IRIS1: Endothelial Keratoplasty - Post-operative improvement in best corrected visual acuity to 20/40 or greater (better)

Updated December 2025. No changes for the 2026 Performance Year.

- **Care Setting**: Ambulatory Care: Clinician Office/Clinic
- **MIPS Reporting Option:** Traditional MIPS
- **Reporting Option:**
  - IRIS Registry QCDR for EHR: groups and individuals
  - IRIS Registry QCDR manual data entry: groups and individuals
- **Measure Type:** Outcome
- **NQS Domain:** Effective Clinical Care
- **Meaningful Measure Area**: Management of Chronic Conditions
- **Description:** Percentage of endothelial keratoplasty patients with a best corrected visual acuity of 20/40 or better at 90 days after surgery
- **Risk Adjusted:** No
- **Performance Rate:** 1
- **High Priority Measure:** Yes
- **Inverse Measure:** No
- **Proportional Measure:** Yes

To Which Patients Does the Measure Apply?

Denominator: Patients aged 18 years or older who underwent a corneal graft procedure.

There are three criteria for inclusion of a patient into the denominator.

1. **Patient characteristics**: Description located in “Denominator” (see above).
2. **Diagnosis codes (ICD-10-CM):** Codes located in “Diagnosis Codes.”
3. **Procedure codes (CPT):** Codes located in “CPT Codes.”

The quality measure also has exclusions for the denominator

ICD-10 Diagnosis Codes

- Bullous keratopathy (ICD-10: H18.11, H18.12, H18.13)
- Idiopathic corneal edema (ICD-10: H18.221, H18.222, H18.223)
- Secondary corneal edema (ICD-10: H18.231, H18.232, H18. 233)
- Endothelial corneal dystrophy (ICD-10: H18.511, H18.512, H18.513)
- Other hereditary corneal dystrophies (ICD-10: H18.591, H18.592, H18.593)

CPT Codes

Corneal graft procedure (CPT: 65756 with modifier RT, LT)

How to Report the Measure

Numerator: Patients with a best corrected visual acuity of 20/40 or better within 90 days of surgery.

Numerator Exclusions: None

Note: Include only procedures performed through September 30 of the reporting period. This will allow the postoperative period to occur within the reporting year.

Denominator Exclusions:

- Acute and subacute iridocyclitis: H20.00, H20.011, H20.012, H20.013, H20.021, H20.022, H20.023, H20.031, H20.032, H20.033, H20.041, H20.042, H20.043, H20.051, H20.052, H20.053
- Adhesions and disruptions of iris and ciliary body: H21.40, H21.41, H21.42, H21.43, H21.501, H21.502, H21.503, H21.511, H21.512, H21.513, H21.521, H21.522, H21.523, H21.531, H21.532, H21.533, H21.541, H21.542, H21.543, H21.551, H21.552, H21.553, H21.561, H21.562, H21.563, H21.81, H21.82, H21.89
- Anterior chamber IOL (identified by mapping IRIS for "AC IOL," "anterior chamber IOL," "AC lens" or "anterior chamber lens" and matching laterality)
- Aphakia: H27.01, H27.02, H27.03– match laterality with reported CPT laterality
- Blindness and low vision: H54.0X33, H54.0X34, H54.0X35, H54.0X43, H54.0X44, H54.0X45, H54.0X53, H54.0X54, H54.0X55, H54.1131, H54.1132, H54.1141, H54.1142, H54.1151, H54.1152, , H54.1213, H54.1214, H54.1215, H54.1223, H54.1224, H54.1225, H54.2X11, H54.2X12,H54.2X21, H54.2X22
- Cataract secondary to ocular disorders: H26.211, H26.212, H26.213, H26.221, H26.222, H26.223,
- Cataract, congenital: Q12.0
- Cataract, mature or hypermature: H25.89
- Cataract, posterior polar: Q12.0
- **C**ataract, traumatic: H26.101, H26.102, H26.103, H26.111, H26.112, H26.113, H26.121, H26.122, H26.123, H26.131, H26.132, H26.133
- Central corneal ulcer: H16.011, H16.012, H16.013
- Choroidal hemorrhage and rupture: H31.301, H31.302, H31.303, H31.311, H31.312, H31.313, H31.321, H31.322, H31.323
- Chronic iridocyclitis: A18.54, H20.11, H20.12, H20.13
- Cystoid macular degeneration: H35.351, H35.352, H35.353
- Degeneration of macula and posterior pole: 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, H35.3224, H35.3230, H35.3231, H35.3232, H35.3233, H35.3234
- Degenerative disorders of globe: H44.21, H44.22, H44.23, H44.311, H44.312, H44.313, H44.321, H44.322, H44.323, H44.391, H44.392, H44.393
- Diabetic Macular Edema: E08.311, E08.3211, E08.3212, E08.3213, E08.3311, E08.3312, E08.3313, E08.3411, E08.3412, E08.3413, E08.3511, E08.3512, E08.3513, E09.311, E09.3211, E09.3212, E09.3213, E09.3311, E09.3312,

