*Measure #12: Primary Open Angle Glaucoma: Optic Nerve Evaluation

DESCRIPTION:

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

INSTRUCTIONS:

This measure is to be reported a minimum of once per reporting period for patients seen during the reporting period. It is anticipated that clinicians who provide the primary management of patients with primary open-angle glaucoma (in either one or both eyes) will submit this measure. The system reason exclusion may be used if a clinician is asked to report on this measure but is not the clinician providing the primary management for primary open-angle glaucoma.

This measure is reported using CPT Category II codes:

ICD-9 diagnosis codes, CPT codes, and patient demographics (age, gender, etc.) are used to identify patients who are included in the measure's denominator. CPT Category II codes are used to report the numerator of the measure

When reporting the measure, submit the listed ICD-9 diagnosis codes, CPT codes, and the appropriate CPT Category II code <u>OR</u> the CPT Category II code <u>with</u> the modifier. The modifiers allowed for this measure are: 1P- medical reasons, 3P-system reasons, 8P- reasons not otherwise specified.

NUMERATOR:

Patients who have an optic nerve head evaluation during one or more office visits within 12 months

Numerator Coding:

Optic Nerve Head Evaluation Performed

CPT II 2027F: Optic nerve head evaluation performed

OR

Optic Nerve Head Evaluation not Performed for Medical or System Reasons

Append a modifier (**1P or 3P**) to CPT Category II code **2027F** to report documented circumstances that appropriately exclude patients from the denominator.

- **1P**: Documentation of medical reason(s) for not performing an optic nerve head evaluation
- **3P**: Documentation of system reason(s) for not performing an optic nerve head evaluation

OR

Optic Nerve Head Evaluation not Performed, Reason not Specified

Append a reporting modifier (8P) to CPT Category II code 2027F to report circumstances when the action described in the numerator is not performed and the reason is not otherwise specified.

• 8P: Optic nerve head evaluation was not performed, reason not otherwise specified

DENOMINATOR:

All patients aged 18 years and older with a diagnosis of primary open-angle glaucoma

Denominator Coding:

An ICD-9 diagnosis code for primary open-angle glaucoma and a CPT code are required to identify patients for denominator inclusion.

ICD-9 diagnosis codes: 365.01, 365.10, 365.11, 365.12, 365.15 AND

CPT codes: 92002, 92004, 92012, 92014, 99201, 99202, 99203, 99204, 99205, 99212, 99213, 99214, 99215, 99241, 99242, 99243, 99244, 99245, 99304, 99305, 99306, 99307, 99308, 99309, 99310, 99324, 99325, 99326, 99327, 99328, 99334, 99335, 99336, 99337

RATIONALE:

Changes in the optic nerve are one of two characteristics which currently define progression and thus worsening of glaucoma disease status (the other characteristic is visual field). There is a significant gap in documentation patterns of the optic nerve for both initial and follow-up care (Fremont, 2003), even among specialists (Lee, 2006). Examination of the optic nerve head and retinal nerve fiber layer provides valuable structural information about glaucomatous optic nerve damage. Visible structural alterations of the optic nerve head or retinal nerve fiber layer and development of peripapillary choroidal atrophy frequently occur before visual field defects can be detected. Careful study of the optic disc neural rim for small hemorrhages is important, since these hemorrhages can precede visual field loss and further optic nerve damage.

CLINICAL RECOMMENDATION STATEMENTS:

The physical exam focuses on nine elements: visual acuity, pupils, slit-lamp biomicroscopy of the anterior segment, measurement of intraocular pressure (IOP), determination of central corneal thickness, gonioscopy, evaluation of optic nerve head and retinal nerve fiber layer, documentation of optic nerve head appearance, evaluation of fundus (through dilated pupil), and evaluation of the visual field (Level A: II Recommendation for optic nerve head evaluation) (AAO, 2005).