2025 Quality ID PIMSH13: Oncology: Mutation Testing for Stage IV Lung Cancer Completed Prior to the Start of Targeted Therapy

--High Priority Type: Appropriate Use

-- Measure Type: Process

2025 COLLECTION TYPE:

QCDR-- Practice Insights by McKesson in Collaboration with The US Oncology Network

DATA SOURCES USED FOR THE MEASURE:

Practice Insights by McKesson in Collaboration with The US Oncology Network - QCDR - EHR: Medical record, including lab results.

DESCRIPTION:

Proportion of stage IV nsNSCLC patients tested for actionable biomarkers and received targeted therapy or chemotherapy based on biomarker results.

DENOMINATOR:

Patients with stage IV non-squamous, NSCLC receiving initial treatment during the measurement period AND patient encounter during the performance period.

DENOMINATOR EXCEPTION:

None

DENOMINATOR EXCLUSION:

Patients on clinical trial

NUMERATOR:

Patients who received mutation testing for all actionable biomarkers at Stage IV diagnosis of nsNSCLC (including NTRK1/2/3, RET, MET, ROS1, EGFR, EGFR T790M, BRAF mutation, ALK rearrangement, CD274(PD-L1), KRAS, ERBB2 mutation) AND lung cancer treated with appropriate mutation-directed therapy or standard chemotherapy if biomarker results are negative.

NUMERATOR NOTE:

Mutation testing may include tissue and/or liquid biopsy options

NUMERATOR EXCLUSION:

None

TELEHEALTH:

Included

MIPS REPORTING OPTIONS:

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MVP, Traditional MIPS

CLINICAL RECOMMENDATION STATEMENTS:

This measure is endorsed by The US Oncology Network Steering Committee. Recent discovery of some of the driver mutations for NSCLC have advanced more individualized and targeted treatment options. It is now a standard recommendation that patients with advanced NSCLC undergo routine molecular testing to identify certain abnormalities which influence treatment selection to improve efficacy. Guidelines:

NCCN Practice Guidelines in Oncology. Non-Small Cell Lung Cancer.

http://www.nccn.org/professionals/physicians_gls/pdf/nsclc.pdf. Published July 14, 2017.

2017 CAP/IASLC/AMP guideline recommendations for biomarker testing in NSCLC.Lindeman NI, Cagle PT, Beasley MB, et al. Molecular testing guideline for selection of lung cancer patients for EGFR and ALK tyrosine kinase inhibitors: guideline from the College of American Pathologists, International Association for the Study of Lung Cancer, and Association for Molecular Pathology. J Mol Diagn. 2013;15(4):415-453.

ASCO provisional clinical opinion: Epidermal growth factor receptor (EGFR) mutation testing for patients with advanced non-small-cell lung cancer considering first-line EGFR tyrosine kinase inhibitor therapy. (2011).

QCDR MEASURE RATIONALE:

Clinicians still face considerable challenges when establishing and implementing biomarker testing standards, including interpreting large-scale genomic data from multiple tumor types, making it difficult to stay current with practice standards. A recent study of oncologists assessed the degree to which a patient with NSCLC's genetic makeup impacted first-line treatment decisions. 60% of oncologists in the US did not base their treatment decisions on a patient's genetic mutation subtype. Despite ordering mutation tests, 21% determined the treatment regimen for their patients before the mutation test results were available. Overall, 23% of clinicians did not consider EGFR mutation subtypes in making treatment decisions. (Spicer, 2015) Monitoring of appropriate biomarker testing through quality measurement and providing that feedback to physicians is a first step to understanding clinical practice guideline compliance to optimize diagnosis and management of NSCLC. References:

Mason C, et al. Patterns of biomarker testing rates and appropriate use of targeted therapy in the first-line, metastatic non-small cell lung cancer treatment setting. J Clin Pathways. 2018; 4(1): 49-54.

Levy, BP, et al. Molecular testing for treatment of metastatic non-small cell lung cancer: how to implement evidence-based recommendations. The Oncologist 2015; 20: 1175-1181.

Spicer J, et al. EGFR mutation testing and oncologist treatment choice in advanced NSCLC: global trends and differences. Ann Oncol. 2015; 26(1): i57-i61.

