

Quality ID #12 (NQF 0086): Primary Open-Angle Glaucoma (POAG): Optic Nerve Evaluation
– National Quality Strategy Domain: Effective Clinical Care
– Meaningful Measure Area: Management of Chronic Conditions

2019 COLLECTION TYPE:
MEDICARE PART B CLAIMS

MEASURE TYPE:
Process

DESCRIPTION:
Percentage of patients aged 18 years and older with a diagnosis of primary open-angle glaucoma (POAG) who have an optic nerve head evaluation 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 Merit-based Incentive Payment System (MIPS) eligible clinicians who provide the primary management of patients with primary open-angle glaucoma (in either one or both eyes) will submit this measure.

Measure Submission Type:
Measure data may be submitted by individual MIPS eligible clinicians using Medicare Part B claims. The listed denominator criteria are 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 on the claim form(s). All measure-specific coding should be submitted on the claim(s) representing the denominator eligible encounter and selected numerator option.

DENOMINATOR:
All patients aged 18 years and older with a diagnosis of primary open-angle glaucoma

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 Medicare Part B claims measures.

Denominator Criteria (Eligible Cases):
Patients aged ≥ 18 years on date of encounter

AND

Diagnosis for primary open-angle glaucoma (ICD-10-CM): H40.10X0, H40.10X1, H40.10X2, H40.10X3, H40.10X4, H40.1110, H40.1111, H40.1112, H40.1113, H40.1114, H40.1120, H40.1121, H40.1122, H40.1123, H40.1124, H40.1130, H40.1131, H40.1132, H40.1133, H40.1134, H40.1210, H40.1211, H40.1212, H40.1213, H40.1214, H40.1220, H40.1221, H40.1222, H40.1223, H40.1224, H40.1230, H40.1231, H40.1232, H40.1233, H40.1234, H40.151, H40.152, H40.153

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 have an optic nerve head evaluation during one or more office visits within 12 months

NUMERATOR NOTE: Denominator Exception(s) are determined on the date of the denominator eligible encounter.

Numerator Quality-Data Coding Options:

Optic Nerve Head Evaluation Performed

Performance Met: CPT II 2027F:

Optic nerve head evaluation performed

OR

Optic Nerve Head Evaluation not Performed for Medical Reasons

Append a modifier (1P) to CPT Category II code 2027F to submit documented circumstances that appropriately exclude patients from the denominator.

Denominator Exception: 2027F with 1P:

Documentation of medical reason(s) for not performing an optic nerve head evaluation

OR

Optic Nerve Head Evaluation not Performed, Reason not Otherwise Specified

Append a reporting modifier (8P) to CPT Category II code 2027F to submit circumstances when the action described in the numerator is not performed and the reason is not otherwise specified.

Performance Not Met: 2027F with 8P:

Optic nerve head evaluation was not performed, reason not otherwise specified

RATIONALE:

Changes in the optic nerve are one of two characteristics which currently define progression and thus worsening of glaucoma disease status (the other characteristic is visual field). There is a significant gap in documentation patterns of the optic nerve for both initial and follow-up care (Fremont, 2003), even among specialists (Lee, 2006).

Examination of the optic nerve head and retinal nerve fiber layer provides valuable structural information about glaucomatous optic nerve damage. Visible structural alterations of the optic nerve head or retinal nerve fiber layer and development of peripapillary choroidal atrophy frequently occur before visual field defects can be detected. Careful study of the optic disc neural rim for small hemorrhages is important, since these hemorrhages can precede visual field loss and further optic nerve damage.

When initiating therapy, the clinician sets a target range of controlled intraocular pressure (IOP) based on the pretreatment pressure and the presence of optic nerve damage. According to the AAO Glaucoma Preferred Practice Pattern, lowering the pretreatment IOP reduces the risk of developing POAG and slows the progression of POAG to preserve visual function (AAO, 2015).

