

Measures

- #1 Diabetes: Hemoglobin A1c Poor Control
- #110 Preventive Care and Screening: Influenza Immunization
- #117 Diabetes: Eye Exam
- #119 Diabetes: Medical Attention for Nephropathy
- #126 Diabetes Mellitus: Diabetic Foot and Ankle Care, Peripheral Neuropathy – Neurological Evaluation
- #226 Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention

Reporting Instructions

(1) Identify patients with the following criteria:

- Aged 18 through 75 years on date of encounter
- Encounter during January 1 - December 31, 2016 with the following:

One of the following diagnosis codes indicating Diabetes:

E10.10, E10.11, E10.21, E10.22, E10.29, E10.311, E10.319, E10.321, E10.329,
E10.331, E10.339, E10.341, E10.349, E10.351, E10.359, E10.36, E10.39, E10.40, E10.41,
E10.42, E10.43, E10.44, E10.49, E10.51, E10.52, E10.59, E10.610, E10.618, E10.620,
E10.621, E10.622, E10.628, E10.630, E10.638, E10.641, E10.649, E10.65, E10.69, E10.8,
E10.9, E11.00, E11.01, E11.21, E11.22, E11.29, E11.311, E11.319, E11.321, E11.329,
E11.331, E11.339, E11.341, E11.349, E11.351, E11.359, E11.36, E11.39, E11.40, E11.41,
E11.42, E11.43, E11.44, E11.49, E11.51, E11.52, E11.59, E11.610, E11.618, E11.620,
E11.621, E11.622, E11.628, E11.630, E11.638, E11.641, E11.649, E11.65, E11.69, E11.8,
E11.9, E13.00, E13.01, E13.10, E13.11, E13.21, E13.22, E13.29, E13.311, E13.319, E13.321,
E13.329, E13.331, E13.339, E13.341, E13.349, E13.351, E13.359, E13.36, E13.39, E13.40,
E13.41, E13.42, E13.43, E13.44, E13.49, E13.51, E13.52, E13.59, E13.610, E13.618, E13.620,
E13.621, E13.622, E13.628, E13.630, E13.638, E13.641, E13.649, E13.65, E13.69, E13.8,
E13.9, O24.011, O24.012, O24.013, O24.019, O24.02, O24.03, O24.111, O24.112,
O24.113, O24.119, O24.12, O24.13

and

One of the following patient encounter codes:

99201, 99202, 99203, 99204, 99205, 99212, 99213, 99214, 99215, 99341, 99342, 99343,
99344, 99345, 99347, 99348, 99349, 99350, G0402, G0438, G0439

2016 PQRS

Diabetes

Measures Group

- (2) Report all applicable measures within the measures group for at least 20 patients.
- The majority of the patients reported must be Medicare Part B Fee-for-service (FFS) patients, including Medicare Secondary and Railroad Medicare.
 - For each measure, the measure's clinical performance must be satisfied for at least 1 patient. [Note: An asterisk (*) indicates that the measure's clinical performance is satisfied.]

For additional information or clinical rationale for measures, review the CMS Measure Specification for 2016 PQRS. All measures group Measure Specifications can be found on the NJII Member Portal > Registry > Getting Started section.

Patient Information

First Name	Middle Initial	Last Name	Date of Birth	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Visit Date	Medical Record Number	Gender	Male	Female
<input type="text"/>	<input type="text"/>	Medicare FFS Patient	Yes	No

Select Measures Performance

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* Recommended clinical performance satisfied
^ Patient is excluded from measure's performance

Select one (1) clinical action for each measure below, where applicable:

#1: Diabetes: Hemoglobin A1c Poor Control

Patients whose most recent HbA1c level (performed during the measurement period) is > 9.0%.

Note: As an inverse measure CMS assesses the percentage of patients with HbA1c poor control. To satisfy the performance criteria of this measure at least 1 patient must have a most recent hemoglobin A1c level ≤ 9.0%

- Most recent hemoglobin A1c level > 9.0%
- Most recent hemoglobin A1c level ≤ 9.0% *
- Hemoglobin A1c not performed

#110: Preventive Care and Screening: Influenza Immunization

Patients who received an influenza immunization OR who reported previous receipt of an influenza immunization.

For Visit Date 01/01/16-03/31/16: Report if Received 08/01/15-03/31/16

For Visit Date 10/01/16-12/31/16: Report if Received 08/01/16-12/31/16

- Administered or previously received *
- Not administered (Reason documented)^
- Not administered (No reason documented)

Need more information? Connect with NJII PQRS Registry
973-642-4055 • pqrs@njii.com • www.njii.com/pqrs

Select Measures Performance

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#117: Diabetes: Eye Exam

Patients who had a retinal or dilated eye exam by an eye care professional (optometrist or ophthalmologist) in the measurement period or a negative retinal or dilated eye exam (negative for retinopathy) by an eye care professional (optometrist or ophthalmologist) in the year prior to the measurement period. For retinal or dilated eye exams performed 12 months prior to the measurement period, an automated result must be available.

Dilated retinal eye exam with interpretation by an ophthalmologist or optometrist documented and reviewed *

Dilated eye exam was not performed, reason not otherwise specified

#119: Diabetes: Medical Attention for Nephropathy

Patients with a screening for nephropathy or evidence of nephropathy during the measurement period.

Microalbuminuria test result documented and reviewed *

Documentation of treatment for nephropathy *

Patient receiving ACE inhibitor or ARB therapy*

Nephropathy screening was NOT performed

#126: Diabetes Mellitus: Diabetic Foot and Ankle Care, Peripheral Neuropathy – Neurological Evaluation

Patients who had a lower extremity neurological exam performed at least once within 12 months.

Lower extremity neurological exam performed and documented *

Lower extremity neurological exam not performed

Select Measures Performance

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#226: Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention

Patients who were screened for tobacco use at least once within 24 months AND who received tobacco cessation counseling intervention if identified as a tobacco user.

Identified as tobacco user and cessation intervention performed *

Screened for tobacco use and identified as non-user of tobacco*

Not screened for tobacco use (Medical reason documented)^

Identified as tobacco user and cessation intervention NOT performed

Not screened for tobacco use (No reason documented)