★ AAD 31: Actinic Keratoses: Discussion With Patients About Potential Use Of Field-Directed Therapies Prior to Destruction of Actinic Keratoses (17004 code) – National Quality Strategy Domain: Person and Caregiver-Centered Experience and Outcomes & Efficiency and Cost Reduction

DESCRIPTION:

Actinic keratoses are the second most common diagnosis made by dermatologists in the United States, accounting for 15.3% of visits. When treating multiple visible or subclinical actinic keratosis (AK) lesions, applying field-directed therapy is an effectual treatment option that greatly reduces further AK development and may reduce the risk of squamous cell carcinoma (SCC). Field-directed therapies such as topical chemotherapeutics, photodynamic therapy, and chemical peels have been shown to also be cost-effective as they account for only 6% of the \$920 million spent on AK treatment annually despite being used for 26% of patients. Two-thirds of patients reflect a preference for field-based therapies treatments.

The ability of field treatments to provide lower-cost treatment that reduces clinical and subclinical lesions has made it a mainstay of society guidelines for the treatment of actinic keratoses. Discussing the potential benefits of field therapies with patients who have numerous actinic keratoses may not only improve the efficiency of treatment, but the patient's experiences and outcomes.

INSTRUCTIONS:

This measure will be reported at least once per 12-month reporting period. To satisfy this measure, patients undergoing destruction of 15 or more AKs need a statement such as the following documented in their chart at least once during the reporting period: "The patient was informed of the risks and benefits of using field-directed therapy and their questions were answered."

Measure Reporting via Registry

ICD-10-CM diagnosis codes, CPT codes or HCPCS codes and patient demographics are used to identify patients who are included in the measure's denominator. The listed numerator options are used to report the numerator of the measure.

The quality-data codes listed do not need to be submitted for registry-based submissions; however, these codes may be submitted for those registries that utilize claims data.

DENOMINATOR:

All patients with destruction of 15 or more AKs in a single visit (code 17004).

NUMERATOR

Number of patients with destruction of 15 or more AKs who have documentation of a discussion of risks and benefits of using field-directed therapy with their physician.

Exclusion(s):

Patients with satisfactory documentation of a discussion of risks and benefits of using field-directed therapy in the previous 12 months.

Potential Benchmarks: >80%

This benchmark will be adjusted based on the mean and standard deviation of the previous reporting years.

RATIONALE:

Actinic keratoses are the second most common diagnosis made by dermatologists in the United States, accounting for 15.3% of visits. With two-thirds of patients reflecting a preference for field-directed therapy treatment and the ability of field treatments to provide lower-cost treatment

that reduces clinical and sub-clinical lesions; it has become a mainstay of society guidelines for the treatment of actinic keratoses. Discussing the potential benefits of field therapies with patients who have numerous actinic keratoses may not only improve the efficiency of treatment, but the patient's experiences and outcomes.

<u>CLINICAL RECOMMENDATION STATEMENTS:</u>
This measure will assess patients with destruction of 15 or more AKs who had a discussion of risks and benefits of field-directed therapy with their physician documented in their chart. By having this discussion with patients, it can result in improved treatment efficacy and patient experience and outcome.

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