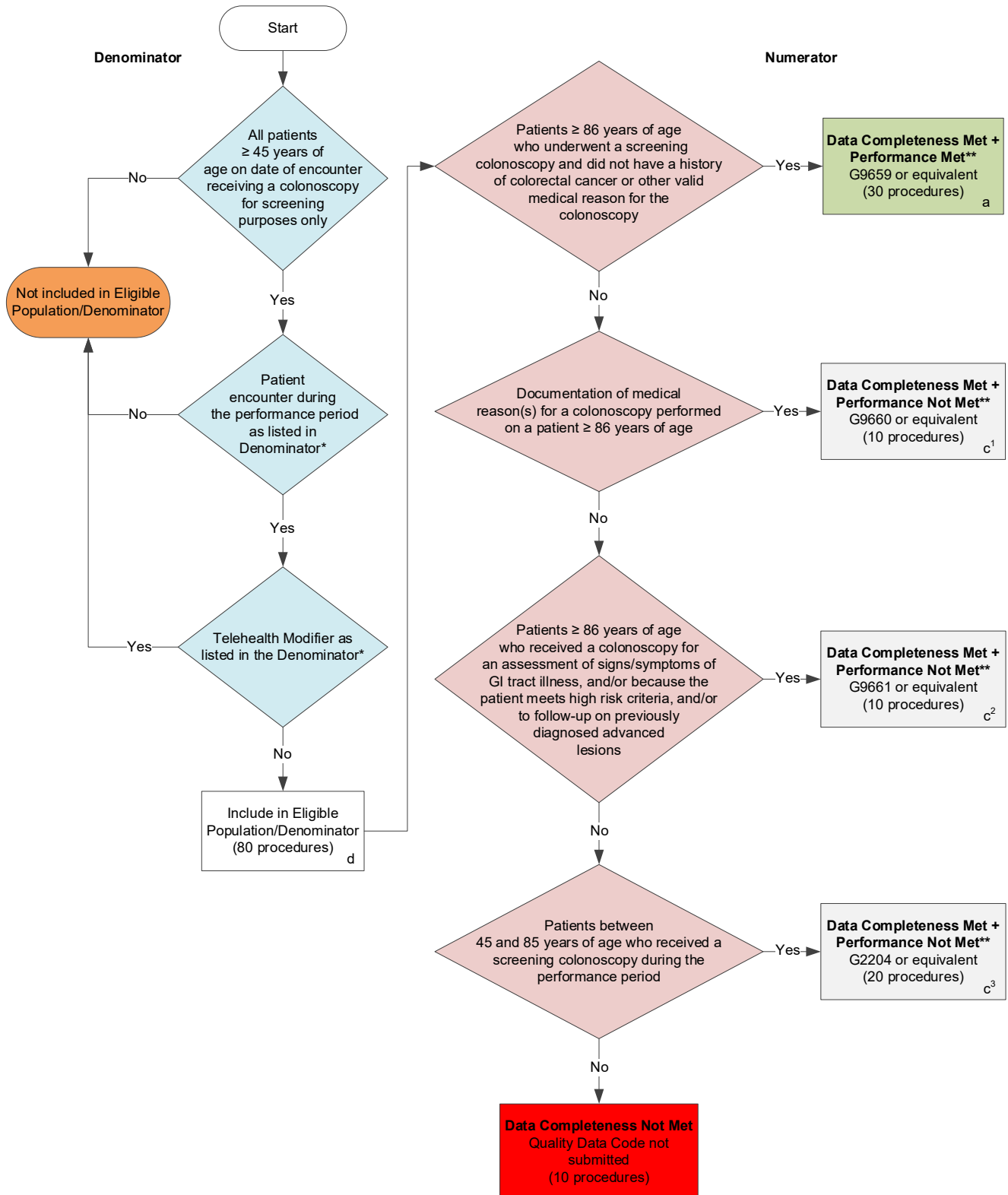
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2024 Clinical Quality Measure Flow for Quality ID #439: Age Appropriate Screening Colonoscopy

Disclaimer: Refer to the measure specification for specific coding and instructions to submit this measure.



SAMPLE CALCULATIONS

Data Completeness=

$$\frac{\text{Performance Met (a=30 procedures)} + \text{Performance Not Met (c}^1\text{+c}^2\text{+c}^3\text{=40 procedures)}}{\text{Eligible Population / Denominator (d=80 procedures)}} = \frac{70 \text{ procedures}}{80 \text{ procedures}} = 87.50\%$$

Performance Rate=**

$$\frac{\text{Performance Met (a=30 procedures)}}{\text{Data Completeness Numerator (70 procedures)}} = \frac{30 \text{ procedures}}{70 \text{ procedures}} = 42.86\%$$

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

**A lower calculated performance rate for this measure indicates better clinical care or control.

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.

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2024 Clinical Quality Measure Flow Narrative for Quality ID #439: Age Appropriate Screening Colonoscopy

Disclaimer: Refer to the measure specification for specific coding and instructions to submit this measure.

