

Quality ID #14 (NQF 0087): Age-Related Macular Degeneration (AMD): Dilated Macular Examination
– National Quality Strategy Domain: Effective Clinical Care
– Meaningful Measure Area: Management of Chronic Conditions

2022 COLLECTION TYPE:
MIPS CLINICAL QUALITY MEASURES (CQMS)

MEASURE TYPE:
Process

DESCRIPTION:
Percentage of patients aged 50 years and older with a diagnosis of age-related macular degeneration (AMD) who had a dilated macular examination performed which included documentation of the presence or absence of macular thickening or geographic atrophy or hemorrhage AND the level of macular degeneration severity during one or more office visits within the 12 month performance period.

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 age-related macular degeneration (in either one or both eyes) will submit this measure.

Measure Submission Type:
Measure data may be submitted by individual MIPS eligible clinicians, groups, or third-party intermediaries. The listed denominator criteria are used to identify the intended patient population. The numerator options included in this specification are used to submit the quality actions as allowed by the measure. The quality data codes listed do not need to be submitted by MIPS eligible clinicians, groups, or third-party intermediaries that utilize this modality for submissions; however, these codes may be submitted for those third party intermediaries that utilize Medicare Part B claims data. For more information regarding Application Programming Interface (API), please refer to the Quality Payment Program (QPP) website.

DENOMINATOR:
All patients aged 50 years and older with a diagnosis of AMD

Denominator Criteria (Eligible Cases):
Patients aged ≥ 50 years on date of encounter

AND
Diagnosis for age-related macular degeneration (ICD-10-CM): H35.3110, H35.3111, H35.3112, H35.3113, H35.3114, H35.3120, H35.3121, H35.3122, H35.3123, H35.3124, H35.3130, H35.3131, H35.3132, H35.3133, H35.3134, H35.3210, H35.3211, H35.3212, H35.3213, H35.3220, H35.3221, H35.3222, H35.3223, H35.3230, H35.3231, H35.3232, H35.3233

AND
Patient encounter during the performance period (CPT): 92002, 92004, 92012, 92014, 99202, 99203, 99204, 99205, 99212, 99213, 99214, 99215, 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 had a dilated macular examination performed which included documentation of the presence or absence of macular thickening or geographic atrophy or hemorrhage AND the level of macular degeneration severity during one or more office visits within 12 months

Definitions:

Macular Thickening – Acceptable synonyms for “macular thickening” include: intraretinal thickening, serous detachment of the retina, pigment epithelial detachment or macular edema.

Severity of Macular Degeneration – Early, intermediate and advanced; or active choroidal neovascularization, inactive choroidal neovascularization, or with inactive scar.

Geographic Atrophy – The advanced form of non-neovascular AMD, will have one or more zones of well- demarcated retinal pigment epithelial and/or choriocapillaris atrophy.

NUMERATOR NOTE: *Denominator Exception(s) are determined on or any date during the performance period prior to the date of the denominator eligible encounter.*

Numerator Options:

Performance Met:

Dilated macular exam performed, including documentation of the presence or absence of macular thickening or geographic atrophy or hemorrhage AND the level of macular degeneration severity (**G9974**)

OR

Denominator Exception:

Documentation of medical reason(s) for not performing a dilated macular examination (**G9975**)

OR

Denominator Exception:

Documentation of patient reason(s) for not performing a dilated macular examination (**G9892**)

OR

Performance Not Met:

Dilated macular exam was not performed, reason not otherwise specified (**G9893**)

RATIONALE:

A documented complete macular examination is a necessary prerequisite to determine the presence and severity of AMD, so that a decision can be made as to the benefits of prescribing antioxidant vitamins. Furthermore, periodic assessment is necessary to determine whether there is progression of the disease and to plan the on-going treatment of the disease, since several therapies exist that reduce vision loss once the advanced neovascular form of AMD occurs. In patients with neovascular AMD, early detection and prompt treatment improves the visual outcome. Intravitreal injection therapy using anti-vascular endothelial growth factor (VEGF) agents (e.g., aflibercept, bevacizumab, and ranibizumab) is the most effective way to manage neovascular AMD and represents the first line of treatment. While no data exist on the frequency or absence of regular examinations of the macula for patients with AMD, parallel data for key structural assessments for glaucoma, cataract and diabetic retinopathy suggest that significant gaps are likely.

CLINICAL RECOMMENDATION STATEMENTS:

According to the American Academy of Ophthalmology, a physical examination should include a stereoscopic biomicroscopic examination of the macula. Binocular slit-lamp biomicroscopy of the ocular fundus is often necessary to detect subtle clinical signs of CNV. These include small areas of hemorrhage, hard exudates, subretinal fluid, macular edema, subretinal fibrosis, or pigment epithelial elevation.

