

FMH Employee Health Plan (UMR) 2018 Quality Measures

| Measure | Measure Description | Comments | | | | | | |
|---|--|--|-------------|-------------|-------------|------------|-------------|----------------------------|
| Cervical Cancer Screen Pap Only | The percentage of women 21-64 years of age who were screened for cervical cancer via cervical cytology (Pap test) every 3 years | Must have claim for Pap test within the last 3 years | | | | | | |
| | | <i>Tip:</i> Document results in labs section and, if scanned results, in patient documents in EHR | | | | | | |
| | Exclusions/Exceptions: Women who had a hysterectomy with no residual cervix, cervical agenesis or acquired absence of cervix any time during their medical history | | | | | | | |
| Diabetes: Eye Exam | The percentage of patients 18-75 years of age with diabetes (type 1 and type 2) who had an eye exam (retinal) performed | Positive for retinopathy - Eye exam in 2018 | | | | | | |
| | | Negative for retinopathy - Eye exam in 2017 or 2018 | | | | | | |
| | | <i>Tip:</i> Close the referral loop and keep the records in the patient documents and in the EHR's designated fields. | | | | | | |
| | Exclusions/Exceptions: History of gestational diabetes or steroid-induced diabetes during the measurement year or the year prior | | | | | | | |
| Diabetes: Nephropathy Attention | The percentage of patients 18-75 years of age with diabetes (type 1 and type 2) who received a nephropathy screening or monitoring test or had evidence of nephropathy during the measurement year | Nephropathy screening or monitoring tests include: | | | | | | |
| | | <table border="1" style="width: 100%;"> <thead> <tr> <th style="text-align: center;">CPT Code</th> <th style="text-align: center;">Description</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">81000-81005</td> <td>Urinalysis</td> </tr> <tr> <td style="text-align: center;">82042-82044</td> <td>Urine Albumin/Microalbumin</td> </tr> </tbody> </table> | CPT Code | Description | 81000-81005 | Urinalysis | 82042-82044 | Urine Albumin/Microalbumin |
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| | | 81000-81005 | Urinalysis | | | | | |
| 82042-82044 | Urine Albumin/Microalbumin | | | | | | | |
| Evidence of nephropathy treatment captured through visit to a nephrologist or through active prescription of an ACE or ARB medication during the measurement year | | | | | | | | |
| Exclusions/Exceptions: History of gestational diabetes or steroid-induced diabetes during the measurement year or the year prior; hospice services during the measurement year | | | | | | | | |