

Quality ID #19 (NQF 0089): Diabetic Retinopathy: Communication with the Physician Managing Ongoing Diabetes Care
– National Quality Strategy Domain: Communication and Care Coordination
– Meaningful Measure Area: Transfer of Health Information and Interoperability

2019 COLLECTION TYPE:
MEDICARE PART B CLAIMS

MEASURE TYPE:
Process – High Priority

DESCRIPTION:

Percentage of patients aged 18 years and older with a diagnosis of diabetic retinopathy who had a dilated macular or fundus exam performed with documented communication to the physician who manages the ongoing care of the patient with diabetes mellitus regarding the findings of the macular or fundus exam at least once within 12 months

INSTRUCTIONS:

This measure is to be submitted a minimum of **once per performance period** for all patients with diabetic retinopathy 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 diabetic retinopathy (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 diabetic retinopathy who had a dilated macular or fundus exam performed

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 of diabetic retinopathy (ICD-10-CM): E08.311, E08.319, E08.3211, E08.3212, E08.3213, E08.3291, E08.3292, E08.3293, E08.3311, E08.3312, E08.3313, E08.3391, E08.3392, E08.3393, E08.3411, E08.3412, E08.3413, E08.3491, E08.3492, E08.3493, E08.3511, E08.3512, E08.3513, E08.3521, E08.3522, E08.3523, E08.3531, E08.3532, E08.3533, E08.3541, E08.3542, E08.3543, E08.3551, E08.3552, E08.3553, E08.3591, E08.3592, E08.3593, E09.311, E09.319, E09.3211, E09.3212, E09.3213, E09.3291, E09.3292, E09.3293, E09.3311, E09.3312, E09.3313, E09.3391, E09.3392, E09.3393, E09.3411, E09.3412, E09.3413, E09.3491, E09.3492, E09.3493, E09.3511, E09.3512, E09.3513, E09.3521, E09.3522, E09.3523, E09.3531, E09.3532, E09.3533, E09.3541, E09.3542, E09.3543, E09.3551, E09.3552, E09.3553, E09.3591, E09.3592, E09.3593, E10.311, E10.319, E10.3211, E10.3212, E10.3213, E10.3291, E10.3292, E10.3293, E10.3311, E10.3312, E10.3313, E10.3391, E10.3392, E10.3393, E10.3411, E10.3412, E10.3413, E10.3491, E10.3492, E10.3493, E10.3511,

E10.3512, E10.3513, E10.3521, E10.3522, E10.3523, E10.3531, E10.3532, E10.3533, E10.3541, E10.3542, E10.3543, E10.3551, E10.3552, E10.3553, E10.3591, E10.3592, E10.3593, E11.311, E11.319, E11.3211, E11.3212, E11.3213, E11.3291, E11.3292, E11.3293, E11.3311, E11.3312, E11.3313, E11.3391, E11.3392, E11.3393, E11.3411, E11.3412, E11.3413, E11.3491, E11.3492, E11.3493, E11.3511, E11.3512, E11.3513, E11.3521, E11.3522, E11.3523, E11.3531, E11.3532, E11.3533, E11.3541, E11.3542, E11.3543, E11.3551, E11.3552, E11.3553, E11.3591, E11.3592, E11.3593, E13.311, E13.319, E13.3211, E13.3212, E13.3213, E13.3291, E13.3292, E13.3293, E13.3311, E13.3312, E13.3313, E13.3391, E13.3392, E13.3393, E13.3411, E13.3412, E13.3413, E13.3491, E13.3492, E13.3493, E13.3511, E13.3512, E13.3513, E13.3521, E13.3522, E13.3523, E13.3531, E13.3532, E13.3533, E13.3541, E13.3542, E13.3543, E13.3551, E13.3552, E13.3553, E13.3591, E13.3592, E13.3593

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 with documentation, at least once within 12 months, of the findings of the dilated macular or fundus exam via communication to the physician who manages the patient's diabetic care

Definitions:

Communication – May include documentation in the medical record indicating that the findings of the dilated macular or fundus exam were communicated (e.g., verbally, by letter) with the clinician managing the patient's diabetic care OR a copy of a letter in the medical record to the clinician managing the patient's diabetic care outlining the findings of the dilated macular or fundus exam.

