Descriptive text...

AND

Patient encounter during the performance period (CPT or HCPCS): 92002, 92004, 92012, 92014, 99202,
99203, 99204, 99205, 99212, 99213, 99214, 99215, 99341, 99342, 99343, 99344, 99345, 99346, 99347, 99348,
99349, 99350, 99385*, 99386*, 99387*, 99395*, 99396*, 99397*, G0438, G0439

NUMERATOR:
Patients with an eye screening for diabetic retinal disease. This includes diabetics who had one of the following:
• Diabetic with a diagnosis of retinopathy during the measurement period and a retinal or dilated eye exam by an eye care
  professional in the measurement period
• Diabetic with no diagnosis of retinopathy during the measurement period and a retinal or dilated eye exam by an eye
  care professional in the measurement period or the year prior to the measurement period

NUMERATOR NOTE: The eye exam must be performed or reviewed by an ophthalmologist or optometrist, or there must be evidence that fundus photography results were read by a system that provides an artificial
intelligence (AI) interpretation. Alternatively, results may be read by a qualified reading center that operates under
the direction of a medical director who is a retinal specialist.

To assess the age for exclusions, the patient’s age on the date of the encounter should be used.

Numerator Quality Data Coding Options:
Patient receiving Hospice Services, Patient Not Eligible
Denominator Exclusion: G9714:

OR
Patient receiving Palliative Care Services, Patient Not Eligible
Denominator Exclusion: G9994:

OR
G2105:

OR
G2106:

Patients 66 years of age and older with at least one claim/encounter for frailty during the measurement period
AND a dispensed medication for dementia during the measurement period or the year prior to the measurement period
Patient 66 years of age and older with at least one claim/encounter for frailty during the measurement period AND either one acute inpatient encounter with a diagnosis of advanced illness or two outpatient, observation, ED or nonacute inpatient encounters on different dates of service with an advanced illness diagnosis during the measurement period or the year prior to the measurement period.

### OR G2107:

Table: Dementia Exclusion Medications

<table>
<thead>
<tr>
<th>Description</th>
<th>Prescription</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cholinesterase inhibitors</td>
<td>Donepezil</td>
</tr>
<tr>
<td></td>
<td>Galantamine</td>
</tr>
<tr>
<td></td>
<td>Rivastigmine</td>
</tr>
<tr>
<td>Miscellaneous central nervous system agents</td>
<td>Memantine</td>
</tr>
</tbody>
</table>

