AAO39: Neck Mass Evaluation

High Priority Status: No / N/A
CBE Number: N/A

Measure Description:
Percentage of patients aged 18 years and older diagnosed with a neck mass and suspected/increased risk of malignancy who had a fine needle aspiration (FNA), or refer the patient to someone who can perform FNA with tumor human papillomavirus (HPV) test and receive a neck computed tomography (or magnetic resonance imaging) with contrast.

Instructions:
This measure is to be submitted a minimum of **once per performance period** for patients with a new neck mass. This measure may be submitted by clinicians based on the services provided and the measure-specific denominator coding. This measure has two strata separated by numerical indicators (i.e., denominator exception 2 is evaluated in the instance numerator 2 is not performed).

Denominator:
1. Patients aged 18 years and older diagnosed with a neck mass and *suspected/increased risk of malignancy
2. Patients aged 18 years and older diagnosed with a neck mass and *suspected/increased risk of malignancy

Denominator Note:
- Patients with a neck mass who are at increased risk for malignancy because the patient lacks a history of infectious etiology, and the mass has been present for ≥ 2 weeks without significant fluctuation or the mass is of uncertain duration.
- Patients with a neck mass who are at increased risk for malignancy based on ≥ 1 of these physical examination characteristics: fixation to adjacent tissues, firm consistency, size > 1.5 cm, or ulceration of overlying skin.
- Documentation

Denominator Exclusions:
1. None
2. None

Numerator:
1. Patients that have a FNA, or refer the patient to someone who can perform FNA with human papillomavirus (HPV) test.
2. Patients that received a neck computed tomography scan or magnetic resonance imaging with contrast.

Note: This measure assesses the completion of an FNA prior to an open biopsy, if further testing is required.

Denominator Exceptions:
1. Documentation of a system reason for not completing an FNA (i.e., cytopathologist unavailable to read FNA)
2. FNA results negative for malignancy.

Measure Classifications:
Submission Pathway: Traditional MIPS
Measure Type: Process
High Priority Type: Patient Safety
Meaningful Measures Area: Appropriate Use of Healthcare

Care Setting(s): Ambulatory Care: Clinician Office/Clinic
Includes Telehealth: No
Number of Performance Rates: 2
    Inverse measure: No
    Continuous measure: No
    Proportional measure: Yes
    Ratio measure: No
    Risk Adjusted measure: No

Empowering otolaryngologist–head and neck surgeons to deliver the best patient care