Findings – Includes level of severity of retinopathy (e.g., mild nonproliferative, moderate nonproliferative, severe nonproliferative, very severe nonproliferative, proliferative) AND the presence or absence of macular edema.

NUMERATOR NOTE: *The correct combination of numerator code(s) must be submitted on the claim form in order to properly submit this measure. The "correct combination" of codes may require the submission of multiple numerator codes. Denominator Exclusion/Exception(s) are determined on the date of the denominator eligible encounter.*

Numerator Quality-Data Coding Options:

If patient is not eligible for this measure because patient did not have dilated macular or fundus exam performed, submit:

(One quality-data code [G8398] is required on the claim form to submit this numerator option)

Denominator Exclusion: G8398: Dilated macular or fundus exam not performed

OR

Dilated Macular or Fundus Exam Findings Communicated

(One CPT II code & one quality-data code [5010F & G8397] are required on the claim form to submit this numerator option)

Performance Met: CPT II 5010F: Findings of dilated macular or fundus exam communicated to the physician or other qualified health care professional managing the diabetes care

AND

G8397: Dilated macular or fundus exam performed, including documentation of the presence or absence of macular edema AND level of severity of retinopathy

OR

Dilated Macular or Fundus Exam Findings not Communicated for Medical Reasons or Patient Reasons

(One CPT II code & one quality-data code [5010F-xP & G8397] are required on the claim form to submit this numerator option)

Append a modifier (1P or 2P) to CPT Category II code 5010F to submit documented circumstances that appropriately exclude patients from the denominator.

Denominator Exception: 5010F with 1P: Documentation of medical reason(s) for not communicating the findings of the dilated macular or fundus exam to the physician or other qualified health care professional managing the ongoing care of the patient with diabetes

OR

Denominator Exception: 5010F with 2P: Documentation of patient reason(s) for not communicating the findings of the dilated macular or fundus exam to the physician or other qualified health care professional managing the ongoing care of the patient with diabetes

AND

G8397: Dilated macular or fundus exam performed, including documentation of the presence or absence of macular edema AND level of severity of retinopathy

OR

Dilated Macular or Fundus Exam Findings not Communicated, Reason not Otherwise Specified

(One CPT II code & one quality-data code [5010F-8P & G8397] are required on the claim form to submit this numerator option)

Append a submission modifier (8P) to CPT Category II code 5010F to submit circumstances when the action described in the numerator is not performed and the reason is not otherwise specified.

Performance Not Met: 5010F with 8P: Findings of dilated macular or fundus exam were not communicated to the physician or other qualified health care professional managing the diabetes care, reason not otherwise specified

AND

G8397: Dilated macular or fundus exam performed, including documentation of the presence or absence of macular edema AND level of severity of retinopathy

RATIONALE:

The primary care physician that manages the ongoing care of the patient with diabetes should be aware of the patient's dilated eye examination and severity of retinopathy to manage the ongoing diabetes care. Such communication is important in assisting the physician to better manage the diabetes. Several studies have shown that better management of diabetes is directly related to lower rates of development of diabetic eye disease (Diabetes Control and Complications Trial – DCCT, UK Prospective Diabetes Study – UKPDS).

CLINICAL RECOMMENDATION STATEMENTS:

The ophthalmologist should refer patients with diabetes to a primary care physician for appropriate management of their systemic condition and should communicate examination results to the physician managing the patient's ongoing diabetes care. (Good evidence; Strong recommendation) (AAO, 2016)

