



# PQRI Flow Sheet: Ophthalmology

GLAUCOMA

DIABETIC RETINOPATHY

**Patient Name**

**Practice Medical Record Number**

**Birth Date (mm/dd/yyyy)**

**Male / Female Gender**

**National Provider Identifier (NPI)**

**Date of Service**

**CPT Code for Procedure**

**Auditing**

All orders must be documented and can include:

- Written Orders
- Verbal Orders
- Standing Orders

**Eligibility**

PQRI does not include Medicare managed care plans. The program is only applicable to traditional Medicare.

**Communication may include:**

Documentation in the medical record indicating that the results 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.

**Patient Eligibility**

1. Is the patient entitled to traditional Medicare?	YES	NO	If NO is circled for any question, STOP. Do not report quality data.
2. Is the patient's ICD-9 diagnostic code included in the following list: <b>365.01, 365.10, 365.11, 365.12, 365.15?</b>	YES	NO	
3. Is the patient's visit code included in the following list: <b>92002, 92004, 92012, 92014, 99201, 99202, 99203, 99204, 99205, 99212, 99213, 99214, 99215, 99241, 99242, 99243, 99244, 99245</b> OR Other Ophthalmologic Services	YES	NO	

**Primary Open Angle Glaucoma: Optic Nerve Evaluation**

If Yes, Report

1. Optic nerve head evaluation performed (within last 12 months)	YES	NO	2027F
2. Optic nerve head evaluation NOT performed for <u>medical reason</u>	YES	NO	2027F - 1P
<i>Document medical reason:</i>			
3. Optic nerve head evaluation NOT performed, no reason specified	YES	NO	2027F - 8P

**Patient Eligibility**

1. Is the patient entitled to traditional Medicare?	YES	NO	If NO is circled for any question, STOP. Do not report quality data.
2. Is the patient's ICD-9 diagnostic code included in the following list: <b>362.01, 362.02, 362.03, 362.04, 362.05, 362.06?</b>	YES	NO	
3. Is the patient's visit code included in the following list: <b>92002, 92004, 92012, 92014, 99201, 99202, 99203, 99204, 99205, 99212, 99213, 99214, 99215, 99241, 99242, 99243, 99244, 99245?</b>	YES	NO	

**Diabetic Retinopathy: Macular Edema & Severity of Retinopathy**

If Yes, Report

1. Dilated macular or fundus exam performed, including documentation of the presence or absence of macular edema AND level of severity of retinopathy (within last 12 months)	YES	NO	2021F
2. Macular or fundus exam NOT performed, for <u>medical reason</u>	YES	NO	2021F - 1P
<i>Document medical reason:</i>			
3. Macular or fundus exam NOT performed, for <u>patient reason</u>	YES	NO	2021F - 2P
<i>Document patient reason:</i>			
4. Macular or fundus exam NOT performed, no reason specified	YES	NO	2021F - 8P

**Diabetic Retinopathy: Communication with Managing Physician**

If Yes, Report

1. Findings of dilated macular or fundus exam communicated to the physician managing the diabetes care (within last 12 months)	YES	NO	5010F AND 2021F
2. Findings of dilated macular or fundus exam NOT communicated for <u>medical reason</u>	YES	NO	5010F - 1P AND 2021F
<i>Document medical reason:</i>			
3. Findings of dilated macular or fundus exam NOT communicated for <u>patient reason</u>	YES	NO	5010F - 2P AND 2021F
<i>Document patient reason:</i>			
4. Findings of dilated macular or fundus exam NOT communicated, no reason specified	YES	NO	5010F - 8P AND 2021F
5. Dilated macular or fundus exam NOT performed	YES	NO	2021F - 8P