

## Quality ID #499: Appropriate Screening and Plan of Care for Elevated Intraocular Pressure Following Intravitreal or Periocular Steroid Therapy

### 2026 COLLECTION TYPE:

MERIT-BASED INCENTIVE PAYMENT SYSTEM (MIPS) CLINICAL QUALITY MEASURE (CQM)

### MEASURE TYPE:

Process

### DESCRIPTION:

Percentage of patients who had an intravitreal or periocular corticosteroid injection (e.g., triamcinolone, preservative-free triamcinolone, dexamethasone, dexamethasone intravitreal implant, or fluocinolone intravitreal implant) who, within seven (7) weeks following the date of injection, are screened for elevated intraocular pressure (IOP) with tonometry with documented IOP  $\leq$  25 mm Hg for injected eye OR if the IOP was  $>$  25 mm Hg, a plan of care was documented.

### INSTRUCTIONS:

#### **Reporting Frequency:**

This measure is to be submitted a minimum of once per performance period for denominator eligible cases as defined in the denominator criteria.

#### **Intent and Clinician Applicability:**

This measure is intended to reflect the quality of services provided for patients who had an intravitreal or periocular corticosteroid injection. This measure may be submitted by Merit-based Incentive Payment System (MIPS) eligible clinicians who perform the quality actions described in the measure based on the services provided and the measure specific denominator coding.

#### **Measure Strata and Performance Rates:**

This measure contains one strata defined by a single submission criteria.

This measure produces a single performance rate.

#### **Implementation Considerations:**

For the purposes of MIPS implementation, this patient-process measure is submitted a minimum of once per patient during the performance period. The most advantageous quality data code will be used if the measure is submitted more than once.

#### **Telehealth:**

**NOT TELEHEALTH ELIGIBLE:** This measure is not appropriate for nor applicable to the telehealth setting. Patient encounters for this measure conducted via telehealth should be removed from the denominator eligible patient population. Therefore, if the patient meets all denominator criteria but the encounter is conducted via telehealth, it would be appropriate to remove them from the denominator eligible patient population. Telehealth eligibility is at the measure level for inclusion within the denominator eligible patient population and based on the measure specification definitions which are independent of changes to coding and/or billing practices.

#### **Measure Submission:**

The quality data codes listed do not need to be submitted by MIPS eligible clinicians, groups, or third party intermediaries that utilize this collection type for submissions; however, these codes may be submitted for those third party intermediaries that utilize Medicare Part B claims data. The coding provided to identify the measure criteria: Denominator or Numerator, may be an example of coding that could be used to identify patients that meet the intent of this clinical topic. When implementing this measure, please refer to the 'Reference Coding' section to determine if other codes or code languages that meet the intent of the criteria may also be used within the medical record to identify and/or assess patients. For more

information regarding Application Programming Interface (API), please refer to the Quality Payment Program (QPP) website.

**DENOMINATOR:**

Patients who had an intravitreal or periocular corticosteroid injection (e.g., triamcinolone, preservative-free triamcinolone, dexamethasone, dexamethasone intravitreal implant, or fluocinolone intravitreal implant) with a patient encounter during the performance period.

**DENOMINATOR NOTE:**

*\*Signifies that this CPT Category I code is a non-covered service under the Medicare Part B Physician Fee Schedule (PFS). These non-covered services should be counted in the denominator population for MIPS CQMs.*

**Denominator Criteria (Eligible Cases):**

All patients regardless of age

**AND**

Patient encounters during the performance period (CPT): 92002, 92004, 92012, 92014, 99202, 99203, 99204, 99205, 99212, 99213, 99214, 99215, 99242\*, 99243\*, 99244\*, 99245\*

**WITHOUT**

Encounters conducted via telehealth: M1426

**AND**

Patients who had an intravitreal or periocular corticosteroid injection (e.g., triamcinolone, preservative-free triamcinolone, dexamethasone, dexamethasone intravitreal implant, or fluocinolone intravitreal implant): M1324

**AND NOT**

**DENOMINATOR EXCLUSION:**

Patients with a diagnosis of hypotony: M1326

**NUMERATOR:**

Number of patients who, within seven (7) weeks following the date of injection, are screened for elevated intraocular pressure (IOP) with tonometry with documented IOP  $\leq$  25 mm Hg for injected eye listed in chart OR if the IOP was  $>$  25 mm Hg, a plan of care was documented.