**Codes to identify Frailty:** 99504, 99509, E0100, E0105, E0130, E0135, E0140, E0141, E0143, E0144, E0147, E0148, E0149, E0163, E0165, E0167, E0168, E0170, E0171, E0250, E0251, E0255, E0256, E0260, E0261, E0265, E0266, E0270, E0290, E0291, E0292, E0293, E0294, E0295, E0296, E0297, E0301, E0302, E0303, E0304, E0424, E0425, E0430, E0431, E0433, E0434, E0435, E0439, E0440, E0441, E0442, E0443, E0444, E0445, E0462, E0465, E0466, E0470, E0471, E0472, E0561, E0562, E1130, E1140, E1150, E1160, E1161, E1240, E1250, E1260, E1270, E1280, E1285, E1290, E1295, E1296, E1297, E1298, G0162, G0299, G0300, G0493, G0494, S0271, S0311, S0493, S0494, S0271, S0311, S9123, S9124, T1000, T1001, T1002, T1003, T1004, T1005, T1019, T1020, T1021, T1022, T1030, T1031, L89.000, L89.001, L89.002, L89.003, L89.004, L89.006, L89.009, L89.010, L89.011, L89.012, L89.013, L89.014, L89.016, L89.017, L89.018, L89.019, L89.020, L89.021, L89.022, L89.023, L89.024, L89.026, L89.029, L89.100, L89.101, L89.102, L89.103, L89.104, L89.106, L89.109, L89.110, L89.111, L89.112, L89.113, L89.114, L89.116, L89.119, L89.120, L89.121, L89.122, L89.123, L89.124, L89.126, L89.129, L89.130, L89.131, L89.132, L89.136, L89.137, L89.138, L89.140, L89.141, L89.142, L89.143, L89.144, L89.146, L89.148, L89.152, L89.153, L89.154, L89.156, L89.159, L89.200, L89.201, L89.202, L89.203, L89.204, L89.206, L89.209, L89.210, L89.211, L89.212, L89.213, L89.214, L89.216, L89.219, L89.220, L89.221, L89.222, L89.223, L89.224, L89.226, L89.229, L89.230, L89.301, L89.302, L89.303, L89.304, L89.306, L89.309, L89.310, L89.311, L89.312, L89.313, L89.314, L89.316, L89.319, L89.320, L89.321, L89.322, L89.323, L89.324, L89.326, L89.329, L89.40, L89.41, L89.42, L89.43, L89.44, L89.45, L89.46, L89.500, L89.501, L89.502, L89.503, L89.504, L89.506, L89.509, L89.510, L89.511, L89.512, L89.513, L89.514, L89.516, L89.519, L89.520, L89.521, L89.522, L89.523, L89.524, L89.526, L89.529, L89.600, L89.601, L89.602, L89.603, L89.604, L89.606, L89.609, L89.610, L89.611, L89.612, L89.613, L89.614, L89.616, L89.619, L89.620, L89.621, L89.622, L89.623, L89.624, L89.626, L89.629, L89.810, L89.811, L89.812, L89.813, L89.814, L89.816, L89.819, L89.890, L89.891, L89.892, L89.893, L89.894, L89.896, L89.899, L89.90, L89.91, L89.92, L89.93, L89.94, L89.95, L89.96, M62.50, M62.81, M62.84, R26.0, R26.1, R26.2, R26.8, R26.9, R41.81, R53.1, R53.81, R53.83, R54, R62.7, R63.6, R64, W01.0XXA, W01.0XXD, W01.0XXS, W01.1XXA, W01.1XXD, W01.1XXS, W01.110A, W01.110S, W01.111A, W01.111D, W01.111S, W01.118A, W01.118D, W01.118S, W01.119A, W01.119D, W01.119S, W01.190A, W01.190D, W01.190S, W01.198A, W01.198D, W01.198S, W06.0XXA, W06.0XXD, W06.0XXS, W07.0XXA, W07.0XXD, W07.0XXS, W08.0XXXA, W08.0XXXD, W08.0XXXS, W08.0XXXA, W08.0XXDS, W08.0XXXD, W08.0XXS, W08.1XXXA, W08.1XXXD, W08.1XXXS, W08.1XXDS, W08.1XXXD, W08.1XXS, W08.2XXXA, W08.2XXXD, W08.2XXXS, W08.2XXDS, W08.2XXXD, W08.2XXS, W08.3XXXA, W08.3XXXD, W08.3XXXS, W08.3XXDS, W08.3XXXD, W08.3XXS, W08.4XXXA, W08.4XXXD, W08.4XXXS, W08.4XXDS, W08.4XXXD, W08.4XXS, W08.5XXXA, W08.5XXXD, W08.5XXXS, W08.5XXDS, W08.5XXXD, W08.5XXS, W08.6XXXA, W08.6XXXD, W08.6XXXS, W08.6XXDS, W08.6XXXD, W08.6XXS, W08.7XXXA, W08.7XXXD, W08.7XXXS, W08.7XXDS, W08.7XXXD, W08.7XXS.
- **Codes to identify Advanced Illness:** A81.00, A81.01, A81.09, C25.0, C25.1, C25.2, C25.3, C25.4, C25.7, C25.8, C25.9, C71.0, C71.1, C71.2, C71.3, C71.4, C71.5, C71.6, C71.7, C71.8, C71.9, C77.0, C77.1, C77.2, C77.3, C77.4, C77.5, C77.8, C77.9, C78.00, C78.01, C78.02, C78.1, C78.2, C78.30, C78.39, C78.4, C78.5, C78.6, C78.7, C78.80, C78.89, C79.00, C79.01, C79.02, C79.10, C79.11, C79.19, C79.2, C79.31, C79.32, C79.40, C79.49, C79.51, C79.52, C79.60, C79.61, C79.62, C79.70, C79.71, C79.72, C79.81, C79.82, C79.9, C91.00, C91.02, C92.00, C92.02, C93.00, C93.02, C93.90, C93.92, C93.Z0, C93.Z2, C94.30, C94.32, F01.50, F01.51, F02.80, F02.81, F03.90, F03.91, F04, F10.27, F10.96, F10.97, G10, G12.21, G20, G30.0, G30.1, G30.8, G30.9, G31.01, G31.09, G31.83, I09.81, I10.0, I10.1, I11.0, I12.0, I13.0, I13.1, I13.2, I50.1, I50.20, I50.21, I50.22, I50.23, I50.30, I50.31, I50.32, I50.33, I50.40, I50.41, I50.42, I50.43, I50.810, I50.811, I50.812, I50.813, I50.814, I50.82, I50.83, I50.84, I50.85, I50.86, I50.89, I50.9, J43.0, J43.1, J43.2, J43.8, J43.9, J68.4, J84.10, J84.112, J84.17, J84.170, J84.178, J96.10, J96.11, J96.12, J96.20, J96.21, J96.22, J96.90, J96.91, J96.92, J98.2, J98.3, K70.10, K70.11, K70.2, K70.30, K70.31, K70.40, K70.41, K70.9, K74.0, K74.00, K74.01, K74.02, K74.1, K74.2, K74.4, K74.5, K74.60, K74.69, N18.5, N18.6

