Quality ID #385: Adult Primary Rhegmatogenous Retinal Detachment Surgery: Visual Acuity Improvement Within 90 Days of Surgery
– National Quality Strategy Domain: Effective Clinical Care
– Meaningful Measure Area: Functional Outcomes

2021 COLLECTION TYPE:
MIPS CLINICAL QUALITY MEASURES (CQMS)

MEASURE TYPE:
Outcome – High Priority

DESCRIPTION:
Patients aged 18 years and older who had surgery for primary rhegmatogenous retinal detachment and achieved an improvement in their visual acuity, from their preoperative level, within 90 days of surgery in the operative eye

INSTRUCTIONS:
This measure is to be submitted **each time** a procedure for primary rhegmatogenous retinal detachment is performed during the performance period. This measure is intended to reflect the quality of services provided for the patient receiving primary rhegmatogenous retinal detachment surgery.

***Note**: This is an outcome measure and will be calculated solely using MIPS eligible clinician, group, or third party intermediary submitted data.*

- *For patients who receive the surgical procedures specified in the denominator coding, it should be submitted whether or not the patient achieved an improvement of their visual acuity within 90 days of surgery.*
- *Include only procedures performed through **September 30** of the performance period. This will allow the post-operative period to occur before third party intermediaries must submit data to CMS.*

Measure Submission Type:
Measure data may be submitted by individual MIPS eligible clinicians, groups, or third-party intermediaries. The listed denominator criteria are used to identify the intended patient population. The numerator options included in this specification are used to submit the quality actions as allowed by the measure. The quality-data codes listed do not need to be submitted by MIPS eligible clinicians, groups, or third-party intermediaries that utilize this modality for submissions; however, these codes may be submitted for those third party intermediaries that utilize Medicare Part B claims data. For more information regarding Application Programming Interface (API), please refer to the Quality Payment Program (QPP) website.

DENOMINATOR:
Patients aged 18 years and older who had surgery for primary rhegmatogenous retinal detachment

Denominator Criteria (Eligible Cases):
Patients aged ≥ 18 years on the date of the procedure
AND
Patient procedure during the performance period (CPT): 67107, 67108, 67110
AND NOT
DENOMINATOR EXCLUSIONS:
Patients with a pre-operative visual acuity better than 20/40
OR
Surgical procedures that included the use of silicone oil: G9757

NUMERATOR:
Patients who achieved an improvement in their visual acuity, from their preoperative level, within 90 days of surgery in the operative eye

Numerator Options:

Performance Met: Patient achieved an improvement in visual acuity, from their preoperative level, within 90 days of surgery **(G9516)**

OR

Performance Not Met: Patient did not achieve an improvement in visual acuity, from their preoperative level, within 90 days of surgery, reason not given **(G9517)**

RATIONALE:

For management and treatment for PVD and RRD, the following apply (for goals of treatment):

- Identification of the patients at risk
- Prevention of visual loss and functional impairment
- Maintenance of quality of life

All patients with risk factors should be advised to contact their ophthalmologist promptly if new symptoms such as flashes, floaters, peripheral visual field loss, or decreased visual acuity develop.

Studies demonstrate that the success rate increases with the recognition of risk factors and the practice of retina subspecialization. International studies report primary rhegmatogenous retinal surgery success rates ranging from 64 to 91%.

References:

American Academy of Ophthalmology Retina/Vitreous Panel. Preferred Practice Pattern® Guidelines. Posterior Vitreous Detachment, Retinal Breaks, and Lattice Degeneration. San Francisco, CA: American Academy of Ophthalmology; 2014, Available at: AAO Website

Wickham, BC, Wong, D, Charteris, DG, Retinal detachment repair by vitrectomy: simplified formulae to estimate the risk of failure, Br J Ophthalmology 2011 Feb 16

Sullivan PM, Luff AJ, Aylward GW. Results of primary retinal reattachment surgery: a prospective audit. Eye 1997; 11:869-71

Day S, Grossman DS, Mruthyunjaya P, Sloan FA, Lee PP. One year outcomes after retinal detachment surgery among Medicare beneficiaries. Am J Ophthalmol 2010; 150(3):338-45

CLINICAL RECOMMENDATION STATEMENTS:

This is an outcome measure. As such, no clinical recommendations are included.

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The American Association of Eye and Ear Centers of Excellence (AAEECE) significant past efforts and contributions to the development and updating of the measure is acknowledged. AAO is solely responsible for the review and enhancement ("Maintenance") of the measure as of June 5, 2015.

