## Continuity of Care — Recall System

This measure is to be reported for all patients, regardless of age, with a new diagnosis of melanoma or a history of melanoma — a minimum of **once** per reporting period.

## **Measure description**

Percentage of patients, regardless of age, with a current diagnosis of melanoma or a history of melanoma who were entered into a recall system with the date for the next complete physical skin examination specified at least once within 12 months

## What will you need to report for each patient with a new diagnosis of melanoma or a history of melanoma for this measure?

If you select this measure for reporting, you will report:

 Whether or not you entered the patient's information into a recall system<sup>1</sup> with the date for the next complete physical skin examination specified

## What if this process or outcome of care is not appropriate for your patient?

There may be times when it is not appropriate to enter the patient's information into a recall system, due to:

System reasons (eg, melanoma being monitored by another physician provider)

In these cases, you will need to indicate that the system reason applies, and specify the reason on the worksheet and in the medical chart. The office/billing staff will then report a code with a modifier that represents these valid reasons (also called exclusions).

<sup>1</sup>To satisfy this measure, the recall system *must* be linked to a process for notifying patients when their next physical exam is due and *must* include the following elements at a minimum: patient identifier, patient contact information, cancer diagnosis(es), date(s) of initial cancer diagnosis (if known), and the target date for the next complete physical exam.