Quality ID #14 (NQF 0087): Age-Related Macular Degeneration (AMD): Dilated Macular Examination
– National Quality Strategy Domain: Effective Clinical Care

2018 OPTIONS FOR INDIVIDUAL MEASURES:
CLAIMS ONLY

MEASURE TYPE:
Process

DESCRIPTION:
Percentage of patients aged 50 years and older with a diagnosis of age-related macular degeneration (AMD) who had a dilated macular examination performed which included documentation of the presence or absence of macular thickening or geographic atrophy or hemorrhage AND the level of macular degeneration severity during one or more office visits within 12 months

INSTRUCTIONS:
This measure is to be submitted a minimum of once per performance period for patients seen during the performance period. It is anticipated that eligible clinicians who provide the primary management of patients with age-related macular degeneration (in either one or both eyes) will submit this measure.

Measure Submission:
The listed denominator criteria is used to identify the intended patient population. The numerator quality-data codes included in this specification are used to submit the quality actions allowed by the measure. All measure-specific coding should be submitted on the claim(s) representing the eligible encounter.

DENOMINATOR:
All patients aged 50 years and older with a diagnosis of AMD

DENOMINATOR NOTE: *Signifies that this CPT Category I code is a non-covered service under the PFS (Physician Fee Schedule). These non-covered services will not be counted in the denominator population for claims-based measures.

Denominator Criteria (Eligible Cases):
Patients aged ≥ 50 years on date of encounter
AND
AND
Patient encounter during the performance period (CPT): 92002, 92004, 92012, 92014, 99201, 99202, 99203, 99204, 99205, 99212, 99213, 99214, 99215, 99241*, 99242*, 99243*, 99244*, 99245*, 99304, 99305, 99306, 99307, 99308, 99309, 99310, 99324, 99325, 99326, 99327, 99328, 99334, 99335, 99336, 99337
WITHOUT
Telehealth Modifier: GQ, GT, 95, POS 02

NUMERATOR:
Patients who had a dilated macular examination performed which included documentation of the presence or absence of macular thickening or geographic atrophy or hemorrhage AND the level of macular degeneration severity during one or more office visits within 12 months
**NUMERATOR NOTE:** Denominator Exception(s) are determined on any date during the performance period prior to the date of the denominator eligible encounter.

**Definitions:**

**Macular Thickening** – Acceptable synonyms for “macular thickening” include: intraretinal thickening, serous detachment of the retina, pigment epithelial detachment or macular edema.

**Severity of Macular Degeneration** – Early, intermediate and advanced.

**Geographic Atrophy** - the advanced form of non-neovascular AMD, will have one or more zones of well-demarcated retinal pigment epithelial and/or choriocapillaris atrophy

**Numerator Quality-Data Coding Options:**

**Dilated Macular Examination Performed**

*Performance Met: G9974:*

Dilated macular exam performed, including documentation of the presence or absence of macular thickening or geographic atrophy or hemorrhage AND the level of macular degeneration severity

**OR**

Dilated Macular Examination not Performed for Medical or Patient Reasons

Submit code G9975 or G9892 for documented circumstances that appropriately exclude patients from the denominator.

*Denominator Exception: G9975:*

Documentation of medical reason(s) for not performing a dilated macular examination

**OR**

*Denominator Exception: G9892:*

Documentation of patient reason(s) for not performing a dilated macular examination

**OR**

Dilated Macular Examination not Performed, Reason not Otherwise Specified

Submit code G9893 for circumstances when the action described in the numerator is not performed and the reason is not otherwise specified.

*Performance Not Met: G9893:*

Dilated macular exam was not performed, reason not otherwise specified

**RATIONALE:**

A documented complete macular examination is a necessary prerequisite to determine the presence and severity of AMD, so that a decision can be made as to the benefits of prescribing antioxidant vitamins. Further, periodic assessment is necessary to determine whether there is progression of the disease and to plan the on-going treatment of the disease, since several therapies exist that reduce vision loss once the advanced “wet” form of AMD occurs. While no data exist on the frequency or absence of regular examinations of the macula for patients with AMD, parallel data for key structural assessments for glaucoma, cataract and diabetic retinopathy suggest that significant gaps are likely.

**CLINICAL RECOMMENDATION STATEMENTS:**

According to the American Academy of Ophthalmology, a physical examination should include stereoscopic biomicroscopic examination of the macula. (III; Good; Strong) Binocular slit-lamp biomicroscopy of the ocular fundus is often necessary to detect subtle clinical signs of CNV. (III; Good; Strong)
2018 Claims Flow for Quality ID #14 NQF # 0087:
Age-Related Macular Degeneration (AMD): Dilated Macular Examination

Denominator

Start

Patient Age at Date of Service ≥ 50 Years

Yes

Not Included in Eligible Population/Denominator

No

Diagnosis of AMD as Listed in Denominator*

Yes

Encounter as Listed in Denominator* (1/1/2018 thru 12/31/2018)

Yes

Telehealth Modifier: GQ, GT, 95, POS 02

No

Include in Eligible Population/ Denominator (80 patients)

Numerator

Dilated Macular Examination Performed, Including Documentation of Presence or Absence Macular Thickening or Geographic Atrophy or Hemorrhage AND the Level of Macular Degeneration Severity

Yes

Data Completeness Met + Performance Met G9974 (50 patients) a

No

Data Completeness Met + Denominator Exception G9975 (10 patients) b

Documentation of Medical Reason(s) for Not Performing a Dilated Macular Examination

Yes

Data Completeness Met + Denominator Exception G9892 (0 patients)

No

Documentation of Patient Reason(s) for Not Performing a Dilated Macular Examination

Yes

Data Completeness Met + Performance Not Met G9893 (10 patients) c

No

Data Completeness Met + Denominator Exception G9895 (10 patients)

SAMPLE CALCULATIONS:

Data Completeness=
Performance Met (a=50 patients) + Denominator Exception (b1+b2=10 patients) + Performance Not Met (c=10 patients) = Eligible Population / Denominator (d=80 patients)  
= 70 patients / 80 patients = 87.50%

Performance Rate=
Performance Met (a=50 patients)  
= 50 patients / 80 patients = 62.50%

Data Completeness Numerator (70 patients) – Denominator Exception (b1+b2=10 patients) = 60 patients

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

NOTE: Submission Frequency: Patient-process

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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.

