Quality Measure: Cancer Screening in 2020

The quality measures for cancer screening in 2020 are similar to those in past years, with a few small changes.

### CMS Quality Measures

<table>
<thead>
<tr>
<th>CMS 122</th>
<th>DM: HbA1c poor control (&gt;9%)</th>
<th>Lab, but must be ordered and drawn</th>
</tr>
</thead>
<tbody>
<tr>
<td>CMS 123</td>
<td>DM: Foot exam (18-75)</td>
<td>Preventive Medicine-Quality Measure</td>
</tr>
<tr>
<td>CMS 124</td>
<td>Cervical cancer screening (21-64)</td>
<td>Pap = Lab. If elsewhere, place order &amp; scan</td>
</tr>
<tr>
<td>CMS 125</td>
<td>Breast cancer screening (50-74)</td>
<td>Mammo = Di. If elsewhere, place order &amp; scan</td>
</tr>
<tr>
<td>CMS 127</td>
<td>Pneumococcal vaccine (≥65)</td>
<td>Had the vaccine</td>
</tr>
<tr>
<td>CMS 130</td>
<td>Colorectal screening (50-75)</td>
<td>Colonoscopy, Cologuard, FIT</td>
</tr>
</tbody>
</table>

### Cervical Cancer Screening

For all women aged 21 to 64 who have a cervix, a Pap without HPV testing should be done every 3 years (the USPSTF recommends against HPV testing in women under age 30), or a Pap with HPV testing should be done every 5 years (typically done for women age 30 and older). If the testing is done at Prima CARE, the quality measure (found in CDSS) is automatically satisfied – no additional steps are necessary.

However, if the Pap smear is done outside of Prima CARE, the report of the Pap smear must be scanned into the lab subfolder of the patient documents folder. Then this document was be linked to an order for a Pap smear.

To link the scan to an order, click on the ellipsis next to “Attached”.

Then click on “New” in the lab folder. If the lab folder doesn't open after clicking on the ellipsis above, make sure the Pap smear has been filed in the lab subfolder of the patient documents folder.
Click on the ellipsis...

… and select the correct Pap smear from the lab compendium.

Make sure to adjust the order date and collection date to the date the Pap smear was done. Then click on the “Results” tab.

Make sure to check the box next to “Received” - this is what makes this count toward the quality measure benchmark. Make sure the result date is accurate. Clicked “Reviewed” and then “OK” (I like to add a brief statement in the “Result” box, but this is not necessary).
Check the box next to the Pap smear that was just entered – and click “OK” at the bottom right of the screen (not shown in the screenshot below).

The order for the Pap smear has now been attached to the Pap smear results. In the lab folder, there will now be a gray paperclip next to the order – which when clicked will open the Pap smear report (in this test patient, I scanned in an image of a Pap smear – in a real patient, a report of the Pap smear would be seen). This now satisfies the quality measure for cervical cancer screening.

If the woman had a hysterectomy (with removal of the cervix), she is excluded from this measure IF there is an operative note scanned into eCW. So long as the operative note has been scanned in to eCW, no additional documentation is needed in the Preventive Medicine folder.

However, if no hysterectomy operative note can be found, documentation of the absence of a cervix noted on physical exam suffices to exclude the patient so long as this is documented in the “Notes” section of the Quality Measures folder.
This alert should also be suppressed CDSS. Click on the icon of the hand, click the box “Never Remind”, and then click on the ellipsis to open the notes box to report the reason for suppression (in this case – a past hysterectomy).

**Breast Cancer Screening**

For women aged 50 to 74, a mammogram should be done every 2 years. If the mammogram is performed a Prima CARE radiology, nothing more needs to be done. If this is done outside of Prima CARE, the report should be scanned into eCW and linked to an order for a mammogram (the same workflow shown earlier for Pap smears – the only difference is that the mammogram report must be filed in the imaging documents folder).

The only qualifying exclusion for this measure is a history of a bilateral mastectomy (or 2 unilateral mastectomies).

Operative notes should be scanned into eCW, and this should be documented in the Quality Measure Exclusion folder. I would also suggest suppressing the alert in CDSS.
Colorectal Cancer Screening

Colon cancer screening can be accomplished by any of the following:

- Colonoscopy in the past 10 years
- CT colonography in the past 5 years
- FIT testing in the current measurement year (2019)
- Flexible sigmoidoscopy in the past 5 years
- FIT-DNA testing done in the past 3 years

If any of these tests/procedures are performed at Prima CARE, nothing more needs to be done (CT colonography is not currently performed at Prima CARE). If they are done outside of Prima CARE, the result needs to be scanned into eCW (either into the lab folder or DI folder, depending on the test), and then linked to an order (using the workflow described above for Pap smears).

Since July, 2019, many of the Prima CARE colonoscopies have been done at our ambulatory surgical center. The ASC module can be accessed from the Hub, progress notes, and telephone/web encounters.

Colonoscopy reports can be found easily in ASC encounters. Any colonoscopy done at Prima CARE will automatically satisfy the colon cancer screening quality measure.

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