Urine Screening for Microalbumin or Medical Attention for Nephropathy in Diabetic Patients

PQRI Data Collection Sheet			
			/ / □ Male □ Female
atient's Name Practice Medical Record Number (MRN)		Birth Date (mm/dd/yyyy) Gender	
lational Provider Identifier (NPI)			Date of Service
Clinical Information			Billing Information
Step 1 Is patient eligible for this measure?			
	Yes	No	Code Required on Claim Form
Patient is aged 18 through 75 years.			Verify date of birth on claim form.
Patient has a diagnosis of diabetes mellitus.			Refer to coding specifications document for list of applicable codes.
There is a CPT E/M Service Code for this visit.			
If \mathbf{No} is checked for any of the above, STOP. Do not repo CPT category II code.	ort a		
Step 2 Does patient meet the measure?			
Nephropathy Screening OR Treatment for Nephropathy	Yes	No	Code to be Reported on Line 24D of Paper Claim Form, if <i>Yes</i> (or Service Line 24 of Electronic Claim Form)
Screening Performed — Positive microalbuminuria test result			3060F
Screening Performed — Negative microalbuminuria test result			3061F
Screening Performed — Positive macroalbuminuria test result			3062F
Documentation of treatment for nephropathy (eg, patient receiving dialysis, patient being treated for ESRD, CRF, ARF, or renal insufficiency, any visit to a nephrologist)			3066F
Angiotensin converting enzyme (ACE) inhibitor or angiotensin receptor blocker (ARB) therapy prescribed			4009F
	1	1	If No is checked for all of the above, report 3060F-8P OR 3061F-8P OR 3062F-8P (Nephropathy screening was not performed, reason not otherwise specified.)