

Quality ID #117 (NQF 0055): Diabetes: Eye Exam – National Quality Strategy Domain: Effective Clinical Care

2018 OPTIONS FOR INDIVIDUAL MEASURES:
CLAIMS ONLY

MEASURE TYPE:
Process

DESCRIPTION:
Percentage of patients 18 - 75 years of age with diabetes who had a retinal or dilated eye exam by an eye care professional during the measurement period or a negative retinal or dilated eye exam (no evidence of retinopathy) in the 12 months prior to the measurement period

INSTRUCTIONS:
This measure is to be submitted a minimum of **once per performance period** for patients with diabetes mellitus seen during the performance period. This measure may be submitted by eligible clinicians who perform the quality actions described in the measure based on services provided and the measure-specific denominator coding.

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:
Patients 18 - 75 years of age with diabetes with a visit during the measurement period

Denominator Criteria (Eligible Cases):

Patients 18 to 75 years of age on date of encounter

AND

Diagnosis for diabetes (ICD-10-CM): E10.10, E10.11, E10.21, E10.22, E10.29, E10.311, E10.319, E10.3211, E10.3212, E10.3213, E10.3219, E10.3291, E10.3292, E10.3293, E10.3299, E10.3311, E10.3312, E10.3313, E10.3319, E10.3391, E10.3392, E10.3393, E10.3399, E10.3411, E10.3412, E10.3413, E10.3419, E10.3491, E10.3492, E10.3493, E10.3499, E10.3511, E10.3512, E10.3513, E10.3519, E10.3521, E10.3522, E10.3523, E10.3529, E10.3531, E10.3532, E10.3533, E10.3539, E10.3541, E10.3542, E10.3543, E10.3549, E10.3551, E10.3552, E10.3553, E10.3559, E10.3591, E10.3592, E10.3593, E10.3599, E10.36, E10.37X1, E10.37X2, E10.37X3, E10.37X9, E10.39, E10.40, E10.41, E10.42, E10.43, E10.44, E10.49, E10.51, E10.52, E10.59, E10.610, E10.618, E10.620, E10.621, E10.622, E10.628, E10.630, E10.638, E10.641, E10.649, E10.65, E10.69, E10.8, E10.9, E11.00, E11.01, E11.21, E11.22, E11.29, E11.311, E11.319, E11.3211, E11.3212, E11.3213, E11.3219, E11.3291, E11.3292, E11.3293, E11.3299, E11.3311, E11.3312, E11.3313, E11.3319, E11.3391, E11.3392, E11.3393, E11.3399, E11.3411, E11.3412, E11.3413, E11.3419, E11.3491, E11.3492, E11.3493, E11.3499, E11.3511, E11.3512, E11.3513, E11.3519, E11.3521, E11.3522, E11.3523, E11.3529, E11.3531, E11.3532, E11.3533, E11.3539, E11.3541, E11.3542, E11.3543, E11.3549, E11.3551, E11.3552, E11.3553, E11.3559, E11.3591, E11.3592, E11.3593, E11.3599, E11.36, E11.37X1, E11.37X2, E11.37X3, E11.37X9, E11.39, E11.40, E11.41, E11.42, E11.43, E11.44, E11.49, E11.51, E11.52, E11.59, E11.610, E11.618, E11.620, E11.621, E11.622, E11.628, E11.630, E11.638, E11.641, E11.649, E11.65, E11.69, E11.8, E11.9, E13.00, E13.01, E13.10, E13.11, E13.21, E13.22, E13.29, E13.311, E13.319, E13.3211, E13.3212, E13.3213, E13.3219, E13.3291, E13.3292, E13.3293, E13.3299, E13.3311, E13.3312, E13.3313, E13.3319, E13.3391, E13.3392, E13.3393, E13.3399, E13.3411, E13.3412, E13.3413, E13.3419, E13.3491, E13.3492, E13.3493, E13.3499, E13.3511, E13.3512, E13.3513, E13.3519, E13.3521, E13.3522, E13.3523, E13.3529, E13.3531, E13.3532, E13.3533, E13.3539, E13.3541, E13.3542, E13.3543, E13.3549, E13.3551, E13.3552, E13.3553, E13.3559, E13.3591, E13.3592, E13.3593, E13.3599, E13.36, E13.37X1, E13.37X2, E13.37X3, E13.37X9, E13.39, E13.40, E13.41, E13.42, E13.43, E13.44, E13.49, E13.51, E13.52, E13.59, E13.610,

E13.618, E13.620, E13.621, E13.622, E13.628, E13.630, E13.638, E13.641, E13.649, E13.65, E13.69, E13.8, E13.9, O24.011, O24.012, O24.013, O24.019, O24.02, O24.03, O24.111, O24.112, O24.113, O24.119, O24.12, O24.13, O24.311, O24.312, O24.313, O24.319, O24.32, O24.33, O24.811, O24.812, O24.813, O24.819, O24.82, O24.83