**Definition:**

**Plan of care** – Plan of care includes one of the following: placement on IOP lowering medication (i.e., placement on a new medication, change in frequency or dose of an existing medication, or re-prescribing/renewing an existing medication), order for or performance of a IOP lowering procedure, referral to eye care provider for management of elevated IOP, or return within 4 weeks for IOP re-check.

**Numerator Instructions:**

For patients who receive more than one injection during the measurement period (12 months), screening only needs to occur once to meet the numerator. Tonometry with documented IOP should occur for the same eye that was injected.

**NUMERATOR NOTE:**

*If the intravitreal or periocular corticosteroid injection occurs from November 12<sup>th</sup> – December 31<sup>st</sup> of the performance period and the patient is not able to be seen for follow-up within the performance period, it would be appropriate to report the denominator exception for inadequate time for follow-up.*

**Numerator Options:**

***Performance Met:***

Patients seen within 7 weeks following the date of injection AND are screened for elevated intraocular pressure (IOP) with tonometry with documented IOP  $\leq$  25 mm Hg for injected eye (M1322)

**OR**

***Performance Met:***

Patients seen within 7 weeks following the date of injection AND are screened for elevated intraocular pressure (IOP) with tonometry with documented IOP  $>$  25 mm Hg AND a plan of care was documented (M1323)

**OR**

***Denominator Exception:***

Patients who were not seen for reasons documented by clinician for patient or medical reasons (e.g., inadequate time for follow-up, patients who received a prior intravitreal or periocular steroid injection within the last six (6) months and had a subsequent IOP evaluation with IOP  $<$  25mm Hg within seven (7) weeks of treatment) (M1325)

**OR**

***Performance Not Met:***

Patients who were not seen within 7 weeks following the date of injection for follow up OR who did not have a documented IOP OR no plan of care documented if the IOP was  $>$  25 mm Hg (M1321)

**RATIONALE:**

Patients treated with corticosteroid therapy are at increased risk for elevated IOP leading to steroid-induced glaucoma and their quality of life may be negatively impacted due to visual impairments (Breusegem, 2009; Haller, 2011; Iwao, 2007; Jonas, 2003; Phulke, 2017; Skaliky, 2012; Smithen, 2004; Vedantham, 2005).

Several randomized clinical trials and a systematic review identified that IOPs typically peak around 7-9 weeks (Haller, 2010; Kiddee, 2013; Aref, 2015). Ensuring that appropriate monitoring is conducted to detect and treat this complication is important to prevent significant visual morbidity. This measure encourages providers to screen and treat patients identified with an elevated IOP in a timely manner.

**CLINICAL RECOMMENDATION STATEMENTS:**

While current clinical guidelines do not address the need to assess for elevated IOP following corticosteroid injection, a systematic review completed by Kiddee and colleagues (Kiddee, 2013) identified that 10.9% to 79.0% of these patients will develop clinically significant IOP elevations with the large variation in incidence dependent largely on the specific steroid utilized and dose administered. The timing of IOP elevation also varies based on the type and dose; although, the available literature consistently shows IOP peaking in the 4-8 week range following injection with higher and earlier elevations following intravitreal triamcinolone injections as compared to intravitreal dexamethasone implants. This review recommended that IOP be assessed every two weeks in the first month and monthly for an additional six months at a minimum. Well-designed randomized controlled trials also support initial follow-up of no later than seven weeks. The Standard of Care vs. Corticosteroid for Retinal Vein Occlusion (SCORE) study where pressures peaked within 52.5 days following 4 mg intravitreal triamcinolone acetate injection and the GENEVA study examining the effectiveness of dexamethasone intravitreal injections saw IOP peak within 60 days (Haller, 2010; Aref, 2015). For patients with a diagnosis of glaucoma, these symptoms can occur earlier and we would expect the follow up timeframe would occur sooner such as within the first four weeks following the injection (Vie, 2017).