E09.3313, E09.3411, E09.3412, E09.3413, E09.3511, E09.3512, E09.3513, E10.311, E10.3211, E10.3212, E10.3213, E10.3311, E10.3312, E10.3313, E10.3411, E10.3412, E10.3413, E10.3511, E10.3512, E10.3513, E11.311, E11.3211, E11.3212, E11.3213, E11.3311, E11.3312, E11.3313, E11.3411, E11.3412, E11.3413, E11.3511, E11.3512, E11.3513, E13.311, E13.3211, E13.3212, E13.3213, E13.3311, E13.3312, E13.3313, E13.3411, E13.3412, E13.3413, E13.3511, E13.3512, E13.3513

- Diabetic Retinopathy with Macular Edema: E08.319, E08.3291, E08.3292, E08.3293, E08.3391, E08.3392, E08.3393, E08.3491, E08.3492, E08.3493, E08.3521, E08.3522, E08.3523, E08.3529, E08.3531, E08.3532, E08.3533, E08.3541, E08.3542, E08.3543, E08.3551, E08.3552, E08.3553, E08.37X1, E08.37X2, E08.37X3, E08.37X9, E09.311, E09.319, E09.3291, E09.3292, E09.3293, E09.3299,E09.3391, E09.3392, E09.3393, E09.3399, E09.3491, E09.3492, E09.3493, E09.3499, E09.3521, E09.3522, E09.3523, E09.3529, E09.3531, E09.3532, E09.3533, E09.3539, E09.3541, E09.3542, E09.3543, E09.3549, E09.3551, E09.3552, E09.3553, E09.3559, E09.3591, E09.3592, E09.3593, E10.3291, E10.3292, E10.3293, E10.3391, E10.3392, E10.3393, E10.3491, E10.3492, E10.3493, E10.3521, E10.3522, E10.3523, E10.3531, E10.3532, E10.3533, E10.3541, E10.3542, E10.3543, E10.3551, E10.3552, E10.3553, E10.3591, E10.3592, E10.3593, E10.319;E11.319, E11.3291, E11.3292, E11.3293, E11.3391, E11.3392, E11.3393, E11.3491, E11.3492, E11.3493, E11.3521, E11.3522, E11.3523, E11.3531, E11.3532, E11.3533, E11.3541, E11.3542, E11.3543, E11.3551, E11.3552, E11.3553, E11.3591, E11.3592, E11.3593, E13.319, E13.3291, E13,3292, E13.3293, E13.3391, E13.3392, E13.3393, E13.3491, E13.3492, E13.3493, E13.3521, E13.3522, E13.3523, E13.3531, E13.3532, E13.3533, E13.3541, E13.3542, E13.3543, E13.3551, E13.3552, E13.3553, E13.3591, E13.3592, E13.3593
- Dislocation of lens: H27.10, H27.111, H27.112, H27.113, H27.121, H27.122, H27.123, H27.131, H27.132, H27.133
- Disorders of optic chiasm: H47.41, H47.42, H47.43
- Disorders of visual cortex: H47.611, H47.612
- Disseminated chorioretinitis and disseminated retinochoroiditis: A18.53, H30.101, H30.102, H30.103, H30.111, H30.112, H30.113, H30.121, H30.122, H30.123, H30.131, H30.132, H30.133, H30.141, H30.142, H30.143
- Drusen (degenerative) of macula: H35.361, H35.362, H35.363
- Hereditary choroidal dystrophies: H31.20, H31.21, H31.22, H31.23
- Hereditary retinal dystrophies: H35.50, H35.51, H35.52, H35.53, H35.54, H36
- High hyperopia: H52.00, H52.01, H52.02, H52.03
- Hypotony of eye: H44.40, H44.411, H44.412, H44.413, H44.421, H44.422, H44.423, H44.431, H44.432, H44.433, H44.441, H44.442, H44.443
- Injury to optic nerve and pathways: S04.011A, S04.012A, S04.02XA, S04.031A, S04.032A, S04.041A, S04.042A
- Macular cyst, hole or pseudohole: H35.341, H35.342, H35.343
- Nystagmus and other irregular eye movements: H55.01
- Open wound of eyeball: S05.11XA, S05.12XA, S05.21XA, S05.22XA, S05.31XA, S05.32XA, S05.51XA, S05.52XA, S05.61XA, S05.62XA, S05.71XA, S05.72XA, S05.8X1A, S05.8X2A, S05.8X9A, S05.91XA. S05.92X
- Optic atrophy: H47.20, H47.211, H47.212, H47.213, H47.22, H47.231, H47.232, H47.233, H47.291, H47.292, H47.293

