

American Academy of Ophthalmology IRIS Registry (Intelligent Research in Sight) - 2016 Non-PQRS QCDR Measures

Identifier	Measure Title	Measure Description	NQS Domain	Numerator	Denominator	Denominator Exceptions	Denominator Exclusions	Measure Type	Inverse Measure	Rationale	Steward
AAO 1	Corneal Graft Surgery - Postoperative Improvement in Visual Acuity of 20/40 or greater	Percentage of corneal graft surgery patients with a postoperative visual acuity of 20/40 or better within 90 days following surgery	Effective Clinical Care	Patients who had a visual acuity of 20/40 or better, achieved within 90 days following corneal graft surgery	Patients aged 18 years or older who underwent a corneal graft procedure with one of the following indications for surgery: endothelial dystrophy, post-cataract surgery edema, failed corneal graft, extactic disease, anterior/stromal dystrophy, or corneal opacity.	N/A	N/A	Outcome	No	Improved visual acuity is a desired surgical goal to improve patient's daily activities and quality of life	American Academy of Ophthalmology
AAO 2	Glaucoma - Intraocular Pressure (IOP)Reduction	Percentage of glaucoma patient visits where their IOP was below a threshold level based on the severity of their diagnosis	Effective Clinical Care	Visits where the eye(s) IOP was below a specified threshold based on the severity of their glaucoma: Mild stage: IOP < 22 mmHg, Moderate stage: IOP < 18 mmHg Severe stage: IOP < 15 mmHg	Patients aged between 40 and 85 years, with a minimum of 4 office visits during the prior 2 years, with a glaucoma diagnosis and documentation of the severity of their glaucoma	N/A	<ul style="list-style-type: none"><li>· Patients with a diagnosis of low tension glaucoma.</li><li>· Eyes with a documented severity of indeterminate stage.</li><li>· Eyes with absolute glaucoma blindness.</li><li>· Eyes with a glaucoma incisional surgery.</li><li>· Visual acuity findings: Count fingers (CF or FC), Hand motion (HM), Light perception (LP), No light perception (NLP)</li></ul>	Outcome	No	Intraocular pressure is the only modifiable risk factor so control of IOP is relevant to clinical outcome	American Academy of Ophthalmology
AAO 3	Glaucoma - Visual Field Progression	Percentage of eyes, in patients with a diagnosis of glaucoma, with a mean deviation loss of more than 3dB from their baseline value	Effective Clinical Care	Eyes with a mean deviation loss of 3dB or more from 'baseline' VFs to the most recent test	Patients aged between 40 and 85 years, with a minimum of 4 visual field tests during the prior 3 years, with a glaucoma diagnosis	N/A	<ul style="list-style-type: none"><li>· Eyes with absolute glaucoma blindness.</li><li>· Eyes with a glaucoma incisional surgery performed within the last 90 days.</li><li>· Conditions that may results in visual field worsening independent of glaucoma.</li><li>· Visual acuity findings: Count fingers (CF or FC), Hand motion (HM), Light perception (LP), No light perception (NLP)</li></ul>	Outcome	Yes	Progression of visual field loss indicates worsening of disease outcome so this indicates the % of eyes with worsened clinical outcome	American Academy of Ophthalmology
AAO 4	Glaucoma - Intraocular Pressure Reduction Following Laser Trabeculoplasty	Percentage of patients underwent laser trabeculoplasty who had IOP reduced by 20% from their pretreatment level	Effective Clinical Care	Eye(s) with a reduction in IOP 20% or greater from the pretreatment level.  Percentage (%) change between pretreatment IOP (Do not include IOP values taken on the day of the procedure) and the lowest IOP measure recorded between 2 and 4 months postoperatively. Calculation is based on the IOP of the eye that underwent the procedure.	Patients aged between 40 and 85 years who underwent laser trabeculoplasty	N/A	  Eyes with absolute glaucoma blindness.  Visual acuity findings: Count fingers (CF or FC), Hand motion (HM), Light perception (LP), No light perception (NLP)	Outcome	No	Intraocular pressure is the only modifiable risk factor so control of IOP is relevant to clinical outcome	American Academy of Ophthalmology

