

Measure	CPTII	Code Description	Age	ICD.10	CPT I	Modifiers
12 (NQF 0086) POAG: ON Evaluation Primary Open-Angle Glaucoma: Optic Nerve Evaluation (Effective Clinical Care)	2027F	POAG: Optic Nerve Evaluation Performed	18 +	H40.1110, H40.1111, H40.1112, H40.1113, H40.1114, H40.1120, H40.1121, H40.1122, H40.1123, H40.1124, H40.1130, H40.1131, H40.1132, H40.1133, H40.1134, H40.1190, H40.1191, H40.1192, H40.1193, H40.1194, H40.1210, H40.1211, H40.1212, H40.1213, H40.1214, H40.1220, H40.1221, H40.1222, H40.1223, H40.1224, H40.1230, H40.1231, H40.1232, H40.1233, H40.1234, H40.151, H40.152, H40.153,	92002, 92004, 92012, 92014, 99201, 99202, 99203, 99204, 99205, 99212, 99213, 99214, 99215, 99215 * Signifies that this CPT code is a non-covered service under the PFS (Physician Fee Schedule). These non-covered services will not be counted in the denominator population for claims-based measures.	1P: Medical Reason 8P: Reason NOT Specified
14 (NQF 0087) AMD: DFE Age-Related Macular Degeneration: Dilated Macular Examination (Effective Clinical Care)	2019F	AMD: Dilated Macular Examination Performed including documentation of the presence or absence of macular thickening or hemorrhage AND the level of macular degeneration severity	50 +	H35.30, H35.3110, H35.3111, H35.3112, H35.3113, H35.3114, H35.3120, H35.3121, H35.3122, H35.3123, H35.3124, H35.3130, H35.3131, H35.3132, H35.3133, H35.3134, , H35.3210, H35.3211, H35.3212, H35.3213, H35.3220, H35.3221, H35.3222, H35.3223, H35.3230, H35.3231, H35.3232, H35.3233	92002, 92004, 92012, 92014, 99201, 99202, 99203, 99204, 99205, 99212, 99213, 99214, 99215, 99304, 99305, 99306, 99307, 99308, 99309, 99310, 99324, 99325, 99326, 99327, 99328, 99334, 99335, 99336, 99337	1P: Medical Reason 2P: Patient Reason 8P: Reason NOT Specified
19 (NQF 0089) DR: Diabetic Retinopathy: Communication with Physician Managing Ongoing Diabetes Care (Communication and Care Coordination)	G8398 OR 5010F and G8397	Dilated Macular or Fundus Exam NOT Performed Diabetic Retinopathy: Findings of dilated macular or fundus exam communicated with the physician or other qualified health care professional responsible for managing ongoing diabetes care Dilated Macular or Fundus Exam Performed including documentation of the presence or absence of macular edema AND level of severity of retinopathy	18 +	E08, E09 and E10 series as well as the following: E11.311, E11.319, E11.3211, E11.3212, E11.3213, E11.3219, E11.3291, E11.3292, E11.3293, E11.3299, E11.3311, E11.3313, E11.3319, E11.3391, E11.3392, E11.3393, E11.3399, E11.3411, E11.3412, E11.3413, E11.3419, E11.3491, E11.3492, E11.3493, E11.3499, E11.3511, E11.3512, E11.3513, E11.3519, E11.3521, E11.3522, E11.3523, E11.3529, E11.3531, E11.3532, E11.3533, E11.3539, E11.3541, E11.3542, E11.3543, E11.3549, E11.3551, E11.3552, E11.3553, E11.3559, E11.3591, E11.3593, E11.3599, E13.311, E13.319, E13.3211, E13.3212, E13.3213, E13.3219, E13.3291, E13.3292, E13.3293, E13.3299, E13.3311, E13.3312, E13.3313, E13.3319, E13.3391, E13.3392, E13.3393, E13.3399, E13.3411, E13.3412, E13.3413, E13.3419, E13.3491, E13.3492, E13.3493, E13.3499, E13.3511, E13.3512, E13.3513, E13.3519, E13.3521, E13.3522, E13.3523, E13.3529, E13.3531, E13.3532, E13.3533, E13.3539, E13.3541, E13.3542, E13.3543, E13.3549, E13.3551, E13.3552, E13.3553, E13.3559, E13.3591, E13.3592, E13.3593, E13.3599	92002, 92004, 92012, 92014, 99201, 99202, 99203, 9204, 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 * Signifies that this CPT code is a non-covered service under the PFS (Physician Fee Schedule). These non-covered services will not be counted in the denominator population for claims-based measures.	1P: Medical Reason 2P: Patient Reason 8P: Reason NOT Specified