**REFERENCES:**

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Haller JA, Bandello F, Belfort R, et al. for the OZURDEX GENEVA Study Group. Randomized, sham-controlled trial of dexamethasone intravitreal implant in patients with macular edema due to retinal vein occlusion. *Ophthalmol*. 2010;117:1134-1146.

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Iwao K, Inatani M, Kawaji T, Koga T, Mawatari Y, Tanihara H. Frequency and risk factors for intraocular pressure elevation after posterior sub-tenon capsule triamcinolone acetonide injection. *J Glaucoma*. 2007;16:251-256.

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Skalicky Se, Goldberg I, McCluskey P. Ocular surface disease and quality of life in patients with glaucoma. *Am J Ophthalmol*. 2012;153:1-9.

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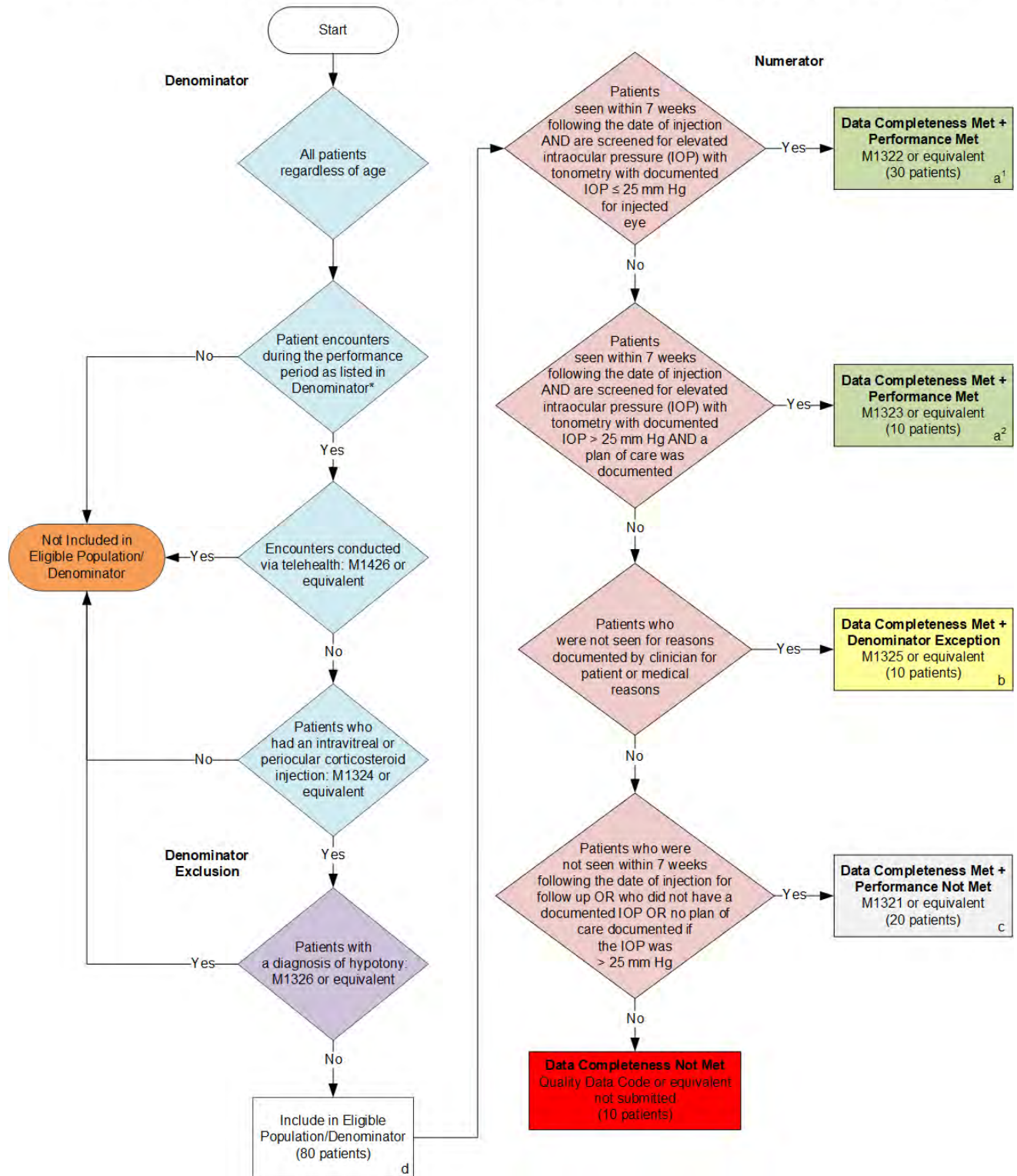
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**2026 Clinical Quality Measure Flow for Quality ID #499:  
Appropriate Screening and Plan of Care for Elevated Intraocular Pressure Following Intravitreal  
or Periocular Steroid Therapy**