CLINICAL RECOMMENDATION STATEMENTS:

Ophthalmic Evaluation

The ophthalmic evaluation specifically focuses on the following elements in the comprehensive adult medical eye evaluation:

- Visual acuity measurement
- Pupil examination
- Anterior segment examination
- IOP measurement
- Gonioscopy
- Optic nerve head (ONH) and retinal nerve fiber layer (RNFL) examination
- Fundus examination

(AAO, 2015)

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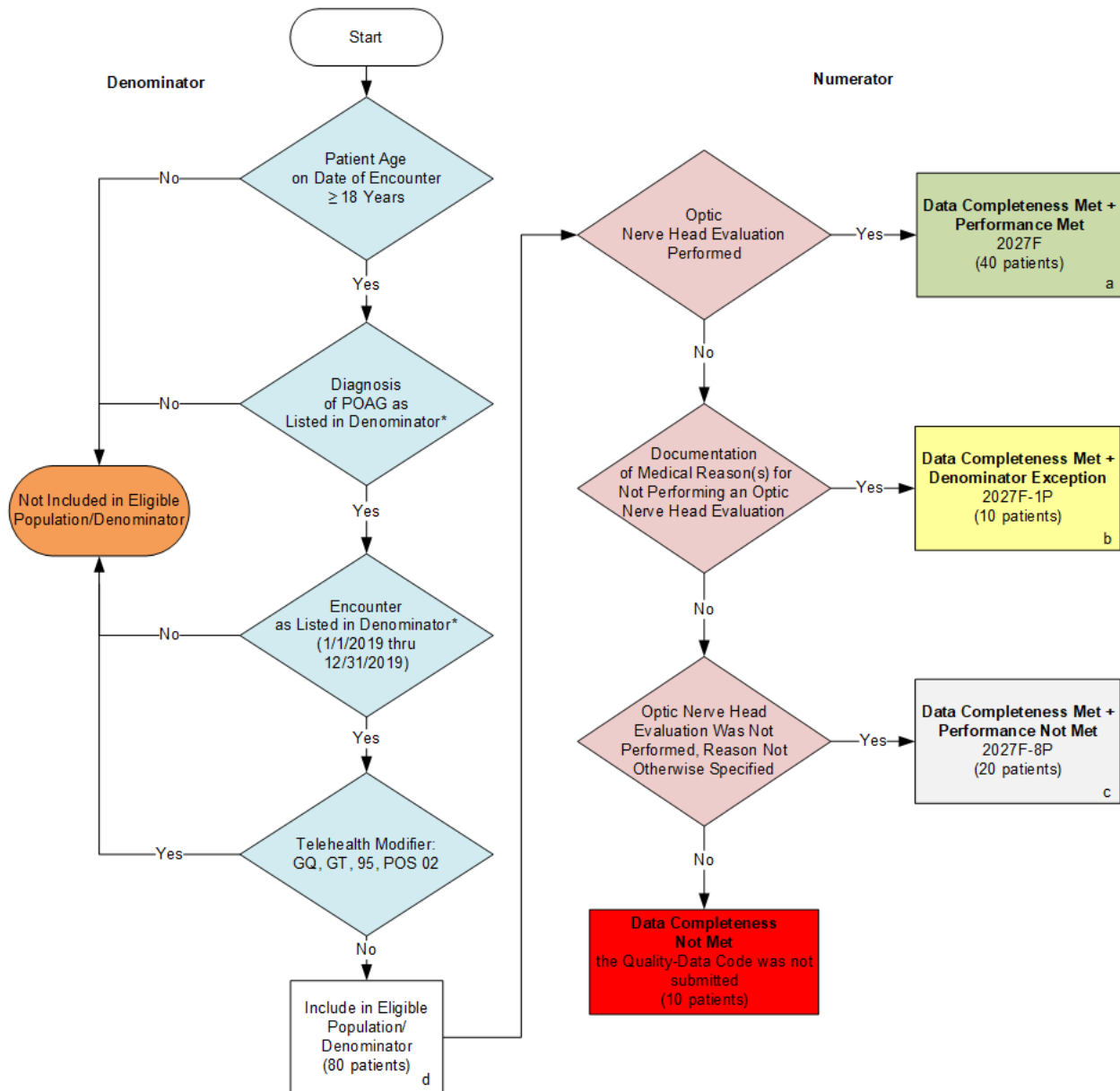
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**2019 Medicare Part B Claims Flow for Quality ID #12 NQF #0086:
Primary Open-Angle Glaucoma (POAG): Optic Nerve Evaluation**