**OR**

Retinal or Dilated Eye Exam Performed by an Eye Care Professional

*Performance Met: 2022F:*

Dilated retinal eye exam with interpretation by an ophthalmologist or optometrist documented and reviewed; with evidence of retinopathy

**OR**

*Performance Met: 2023F:*

Dilated retinal eye exam with interpretation by an ophthalmologist or optometrist documented and reviewed; without evidence of retinopathy

**OR**

*Performance Met: 2024F:*

7 standard field stereoscopic retinal photos with interpretation by an ophthalmologist or optometrist documented and reviewed; with evidence of retinopathy

**OR**

*Performance Met: 2025F:*

7 standard field stereoscopic retinal photos with interpretation by an ophthalmologist or optometrist documented and reviewed; without evidence of retinopathy

**OR**

*Performance Met: 2026F:*

Eye imaging validated to match diagnosis from 7 standard field stereoscopic retinal photos results documented and reviewed; with evidence of retinopathy

**OR**

*Performance Met: 2033F:*

Eye imaging validated to match diagnosis from 7 standard field stereoscopic retinal photos results documented and reviewed; without evidence of retinopathy

**OR**

*Performance Met: 3072F:*

Low risk for retinopathy (no evidence of retinopathy in the prior year)

**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: 2022F 2024F or 2026F with 8P:*

Dilated eye exam was not performed, reason not otherwise specified

**RATIONALE:**
Diabetes is the seventh leading cause of death in the United States. In 2017, diabetes affected approximately 34 million Americans (10.5 percent of the U.S. population) and killed approximately 84,000 people (Centers for Disease Control and Prevention [CDC], 2020a). Diabetes is a long-lasting disease marked by high blood glucose levels, resulting from the body's inability to produce or use insulin properly (CDC, 2020b). People with diabetes are at increased risk of serious health complications including vision loss, heart disease, stroke, kidney damage, and amputation of feet or legs, and premature death (CDC, 2018). In 2017, diabetes cost the U.S. an estimated $327 billion: $237 billion in direct medical costs and $90 billion in reduced productivity. This is a 34 percent increase from the estimated $245 billion spent on diabetes in 2012 (American Diabetes Association, 2018).

