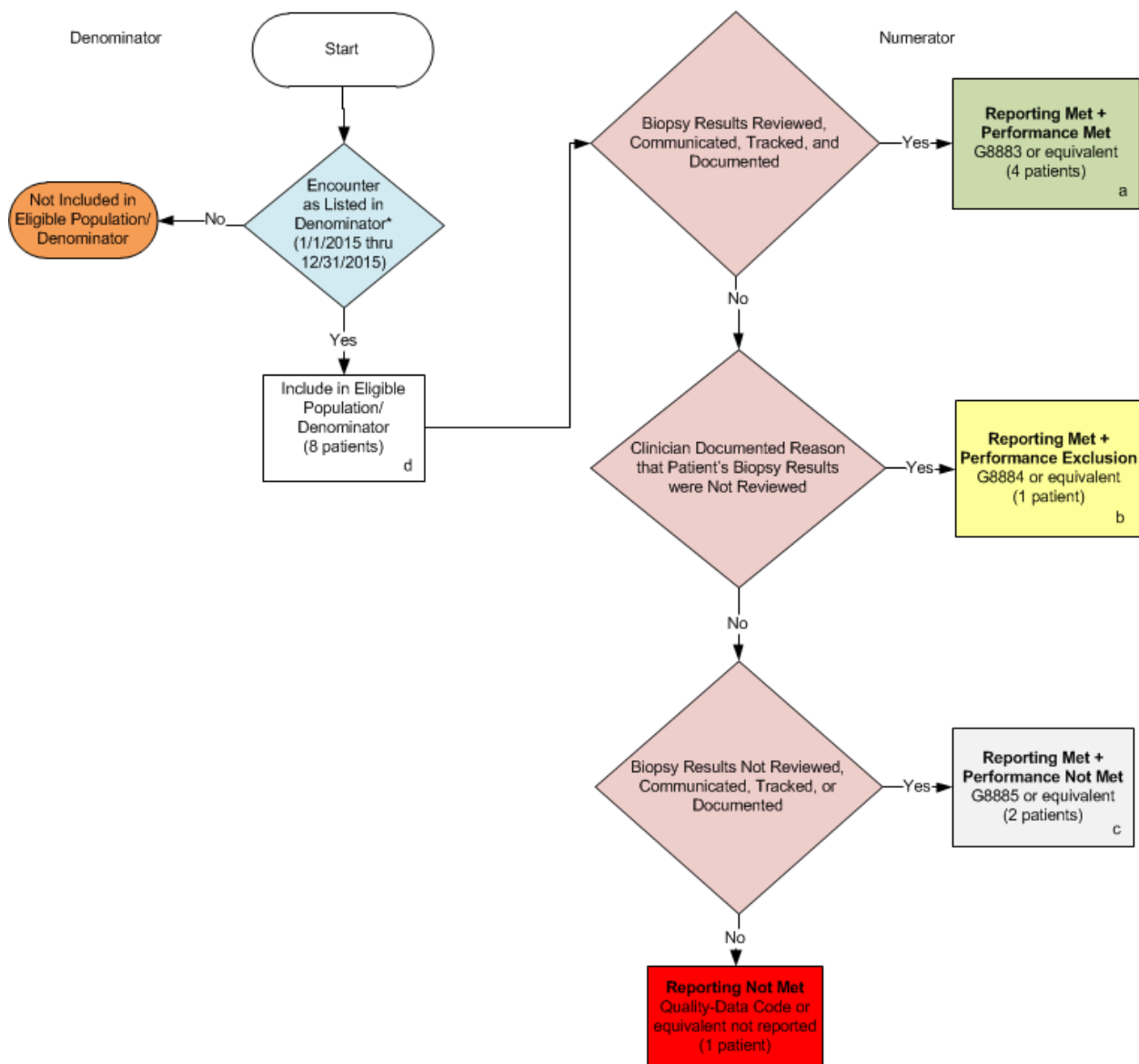


**2015 Registry Individual Measure Flow
PQRS #265 NQF 0645#: Biopsy Follow-Up**



SAMPLE CALCULATIONS:

Reporting Rate=

$$\frac{\text{Performance Met (a=4 patients)} + \text{Performance Exclusion (b=1 patient)} + \text{Performance Not Met (c=2 patients)}}{\text{Eligible Population / Denominator (d=8 patients)}} = \frac{7 \text{ patients}}{8 \text{ patients}} = 87.50\%$$

Performance Rate=

$$\frac{\text{Performance Met (a=4 patients)}}{\text{Reporting Numerator (7 patients) - Performance Exclusion (b=1 patient)}} = \frac{4 \text{ patients}}{6 \text{ patients}} = 66.67\%$$

*See the posted Measure Specification for specific coding and instructions to report this measure.
NOTE: Reporting Frequency: Patient-Process

2015 Registry Individual Measure Flow
PQRS #265 NQF 0645#: Biopsy Follow-Up

Please refer to the specific section of the Measure Specification to identify the denominator and numerator information for use in reporting this Individual Measure.

1. Start with Denominator
2. Check Encounter Performed:
 - a. If Encounter as Listed in the Denominator equals No, do not include in Eligible Patient Population. Stop Processing.
 - b. If Encounter as Listed in the Denominator equals Yes, include in the Eligible population.
3. Denominator Population:
 - a. Denominator population is all Eligible Patients in the denominator. Denominator is represented as Denominator in the Sample Calculation listed at the end of this document. Letter d equals 8 patients in the sample calculation.
4. Start Numerator
5. Check Biopsy Results Reviewed, Communicated, Tracked and Documented:
 - a. If Biopsy Results Reviewed, Communicated, Tracked and Documented equals Yes, include in Reporting Met and Performance Met.
 - b. Reporting Met and Performance Met letter is represented in the Reporting Rate and Performance Rate in the Sample Calculation listed at the end of this document. Letter a equals 4 patients in Sample Calculation.
 - c. If Biopsy Results Reviewed, Communicated, Tracked and Documented equals No, proceed to Clinical Documented Reason that Patient's Biopsy Results were not Reviewed.
6. Check Clinical Documented Reason that Patient's Biopsy Results were not Reviewed:
 - a. If Clinical Documented Reason that Patient's Biopsy Results were not Reviewed equals Yes, include in Reporting Met and Performance Exclusion.
 - b. Reporting Met and Performance Exclusion letter is represented in the Reporting Rate and Performance Rate in the Sample Calculation listed at the end of this document. Letter b equals 1 patient in the Sample Calculation.
 - c. If Clinical Documented Reason that Patient's Biopsy Results were not Reviewed equals No, proceed to Biopsy Results Not, Reviewed, Communicated, Tracked or Documented.
7. Check Biopsy Results Not, Reviewed, Communicated, Tracked or Documented:
 - a. If Biopsy Results Not, Reviewed, Communicated, Tracked or Documented equals Yes, include in the Reporting Met and Performance Not Met.
 - b. Reporting Met and Performance Not Met letter is represented in the Reporting Rate in the Sample Calculation listed at the end of this document. Letter c equals 2 patients in the Sample Calculation.
 - c. If Biopsy Results Not, Reviewed, Communicated, Tracked or Documented equals No, proceed to Reporting Not Met.
8. Check Reporting Not Met:

- a. If Reporting Not Met equals No, Quality Data Code or equivalent not reported. 1 patient has been subtracted from the reporting numerator in the sample calculation.

SAMPLE CALCULATIONS:

Reporting Rate=

$$\frac{\text{Performance Met (a=4 patients) + Performance Exclusion (b=1 patient) + Performance Not Met (c=2 patients)}}{\text{Eligible Population / Denominator (d=8 patients)}} = \frac{7 \text{ patients}}{8 \text{ patients}} = 87.50\%$$

Performance Rate=

$$\frac{\text{Performance Met (a=4 patients)}}{\text{Reporting Numerator (7 patients) - Performance Exclusion (b=1 patient)}} = \frac{4 \text{ patients}}{6 \text{ patients}} = 66.67\%$$