Measure #384: Adult Primary Rhegmatogenous Retinal Detachment Surgery: No Return to the Operating Room Within 90 Days of Surgery—National Quality Strategy Domain: Effective Clinical Care

2017 OPTIONS FOR INDIVIDUAL MEASURES:
REGISTRY ONLY

MEASURE TYPE:
Outcome

DESCRIPTION:
Patients aged 18 years and older who had surgery for primary rhegmatogenous retinal detachment who did not require a return to the operating room within 90 days of surgery

INSTRUCTIONS:
This measure is to be calculated each time a procedure for primary rhegmatogenous retinal detachment is performed during the performance period. This measure is intended to reflect the quality of services provided for the patient receiving primary rhegmatogenous retinal detachment surgery.

Note: This is an outcome measure and will be calculated solely using registry data.

- For patients who receive the surgical procedures specified in the denominator coding, it should be reported whether or not the patient had to return to the operating room within 90 days of surgery.
- Include only procedures performed through September 30 of the performance period. This will allow the post-operative period to occur before registries must submit data to CMS.

Measure Reporting:
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 aged 18 years or older who had surgery for primary rhegmatogenous retinal detachment

<table>
<thead>
<tr>
<th>Denominator Criteria (Eligible Cases):</th>
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<tbody>
<tr>
<td>Patients aged ≥ 18 years on the date of the procedure</td>
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<tr>
<td>AND</td>
</tr>
<tr>
<td>Patient procedure during the performance period (CPT): 67107, 67108, 67110</td>
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<tr>
<td>AND NOT</td>
</tr>
<tr>
<td>DENOMINATOR EXCLUSION:</td>
</tr>
<tr>
<td>Surgical procedures that included the use of silicone oil: G9756</td>
</tr>
</tbody>
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NUMERATOR:
Patients who did not return to the operating room within 90 days for complications within the operative eye

<table>
<thead>
<tr>
<th>Numerator Options:</th>
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<tbody>
<tr>
<td>Performance Met:</td>
</tr>
<tr>
<td>Patient did not require a return to the operating room within 90 days of surgery (G9515)</td>
</tr>
<tr>
<td>OR</td>
</tr>
<tr>
<td>Performance Not Met:</td>
</tr>
<tr>
<td>Patient required a return to the operating room within 90 days of surgery (G9514)</td>
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</table>
RATIONALE:
The goal of treatment for retinal breaks is to create a firm chorioretinal adhesion in the attached retina immediately adjacent to and surrounding the retinal tear using cryotherapy or laser photocoagulation to halt the progression of subretinal fluid from detaching the neurosensory retina. Treatment of peripheral horseshoe tears should be extended to the ora serrata. The most common cause of failure in treating horseshoe tears is failure to adequately treat the tear, particularly the anterior border. Continued vitreous traction may extend the tear beyond the treated area and allow fluid to dissect through the subretinal space to cause a clinical retinal detachment. Treatment of dialyses must extend over the entire length of the dialysis, reaching the ora serrata beyond each horn or end of the dialysis.

Sufficient evidence exists for treating acute, symptomatic horseshoe tears. There is insufficient evidence for management of other vitreoretinal abnormalities. In making the decision to treat other vitreoretinal abnormalities, including lattice degeneration and asymptomatic retinal breaks, the risks that treatment will be unnecessary, ineffective, or harmful must be weighed against the possible benefit of reducing the rate of subsequent retinal detachment.

In a study published in 2011, Schall and colleagues studied the success rate with 4 surgical techniques. Initial success rate for retinal reattachment was 86% for scleral buckling only, 90% for vitrectomy only, 94% for the combination of scleral buckling and vitrectomy, and 63% for pneumatic retinopexy surgery. Patients undergoing pneumatic retinopexy had a lower initial success rate, however there was no statistically significant difference in initial reattachment rates between the other three groups. In a 2002 study Ling and colleagues reported an 85% success rate with a single procedure. Of the 15% that initially failed, 97% were successful with one additional surgery.

References:


CLINICAL RECOMMENDATION STATEMENTS:
This is an outcome measure. As such, no clinical recommendations are included.

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AAO encourages use of the Measures by other health care professionals, where appropriate.

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2017 Registry Individual Measure Flow

#384: Adult Primary Rhegmatogenous Retinal Detachment Surgery: No Return to the Operating Room Within 90 Days of Surgery

![Flowchart Diagram]

**SAMPLE CALCULATIONS:**

Data Completeness

\[
\text{Data Completeness} = \frac{\text{Performance Met (a=4 procedures) + Performance Not Met (c=3 procedures)}}{\text{Eligible Population /Denominator (d=7 procedures)}} \times 100\%
\]

= \frac{4 \text{ procedures} + 3 \text{ procedures}}{7 \text{ procedures}} = 100.00\%

Performance Rate

\[
\text{Performance Rate} = \frac{\text{Performance Met (a=4 procedures)}}{\text{Data Completeness Numerator (7 procedures)}}
\]

= \frac{4 \text{ procedures}}{7 \text{ procedures}} = 57.14\%

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

NOTE: Reporting Frequency: Procedure

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

1. Start with Denominator

2. Check Patient Age:
   a. If Patient Age is greater than or equal to 18 Years on the Date of the Procedure equals No, do not include in Eligible Patient Population. Stop Processing.
   b. If Patient Age is greater than or equal to 18 Years on the Date of the Procedure equals Yes, proceed to check Patient Diagnosis.

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

4. Check Surgical Procedures that Included the Use of Silicone Oil:
   a. If Surgical Procedures that Included the Use of Silicone Oil equals Yes, do not include in Eligible Patient Population. Stop Processing.
   b. If Surgical Procedures that Included the Use of Silicone Oil equals No, 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 8 patients in the sample calculation.

6. Start Numerator

7. Check Patient did Not Require a Return to the Operating Room Within 90 Days of Surgery:
   a. If Patient did Not Require a Return to the Operating Room Within 90 Days of Surgery 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 4 patients in Sample Calculation.
   c. If Patient did Not Require a Return to the Operating Room Within 90 Days of Surgery equals No, proceed to check Retina Not Attached at the Six Month Follow-Up Visit Following Only One Surgery.

8. Check Patient Required a Return to the Operating Room Within 90 Days of Surgery:
   a. If Patient Required a Return to the Operating Room Within 90 Days of Surgery 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 3 procedures in the Sample Calculation.

c. If Patient Required a Return to the Operating Room Within 90 Days of Surgery equals No, proceed to Data Completeness Not Met.

9. Check Data Completeness Not Met:

a. If Data Completeness Not Met, the Quality Data Code or equivalent was not reported. 1 procedure has been subtracted from the Data Completeness numerator in sample calculation.

<table>
<thead>
<tr>
<th>Data Completeness Calculation</th>
<th>Performance Rate Calculation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Performance Met (a=4 procedures) + Performance Not Met (c=3 procedures) = 7 procedures = 100.00%</td>
<td>Performance Met (a=4 procedures)</td>
</tr>
<tr>
<td>Eligible Population / Denominator (d=7 procedures) = 7 procedures</td>
<td>Data Completeness Numerator (7 procedures)</td>
</tr>
</tbody>
</table>