Diabetic retinopathy is progressive damage to the small blood vessels in the retina that may result in loss of vision. It is the leading cause of blindness in adults between 20-74 years of age. Approximately 4.1 million adults are affected by diabetic retinopathy (CDC, 2020c).

**CLINICAL RECOMMENDATION STATEMENTS:**
American Diabetes Association (2020):
- 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 diabetes diagnosis. (Level of evidence: B)
- If there is no evidence of retinopathy for one or more annual eye exam and glycemia is well controlled, then screening every 1–2 years may be considered. If any level of diabetic retinopathy is present, subsequent dilated retinal examinations should be repeated at least annually by an ophthalmologist or optometrist. If retinopathy is progressing or sight threatening, then examinations will be required more frequently. (Level of evidence: B)

**COPYRIGHT:**
Physician Performance Measure (Measures) and related data specifications were developed by the National Committee for Quality Assurance (NCQA). These performance Measures are not clinical guidelines and do not establish a standard of medical care, and have not been tested for all potential applications. NCQA makes no representations, warranties or endorsements about the quality of any organization or clinician who uses or reports performance measures. NCQA has no liability to anyone who relies on measures and specifications or data reflective of performance under such measures and specifications.

The Measures are copyrighted but can be reproduced and distributed, without modification, for noncommercial purposes (eg, use by healthcare providers in connection with their practices). Commercial use is defined as the sale, licensing, or distribution of the Measures for commercial gain, or incorporation of the Measures into a product or service that is sold, licensed or distributed for commercial gain. All commercial uses or requests for alteration of the measures and specifications must be approved by NCQA and are subject to a license at the discretion of NCQA. NCQA is not responsible for any use of the Measures. © 2021 NCQA. All Rights Reserved.

**THE MEASURES AND SPECIFICATIONS ARE PROVIDED "AS IS" WITHOUT WARRANTY OF ANY KIND.**

Limited proprietary coding is contained in the Measure specifications for user convenience. Users of proprietary code sets should obtain all necessary licenses from the owners of the code sets. NCQA disclaims all liability for use or accuracy of any CPT or other codes contained in the specifications.

CPT® contained in the Measure specifications is copyright 2004-2021 American Medical Association. LOINC® copyright 2004-2021 Regenstrief Institute, Inc. This material contains SNOMED Clinical Terms® (SNOMED CT®) copyright 2004-2021 International Health Terminology Standards Development Organisation. ICD-10 copyright 2021 World Health Organization. All Rights Reserved.
2022 Medicare Part B Claims Flow for Quality ID #117 (NQF 0055):
Diabetes: Eye Exam

Disclaimer: Refer to the measure specification for specific coding and instructions to submit this measure.
Dilated retinal eye exam with interpretation by an ophthalmologist or optometrist documented and reviewed; without evidence of retinopathy

Data Completeness Met + Performance Met
2022F
(10 patients) a1

Dilated retinal eye exam with interpretation by an ophthalmologist or optometrist documented and reviewed; with evidence of retinopathy

Data Completeness Met + Performance Met
2023F
(10 patients) a2

7 standard field stereoscopic retinal photos with interpretation by an ophthalmologist or optometrist documented and reviewed; without evidence of retinopathy

Eye imaging validated to match diagnosis from 7 standard field stereoscopic retinal photos results documented and reviewed; without evidence of retinopathy

Data Completeness Met + Performance Met
2026F
(10 patients) a5

7 standard field stereoscopic retinal photos with interpretation by an ophthalmologist or optometrist documented and reviewed; with evidence of retinopathy

Eye imaging validated to match diagnosis from 7 standard field stereoscopic retinal photos results documented and reviewed; with evidence of retinopathy