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2018 Claims Flow for Quality ID

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Please refer to the specific section of the specification to identify the denominator and numerator information for use in submitting this Individual Specification. This flow is for claims data submission.

1. Start with Denominator

2. Check Patient Age:
   
   a. If the Age is greater than or equal to 50 years of age on Date of Service equals No during the measurement period, do not include in Eligible Patient Population. Stop Processing.
   
   b. If the Age is greater than or equal to 50 years of age on Date of Service equals Yes during the measurement period, proceed to check Patient Diagnosis.

3. Check Patient Diagnosis:
   
   a. If Diagnosis of AMD as Listed in the Denominator equals No, do not include in Eligible Patient Population. Stop Processing.
   
   b. If Diagnosis of AMD as Listed in the Denominator equals Yes, proceed to check Encounter Performed.

4. Check Encounter Performed:
   
   a. If Encounter as Listed in the Denominator equals No, do not include in Eligible Patient Population. Stop Processing.
   
   b. If Encounter as Listed in the Denominator equals Yes, include in the Eligible Population.

5. Telehealth Modifier
   
   a. If Telehealth as listed in the Denominator equals Yes, do not include in the Eligible Denominator Population. Stop Processing.
   
   b. If Telehealth as listed in the Denominator equals No, include in the Eligible Population.

6. Denominator Population:
   
   a. Denominator population is all Eligible Patients in the denominator. Denominator is represented as Denominator in the Sample Calculation listed at the end of this document. Letter d equals 80 patients in the Sample Calculation.

7. Start Numerator

8. Check Dilated Macular Examination Performed Including Documentation of Presence or Absence Macular Thickening or Hemorrhage AND the Level of Macular Degeneration Severity:
   
   a. If Dilated Macular Examination Performed Including Documentation of Presence or Absence Macular Thickening or Hemorrhage AND the Level of Macular Degeneration Severity equals Yes, include in Data Completeness Rate and Performance Met.
   
   b. Data Completeness Met and Performance Met letter is represented in the Data Completeness Rate and Performance Rate in the Sample Calculation listed at the end of this document. Letter a equals 50 patients in the Sample Calculation.
c. If Dilated Macular Examination Performed Including Documentation of Presence or Absence Macular Thickening or Hemorrhage AND the Level of Macular Degeneration Severity equals No, proceed to Documentation of Medical Reason(s) for not Performing a Dilated Macular Examination.

9. Check Documentation of Medical Reason(s) for not Performing a Dilated Macular Examination:
   a. If Documentation of Medical Reason(s) for not Performing a Dilated Macular Examination equals Yes, include in Data Completeness Met and Denominator Exception.
   b. Data Completeness Met and Denominator Exception letter is represented in the Data Completeness Rate and Performance Rate in the Sample Calculation listed at the end of this document. Letter b1 equals 10 patients in the Sample Calculation.
   c. If Documentation of Medical Reason(s) for not Performing a Dilated Macular Examination equals No, proceed to Documentation of Patient Reason(s) for not Performing a Dilated Macular Examination.

10. Check Documentation of Patient Reason(s) for not Performing a Dilated Macular Examination:
    a. If Documentation of Patient Reason(s) for not Performing a Dilated Macular Examination equals Yes, include in Data Completeness Met and Denominator Exception.
    b. Data Completeness Met and Denominator Exception letter is represented in the Data Completeness Rate and Performance Rate in the Sample Calculation listed at the end of this document. Letter b2 equals 0 patients in the Sample Calculation.
    c. If Documentation of Patient Reason(s) for not Performing a Dilated Macular Examination equals No, proceed to Dilated Macular Examination was Not Performed, Reason Not Specified.

11. Check Dilated Macular Examination was Not Performed, Reason Not Specified:
    a. If Dilated Macular Examination was Not Performed, Reason Not Specified equals Yes, include in Data Completeness Met and Performance Not Met.
    b. Data Completeness Met and Performance Not Met letter is represented in the Data Completeness Rate and Performance Rate in the Sample Calculation listed at the end of this document. Letter c equals 10 patients in the Sample Calculation.
    c. If Dilated Macular Examination was Not Performed, Reason Not Specified equals No, proceed to Data Completeness Not Met.

12. Check Data Completeness Not Met:
    a. If Data Completeness Not Met equals No, Quality Data Code not submitted. 10 patients have been subtracted from Data Completeness Numerator in the Sample Calculation.

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**SAMPLE CALCULATIONS:**

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\text{Data Completeness} = \frac{\text{Performance Met (a=50 patients) \times Denominator Exception (b1+b2=10 patients) \times Performance Not Met (c=10 patients)}}{\text{Eligible Population / Denominator (d=80 patients)}} = \frac{70}{80} = 87.50\%
\]

\[
\text{Performance Rate} = \frac{\text{Performance Met (a=50 patients)}}{\text{Data Completeness Numerator (70 patients) - Denominator Exception (b1+b2=10 patients)}} = \frac{50}{60} = 83.33\%
\]