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AAO 5	Surgery for Acquired Involuntary PtoSis Patients with an Improvement of Marginal Reflex Distance	Percentage of surgical ptosis patients with an improvement of MRD postoperatively within 90 days following the surgical procedure	Effective Clinical Care	Patients who achieved an improvement in MRD postoperatively within 90 days following surgery	All patients aged 18 years or older with a diagnosis of acquired involuntary ptosis who underwent a surgical procedure for the condition	N/A	N/A	Outcome	No	Improved marginal reflex distance is the desired goal of surgery to improve clinical and functional outcomes	American Academy of Ophthalmology
AAO 6	Acquired Involuntary Entropion - Normalized Lid Position After Surgical Repair	Percentage of surgical entropion patients with postoperative normalized lid position	Effective Clinical Care	Patients with normalized lid position postoperatively within 90 days following surgery	All patients aged 18 years or older with a diagnosis of involuntary entropion who underwent a surgical procedure for the condition	N/A	N/A	Outcome	No	Normalized lid position is the desired goal of surgery to improve clinical and functional outcomes for the patient	American Academy of Ophthalmology
AAO 7	Amblyopia - Interocular Visual Acuity	Percentage of newly diagnosed amblyopic patients with a corrected interocular visual acuity difference of less than 0.23 logMAR within 6 months of first diagnosis	Effective Clinical Care	Patients with interocular visual acuity difference of less than 0.23 logMar recorded 6 months after first use of amblyopia diagnosis code	All patients aged 3 to 7 years at diagnosis of amblyopia with recognized visual acuity difference of greater than 0.29 logMar	N/A	Patients with diagnosis of deprivation amblyopia, cataract, aphakia, or pseudophakia	Outcome	No	Improved interocular visual acuity difference is a desired treatment goal for the patient's quality of life and binocular visual function.	American Academy of Ophthalmology
AAO 8	Surgical Esotropia Postoperative Alignment	Percentage of surgical esotropia patients with a postoperative alignment of 15 prism diopters (PD) or less	Effective Clinical Care	Patients who achieved a postoperative alignment of 15 PD or less between 4 and 12 weeks after surgery.	All patients aged 18 years or less who underwent a surgical procedure for esotropia	N/A	Patients with diagnosis codes of diplopia, CN 6 palsy, and Duane syndrome.  Patients who have a reoperation within 30 days of the original surgical date	Outcome	No	Alignment of 15 Prism Diopters or less is the desired goal of surgery to improve clinical and functional outcomes	American Academy of Ophthalmology

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AAO 9	Diabetic Retinopathy - Documentation of the Presence or Absence of Macular Edema and the Level of Severity of Retinopathy	Percentage of patients aged 18 years and older with a diagnosis of diabetic retinopathy who had a dilated macular or fundus exam performed which included documentation of the level of severity of retinopathy and the presence or absence of macular edema during one or more office visits within 12 months	Effective Clinical Care	Patients who had a dilated macular or fundus exam performed which included documentation of the level of severity of retinopathy AND the presence or absence of macular edema during one or more office visits within 12 months	All patients aged 18 years and older with a diagnosis of diabetic retinopathy	N/A	Documentation of medical reason for not performing a dilated or fundus examination and documentation of patient reason for not performing a dilated macular or fundus examination	Process	No	The documented level of severity of retinopathy and the documented presence or absence of macular edema assists with the ongoing plan of care for the patient with diabetic retinopathy, directly tying the disease severity and presence of edema to evidence-based, randomized controlled trial linkage to appropriate treatments	American Medical Association-convened Physician Consortium for Performance Improvement (AMA-PCPI)
AAO 10	Exudative Age-Related Macular Degeneration - Loss of Visual Acuity	Percentage of patients with a diagnosis of exudative age-related macular degeneration, being treated with anti-VEGF agents, with of loss of less than 0.3 logMar of visual acuity within the past 12 months	Effective Clinical Care	Patients with four or more recorded visual acuity values within the past 12 months and with loss of visual acuity less than 0.3 logMar	All patients aged 18 years of older with a diagnosis of exudative age-related macular degeneration currently receiving anti-VEGF treatment and with 4 or more visual acuity values recorded in the past 12 months	N/A	N/A	Outcome	No	Maintenance of visual acuity is a desired treatment goal to continue the level of the patient's daily activities and quality of life	American Academy of Ophthalmology
AAO 11	Nonexudative Age-Related Macular Degeneration - Loss of Visual Acuity	Percentage of patients with a diagnosis of nonexudative age-related macular degeneration and taking AREDS supplements with of loss of less than 0.3 logMar of visual acuity within the past 12 months	Effective Clinical Care	Patients with four or more recorded visual acuity values within the past 12 months and loss of visual acuity less than 0.3 logMar	All patients aged 18 years of older with a diagnosis of nonexudative and currently taking antioxidant supplements with 4 or more visual acuity values recorded in the past 12 months	N/A	N/A	Outcome	No	Maintenance of visual acuity is a desired treatment goal to continue the level of the patient's daily activities and quality of life	American Academy of Ophthalmology
AAO 12	Age-Related Macular Degeneration - Disease Progression	Percentage of patients with nonexudative age-related macular degeneration progressing to exudative age-related macular degeneration over the past 12 months	Effective Clinical Care	Patients who had an active diagnosis of nonexudative age-related macular degeneration in the past 12 months including documentation of the laterality (OD, OS, OU) and a history of taking AREDS supplements	All patients aged 18 years of older with an active diagnosis of exudative age-related macular degeneration including documentation of the laterality (OD, OS, OU)	N/A	N/A	Outcome	Yes	Progression to exudative AMD is worsening of disease severity and indicates a poorer treatment outcome	American Academy of Ophthalmology

