

- 1. CMS Measure ID/CMS QCDR ID: CAP1
- 2. Measure Title: Turnaround Time (TAT) Standard biopsies
- 3. **Measure Description:** Measurement of the TAT for surgical pathology biopsy reports that meet a minimum two (2) business day requirement, an indicator of a laboratory's efficiency, and also impacts coordination of patient care.
- 4. **Denominator:** Total number of standard biopsies completed.
- Numerator: Number of standard biopsies meeting a 2-day (48 business hours or 2 business days) TAT.

## 6. **Definitions:**

- a. Standard biopsies any biopsy (e.g. CPT 88305<sup>1</sup>) received on a patient in which special handling is not required.
- Special handling cases requiring further fixation, decalcification, ancillary testing (such as special stains, immunohistochemistry, and molecular studies), or deeper sections.
- Turnaround time (TAT) The day the specimen is accessioned in the lab to the day the final report is signed out. Business days counted only.
- d. Signed Out The pathology report with a final diagnosis is released.

## 7. Denominator Exclusions:

- a. Cases requiring special handling (these cases could be excluded when codes other than 88305 are associated with a case).
- b. Biopsy associated with another specimen type (i.e. 88307, 88309).
- 8. Denominator Exceptions:
  - a. Cases requiring intra-departmental or extra-departmental consultation.
  - b. Skin excisions with margins coded as 88305.
- 9. Numerator Exclusions: None.
- 10. **Rationale:** The average TAT for surgical pathology biopsy reports is an indicator of a laboratory's efficiency and can also effect coordination of patient care. Prior studies have shown that the average time to verification for small hospitals is 2 days.

11. NQF Number: N/A

12. eCQM Number: N/A

13. NQS Domain: Communication and Care Coordination

Last Updated 7/12/2018 1

<sup>&</sup>lt;sup>1</sup> Note – That this is meant as a guide and not sufficient for inclusion in the denominator; not all 88305s are included in the measure. CPT® contained in the Measures specifications is copyright 2004-2017 American Medical Association.

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14. Outcome or High Priority?: High Priority

15. High Priority Type: Care Coordination

16. Measure Type: Process

17. Inverse Measure: No

18. Proportional Measure: Yes

19. Continuous Variable Measure: No

20. Ratio Measure: No.

- 21. If Continuous Variable and/or Ratio is chosen, what would be the range of the score(s)?: N/A
- 22. Number of performance rates to be submitted: 1
- 23. Overall Performance Rate if more than 1 performance rate is to be submitted: N/A
- 24. Is the Measure Risk-Adjusted?: No
- 25. Data Source: Laboratory Information System
- Reference: Novis DA1, Zarbo RJ, Saladino AJ. <u>Interinstitutional comparison of surgical biopsy diagnosis turnaround time: a College of American Pathologists Q-Probes study of 5384 surgical biopsies in 157 small hospitals</u>. Arch Pathol Lab Med. 1998
  Nov;122(11):951-6.

Last Updated 7/12/2018 2