*Disclaimer: Refer to the measure specification for specific coding and instructions to submit this measure.*



### SAMPLE CALCULATIONS

**Data Completeness =**

$$\frac{\text{Performance Met (a}^1\text{+a}^2\text{=40 patients)} + \text{Denominator Exception (b=10 patients)} + \text{Performance Not Met (c=20 patients)}}{\text{Eligible Population / Denominator (d=80 patients)}} = \frac{70 \text{ patients}}{80 \text{ patients}} = 87.50\%$$

**Performance Rate=**

$$\frac{\text{Performance Met (a}^1\text{+a}^2\text{=40 patients)}}{\text{Data Completeness Numerator (70 patients) – Denominator Exception (b=10 patients)}} = \frac{40 \text{ patients}}{60 \text{ patients}} = 66.67\%$$

\*See the posted measure specification for specific coding and instructions to submit this measure.

NOTE: Submission Frequency: Patient-Process

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**2026 Clinical Quality Measure Flow Narrative for Quality ID #499:**  
**Appropriate Screening and Plan of Care for Elevated Intraocular Pressure Following Intravitreal or**  
**Periocular Steroid Therapy**

*Disclaimer: Refer to the measure specification for specific coding and instructions to submit this measure.*

1. Start with Denominator
2. Check *All patients regardless of age*
3. Check *Patient encounters during the performance period as listed in Denominator\**:
  - a. If *Patient encounters during the performance period as listed in Denominator\** equals No, do not include in *Eligible Population/Denominator*. Stop processing.
  - b. If *Patient encounters during the performance period as listed in Denominator\** equals Yes, proceed to check *Encounters conducted via telehealth as listed in Denominator\**.
4. Check *Encounters conducted via telehealth as listed in Denominator\**:
  - a. If *Encounters conducted via telehealth as listed in Denominator\** equals Yes, do not include in *Eligible Population/Denominator*. Stop processing.
  - b. If *Encounters conducted via telehealth as listed in Denominator\** equals No, proceed to check *Patients who had an intravitreal or periocular corticosteroid injection*.
5. Check *Patients who had an intravitreal or periocular corticosteroid injection*:
  - a. If *Patients who had an intravitreal or periocular corticosteroid injection* equals No, do not include in *Eligible Population/Denominator*. Stop processing.
  - b. If *Patients who had an intravitreal or periocular corticosteroid injection* equals Yes, proceed to check *Patients with a diagnosis of hypotony*.
6. Check *Patients with a diagnosis of hypotony*:
  - a. If *Patients with a diagnosis of hypotony* equals Yes, do not include in *Eligible Population/Denominator*. Stop processing.
  - b. If *Patients with a diagnosis of hypotony* equals No, include in *Eligible Population/Denominator*.
7. Denominator Population:
  - Denominator Population is all Eligible Patients in the Denominator. Denominator is represented as Denominator in the Sample Calculation listed at the end of this document. Letter d equals 80 patients in the Sample Calculation.
8. Start Numerator
9. Check *Patients seen within 7 weeks following the date of injection AND are screened for elevated intraocular pressure (IOP) with tonometry with documented IOP less than or equal to 25 mm Hg for injected eye*:
  - a. If *Patients seen within 7 weeks following the date of injection AND are screened for elevated intraocular pressure (IOP) with tonometry with documented IOP less than or equal to 25 mm Hg for injected eye* equals Yes, include in *Data Completeness Met and Performance Met*.