AAO encourages use of the measure by other health care professionals, where appropriate.

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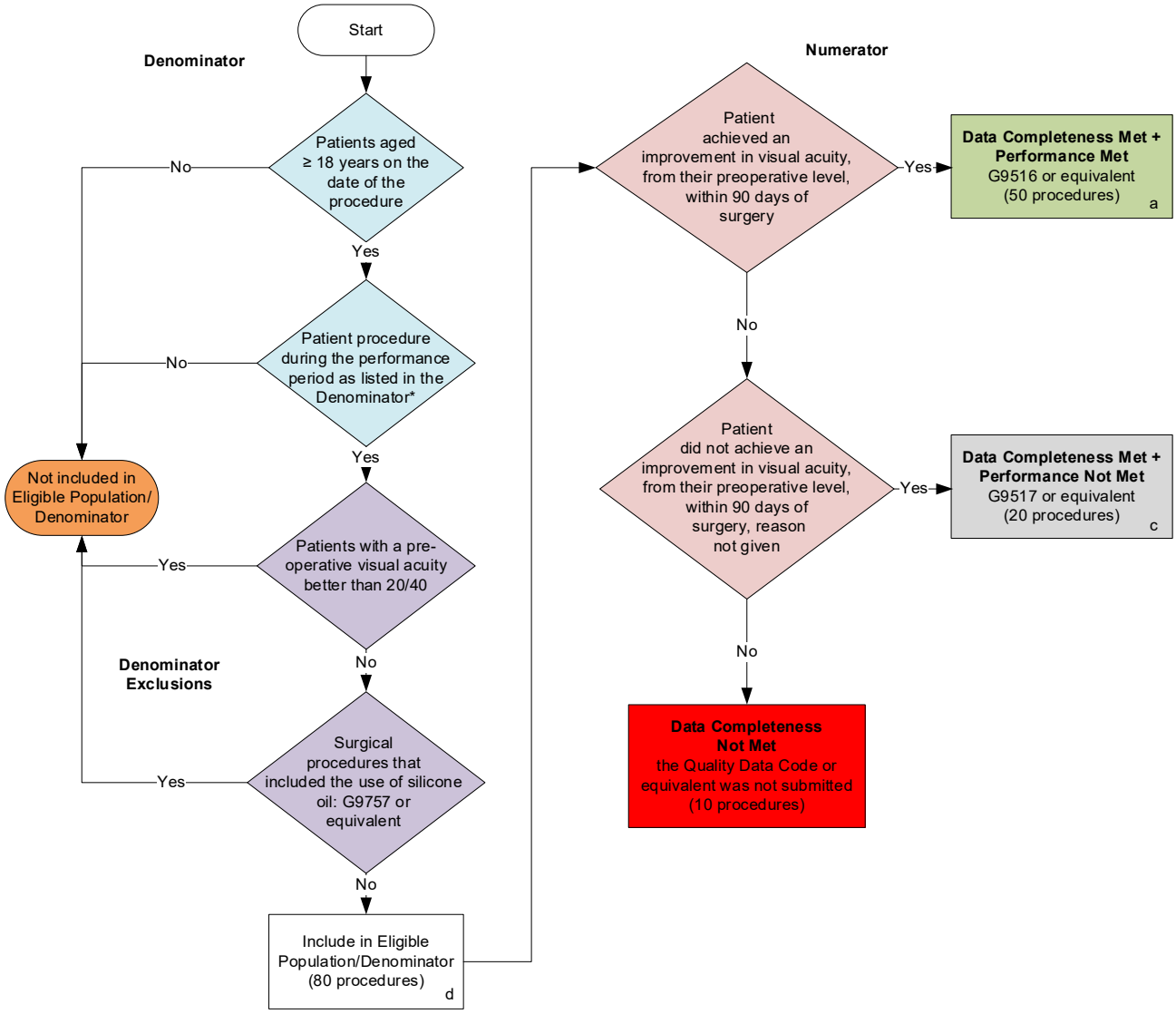
2021 Clinical Quality Measure Flow for Quality ID #385: Adult Primary Rhegmatogenous Retinal Detachment Surgery: Visual Acuity Improvement Within 90 Days of Surgery

Disclaimer: *Refer to the measure specification for specific coding and instructions to submit this measure.*



SAMPLE CALCULATIONS

Data Completeness=

Performance Met (a=50 procedures) + Performance Not Met (c=20 procedures) / Eligible Population / Denominator (d=80 procedures) = 70 procedures / 80 procedures = **87.50%**

Performance Rate=

Performance Met (a=50 procedures) / Data Completeness Numerator (70 procedures) = 50 procedures / 70 procedures = **71.43%**

* See the posted measure specification for specific coding and instructions to submit this measure.