SAMPLE CALCULATIONS:

Data Completeness=

$$\frac{\text{Performance Met (a=40 patients)} + \text{Denominator Exception (b=10 patients)} + \text{Performance Not Met (c=20 patients)}}{\text{Eligible Population / Denominator (d=80 patients)}} = \frac{70 \text{ patients}}{80 \text{ patients}} = 87.50\%$$

Performance Rate=

$$\frac{\text{Performance Met (a=40 patients)}}{\text{Data Completeness Numerator (70 patients) – Denominator Exception (b=10 patients)}} = \frac{40 \text{ patients}}{60 \text{ patients}} = 66.67\%$$

*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.

**2019 Medicare Part B Claims Flow Narrative for Quality ID #12 NQF #0086:
Primary Open-Angle Glaucoma (POAG): Optic Nerve Evaluation**

Please refer to the specific section of the specification to identify the denominator and numerator information for use in submitting this Individual Specification.

1. Start with Denominator
2. Check Patient Age:
 - a. If Patient Age is greater than or equal to 18 Years on Date of Encounter equals No during the measurement period, do not include in Eligible Population. Stop Processing.
 - b. If Patient Age is greater than or equal to 18 Years on Date of Encounter equals Yes during the measurement period, proceed to check Patient Diagnosis.
3. Check Patient Diagnosis:
 - a. If Diagnosis of POAG as Listed in the Denominator equals No, do not include in Eligible Population. Stop Processing.
 - b. If Diagnosis of POAG 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 Population. Stop Processing.
 - b. If Encounter as Listed in the Denominator equals Yes, proceed to check Telehealth Modifier.
5. Check Telehealth Modifier:
 - a. If Telehealth Modifier equals Yes, do not include in Eligible Population. Stop Processing.
 - b. If Telehealth Modifier equals No, include in 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 Optic Nerve Head Evaluation Performed:
 - a. If Optic Nerve Head Evaluation Performed equals Yes, include in Data Completeness Met and Performance Met.
 - b. 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 40 patients in the Sample Calculation.
 - c. If Optic Nerve Head Evaluation Performed equals No, proceed to check Documentation of Medical Reason(s) for Not Performing an Optic Nerve Head Evaluation.

9. Check Documentation of Medical Reason(s) for Not Performing an Optic Nerve Head Evaluation:
 - a. If Documentation of Medical Reason(s) for Not Performing an Optic Nerve Head Evaluation equals Yes, include in Data Completeness Met and Denominator Exception.
 - b. Data Completeness Met and Denominator Exception letter is represented in the Data Completeness and Performance Rate in the Sample Calculation listed at the end of this document. Letter b equals 10 patients in the Sample Calculation.
 - c. If Documentation of Medical Reason(s) for Not Performing an Optic Nerve Head Evaluation equals No, proceed to check Optic Nerve Head Evaluation Was Not Performed, Reason Not Otherwise Specified.
10. Check Optic Nerve Head Evaluation Was Not Performed, Reason Not Otherwise Specified:
 - a. If Optic Nerve Head Evaluation Was Not Performed, Reason Not Otherwise 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 in the Sample Calculation listed at the end of this document. Letter c equals 20 patients in the Sample Calculation.
 - c. If Optic Nerve Head Evaluation Was Not Performed, Reason Not Otherwise Specified equals No, proceed to check Data Completeness Not Met.
11. Check Data Completeness Not Met:
 - a. If Data Completeness Not Met, the Quality Data Code was not submitted. 10 patients have been subtracted from the Data Completeness Numerator in the Sample Calculation.

SAMPLE CALCULATIONS:

Data Completeness=

$$\frac{\text{Performance Met (a=40 patients)} + \text{Denominator Exception (b=10 patients)} + \text{Performance Not Met (c=20 patients)}}{\text{Eligible Population / Denominator (d=80 patients)}} = \frac{70 \text{ patients}}{80 \text{ patients}} = 87.50\%$$

Performance Rate=

$$\frac{\text{Performance Met (a=40 patients)}}{\text{Data Completeness Numerator (70 patients) - Denominator Exception (b=10 patients)}} = \frac{40 \text{ patients}}{60 \text{ patients}} = 66.67\%$$