American Academy of Ophthalmology Retina/Vitreous Panel. Preferred Practice Pattern® Guidelines. Age-Related Macular Degeneration. San Francisco, CA: American Academy of Ophthalmology; 2019. Available at: www.aao.org/ppp

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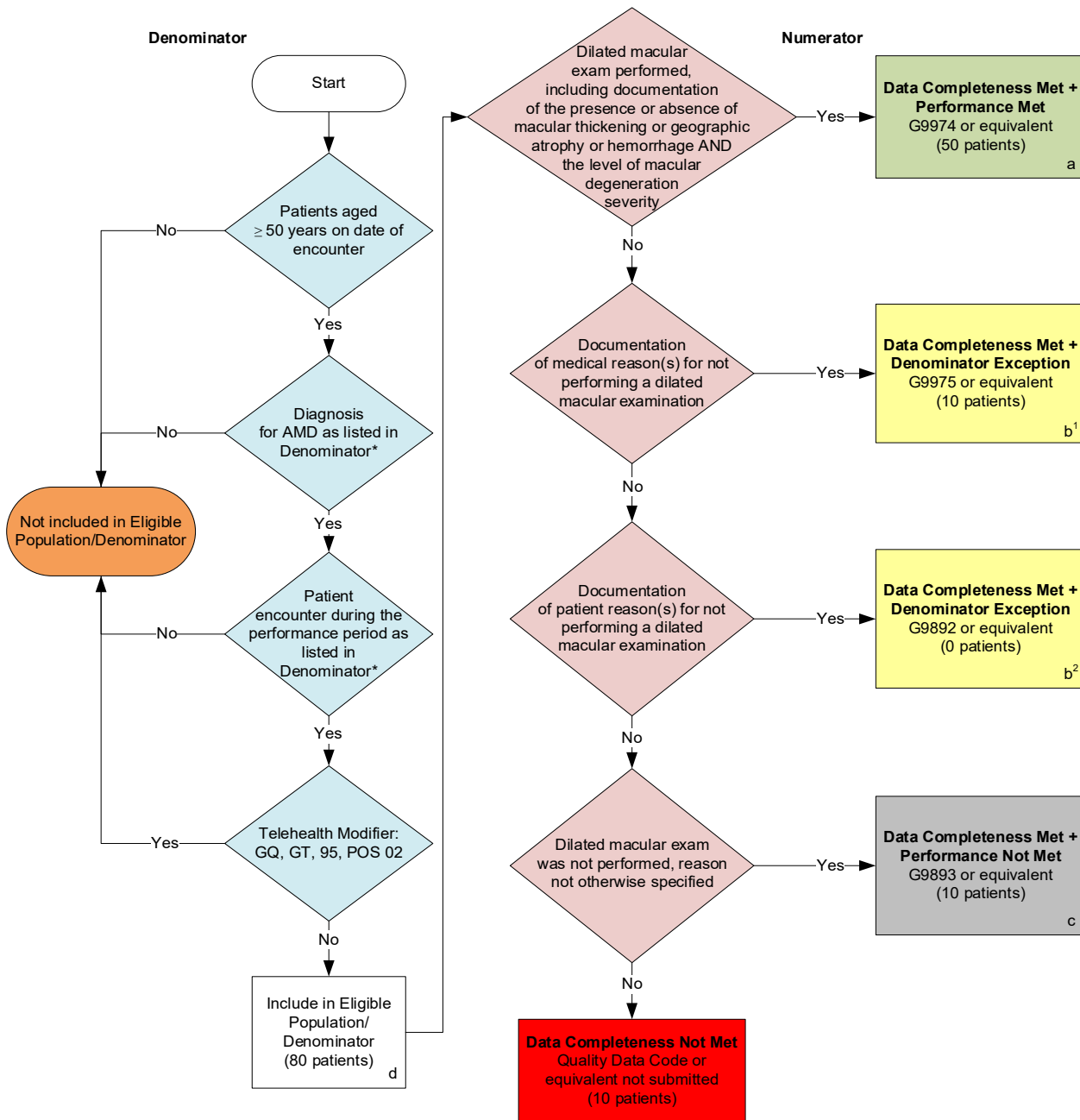
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**2022 Clinical Quality Measure Flow for Quality ID #14 (NQF 0087):
Age-Related Macular Degeneration (AMD): Dilated Macular Examination**

Disclaimer: Refer to the measure specification for specific coding and instructions to submit this measure.