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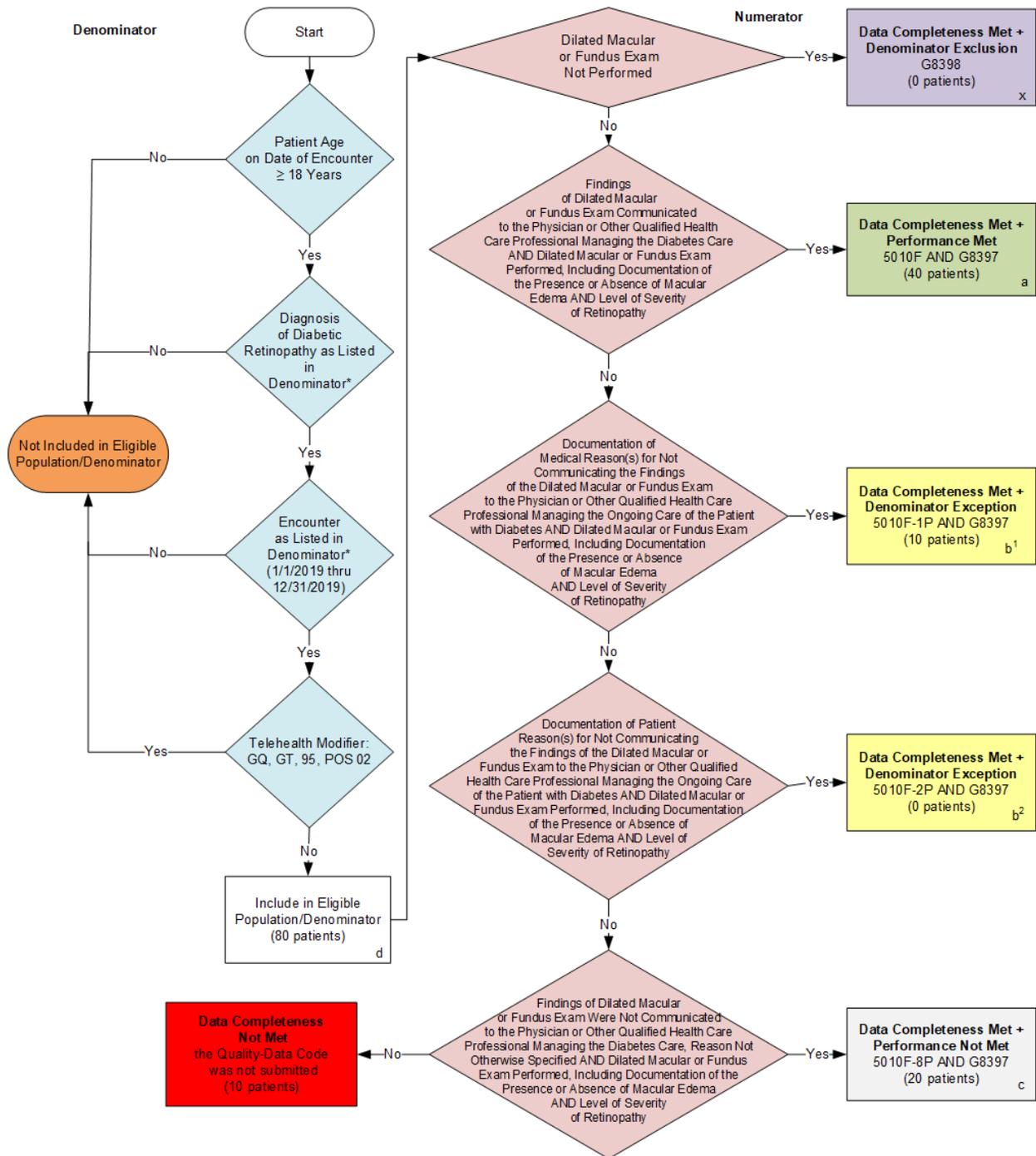
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**2019 Medicare Part B Claims Flow for Quality ID #19 NQF #0089:
Diabetic Retinopathy: Communication with the Physician Managing Ongoing Diabetes Care**



*See the posted Measure Specification for specific coding and instructions to submit this measure.
NOTE: Submission Frequency: Patient-process

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**2019 Medicare Part B Claims Flow for Quality ID #19 NQF #0089:
Diabetic Retinopathy: Communication with the Physician Managing Ongoing Diabetes Care**