AND

Patient encounter during the performance period (CPT or HCPCS): 92002, 92004, 92012, 92014, 99201, 99202, 99203, 99204, 99205, 99212, 99213, 99214, 99215, 99341, 99342, 99343, 99344, 99345, 99347, 99348, 99349, 99350, G0402, G0438, G0439

NUMERATOR:

Patients with an eye screening for diabetic retinal disease. This includes diabetics who had one of the following:
A retinal or dilated eye exam by an eye care professional in the measurement period or a negative retinal or dilated eye exam (no evidence of retinopathy) by an eye care professional in the year prior to the measurement period

NUMERATOR NOTE: The eye exam must be performed or reviewed by an ophthalmologist or optometrist. Alternatively, results may be read by a qualified reading center that operates under the direction of a medical director who is a retinal specialist.

Numerator Quality-Data Coding Options:

Patient receiving Hospice Services, Patient Not Eligible

Denominator Exclusion: G9714: Patient is using hospice services any time during the measurement period

OR

Retinal or Dilated Eye Exam Performed by an Eye Care Professional

Performance Met: CPT II 2022F: Dilated retinal eye exam with interpretation by an ophthalmologist or optometrist documented and reviewed

OR

Performance Met: CPT II 2024F: Seven standard field stereoscopic photos with interpretation by an ophthalmologist or optometrist documented and reviewed

OR

Performance Met: CPT II 2026F: Eye imaging validated to match diagnosis from seven standard field stereoscopic photos results documented and reviewed

OR

Performance Met: CPT II 3072F: Low risk for retinopathy (no evidence of retinopathy in the prior year)*

*Note: This code can only be used if the claim/encounter was during the measurement period because it indicates that the patient had "no evidence of retinopathy in the prior year". This code definition indicates results were negative; therefore a result is not required.

OR

Retinal or Dilated Eye Exam not Performed, Reason not Otherwise Specified

Append a submission modifier (8P) to CPT Category II code 2022F or 2024F or 2026F to submit circumstances when the action described in the numerator is not performed and the reason is not otherwise specified.

Performance Not Met: CPT II 2022F or 2024F or 2026F with 8P: Dilated eye exam was not performed, reason not otherwise specified

RATIONALE:

As the seventh leading cause of death in the U.S., diabetes kills approximately 75,000 people a year (CDC FastStats 2015). Diabetes is a group of diseases marked by high blood glucose levels, resulting from the body's inability to

produce or use insulin (CDC Statistics 2014, ADA Basics 2013). People with diabetes are at increased risk of serious health complications including vision loss, heart disease, stroke, kidney failure, amputation of toes, feet or legs, and premature death. (CDC Fact Sheet 2014).

In 2012, diabetes cost the U.S. an estimated \$245 billion: \$176 billion in direct medical costs and \$69 billion in reduced productivity. This is a 41 percent increase from the estimated \$174 billion spent on diabetes in 2007 (ADA Economic 2013).

In 2005-2008, of adults with diabetes aged 40 years or older, 4.2 million (28.5%) people had diabetic retinopathy, damage to the small blood vessels in the retina that may result in loss of vision. (CDC Statistics, 2014).

CLINICAL RECOMMENDATION STATEMENTS:

American Diabetes Association (ADA) (2017):

Adults with type 1 diabetes should have an initial dilated and comprehensive eye examination by an ophthalmologist or optometrist within 5 years after the onset of diabetes. (Level of evidence: B)

Patients with type 2 diabetes should have an initial dilated and comprehensive eye examination by an ophthalmologist or optometrist at the time of the diagnosis of diabetes. (Level of evidence: B)