1. Start with Denominator
2. Check *All patients greater than or equal to 45 years of age on date of encounter receiving a colonoscopy for screening purposes only*:
 - a. If *All patients greater than or equal to 45 years of age on date of encounter receiving a colonoscopy for screening purposes only* equals No, do not include in *Eligible Population/Denominator*. Stop processing.
 - b. If *All patients greater than or equal to 45 years of age on date of encounter receiving a colonoscopy for screening purposes only* equals Yes, proceed to check *Patient encounter during the performance period as listed in Denominator**.
3. Check *Patient encounter during the performance period as listed in Denominator**:
 - a. If *Patient encounter during the performance period as listed in Denominator** equals No, do not include in *Eligible Population/Denominator*. Stop processing.
 - b. If *Patient encounter during the performance period as listed in Denominator** equals Yes, proceed to check *Telehealth Modifier as listed in the Denominator**.
4. Check *Telehealth Modifier as listed in the Denominator**:
 - a. If *Telehealth Modifier as listed in the Denominator** equals Yes, do not include in *Eligible Population/Denominator*. Stop processing.
 - b. If *Telehealth Modifier as listed in the Denominator** equals No, include in *Eligible Population/Denominator*.
5. Denominator Population:
 - 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.
6. Start Numerator
7. Check *Patients greater than or equal to 86 years of age who underwent a screening colonoscopy and did not have a history of colorectal cancer or other valid medical reason for the colonoscopy*:
 - a. If *Patients greater than or equal to 86 years of age who underwent a screening colonoscopy and did not have a history of colorectal cancer or other valid medical reason for the colonoscopy* equals Yes, include in *Data Completeness Met and Performance Met***.
 - *Data Completeness Met and Performance Met*** is represented in the Data Completeness and Performance Rate in the Sample Calculation listed at the end of this document. Letter a equals 30 procedures in Sample Calculation.
 - b. If *Patients greater than or equal to 86 years of age who underwent a screening colonoscopy and did not have a history of colorectal cancer or other valid medical reason for the colonoscopy* equals No, proceed to check *Documentation of medical reason(s) for a colonoscopy performed on a patient greater than or equal to 86 years of age*.

8. Check *Documentation of medical reason(s) for a colonoscopy performed on a patient greater than or equal to 86 years of age*:
 - a. If *Documentation of medical reason(s) for a colonoscopy performed on a patient greater than or equal to 86 years of age* equals Yes, include in *Data Completeness Met and Performance Not Met***.
 - *Data Completeness Met and Performance Not Met*** is represented in the Data Completeness in the Sample Calculation listed at the end of this document. Letter c¹ equals 10 procedures in the Sample Calculation.
 - b. If *Documentation of medical reason(s) for a colonoscopy performed on a patient greater than or equal to 86 years of age* equals No, proceed to check *Patients greater than or equal to 86 years of age who received a colonoscopy for an assessment of signs/symptoms of GI tract illness, and/or because the patient meets high risk criteria, and/or to follow-up on previously diagnosed advanced lesions*.
9. Check *Patients greater than or equal to 86 years of age who received a colonoscopy for an assessment of signs/symptoms of GI tract illness, and/or because the patient meets high risk criteria, and/or to follow-up on previously diagnosed advanced lesions*:
 - a. If *Patients greater than or equal to 86 years of age who received a colonoscopy for an assessment of signs/symptoms of GI tract illness, and/or because the patient meets high risk criteria, and/or to follow-up on previously diagnosed advanced lesions* equals Yes, include in *Data Completeness Met and Performance Not Met***.
 - *Data Completeness Met and Performance Not Met*** is represented in the Data Completeness in the Sample Calculation listed at the end of this document. Letter c² equals 10 procedures in the Sample Calculation.
 - b. If *Patients greater than or equal to 86 years of age who received a colonoscopy for an assessment of signs/symptoms of GI tract illness, and/or because the patient meets high risk criteria, and/or to follow-up on previously diagnosed advanced lesions* equals No, proceed to check *Patients between 45 and 85 years of age who received a screening colonoscopy during the performance period*.
10. Check *Patients between 45 and 85 years of age who received a screening colonoscopy during the performance period*:
 - a. If *Patients between 45 and 85 years of age who received a screening colonoscopy during the performance period* equals Yes, include in *Data Completeness Met and Performance Not Met***.
 - *Data Completeness Met and Performance Not Met*** is represented in the Data Completeness in the Sample Calculation listed at the end of this document. Letter c³ equals 20 procedures in the Sample Calculation.
 - b. If *Patients between 45 and 85 years of age who received a screening colonoscopy during the performance period* equals No, proceed to check *Data Completeness Not Met*.
11. Check *Data Completeness Not Met*:
 - 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 the Sample Calculation.

Sample Calculations

Data Completeness equals Performance Met (a equals 30 procedures) plus Performance Not Met (c^1 plus c^2 plus c^3 equals 40 procedures) divided by Eligible Population/Denominator (d equals 80 procedures). All equals 70 procedures divided by 80 procedures. All equals 87.50 percent.

Performance Rate** equals Performance Met (a equals 30 procedures) divided by Data Completeness Numerator (70 procedures). All equals 30 procedures divided by 70 procedures. All equals 42.86 percent.

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

**A lower calculated performance rate for this measure indicates better clinical care or control.

NOTE: Submission Frequency: Procedure

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