

Measure #61. Melanoma Continuity of Care—Recall System

CARE COORDINATION MEASURE MAPPING TABLE

	MEASUREMENT PERSPECTIVE		
	<i>Patient/Family</i>	<i>Health Care Professional(s)</i>	<i>System Representative(s)</i>
CARE COORDINATION ACTIVITIES			
Establish accountability or negotiate responsibility			
Communicate			
<i>Interpersonal communication</i>			
<i>Information transfer</i>			
Facilitate transitions			
<i>Across settings</i>			
<i>As coordination needs change</i>			
Assess needs and goals			
Create a proactive plan of care			
Monitor, follow up, and respond to change			□
Support self-management goals			
Link to community resources			
Align resources with patient and population needs			
BROAD APPROACHES POTENTIALLY RELATED TO CARE COORDINATION			
Teamwork focused on coordination			
Health care home			
Care management			
Medication management			
Health IT-enabled coordination			

Legend:

- = ≥ 3 corresponding measure items
- = 1-2 corresponding measure items

Melanoma Continuity of Care—Recall System

Purpose: To measure the percentage of patients, regardless of age, with a current diagnosis of melanoma or a history of melanoma whose information was entered, at least once within a 12 month period, into a recall system that includes: a target date for the next complete physical skin exam and a process to follow up with patients who either did not make an appointment within the specified timeframe or who missed a scheduled appointment.¹

Format/Data Source: This process measure requires administrative claims data and data collected from the medical record.¹

Date: Measure released in 2007¹

Perspective: System Representative(s)

Measure Item Mapping:

This measure maps to the following domains. There are no individual measure items to map.

- **Monitor, follow-up, and respond to change**

Development and Testing: The measure was endorsed by NQF as part of their preferred practices and performance measures for measuring and reporting care coordination, released in September 2010.²

Link to Outcomes or Health System Characteristics: None described in the sources identified.

Logic Model/Conceptual Framework: The measure is based on clinical guidelines from both the National Comprehensive Cancer Network (NCCN) and the British National Institute for Health and Clinical Excellence (NICE).¹

Country: United States

Past or Validated Applications*:

- **Patient Age:** Not Age Specific
- **Patient Condition:** Combined Chronic Conditions, Cancer/Oncology
- **Setting:** Not Setting Specific

*Based on the sources listed below and input from the measure developers.

Notes:

- Detailed measure specifications are included in the American Academy of Dermatology/Physician Consortium for Performance Improvement/National Committee for Quality Assurance Melanoma II Physician Performance Measurement Set.¹
- Because the NQF-endorsed preferred practices and performance measures for measuring and reporting care coordination were released shortly before completion of the *Atlas*, we were not able to contact the measure developers about any on-going measure development or testing. Additional information may become available in the future.

Sources:

1. American Academy of Dermatology, Physician Consortium for Performance Improvement, National Committee for Quality Assurance. Melanoma II Physician Performance Measurement Set. Chicago, IL, and Washington, DC: American Medical Association and National Committee for Quality Assurance; 2007.
2. National Quality Forum. Preferred practices and performance measures for measuring and reporting care coordination: a consensus report. Washington, DC: National Quality Forum; 2010.