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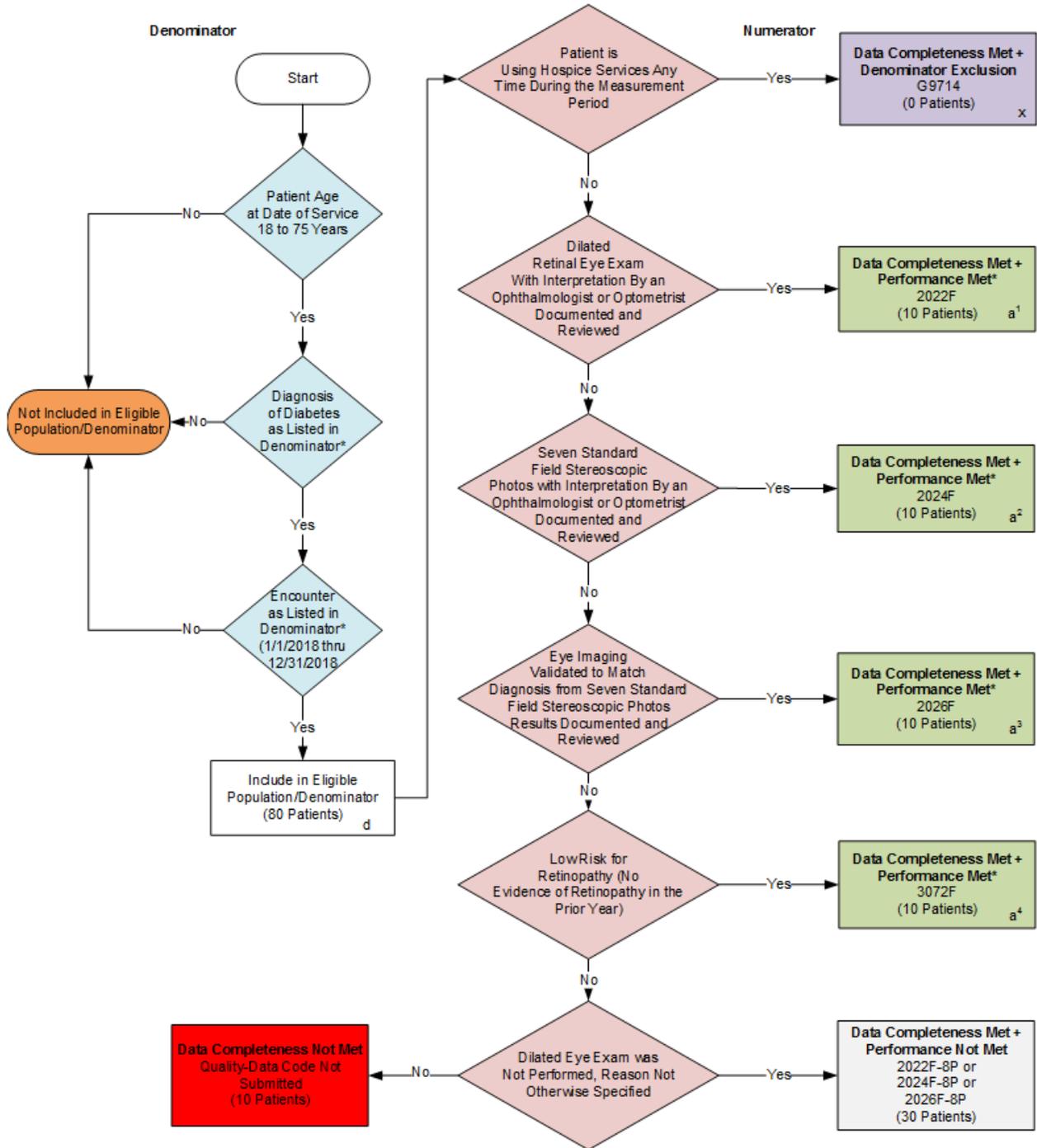
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2018 Claims Flow for Quality ID #117 NQF #0055: Diabetes: Eye Exam



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

NOTE: Submission Frequency: Patient-process

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2018 Claims Flow for Quality ID #117 NQF #0055: Diabetes: Eye Exam

SAMPLE CALCULATIONS:

Data Completeness=

$$\frac{\text{Denominator Exclusion (x=0 patients)+Performance Met (a^1+a^2+a^3+a^4=40 patients) + Performance Not Met (c=30 patients)}{\text{Eligible Population / Denominator (d=80 patients)}} = \frac{70 \text{ patients}}{80 \text{ patients}} = 87.50\%$$

Performance Rate=

$$\frac{\text{Performance Met (a^1+a^2+a^3+a^4=40 patients)}}{\text{Data Completeness Numerator (70 patients)- Denominator Exclusion (x=0 patients)}} = \frac{40 \text{ patients}}{70 \text{ patients}} = 57.14\%$$

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

NOTE: Submission Frequency: Patient-process

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**2018 Claims Flow for Quality ID
#117 NQF #0055: Diabetes: Eye Exam**

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

1. Start with Denominator
2. Check Patient Age:
 - a. If Age equal to 18 to 75 years of age on Date of Service equals No during the Measurement Period, do not include in Eligible Patient Population. Stop Processing.
 - b. If Age equal to 18 to 75 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 Diabetes as Listed in the Denominator equals No, do not include in Eligible Patient Population. Stop Processing.
 - b. If Diagnosis of Diabetes 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. 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.
6. Start Numerator
7. Check Patient is Using Hospice Services Any Time During the Measurement Period:
 - a. If Patient is Using Hospice Services Any Time During the Measurement Period equals Yes, include in Data Completeness Met and Denominator Exclusion.
 - b. Data Completeness Met and Performance Met letter is represented as Data Completeness and Performance Rate in the Sample Calculation listed at the end of this document. Letter x equals 0 patients in the Sample Calculation.
 - c. If Patient is Using Hospice Services Any Time During the Measurement Period equals No, proceed to Dilated Retinal Eye Exam with Interpretation by an Ophthalmologist or Optometrist Documented and Reviewed.
8. Check Dilated Retinal Eye Exam with Interpretation by an Ophthalmologist or Optometrist Documented and Reviewed:
 - a. If Dilated Retinal Eye Exam with Interpretation by an Ophthalmologist or Optometrist Documented and

Reviewed equals Yes, include in Data Completeness Met and Performance Met.