Data Completeness Met + Performance Met
2025F
(10 patients) a4

Data Completeness Met + Performance Met
2024F
(10 patients) a3

Data Completeness Met + Performance Met
2026F
(10 patients) a5

Data Completeness Met + Performance Met
2023F
(10 patients) a2

Continue to Numerator
**SAMPLE CALCULATIONS**

Data Completeness=
\[
\text{Denominator Exclusion (x_1 to x_5=0 patients) + Performance Met (a_1 to a_7=70 patients) + Performance Not Met (c=30 patients)} = 100 \text{ patients} = 83.33%
\]

Eligible Population / Denominator (d=120 patients) = 120 patients

Performance Rate=
\[
\frac{\text{Performance Met (a_1+a_2+a_3+a_4+a_5+a_6+a_7=70 patients)}}{\text{Data Completeness Numerator (100 patients) - Denominator Exclusion (x_1+x_2+x_3+x_4+x_5=0 patients)}} = \frac{70 \text{ patients}}{100 \text{ patients}} = 70.00%
\]

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

**NOTE:** Submission Frequency: Patient-Process

CPT only copyright 2021 American Medical Association. All rights reserved.

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.
2022 Medicare Part B Claims Flow Narrative for Quality ID #117 (NQF 0055):
Diabetes: Eye Exam

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

1. Start with Denominator

2. Check Patients 18 to 75 years of age on date of encounter:
   a. If Patients 18 to 75 years of age on date of encounter equals No, do not include in Eligible Population/Denominator. Stop processing.
   b. If Patients 18 to 75 years of age on date of encounter equals Yes, proceed to Diagnosis for diabetes as listed in Denominator*.

3. Check Diagnosis for diabetes as listed in Denominator*:
   a. If Diagnosis for diabetes as listed in Denominator* equals No, do not include in Eligible Population/Denominator. Stop processing.
   b. If Diagnosis for diabetes as listed in Denominator* equals Yes, proceed to 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, include in Eligible Population/Denominator.

5. Denominator Population:
   • 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 120 patients in the Sample Calculation.

6. Start Numerator

7. 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 Yes, include in Data Completeness Met and Denominator Exclusion.
      • Data Completeness Met and Denominator Exclusion letter is represented as Data Completeness and Performance Rate in the Sample Calculation listed at the end of this document. Letter x1 equals 0 patients in the Sample Calculation.
   b. If Patient is using hospice services any time during the measurement period equals No, proceed to Patient is using palliative care services any time during the measurement period.

8. Check Patient is using palliative care services any time during the measurement period:
   a. If Patient is using palliative care services any time during the measurement period equals Yes, include in Data Completeness Met and Denominator Exclusion.
      • Data Completeness Met and Denominator Exclusion letter is represented as Data Completeness and Performance Rate in the Sample Calculation listed at the end of this document.
b. If Patient is using palliative care services any time during the measurement period equals No, proceed to Patient greater than or equal to 66 years of age in Institutional Special Needs Plans (SNP) or residing in long-term care with POS code 32, 33, 34, 54, or 56 for more than 90 consecutive days during the measurement period.

9. Check Patient greater than or equal to 66 years of age in Institutional Special Needs Plans (SNP) or residing in long-term care with POS code 32, 33, 34, 54, or 56 for more than 90 consecutive days during the measurement period:

a. If Patient greater than or equal to 66 years of age in Institutional Special Needs Plans (SNP) or residing in long-term care with POS code 32, 33, 34, 54, or 56 for more than 90 consecutive days during the measurement period equals Yes, include in Data Completeness Met and Denominator Exclusion.

   • Data Completeness Met and Denominator Exclusion letter is represented as Data Completeness and Performance Rate in the Sample Calculation listed at the end of this document. Letter x equal 0 patients in the Sample Calculation.

b. If Patient greater than or equal to 66 years of age in Institutional Special Needs Plans (SNP) or residing in long-term care with POS code 32, 33, 34, 54, or 56 for more than 90 consecutive days during the measurement period equals No, proceed to Patients greater than or equal to 66 years of age with at least one claim/encounter for frailty during the measurement period AND a dispensed medication for dementia during the measurement period or year prior to the measurement period.