NOTE: Submission Frequency: Procedure

2021 Clinical Quality Measure Flow Narrative for Quality ID #385:
Adult Primary Rhegmatogenous Retinal Detachment Surgery:
Visual Acuity Improvement Within 90 Days of Surgery

Disclaimer: Refer to the measure specification for specific coding and instructions to submit this measure.

1. Start with Denominator
2. Check *Patients aged greater than or equal to 18 years on the date of the procedure*:
    a. If *Patients aged greater than or equal to 18 years on the date of the procedure* equals No, do not include in *Eligible Population/Denominator*. Stop processing.
    b. If *Patients aged greater than or equal to 18 years on the date of the procedure* equals Yes, proceed to check *Patient procedure during the performance period as listed in the Denominator**.
3. Check *Patient procedure during the performance period as listed in the Denominator**:
    a. If *Patient procedure during the performance period as listed in the Denominator** equals No, do not include in *Eligible Population/Denominator*. Stop processing.
    b. If *Patient procedure during the performance period as listed in the Denominator** equals Yes, proceed to check *Patients with a pre-operative visual acuity better than 20/40*.
4. Check *Patients with a pre-operative visual acuity better than 20/40*:
    a. If *Patients with a pre-operative visual acuity better than 20/40* equals Yes, do not include in *Eligible Population/Denominator*. Stop processing
    b. If *Patients with a pre-operative visual acuity better than 20/40* equals No, check *Surgical procedures that included the use of silicone oil*.
5. Check *Surgical procedures that included the use of silicone oil*:
    a. If *Surgical procedures that included the use of silicone oil* equals Yes, do not include in *Eligible Population/Denominator*. Stop processing.
    b. If *Surgical procedures that included the use of silicone oil* equals No, include in *Eligible Population/Denominator*.
6. Denominator Population:
    a. Denominator Population is all Eligible Procedures in the Denominator. Denominator is represented as Denominator in the Sample Calculation listed at the end of this document. Letter d equals 80 procedures in the Sample Calculation.
7. Start Numerator
8. Check *Patient achieved an improvement in visual acuity, from their preoperative level, within 90 days of surgery*:
    a. If *Patient achieved an improvement in visual acuity, from their preoperative level, within 90 days of surgery* equals Yes, include in *Data Completeness Met and Performance Met*.
        - *Data Completeness Met and Performance Met* letter is represented in the Data

Completeness and Performance Rate in the Sample Calculation listed at the end of this document. Letter a equals 50 procedures in the Sample Calculation.

b. If *Patient achieved an improvement in visual acuity, from their preoperative level, within 90 days of surgery* equals No, proceed to check *Patient did not achieve an improvement in visual acuity, from their preoperative level, within 90 days of surgery, reason not given*.

9. Check *Patient did not achieve an improvement in visual acuity, from their preoperative level, within 90 days of surgery, reason not given*:

   a. If *Patient did not achieve an improvement in visual acuity, from their preoperative level, within 90 days of surgery, reason not given* equals Yes, include in *Data Completeness Met and Performance Not Met*.

      - *Data Completeness Met and Performance Not Met* letter is represented in the Data Completeness in the Sample Calculation listed at the end of this document. Letter c equals 20 procedures in the Sample Calculation.

   b. If *Patient did not achieve an improvement in visual acuity, from their preoperative level, within 90 days of surgery, reason not given* equals No, proceed to check *Data Completeness Not Met*.

10. Check *Data Completeness Not Met*:

    a. If *Data Completeness Not Met*, the Quality Data Code or equivalent was not submitted. 10 procedures have been subtracted from the Data Completeness Numerator in the Sample Calculation.

Sample Calculations

Sample Calculations: Data Completeness equals Performance Met (a equals 50 procedures) plus Performance Not Met (c equals 20 procedures) divided by Eligible Population/Denominator (d equals 80 procedures). All equals 70 procedures divided by 80 procedures. All equals 87.50 percent.

Performance Rate equals Performance Met (a equals 50 procedures) divided by Data Completeness Numerator (70 procedures). All equals 50 procedures divided by 70 procedures. All equals 71.43 percent.

* See the posted measure specification for specific coding and instructions to submit this measure.

NOTE: Submission Frequency: Procedure

The measure diagrams were developed by CMS as a supplemental resource to be used in conjunction with the measure specifications. They should not be used alone or as a substitution for the measure specification.