

# Ophthalmology

## PREPARING FOR MIPS 2019

### Specialty Specific Quality Measures to Avoid 2021 Penalty

Here is a list to help you find six quality measures based upon your submission method.

One measure must be a high priority (\*).

Quality Measure	Definition	Submission Method
<input type="checkbox"/> <b>#12 Primary Open-Angle Glaucoma (POAG): Optic Nerve Evaluation*</b>	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.	Claims* EHR QCDR Registry
<input type="checkbox"/> <b>#117 Diabetes: Eye Exam</b>	Percentage of patients 18-75 years of age with diabetes who had a retinal or dilated eye exam by an eye care professional during the measurement period or a negative retinal exam (no evidence of retinopathy) in the 12 months prior to the measurement period.	Claims* EHR QCDR Registry
<input type="checkbox"/> <b>#19 Diabetic Retinopathy: Communication with the Physician Managing Ongoing Diabetes Care*</b>	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.	Claims* EHR QCDR Registry
<input type="checkbox"/> <b>#130 Documentation of Current Medications in the Medical Record</b>	Percentage of visits for patients aged 18 years and older for which the eligible professional or eligible clinician attests to documenting a list of current medications using all immediate resources available on the date of the encounter. This list must include ALL known prescriptions, over-the-counters, herbals, and vitamin/mineral/dietary (nutritional) supplements AND must contain the medications' name, dosage, frequency and route of administration.	Claims* EHR QCDR Registry
<input type="checkbox"/> <b>#226 Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention</b>	Percentage of patients aged 18 years and older who were screened for tobacco use one or more times within 24 months AND who received tobacco cessation intervention if identified as a tobacco user.	Claims* EHR QCDR Registry
<input type="checkbox"/> <b>#191 Cataracts: 20/40 or Better Visual Acuity within 90 Days Following Cataract Surgery*</b>	Percentage of patients aged 18 years and older with a diagnosis of uncomplicated cataract who had cataract surgery and no significant ocular conditions impacting the visual outcome of surgery and had best-corrected visual acuity of 20/40 or better (distance or near) achieved within 90 days following the cataract surgery.	EHR QCDR Registry
<input type="checkbox"/> <b>#192 Cataracts: Complications within 30 Days Following Cataract Surgery Requiring Additional Surgical Procedures*</b>	Percentage of patients aged 18 years and older with a diagnosis of uncomplicated cataract who had cataract surgery and had any of a specified list of surgical procedures in the 30 days following cataract surgery which would indicate the occurrence of any of the following major complications: retained nuclear fragments, endophthalmitis, dislocated or wrong power IOL, retinal detachment, or wound dehiscence.	EHR QCDR Registry

\* High Priority

\* Only Medicare Part B patients are included in claims based reporting.

**Do you need help with your participation in the QPP?**

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### Common Core Quality Measures to Avoid 2021 Penalty

*If you are having difficulty finding six total measures due to your specialty or submission method, here are a few more measures that may help you achieve the total.*

Quality Measure	Definition	Submission Method
<input type="checkbox"/> <b>#1 Diabetes: Hemoglobin A1c (HbA1c) Poor Control (&gt;9%)*</b>	Percentage of patients 18-75 years of age with diabetes who had hemoglobin A1c > 9.0% during the measurement period.	Claims* EHR QCDR Registry
<input type="checkbox"/> <b>#238 Use of High-Risk Medications in the Elderly</b>	Percentage of patients 65 years of age and older who were ordered high-risk medications. Two rates are submitted: 1) Percentage of patients who were ordered at least one high-risk medication 2) Percentage of patients who were ordered at least two of the same high-risk medication	EHR QCDR Registry
<input type="checkbox"/> <b>#47 Care Plan</b>	Percentage of patients aged 65 years and older who have an advance care plan or surrogate decision maker documented in the medical record that an advance care plan was discussed but the patient did not wish or was not able to name a surrogate decision maker or provide an advance care plan.	Claims* QCDR Registry
<input type="checkbox"/> <b>#128 BMI</b>	Percentage of patients aged 18 years and older with a BMI documented during the current encounter or during the previous twelve months AND with a BMI outside of normal parameters, a follow-up plan is documented during the encounter or during the previous twelve months of the current encounter.  Normal Parameters: Age 18 years and older BMI $\geq 18.5$ and $< 25$ kg/m <sup>2</sup>	Claims* EHR QCDR Registry
<input type="checkbox"/> <b>#110 Preventive Care and Screening: Influenza Immunization</b>	Percentage of patients aged 6 months and older seen for a visit between October 1 and March 31 who received an influenza immunization OR who reported previous receipt of an influenza immunization.	Claims* EHR QCDR Registry
<input type="checkbox"/> <b>#111 Pneumococcal Vaccination Status for Older Adult</b>	Percentage of patients 65 years of age and older who have ever received a pneumococcal vaccine.	Claims* EHR QCDR Registry

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