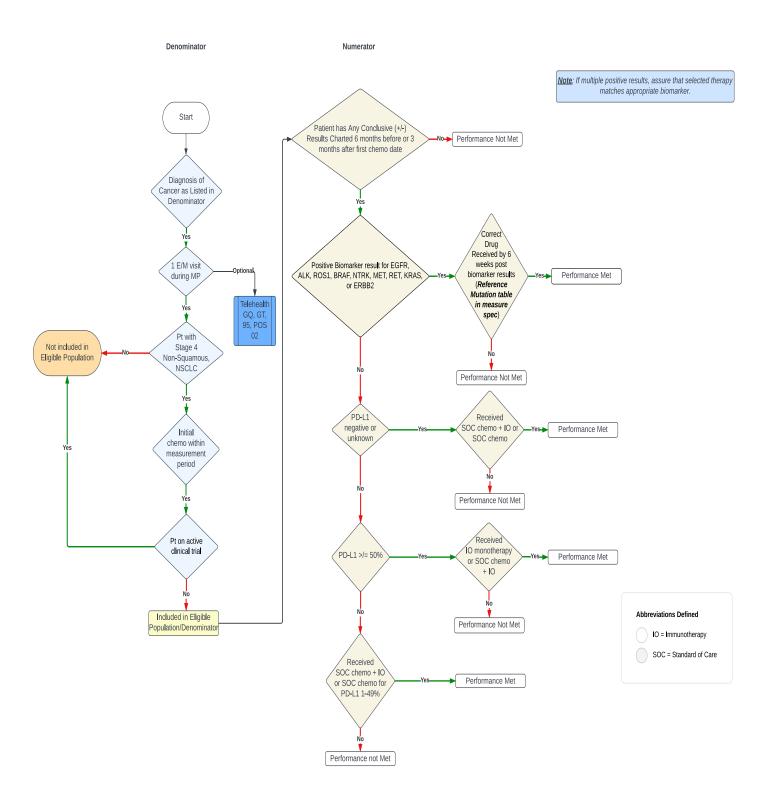
These performance measures are not clinical guidelines and do not establish a standard of medical care and have not been tested for all potential applications.

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Disclaimer: Refer to the measure specification details and value sets for measure guidance.





Value Sets for PIMSH13: Oncology: Mutation Testing for Stage IV Lung Cancer Completed Prior to the Start of Targeted Therapy

Diagnosis Codes:

| NIH National Libra | ry of Medicine | | | |
|---------------------------|---|-------------|---------------------|------------------------|
| Value Set Authority Cente | er e | | | |
| alue Set Name | Non Small Cell Lung Cancer | | | |
| ode System | ICD10CM SNOMEDCT | | | |
| ID | 2.16.840.1.113883.3.1434.1005 | | | |
| ype | Grouping | | | |
| Definition Version | 20190116 | | | |
| iteward | College of American Pathologists Steward | | | |
| | **This update was generated by VSAC to align with code changes published by the code system of one or more member value sets.** | | | |
| xpansion Version | Latest | | | |
| xpansion Status | Active | | | |
| xpanded Code List | | | | |
| Code | ▼ Description | Code System | Code System Version | Code System OID |
| 34.00 | Malignant neoplasm of unspecified main bronchus | ICD10CM | 2024 | 2.16.840.1.113883.6.90 |
| 34.01 | Malignant neoplasm of right main bronchus | ICD10CM | 2024 | 2.16.840.1.113883.6.90 |
| 34.02 | Malignant neoplasm of left main bronchus | ICD10CM | 2024 | 2.16.840.1.113883.6.90 |
| 34.10 | Malignant neoplasm of upper lobe, unspecified bronchus or lung | ICD10CM | 2024 | 2.16.840.1.113883.6.90 |
| 34.11 | Malignant neoplasm of upper lobe, right bronchus or lung | ICD10CM | 2024 | 2.16.840.1.113883.6.90 |
| 34.12 | Malignant neoplasm of upper lobe, left bronchus or lung | ICD10CM | 2024 | 2.16.840.1.113883.6.90 |
| 34.2 | Malignant neoplasm of middle lobe, bronchus or lung | ICD10CM | 2024 | 2.16.840.1.113883.6.90 |
| 34.30 | Malignant neoplasm of lower lobe, unspecified bronchus or lung | ICD10CM | 2024 | 2.16.840.1.113883.6.90 |
| 34.31 | Malignant neoplasm of lower lobe, right bronchus or lung | | 2024 | 2.16.840.1.113883.6.90 |
| 34.32 | Malignant neoplasm of lower lobe, left bronchus or lung | ICD10CM | 2024 | 2.16.840.1.113883.6.90 |
| 34.80 | Malignant neoplasm of overlapping sites of unspecified bronchus and lung | ICD10CM | 2024 | 2.16.840.1.113883.6.90 |
| 34.81 | Malignant neoplasm of overlapping sites of right bronchus and lung | ICD10CM | 2024 | 2.16.840.1.113883.6.90 |
| 34.82 | Malignant neoplasm of overlapping sites of left bronchus and lung | ICD10CM | 2024 | 2.16.840.1.113883.6.90 |
| 34.90 | Malignant neoplasm of unspecified part of unspecified bronchus or lung | ICD10CM | 2024 | 2.16.840.1.113883.6.90 |
| 34.91 | Malignant neoplasm of unspecified part of dispective biolicities of lung | | 2024 | 2.16.840.1.113883.6.90 |
| | | ICD10CM | 2024 | |

