

ACP does not support NQF 0622: "GERD - Upper Gastrointestinal Study in Adults with Alarm Symptoms." This measure, developed by ActiveHealth Management, addresses the percentage of adult patients with gastroesophageal reflux disease (GERD) with alarm symptoms who have had an upper gastrointestinal study. The PMC concludes that there is a lack of evidence that a substantial quality gap exists. Therefore, this measure may create an unjustified measurement burden and will not improve quality of care. The measure specifications do not align with the clinical evidence, which recommends the use of upper endoscopy in men and women with heartburn and alarm symptoms (dysphagia, bleeding, anemia, weight loss, and recurrent vomiting). The alarm symptoms (bleeding and recurrent vomiting) are not currently included in measure specifications and should be added to the denominator of the measure. The term "gastrointestinal study" in the numerator of the measure should be defined. For example, a barium study for diagnosis of GERD is not an evidence-based standard of care.

Date Reviewed: November 18, 2013