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

REGISTRY 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 options included in this specification are used to submit the quality actions allowed by the measure. The quality-data codes listed do not need to be submitted for registry-based submissions; however, these codes may be submitted for those registries that utilize claims data.

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
AND NOT
DENOMINATOR EXCLUSION:
Patient is using hospice services any time during the measurement period: G9714

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 Options:

Performance Met:	Dilated retinal eye exam with interpretation by an ophthalmologist or optometrist documented and reviewed **(2022F)**

OR

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

OR

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

OR

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

*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

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

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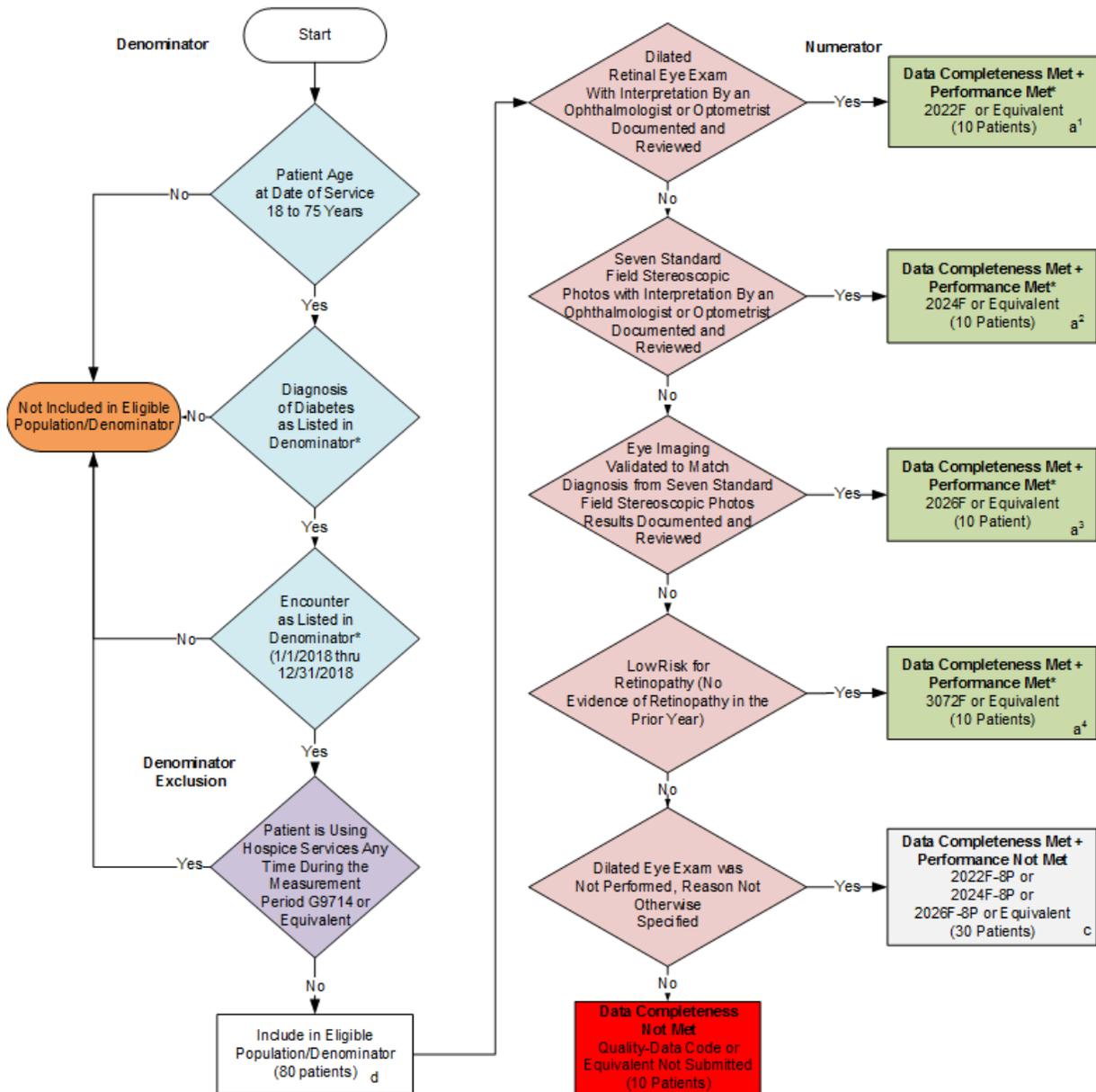
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2018 Registry Flow for Quality ID #117 NQF #0055: Diabetes: Eye Exam

Denominator

Start

Numerator

Patient Age at Date of Service 18 to 75 Years — No → **Not Included in Eligible Population/Denominator**

Yes ↓

Diagnosis of Diabetes as Listed in Denominator* — No → **Not Included in Eligible Population/Denominator**

Yes ↓

Encounter as Listed in Denominator* (1/1/2018 thru 12/31/2018) — No → **Not Included in Eligible Population/Denominator**

Yes ↓

Denominator Exclusion

Patient is Using Hospice Services Any Time During the Measurement Period G9714 or Equivalent — Yes → **Not Included in Eligible Population/Denominator**

No ↓

Include in Eligible Population/Denominator (80 patients) d

Dilated Retinal Eye Exam With Interpretation By an Ophthalmologist or Optometrist Documented and Reviewed — Yes → Data Completeness Met + Performance Met* 2022F or Equivalent (10 Patients) a¹

No ↓

Seven Standard Field Stereoscopic Photos with Interpretation By an Ophthalmologist or Optometrist Documented and Reviewed — Yes → Data Completeness Met + Performance Met* 2024F or Equivalent (10 Patients) a²

No ↓

Eye Imaging Validated to Match Diagnosis from Seven Standard Field Stereoscopic Photos Results Documented and Reviewed — Yes → Data Completeness Met + Performance Met* 2026F or Equivalent (10 Patient) a³

No ↓

LowRisk for Retinopathy (No Evidence of Retinopathy in the Prior Year) — Yes → Data Completeness Met + Performance Met* 3072F or Equivalent (10 Patients) a⁴

No ↓

Dilated Eye Exam was Not Performed, Reason Not Otherwise Specified — Yes → Data Completeness Met + Performance Not Met 2022F-8P or 2024F-8P or 2026F-8P or Equivalent (30 Patients) c

No ↓

Data Completeness Not Met Quality-Data Code or Equivalent Not Submitted (10 Patients)

SAMPLE CALCULATIONS:

Data Completeness=

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

Performance Rate=

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

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

NOTE: Submission Frequency: Patient-process

v2

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 registry 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, Check Patient Using Hospice Services Any Time During the Measurement Period.

5. 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 No, include in the Eligible Population.

    b. If Patient is Using Hospice Services Any Time During the Measurement Period equals Yes, do not include in Eligible Patient Population. Stop Processing.

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 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 and Performance Rate 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 Rear) equals Yes, include in the 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 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 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 or equivalent not submitted. 10 patients have been subtracted from the Data Completeness Numerator in the Sample Calculation.

SAMPLE CALCULATIONS:

Data Completeness=

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

Performance Rate=

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