

Chemotherapy for Stage III Colon Cancer Patients

*This measure is to be reported for all patients aged 18 years and older with colon cancer — a minimum of **once** per reporting period.*

Measure description

Percentage of patients aged 18 years and older with Stage IIIA through IIIC colon cancer who are referred for adjuvant chemotherapy, prescribed¹ adjuvant chemotherapy, or have previously received adjuvant chemotherapy within the 12-month reporting period

What will you need to report for each patient with colon cancer for this measure?

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

- The documented AJCC Cancer Stage of colon cancer for every patient¹

If the patient has Stage III colon cancer, you will then need to report:

- Whether or not you referred for or prescribed adjuvant chemotherapy or documented that the patient previously received adjuvant chemotherapy² during the 12 month reporting period³

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

There may be times when it is not appropriate to refer for or prescribe adjuvant chemotherapy, due to:

- Medical reasons (eg, medical comorbidities, diagnosis date more than 5 years prior to the current visit date; patient's cancer has metastasized; medical contraindication/allergy, poor performance status) OR
- Patient reasons (eg, patient refusal) OR
- System reasons (eg, patient is currently enrolled in a clinical trial that precludes prescription of chemotherapy)

In these cases, you will need to indicate which 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).

¹“Prescribed” includes patients who are currently receiving medication(s) that follow the treatment plan recommended at an encounter during the reporting period, even if the prescription for that medication was ordered prior to the encounter.

²According to current NCCN guidelines, the following therapies are recommended: 5-fluorouracil/leucovorin or capecitabine, or 5-fluorouracil/leucovorin/oxaliplatin.

³Neoadjuvant and adjuvant chemotherapy should be reported. The reporting clinician is not required to have written the initial prescription; ‘prescribed’ can include managing treatment started by another clinician.