SAMPLE CALCULATIONS:

Data Completeness=
$$\frac{\text{Denominator Exclusion (x=0 patients)} + \text{Performance Met (a=40 patients)} + \text{Denominator Exception (b}^1\text{+b}^2\text{=10 patients)} + \text{Performance Not Met (c=20 patients)}}{\text{Eligible Population / Denominator (d=80 patients)}} = \frac{70 \text{ patients}}{80 \text{ patients}} = 87.50\%$$

Performance Rate=
$$\frac{\text{Performance Met (a=40 patients)}}{\text{Data Completeness Numerator (70 patients) - Denominator Exclusion (x=0 patients) - Denominator Exception (b}^1\text{+b}^2\text{=10 patients)}} = \frac{40 \text{ patients}}{60 \text{ patients}} = 66.67\%$$

NOTE: Submission Frequency: Patient-process

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**2019 Medicare Part B Claims Flow Narrative for Quality ID #19 NQF #0089:
Diabetic Retinopathy: Communication with the Physician Managing Ongoing Diabetes Care**

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 Diabetic Retinopathy as Listed in the Denominator equals No, do not include in Eligible Population. Stop Processing.
 - b. If Diagnosis of Diabetic Retinopathy 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 Dilated Macular or Fundus Exam Not Performed:
 - a. If Dilated Macular or Fundus Exam Not Performed equals Yes, include in Data Completeness Met and Denominator Exclusion.
 - b. Data Completeness Met and Denominator Exclusion letter is represented in the 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 Dilated Macular or Fundus Exam Not Performed equals No, proceed to check Findings of Dilated Macular or Fundus Exam Communicated to the Physician or Other Qualified Health Care Professional Managing the Diabetes Care AND Dilated Macular or Fundus Exam Performed, Including Documentation of the Presence or Absence of Macular Edema AND Level of Severity of Retinopathy.
9. Check Findings of Dilated Macular or Fundus Exam Communicated to the Physician or Other Qualified Health Care Professional Managing the Diabetes Care AND Dilated Macular or Fundus Exam Performed, Including Documentation of the Presence or Absence of Macular Edema AND Level of Severity of Retinopathy:
 - a. If Findings of Dilated Macular or Fundus Exam Communicated to the Physician or Other Qualified Health Care Professional Managing the Diabetes Care AND Dilated Macular or Fundus Exam Performed, Including Documentation of the Presence or Absence of Macular Edema AND Level of Severity of Retinopathy 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 Findings of Dilated Macular or Fundus Exam Communicated to the Physician or Other Qualified Health Care Professional Managing the Diabetes Care AND Dilated Macular or Fundus Exam Performed, Including Documentation of the Presence or Absence of Macular Edema AND Level of Severity of Retinopathy equals No, proceed to check Documentation of Medical Reason(s) for Not Communicating the Findings of the Dilated Macular or Fundus Exam to the Physician or Other Qualified Health Care Professional Managing the Ongoing Care of the Patient with Diabetes AND Dilated Macular or Fundus Exam Performed, Including Documentation of the Presence or Absence of Macular Edema AND Level of Severity of Retinopathy.
10. Check Documentation of Medical Reason(s) for Not Communicating the Findings of the Dilated Macular or Fundus Exam to the Physician or Other Qualified Health Care Professional Managing the Ongoing Care of the Patient with Diabetes AND Dilated Macular or Fundus Exam Performed, Including Documentation of the Presence or Absence of Macular Edema AND Level of Severity of Retinopathy:
 - a. If Documentation of Medical Reason(s) for Not Communicating the Findings of the Dilated Macular or Fundus Exam to the Physician or Other Qualified Health Care Professional Managing the Ongoing Care of the Patient with Diabetes AND Dilated Macular or Fundus Exam Performed, Including Documentation of the Presence or Absence of Macular Edema AND Level of Severity of Retinopathy 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 b¹ equals 10 patients in the Sample Calculation.
 - c. If Documentation of Medical Reason(s) for Not Communicating the Findings of the Dilated Macular or Fundus Exam to the Physician or Other Qualified Health Care Professional Managing the Ongoing Care of the Patient with Diabetes AND Dilated Macular or Fundus Exam Performed, Including Documentation of the Presence or Absence of Macular Edema AND Level of Severity of Retinopathy equals No, proceed to check Documentation of Patient Reason(s) for Not Communicating the Findings of the Dilated Macular or Fundus Exam to the Physician or Other Qualified Health Care Professional Managing the Ongoing Care of the Patient with Diabetes AND Dilated Macular or Fundus Exam Performed, Including Documentation of the Presence or Absence of Macular Edema AND Level of Severity of Retinopathy.
11. Check Documentation of Patient Reason(s) for Not Communicating the Findings of the Dilated Macular or Fundus Exam to the Physician or Other Qualified Health Care Professional Managing the Ongoing Care of