SAMPLE CALCULATIONS

Data Completeness=
 Performance Met (a=50 patients) + Denominator Exception (b¹+b²=10 patients) + Performance Not Met (c=10 patients) = 70 patients = 87.50%
 Eligible Population / Denominator (d=80 patients) = 80 patients

Performance Rate=
 $\frac{\text{Performance Met (a=50 patients)}}{\text{Data Completeness Numerator (70 patients) - Denominator Exception (b¹+b²=10 patients)}} = \frac{50 \text{ patients}}{60 \text{ patients}} = 83.33\%$

*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.

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**2022 Clinical Quality Measure Flow Narrative for Quality ID #14 (NQF 0087):
Age-Related Macular Degeneration (AMD): Dilated Macular Examination**

Disclaimer: Refer to the measure specification for specific coding and instructions to submit this measure.

1. Start with Denominator
2. Check *Patients aged greater than or equal to 50 years on date of encounter*.
 - a. If *Patients aged greater than or equal to 50 years on date of encounter* equals No, do not include in *Eligible Population/Denominator*. Stop processing.
 - b. If *Patients aged greater than or equal to 50 years on date of encounter* equals Yes, proceed to check *Diagnosis for AMD as listed in Denominator**.
3. Check *Diagnosis for AMD as listed in Denominator**.
 - a. If *Diagnosis for AMD as listed in Denominator** equals No, do not include in *Eligible Population/Denominator*. Stop processing.
 - b. If *Diagnosis for AMD as listed in Denominator** equals Yes, proceed to check *Patient encounter during the performance period as listed in Denominator**.
4. Check *Patient encounter during the performance period as listed in Denominator**.
 - a. If *Patient encounter during the performance period as listed in Denominator** equals No, do not include in *Eligible Population/Denominator*. Stop processing.
 - b. If *Patient encounter during the performance period as listed in Denominator** equals Yes, proceed to check *Telehealth Modifier*.
5. Check *Telehealth Modifier*.
 - a. If *Telehealth Modifier* equals Yes, do not include in *Eligible Population/Denominator*. Stop processing.
 - b. If *Telehealth Modifier* equals No, include in *Eligible Population/Denominator*.
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 exam performed, including documentation of the presence or absence of macular thickening or geographic atrophy or hemorrhage AND the level of macular degeneration severity*.
 - a. If *Dilated macular exam performed, including documentation of the presence or absence of macular thickening or geographic atrophy or hemorrhage AND the level of macular degeneration severity* equals Yes, include in *Data Completeness Met and Performance Met*.
 - *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 50 patients in the Sample Calculation.

- b. If *Dilated macular exam performed, including documentation of the presence or absence of macular thickening or geographic atrophy or hemorrhage AND the level of macular degeneration severity* equals No, proceed to check *Documentation of medical reason(s) for not performing a dilated macular examination*.
9. Check *Documentation of medical reason(s) for not performing a dilated macular examination*:
 - a. If *Documentation of medical reason(s) for not performing a dilated macular examination* equals Yes, include in *Data Completeness Met and Denominator Exception*.
 - *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.
 - b. If *Documentation of medical reason(s) for not performing a dilated macular examination* equals No, proceed to check *Documentation of patient reason(s) for not performing a dilated macular examination*.
10. Check *Documentation of patient reason(s) for not performing a dilated macular examination*:
 - a. If *Documentation of patient reason(s) for not performing a dilated macular examination* equals Yes, include in *Data Completeness Met and Denominator Exception*.
 - *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.
 - b. If *Documentation of patient reason(s) for not performing a dilated macular examination* equals No, proceed to check *Dilated macular examination was not performed, reason not otherwise specified*.
11. Check *Dilated macular exam was not performed, reason not otherwise specified*:
 - a. If *Dilated macular exam was not performed, reason not otherwise specified* equals Yes, include in the *Data Completeness Met and Performance Not Met*.
 - *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 10 patients in the Sample Calculation.
 - b. If *Dilated macular exam was not performed, reason not otherwise specified* equals No, proceed to check *Data Completeness Not Met*.
12. 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 equals Performance Met (a equals 50 patients) plus Denominator Exception (b¹ plus b² equals 10 patients) plus Performance Not Met (c equals 10 patients) divided by Eligible Population / Denominator (d equals 80 patients). All equals 70 patients divided by 80 patients. All equals 87.5 percent.

Performance Rate equals Performance Met (a equals 50 patients) divided by Data Completeness Numerator (70 patients) minus Denominator Exception (b¹ plus b² equals 10 patients). All equals 50 patients divided by 60 patients. All equals

83.33 percent.

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

NOTE: Submission Frequency: Patient-Process

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