10. Check Patients greater than or equal to 66 years of age with at least one claim/encounter for frailty during the measurement period AND a dispensed medication for dementia during the measurement period or year prior to the measurement period:

a. If Patients greater than or equal to 66 years of age with at least one claim/encounter for frailty during the measurement period AND a dispensed medication for dementia during the measurement period or year prior to the measurement period equals Yes, include in Data Completeness Met and Denominator Exclusion.

   • Data Completeness Met and Denominator Exclusion letter is represented as Data Completeness and Performance Rate in the Sample Calculation listed at the end of this document. Letter x equal 0 patients in the Sample Calculation.

b. If Patients greater than or equal to 66 years of age with at least one claim/encounter for frailty during the measurement period AND a dispensed medication for dementia during the measurement period or year prior to the measurement period equals No, proceed to Patient greater than or equal to 66 years of age and has at least one claim/encounter for frailty during the measurement period AND either one acute inpatient encounter with a diagnosis of advanced illness or two outpatient, observation, ED or nonacute inpatient encounters on different dates of service with an advanced illness diagnosis during the measurement period or the year prior to the measurement period.

11. Check Patient greater than or equal to 66 years of age and has at least one claim/encounter for frailty during the measurement period AND either one acute inpatient encounter with a diagnosis of advanced illness or two outpatient, observation, ED or nonacute inpatient encounters on different dates of service with an advanced illness diagnosis during the measurement period or the year prior to the measurement period:

a. If Patient greater than or equal to 66 years of age and has at least one claim/encounter for frailty during the measurement period AND either one acute inpatient encounter with a diagnosis of
advanced illness or two outpatient, observation, ED or nonacute inpatient encounters on different
dates of service with an advanced illness diagnosis during the measurement period or the year prior
to the measurement period equals Yes, include in Data Completeness Met and Denominator
Exclusion.

- Data Completeness Met and Denominator Exclusion letter is represented as 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.

b. If Patient greater than or equal to 66 years of age and has at least one claim/encounter for frailty during
the measurement period AND either one acute inpatient encounter with a diagnosis of advanced illness
or two outpatient, observation, ED or nonacute inpatient encounters on different dates of service with an
advanced illness diagnosis during the measurement period or the year prior to the measurement period
equals No, proceed to Dilated retinal eye exam with interpretation by an ophthalmologist or optometrist
documented and reviewed:

12. 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.

- 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 a equals 10 patients in the Sample Calculation.

b. If Dilated retinal eye exam with interpretation by an ophthalmologist or optometrist documented and
reviewed equals No, proceed to Dilated retinal eye exam with interpretation by an ophthalmologist or
optometrist documented and reviewed; without evidence of retinopathy.

13. Check Dilated retinal eye exam with interpretation by an ophthalmologist or optometrist documented and
reviewed; without evidence of retinopathy:

a. If Dilated retinal eye exam with interpretation by an ophthalmologist or optometrist documented and reviewed;
without evidence of retinopathy equals Yes, include in Data Completeness Met and
Performance Met.

- 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 a equals 10 patients in the Sample Calculation.

b. If Dilated retinal eye exam with interpretation by an ophthalmologist or optometrist documented and
reviewed; without evidence of retinopathy equals No, proceed to 7 standard field stereoscopic retinal
photos with interpretation by an ophthalmologist or optometrist documented and reviewed; with
evidence of retinopathy.

14. Check 7 standard field stereoscopic retinal photos with interpretation by an ophthalmologist or optometrist
documented and reviewed, with evidence of retinopathy:

a. If 7 standard field stereoscopic retinal photos with interpretation by an ophthalmologist or optometrist
documented and reviewed, with evidence of retinopathy equals Yes, include in the Data
Completeness Met and Performance Met.