| luation and Management Codes: | Telehealth Modifiers: |
|---|--------------------------------------|
| E/M Codes 99202 99203 99204 99205 99212 99213 99214 99215 | Telehealth Modifiers GQ GT 95 POS 02 |

| Mutation Table: | | | |
|-----------------|----------------------------|--|--|
| MUTATION | EXPRESSION | THERAPEUTIC AGENT | |
| ALK | ALK Rearrangement Positive | Crizotinib Ceritinib Alectinib Lorlatinib Brigatinib | |
| | | | |
| ALK | Negative | Standard of Care Chemo | |
| | | | |
| ALK | Equivocal | Standard of Care Chemo | |

| BRAF | BRAF V600E Mutation Positive | Dabrafenib Vemurafenib Dabrafenib + Trametinib Encorafenib |
|------|---|--|
| | | Binimetinib Encorafenib + Binimetinib Standard of Care Chemo |
| | | |
| BRAF | Other BRAF Mutation | Standard of Care Chemo |
| | | |
| BRAF | Negative | Standard of Care Chemo |
| | 1 | I |
| EGFR | EGFR Sensitizing Mutation Positive | Erlotinib Afatinib Osimertinib Gefitinib Dacomitinib |
| EGFR | EGFR Sensitizing Mutation Positive (Only Exon19 deletions/L858R) | Osimertinib + Pemetrexed + Carbo/Cis Erlotinib + Ramucirumab Erlotinib + Bevacizumab |
| EGFR | * EGFR T790M Mutation Positive | Osimertinib |
| | | |
| EGFR | Other EGFR Mutation | Standard of Care Chemo |
| EGFR | Negative | |
| LOTK | regative | Standard of Care Chemo |
| EGFR | Equivocal | Standard of Care Chemo |
| EGFR | EGFR exon 20 Insertion Mutation Positive | Amivantamab-vmjw + carbo + pemetrexed Standard of Care Chemo |
| EGFR | Other EGFR exon 20 Mutation | Standard of Care Chemo |

Pembrolizumab **PD-L1 Expression** >= 50% Expression Cemiplimab Atezolizumab Standard of Care Chemo + Immunotherapy **PD-L1 Expression** 1-49% Expression **Standard of Care Chemo** Standard of Care Chemo + Immunotherapy **PD-L1 Expression** Negative **Standard of Care Chemo** Standard of Care Chemo + Immunotherapy ROS1 **ROS1 Rearrangement Positive** Crizotinib Ceritinib **Entrectinib** Lorlatinib Repotrectinib ROS1 Negative **Standard of Care Chemo** MET **MET exon 14 Skipping Mutation Positive** Capmatinib Crizotinib **Tepotinib Standard of Care Chemo** MET Other MET exon 14 Mutation Positive **Standard of Care Chemo** MET **Negative Standard of Care Chemo** NTRK **NTRK1 Gene Fusion Positive** Entrectinib Larotrectinib **Standard of Care Chemo** NTRK NTRK2 Gene Fusion Positive Entrectinib Larotrectinib **Standard of Care Chemo** NTRK **NTRK3 Gene Fusion Positive Entrectinib** Larotrectinib **Standard of Care Chemo**

| NTRK | Negative | Standard of Care Chemo |
|-------|--------------------------------|---|
| | | |
| RET | RET Rearrangement Positive | Cabozantinib Pralsetinib Selpercatinib Standard of Care Chemo |
| | | |
| RET | Negative | Standard of Care Chemo |
| | | |
| ERBB2 | ERBB2 (HER2) Mutation Positive | Standard of Care Chemo |
| | | |
| ERBB2 | Negative | Standard of Care Chemo |
| | | |
| KRAS | KRAS G12C Mutation Positive | Standard of Care Chemo |
| | | |
| KRAS | Other KRAS Mutation | Standard of Care Chemo |
| | | |
| KRAS | Negative | Standard of Care Chemo |

| Comprehensive Immunotherapy List per PD-L1 result |
|---|
| PDL1 ≥ 50% |
| Immunotherapy Alone Options |
| Pembrolizumab |
| Atezolizumab |
| Cemiplimab-rwlc |
| Immunotherapy + Standard of Care Chemo |
| Pembrolizumab |
| Atezolizumab |
| Cemiplimab-rwlc |
| Nivolumab + ipilimumab |
| Tremelimumab-actl + durvalumab |
| |
| PDL1 1-49% and negative |
| Immunotherapy + Standard of Care Chemo |
| Pembrolizumab |
| Atezolizumab |
| Cemiplimab-rwlc |
| Nivolumab + ipilimumab |
| Tremelimumab-actl + durvalumab |

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