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AAO 13	Diabetic Macular Edema - Loss of Visual Acuity	Percentage of patients with a diagnosis of diabetic macular edema with of loss of less than 0.3 logMar of visual acuity within the past 12 months	Effective Clinical Care	Patients with four or more recorded visual acuity values within the past 12 months; loss of visual acuity less than 0.3 logMar	All patients aged 18 years or older with a diagnosis of diabetic macular edema, with four or more visual acuity values recorded in the last 12 months, who have received anti-VEGF injections, intravitreal steroid injections or laser photocoagulation therapy	N/A	Patients with ophthalmic complications of diabetic retinopathy including neovascular glaucoma, traction retinal detachment, vitreous hemorrhage, history of vitreous surgery, history of retinal surgery, development of retinopathy in fellow eye;	Outcome	No	Maintenance of visual acuity is a desired treatment goal to continue the level of the patient's daily activities and quality of life	American Academy of Ophthalmology
AAO 16	Acute Anterior Uveitis - Post-treatment visual acuity	Percentage of acute anterior uveitis patients with a post-treatment best corrected visual acuity of 20/40 or greater <u>OR</u> patients whose visual acuity had returned to their baseline value prior to onset of uveitis	Effective Clinical Care	Patients with a best corrected visual acuity of 20/40 or greater within 90 days of treatment initiation <u>or</u> Patients whose visual acuity had returned to their baseline value prior to onset of acute uveitis within 90 days of treatment initiation	Patients aged 18 years or older who underwent treatment for acute anterior uveitis	N/A	N/A	Outcome	No	Improvement of visual acuity is a desired treatment goal to continue the level of the patient's daily activities quality of life	American Academy of Ophthalmology
AAO 17	Acute Anterior Uveitis - Post-treatment Grade 0 anterior chamber cells	Percentage of patients with acute anterior uveitis post-treatment with Grade 0 anterior chamber cells	Effective Clinical Care	Patients with Grade 0 anterior chamber cells after treatment at 30 days after onset of treatment and not on topical corticosteroids at 60 days after treatment	Patients aged 18 years or older who underwent treatment for acute anterior uveitis	N/A	N/A	Outcome	No	Reduction of inflammation is a desired treatment goal for improved clinical and functional outcome	American Academy of Ophthalmology
AAO 18	Chronic Anterior Uveitis - Post-treatment visual acuity	Percentage of chronic anterior uveitis patients with a post-treatment best corrected visual acuity of 20/40 or greater <u>OR</u> patients whose visual acuity had returned to their baseline value prior to onset of uveitis	Effective Clinical Care	Patients with a best corrected visual acuity of 20/40 or greater within 90 days of treatment initiation <u>or</u> Patients whose visual acuity had returned to their baseline value prior to onset of acute uveitis within 90 days of treatment initiation	All patients aged 18 years or greater who underwent treatment for chronic anterior uveitis	N/A	N/A	Outcome	No	Improvement or maintenance of visual acuity is a desired treatment goal to continue the level of the patient's daily activities and quality of life	American Academy of Ophthalmology

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AAO 19	Chronic Anterior Uveitis - Post-treatment Grade 0 anterior chamber cells	Percentage of patients with chronic anterior uveitis post-treatment with Grade 0 anterior chamber cells	Effective Clinical Care	Patients with Grade 0 anterior chamber cells at 30 days after treatment or Patients managed at 60 days with dose of topical corticosteroids of prednisolone acetate 1% 3X/day or less (or equivalent)	All patients aged 18 years or greater who underwent treatment for chronic anterior uveitis	N/A	N/A	Outcome	No	Reduction of inflammation is a desired treatment goal for improved clinical and functional outcome	American Academy of Ophthalmology
AAO 20	Idiopathic Intracranial Hypertension: No worsening or improvement of mean deviation	Percentage of patients with no worsening of perimetric mean deviation by > 3dB at 6 months or improvement in mean deviation at 6 months	Effective Clinical Care	Patients with no worsening of perimetric mean deviation by > 3dB at 6 months or improvement in mean deviation at 6 months	All patients aged 18 years or greater with idiopathic intracranial hypertension	N/A	N/A	Outcome	No	Improvement or no change in mean deviation is a desired outcome of the disease course	American Academy of Ophthalmology
AAO 21	Ocular Myasthenia Gravis: Improvement of ocular deviation or absence of diplopia or functional improvement	Percentage of patients with improvement of ocular deviation or absence of diplopia in primary gaze after treatment or functional improvement of ptosis at 6 months	Effective Clinical Care	Patients with improvement of ocular deviation or absence of diplopia in primary gaze after treatment or functional improvement of ptosis at 6 months	All patients aged 18 years or greater with ocular myasthenia gravis	N/A	N/A	Outcome	No	Improvement of ocular deviation and absence of diplopia is a desired outcome of treatment	American Academy of Ophthalmology
AAO 22	Giant Cell Arteritis: Absence of fellow eye involvement after corticosteroid treatment	Percentage of patients without fellow eye involvement 1-26 weeks after initiating corticosteroids in patients with unilateral visual loss	Effective Clinical Care	Patients without fellow eye involvement 1-26 weeks after initiating corticosteroids in patients with unilateral visual loss	All patients aged 18 years or greater with giant cell arteritis in one eye	N/A	N/A	Outcome	No	Minimization of the risk of visual loss to the fellow eye is a desired goal of treatment	American Academy of Ophthalmology