- Data Completeness Met and Performance Met letter is represented as Data
Completeness and Performance Rate in the Sample Calculation listed at the end of
b. If 7 standard field stereoscopic photos with interpretation by an ophthalmologist or optometrist documented and reviewed equals No, proceed to 7 standard field stereoscopic retinal photos with interpretation by an ophthalmologist or optometrist documented and reviewed; without evidence of retinopathy.

15. Check 7 standard field stereoscopic retinal photos with interpretation by an ophthalmologist or optometrist documented and reviewed; without evidence of retinopathy:

a. If 7 standard field stereoscopic retinal photos with interpretation by an ophthalmologist or optometrist documented and reviewed; without evidence of retinopathy equals Yes, include in the Data Completeness Met and Performance Met.

   • 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 a^4 equals 10 patients in the Sample Calculation.

b. If 7 standard field stereoscopic retinal photos with interpretation by an ophthalmologist or optometrist documented and reviewed; without evidence of retinopathy equals No, proceed to Eye imaging validated to match diagnosis from 7 standard field stereoscopic retinal photos results documented and reviewed, with evidence of retinopathy.

16. Check Eye imaging validated to match diagnosis from 7 standard field stereoscopic retinal photos results documented and reviewed, with evidence of retinopathy:

a. If Eye imaging validated to match diagnosis from 7 standard field stereoscopic retinal photos results documented and reviewed, with evidence of retinopathy equals Yes, include in Data Completeness Met and Performance Met.

   • 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 a^5 equals 10 patients in the Sample Calculation.

b. Eye imaging validated to match diagnosis from 7 standard field stereoscopic retinal photos results documented and reviewed, with evidence of retinopathy equals No proceed to Eye imaging validated to match diagnosis from 7 standard field stereoscopic retinal photos results documented and reviewed; without evidence of retinopathy.

17. Check Eye imaging validated to match diagnosis from 7 standard field stereoscopic photos results documented and reviewed; without evidence of retinopathy:

a. If Eye imaging validated to match diagnosis from 7 standard field stereoscopic retinal photos results documented and reviewed; without evidence of retinopathy equals Yes, include in Data Completeness Met and Performance Met.

   • 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 a^6 equals 10 patients in the Sample Calculation.

b. If Eye imaging validated to match diagnosis from 7 standard field stereoscopic retinal photos results documented and reviewed; without evidence of retinopathy equals No, proceed to Low risk for retinopathy (no evidence of retinopathy in the prior year).

18. 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 year) equals Yes, include in Data Completeness Met and Performance Met.

   • 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 a^7 equals 10 patients in the Sample Calculation.

b. 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.

19. 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.

      • Data Completeness Met and Performance Not Met letter is represented as Data Completeness the Sample Calculation listed at the end of this document. Letter c equals 30 patients in the Sample Calculation.

   b. If Dilated eye exam was not performed, reason not otherwise specified equals No, proceed to Data Completeness Not Met.

20. Check Data Completeness Not Met:

   a. If Data Completeness Not Met, the Quality Data Code was not submitted. 20 patients have been subtracted from the Data Completeness Numerator in the Sample Calculation.

Sample Calculations:

Data Completeness equals Denominator Exclusion (x^1 to x^5 equals 0 patients) plus Performance Met (a^1 to a^7 equals 70 patients) plus Performance Not Met (c equals 30 patients) divided by Eligible Population/Denominator (d equals 120 patients). All equals 100 patients divided by 120 patients. All equals 83.33 percent.

Performance rate equals Performance Met (a^1 plus a^2 plus a^3 plus a^4 plus a^5 plus a^6 plus a^7 equals 70 patients) divided by Data Completeness Numerator (100 patients) minus Denominator Exclusion (x^1 plus x^2 plus x^3 plus x^4 equals 0 patients). All equals 70 patients divided by 100 patients. All equals 70 percent.

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

NOTE: Submission Frequency: Patient-Process

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.