- b. Data Completeness Met and Performance Met letter is represented as Data Completeness and Performance Rate in the Sample Calculation listed at the end of this document. Letter a1 equals 10 patients in the Sample Calculation.
 - c. If Dilated Retinal Eye Exam with Interpretation by an Ophthalmologist or Optometrist Documented and Reviewed equals No, proceed to Seven Standard Field Stereoscopic Photos with Interpretation by an Ophthalmologist or Optometrist Documented and Reviewed.
9. Check Seven Standard Field Stereoscopic Photos with Interpretation by an Ophthalmologist or Optometrist Documented and Reviewed:
- a. If Seven Standard Field Stereoscopic Photos with Interpretation by an Ophthalmologist or Optometrist Documented and Reviewed equals Yes, include in Data Completeness Met and Performance Met.
 - b. Data Completeness Met and Performance Met letter is represented as Data Completeness and Performance Rate in the Sample Calculation listed at the end of this document. Letter a2 equals 10 patients in the Sample Calculation.
 - c. If Seven Standard Field Stereoscopic Photos with Interpretation by an Ophthalmologist or Optometrist Documented and Reviewed equals No, proceed to Eye Imaging Validated to Match Diagnosis from Seven Standard Field Stereoscopic Photos Results Documented and Reviewed.
10. Check Eye Imaging Validated to Match Diagnosis from Seven Standard Field Stereoscopic Photos Results Documented and Reviewed:
- a. If Eye Imaging Validated to Match Diagnosis from Seven Standard Field Stereoscopic Photos Results Documented and Reviewed equals Yes, include in the Data Completeness Met and Performance Met.
 - b. Data Completeness Met and Performance Met letter is represented as Data Completeness in the Sample Calculation listed at the end of this document. Letter a3 equals 10 patients in the Sample Calculation.
 - c. If Eye Imaging Validated to Match Diagnosis from Seven Standard Field Stereoscopic Photos Results Documented and Reviewed equals No, proceed to Low Risk for Retinopathy (No Evidence of Retinopathy in the Prior Year).
11. Check Low Risk for Retinopathy (No Evidence of Retinopathy in the Prior Year):
- a. If Low Risk for Retinopathy (No Evidence of Retinopathy in the Prior Year) equals Yes, include in the Data Completeness Met and Performance Met.
 - b. Data Completeness Met and Performance Met letter is represented as Data Completeness in the Sample Calculation listed at the end of this document. Letter a4 equals 10 patients in the Sample Calculation.
 - c. If Low Risk for Retinopathy (No Evidence of Retinopathy in the Prior Year) equals No, proceed to Dilated Eye Exam was Not Performed, Reason Not Otherwise Specified.
12. Check Dilated Eye Exam was Not Performed, Reason Not Otherwise Specified:
- a. If Dilated Eye Exam was Not Performed, Reason Not Otherwise Specified equals Yes, include in the Data Completeness Met and Performance Not Met.
 - b. Data Completeness Met and Performance Not Met letter is represented as Data Completeness in the Sample Calculation listed at the end of this document. Letter c equals 30 patients in the

Sample Calculation.

- c. If Dilated Eye Exam was Not Performed, Reason Not Otherwise Specified equals No, proceed to Data Completeness Not Met.

13. Check Data Completeness Not Met:

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

SAMPLE CALCULATIONS:

Data Completeness=

$$\frac{\text{Denominator Exclusion (x=0 patients)} + \text{Performance Met (a}^1 + \text{a}^2 + \text{a}^3 + \text{a}^4 = 40 \text{ patients)} + \text{Performance Not Met (c=30 patients)}}{\text{Eligible Population / Denominator (d=80 patients)}} = \frac{70 \text{ patients}}{80 \text{ patients}} = 87.50\%$$

Performance Rate=

$$\frac{\text{Performance Met (a}^1 + \text{a}^2 + \text{a}^3 + \text{a}^4 = 40 \text{ patients)}}{\text{Data Completeness Numerator (70 patients) - Denominator Exclusion (x=0 patients)}} = \frac{40 \text{ patients}}{70 \text{ patients}} = 57.14\%$$