- *Data Completeness Met and Performance Met* letter is represented as Data Completeness and Performance Rate in the Sample Calculation listed at the end of this document. Letter a<sup>1</sup> equals 30 patients in the Sample Calculation.
- b. If *Patients seen within 7 weeks following the date of injection AND are screened for elevated intraocular pressure (IOP) with tonometry with documented IOP less than or equal to 25 mm Hg for injected eye* equals No, proceed to check *Patients seen within 7 weeks following the date of injection AND are screened for elevated intraocular pressure (IOP) with tonometry with documented IOP greater than 25 mm Hg AND a plan of care was documented*.
10. Check *Patients seen within 7 weeks following the date of injection AND are screened for elevated intraocular pressure (IOP) with tonometry with documented IOP greater than 25 mm Hg AND a plan of care was documented*:
- a. If *Patients seen within 7 weeks following the date of injection AND are screened for elevated intraocular pressure (IOP) with tonometry with documented IOP greater than 25 mm Hg AND a plan of care was documented* equals Yes, include in *Data Completeness Met and Performance Met*.
- *Data Completeness Met and Performance Met* letter is represented as Data Completeness and Performance Rate in the Sample Calculation listed at the end of this document. Letter a<sup>2</sup> equals 10 patients in the Sample Calculation.
- b. If *Patients seen within 7 weeks following the date of injection AND are screened for elevated intraocular pressure (IOP) with tonometry with documented IOP greater than 25 mm Hg AND a plan of care was documented* equals No, proceed to check *Patients who were not seen for reasons documented by clinician for patient or medical reasons*.
11. Check *Patients who were not seen for reasons documented by clinician for patient or medical reasons*:
- a. If *Patients who were not seen for reasons documented by clinician for patient or medical reasons* equals Yes, include in *Data Completeness Met and Denominator Exception*.
- *Data Completeness Met and Denominator Exception* letter is represented as Data Completeness and Performance Rate in the Sample Calculation listed at the end of this document. Letter b equals 10 patients in the Sample Calculation.
- b. If *Patients who were not seen for reasons documented by clinician for patient or medical reasons* equals No, proceed to check *Patients who were not seen within 7 weeks following the date of injection for follow up OR who did not have a documented IOP OR no plan of care documented if the IOP was greater than 25 mm Hg*.
12. Check *Patients who were not seen within 7 weeks following the date of injection for follow up OR who did not have a documented IOP OR no plan of care documented if the IOP was greater than 25 mm Hg*:
- a. If *Patients who were not seen within 7 weeks following the date of injection for follow up OR who did not have a documented IOP OR no plan of care documented if the IOP was greater than 25 mm Hg* equals Yes, include in *Data Completeness Met and Performance Not Met*.
- *Data Completeness Met and Performance Not Met* letter is represented as Data Completeness in the Sample Calculation listed at the end of this document. Letter c equals 20 patients in the Sample Calculation.
- b. If *Patients who were not seen within 7 weeks following the date of injection for follow up OR who did not have a documented IOP OR no plan of care documented if the IOP was greater than 25 mm Hg* equals No, proceed to check *Data Completeness Not Met*.

13. Check *Data Completeness Not Met*:

- If *Data Completeness Not Met*, the Quality Data Code or equivalent was not submitted. 10 patients have been subtracted from the Data Completeness Numerator in the Sample Calculation.

**Sample Calculations**

Data Completeness equals Performance Met ( $a^1$  plus  $a^2$  equals 40 patients) plus Denominator Exception (b equals 10 patients) plus Performance Not Met (c equals 20 patients) divided by Eligible Population/Denominator (d equals 80 patients). All equals 70 patients divided by 80 patients. All equals 87.50 percent.

Performance Rate equals Performance Met ( $a^1$  plus  $a^2$  equals 40 patients) divided by Data Completeness Numerator (70 patients) minus Denominator Exception (b equals 10 patients). All equals 40 patients divided by 60 patients. All equals 66.67 percent.

\*See the posted measure specification for specific coding and instructions to submit this measure.

NOTE: Submission Frequency: Patient-Process

The measure diagrams were developed by CMS as a supplemental resource to be used in conjunction with the measure specifications. They should not be used alone or as a substitution for the measure specification.