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117 (NQF 0055) Diabetes: Eye Exam (Effective Clinical Care)	2022F or 2024F or 2026F or 3072F*	Retinal or Dilated Eye Exam Performed by an Eye Care Professional (documented and reviewed) 7 standard field stereoscopic photos with interpretation (documented and reviewed) Eye imaging validated to match diagnosis from 7 standard field stereoscopic photos results (documented and reviewed) Low risk retinopathy (no retinopathy in previous year)* <i>* Note: This code can only be used if the claim/encounter was during the measurement period because it indicates that the patient had “no evidence of retinopathy in the prior year.”</i>	18 - 75	E11.00, E11.01, E11.21, E11.22, E11.29, E11.311, E11.319, E11.3211, E11.3212, E11.3213, E11.3219, E11.3291, E11.3292, E11.3293, E11.3299, E11.3311, E11.3312, E11.3313, E11.3319, E11.3391, E11.3392, E11.3393, E11.3399, E11.3411, E11.3412, E11.3413, E11.3419, E11.3491, E11.3492, E11.3493, E11.3499, E11.3511, E11.3512, E11.3513, E11.3519, E11.3521, E11.3522, E11.3523, E11.3529, E11.3531, E11.3532, E11.3533, E11.3539, E11.3541, E11.3542, E11.3543, E11.3549, E11.3551, E11.3552, E11.3553, E11.3559, E11.3591, E11.3592, E11.3593, E11.3593, E11.3599, E11.36, E11.37X1, E11.37X2, E11.37x3E11.37X9, 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	92002, 92004, 92012, 92014, 99201, 99202, 99203, 99204, 99205, 99212, 99213, 99214, 99215, 99341, 99342, 99343, 99344, 99345, 99347, 99348, 99349, 99350, G0402, G0438, G0439	8P: Reason NOT Specified <i>* Note: 8P modifier NOT used with 3072F</i>

Measure	CPTII	Code Description	Age	ICD.10	CPT I	Modifiers
140 (NQF 0566) AMD: AREDS Age-Related Macular Degeneration: Counseling on Antioxidant Supplement (Effective Clinical Care)	4177F	AMD: Counseling on Benefits and/or Risks of the AREDS formulation for preventing progression of AMD, benefits and/or Risks of Antioxidant Supplement(s)	50+	H35.30, H35.3110, H35.3111, H35.3112, H35.3113, H35.3114, H35.3120, H35.3121, H35.3122, H35.3123, H35.3124, H35.3130, H35.3131, H35.3132, H35.3133, H35.3134, H35.3210, H35.3211, H35.3212, H35.3213, H35.3220, H35.3221, H35.3222, H35.3223, H35.3230, H35.3231, H35.3232, H35.3233	92002, 92004, 92012, 92014, 99201, 99202, 99203, 99204, 99205, 99212, 99213, 99214, 99215, 99307, 99308, 99309, 99310, 99324, 99325, 99326, 99327, 99328, 99334, 99335, 99336, 99337	8P: Reason NOT Specified
141 (NQF 0563) POAG: IOP Primary Open-Angle Glaucoma: Reduction of Intraocular Pressure by 15% OR Documentation of a Plan of Care (Communication and Care Coordination)	3284F OR 3285F and 0517F OR 3285F and 0517F OR 3284F	POAG: Reduction of IOP $\geq$ 15% Pre-Intervention Level Reduction of IOP < 15% Pre-Intervention Level Glaucoma Plan of Care Documented Reduction of IOP < 15% Pre-Intervention Level Glaucoma Plan of Care NOT Documented, Reason NOT Otherwise Specified IOP Measurement NOT Documented, Reason NOT Otherwise Specified	18+	H40.1111, H40.1112, H40.1113, H40.1114, H40.1121, H40.1112, H40.1123, H40.1124, H40.1131, H40.1132, H40.1133, H40.1134, H40.1211, H40.1212, H40.1213, H40.1214, H40.1221, H40.1222, H40.1223, H40.1224, H40.1231, H40.1232, H40.1233, H40.1234, H40.151, H40.152, H40.153	92002, 92004, 92012, 92014, 99201, 99202, 99203, 99204, 99205, 99212, 99213, 99214, 99215, 99307, 99308, 99309, 99310, 99324, 99325, 99326, 99327, 99328, 99334, 99335, 99336, 99337	8P: Reason NOT Specified

Measure	CPT II	Code Description	CPT I	Modifiers
130 (NQF 0419) Documentation of Current Medications in the Medical Record (Patient Safety)	G8427 or G8430 or G8428	Current Medications Documented (with Name, Dosage, Frequency, or Route Documented) Current Medications NOT Documented, Patient not Eligible (emergency situations only) Current Medications with Name, Dosage, Frequency, Route NOT Documented, Reason NOT Specified/Given	92002, 92004, 92014, 92014, 92507, 92508, 92526, 92537, 92538, 92540, 92541, 92542, 92544, 92545, 92547, 92548, 92550, 92557, 92567, 92568, 92570, 92585, 92588, 92626, 96116, 96150, 96151, 96152, 97161, 97162, 97163, 97164, 97165, 97166, 97167, 97168, 97532, 97802, 97803, 97804, 98960, 98961, 98962, 99201, 99202, 99203, 99204, 99205, 99212, 99213, 99214, 99215	None
226(NQF 0028) Preventive Care & Screening: Tobacco Use: Screening and Cessation Intervention (Community / Population Health)	4004F or 1036F	Patient Screened for Tobacco Use AND received tobacco cessation intervention (counseling, pharmacotherapy, or both), IF identified as a tobacco user Patient Screened for Tobacco Use and Identified as a Non-User of Tobacco	90791, 90792, 90832, 90834, 90837, 90845, 92002, 92004, 92012, 92014, 92521, 92522, 92524, 92540, 92557, 92625, 96150, 96151, 96152, 96160, 96161, 97165, 97166, 97167, 97168, 99201, 99202, 99203, 99204, 99205, 99212, 99216, 99214, 99215, 99341, 99342, 99343, 99344, 99345, 99347, 99348, 99349, 99350, 99385*, 99385*, 99387*, 99395*, 99396*, 99397*, 99401*, 99402*, 99403*, 99404*, 99406, 99407, 99411*, 99412*, 99429*, G0438, G0439	1P: Medical Reason 8P: Reason NOT Specified