

New NCQA HEDIS Measure Related to Follow-up Colonoscopy

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NCQA Is Developing a New HEDIS Measure for Colorectal Cancer Screening Follow-Up

- NCQA is partnering with the ***Council of Medical Specialty Societies (CMSS)*** and the ***American Gastroenterological Association*** to develop a new HEDIS® measure to improve follow-up care for patients with abnormal colorectal cancer screening results. The project is funded by the ***Centers for Disease Control and Prevention***.
 - ACS-NCCRT members consulting with the ***CMSS*** include Frank Colangelo, Richard Wender, and Robert Smith.



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- NCQA's current HEDIS measure for colorectal cancer screening evaluates the percentage of people 45–75 who had appropriate screening for colorectal cancer.
- In MY 2023, colorectal cancer screening rates were 56% for commercial, 64% for Medicare, and 39% for Medicaid.
- **If a patient has a positive test, and test is not followed up, then the screening exam is not complete.**
- National guidelines do not identify a time frame for completing a follow-up colonoscopy after an abnormal test.
- Follow-up rates vary widely—from 24% to 75%--and NCQA felt they needed consensus on how quickly to follow up on abnormal test results.
- **Patients who had an initial positive stool-based test, but did not have a follow-up colonoscopy, are twice as likely to die as those who had a follow-up colonoscopy.**



Measure Development Process

- The proposed measure will evaluate appropriate follow-up after an abnormal index screening result. NCQA measure development follows this process:
- Review evidence and convene experts to advise on measure development.
- Present the draft measure to NCQA advisory panels.
- Test the measure with health plans and health care delivery systems.
- Solicit feedback on the proposed measure through public comment.

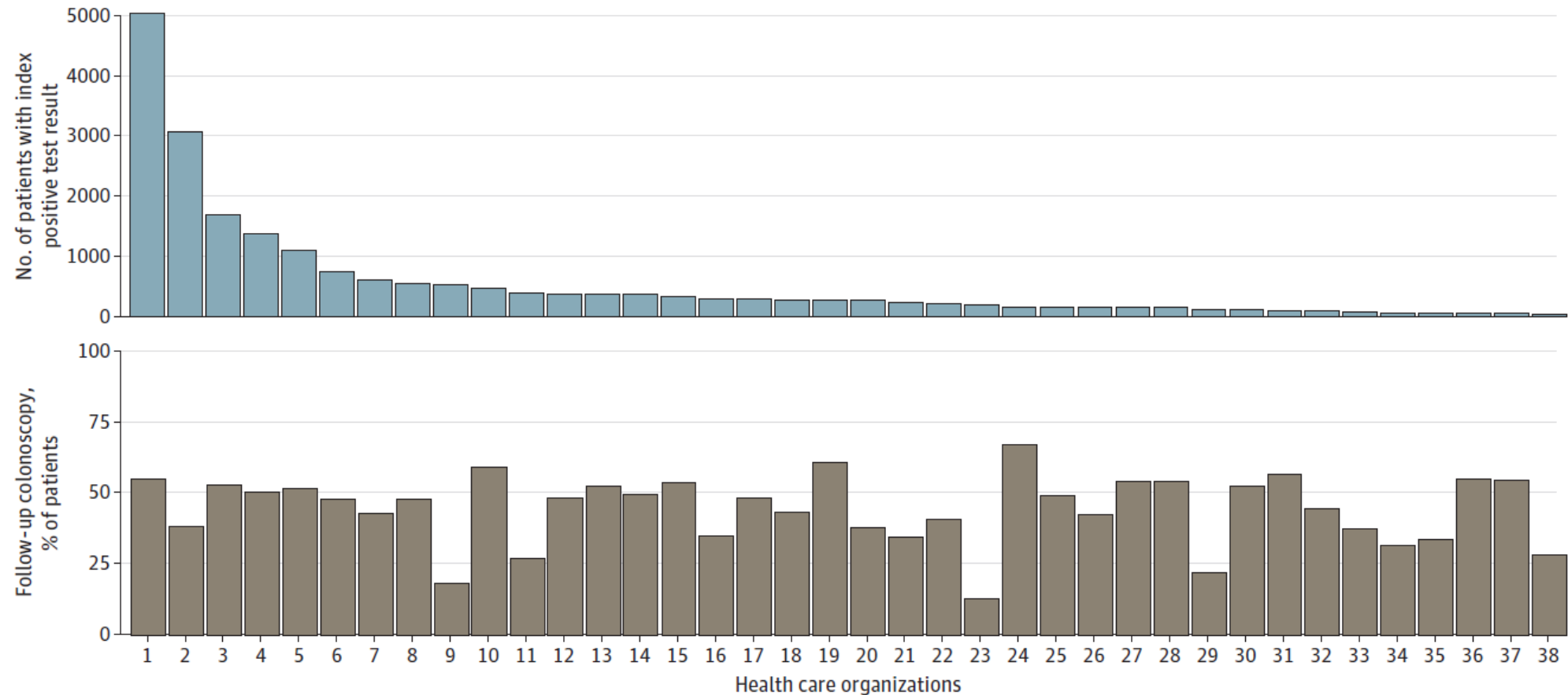
Development of a Follow-Up Measure to Ensure Complete Screening for Colorectal Cancer

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• Key Points

- **Question** What are the supporting evidence, feasibility, reliability, and validity of a quality performance measure on follow-up colonoscopy after an abnormal result of a stool-based screening test (SBT) for colorectal cancer (CRC)?
- **Findings** In this quality improvement study including 20,581 adults at 38 health care organizations, 48% of patients received a colonoscopy within 6 months after an abnormal result of an SBT for CRC. A quality measure that tracks follow-up rates within 6 months of SBT is feasible, valid, and reliable.
- **Meaning** These findings suggest that a measure on follow-up colonoscopy after an abnormal result of an SBT for CRC is warranted based on low current performance rates and high feasibility, validity, and measurement reliability.

Measure Performance, by Health Care Organization and Volume of Tests With Positive Results, 2018



Follow-up colonoscopy within 180 days of abnormal stool-based test ranged from 13.1% to 66.9% (median, 47.9%) across 38 health care organizations.



NCQA Is Recruiting Organizations to Participate in Measure Testing---March 2025

- “NCQA seeks health plans and health care delivery systems to test the availability and completeness of structured data from electronic clinical databases and to help us determine the feasibility of assessing colorectal cancer screening follow-up.”

Questions?

