Measure #73: Plan for Chemotherapy Documented Before Chemotherapy Administered

DESCRIPTION:

Percentage of patients, regardless of age, with a diagnosis of breast, colon, or rectal cancer who are receiving intravenous chemotherapy for whom the planned chemotherapy regimen (which includes, at a minimum: drug(s) prescribed, dose, and duration) is documented prior to the initiation of a new treatment regimen

INSTRUCTIONS:

This measure is to be reported a minimum of once per reporting period for patients with breast, colon, or rectal cancer seen during the reporting period. It is anticipated that clinicians who treat patients with breast, colon, or rectal cancer who are receiving intravenous chemotherapy administration will submit this measure.

This measure is reported using CPT Category II codes:

ICD-9 diagnosis codes, CPT E/M service codes and CPT procedure codes are used to identify patients who are included in the measure's denominator. CPT Category II codes are used to report the numerator of the measure.

When reporting the measure, submit the listed ICD-9 diagnosis codes, CPT E/M service codes, CPT procedure codes, and the appropriate CPT Category II codes <u>OR</u> the CPT Category II code(s) <u>with</u> the modifier. The modifier allowed for this measure is: 8P- reasons not otherwise specified. There are no allowable performance exclusions for this measure.

NUMERATOR:

Patients for whom the planned chemotherapy regimen (which includes, at a minimum: drug(s) prescribed, dose, and duration) is documented prior to the initiation of a new treatment regimen

Numerator Coding:

Plan for Chemotherapy Documented

CPT II 0519F: Planned chemotherapy regimen, including at a minimum: drug(s) prescribed, dose, and duration, documented prior to initiation of a new treatment regimen

OR

Plan for Chemotherapy not Documented, Reason not Specified

Append a reporting modifier (8P) to CPT Category II code 0519F to report circumstances when the action described in the numerator is not performed and the reason is not otherwise specified.

• 8P: Plan for chemotherapy not documented, reason not otherwise specified

DENOMINATOR:

All patients, regardless of age, with a diagnosis of breast, colon, or rectal cancer who are receiving intravenous chemotherapy

Denominator Coding:

An ICD-9 diagnosis code for breast, colon, or rectal cancer, a CPT E/M service code and a CPT procedure code for intravenous chemotherapy administration are required to identify patients for denominator inclusion.

ICD-9 diagnosis codes: 153.0, 153.1, 153.2, 153.3, 153.4, 153.5, 153.6, 153.7, 153.8, 153.9, 154.0, 154.1, 154.2, 154.3, 154.8, 174.0, 174.1, 174.2, 174.3, 174.4, 174.5, 174.6, 174.8, 174.9

AND

CPT E/M service codes: 99201, 99202, 99203, 99204, 99205, 99212, 99213, 99214, 99215

AND

CPT procedure codes: 96401, 96402, 96405, 96406, 96409, 96411, 96413, 96415, 96416, 96417, 96420, 96422, 96423, 96425, 96440, 96445, 96450, 96521, 96522, 96523, 96542, 96549

RATIONALE:

A detailed plan for the chemotherapy regimen is a critical component of ensuring high quality care for patients. There are no exclusions for this measure.

CLINICAL RECOMMENDATION STATEMENTS:

American Society of Clinical Oncology, "Chemotherapy Treatment Summary," specifies that a treatment plan should include the following information about the planned chemotherapy regimen:

- Chemotherapy regimen and starting dosages
- Duration of treatment and number of planned cycles (ASCO)