the Patient with Diabetes AND Dilated Macular or Fundus Exam Performed, Including Documentation of the Presence or Absence of Macular Edema AND Level of Severity of Retinopathy:

- a. If Documentation of Patient Reason(s) for Not Communicating the Findings of the Dilated Macular or Fundus Exam to the Physician or Other Qualified Health Care Professional Managing the Ongoing Care of the Patient with Diabetes AND Dilated Macular or Fundus Exam Performed, Including Documentation of the Presence or Absence of Macular Edema AND Level of Severity of Retinopathy 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 b² equals 0 patients in the Sample Calculation.
 - c. If Documentation of Patient Reason(s) for Not Communicating the Findings of the Dilated Macular or Fundus Exam to the Physician or Other Qualified Health Care Professional Managing the Ongoing Care of the Patient with Diabetes AND Dilated Macular or Fundus Exam Performed, Including Documentation of the Presence or Absence of Macular Edema AND Level of Severity of Retinopathy equals No, proceed to check Findings of Dilated Macular or Fundus Exam Were Not Communicated to the Physician or Other Qualified Health Care Professional Managing the Diabetes Care, Reason Not Otherwise Specified AND Dilated Macular or Fundus Exam Performed, Including Documentation of the Presence or Absence of Macular Edema AND Level of Severity of Retinopathy.
12. Check Findings of Dilated Macular or Fundus Exam Were Not Communicated to the Physician or Other Qualified Health Care Professional Managing the Diabetes Care, Reason Not Otherwise Specified AND Dilated Macular or Fundus Exam Performed, Including Documentation of the Presence or Absence of Macular Edema AND Level of Severity of Retinopathy:
- a. If Findings of Dilated Macular or Fundus Exam Were Not Communicated to the Physician or Other Qualified Health Care Professional Managing the Diabetes Care, Reason Not Otherwise Specified AND Dilated Macular or Fundus Exam Performed, Including Documentation of the Presence or Absence of Macular Edema AND Level of Severity of Retinopathy 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 Findings of Dilated Macular or Fundus Exam Were Not Communicated to the Physician or Other Qualified Health Care Professional Managing the Diabetes Care, Reason Not Otherwise Specified AND Dilated Macular or Fundus Exam Performed, Including Documentation of the Presence or Absence of Macular Edema AND Level of Severity of Retinopathy equals No, proceed to check Data Completeness Not Met.
13. 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 CALCULATION:

Data Completeness=

$$\frac{\text{Denominator Exclusion (x=0 patients)} + \text{Performance Met (a=40 patients)} + \text{Denominator Exception (b}^1\text{+b}^2\text{=10 patients)} + \text{Performance Not Met (c=20 patients)}}{\text{Eligible Population / Denominator (d=80 patients)}} = \frac{70 \text{ patients}}{80 \text{ patients}} = 87.50\%$$

Performance Rate=

$$\frac{\text{Performance Met (a=40 patients)}}{\text{Data Completeness Numerator (70 patients) - Denominator Exclusion (x=0 patients) - Denominator Exception (b}^1\text{+b}^2\text{=10 patients)}} = \frac{40 \text{ patients}}{60 \text{ patients}} = 66.67\%$$