- Other endophthalmitis: H16.241, H16.242, H16.243, H21.331, H21.332, H21.333, H33.121, H33.122, H33.123, H44.111, H44.112, H44.113, H44.121, H44.122, H44.123, H44.131, H44.132, H44.133, H44.19
- Other proliferative retinopathy: H35.101, H35.102, 103, H35.111, H35.112, H35.113, H35.121, H35.122, H35.123, H35.131, H35.132, H35.133, H35.141, H35.142, H35.143, H35.151, H35.152, H35.153, H35.161, H35.162, H35.163, H35.171, H35.172, H35.173
- Pathologic myopia: H44.20, H44.21, H44.22, H44.23, H44.2A1, H44.2A2, H44.2A3, H44.2B1, H44.2B2, H44.2B3, H44.2C1, H44.2C2, H44.2C3, H44.2D1, H44.2D2, H44.2D3, H44.2E1, H44.2E2, H44.2E3, H44.30
- Posterior lenticonus: Q12.2, Q12.4, Q12.8
- Prior glaucoma filtering surgery: CPT 66170, 66172, 66179, 66180, 66183, 66184, 66185 – match laterality
- Prior pars plana vitrectomy: CPT 67036, 67039, 67040, 67041, 67042, 67043 (patient with history of this procedure or IRIS mapping to a past surgical history of vitrectomy)
- Prior penetrating keratoplasty: CPT 65730, 65750, 65755 – match laterality)
- Puckering of macula: H35.371, H35.372, H35.373
- Purulent endophthalmitis: H44.001, H44.002, H44.003, H44.011, H44.012, H44.013, H44.021, H44.022, H44.023
- Retinal vascular occlusion: H34.10, H34.11, H34.12, H34.13, H34.231, H34.232, H34.233, H34.811, H34.812, H34.813, H34.831, H34.832, H34.833
- Retrolental fibroplasias: H35.171, H35.172, H35.173
- Scleritis and episcleritis: A18.51, H15.021, H15.022, H15.023, H15.031, H15.032, H15.033
- Toxic maculopathy: H35.381, H35.382, H35.383
- Use of systemic sympathetic alpha-1a antagonist medication for treatment of prostatic hypertrophy patient taking tamsulosin hydrochloride: G9503
- Uveitis: H44.111, H44.112, H44.113, H44.131, H44.132, H44.133
- Vascular disorders of iris and ciliary body: H21.1X1, H21.1X2, H21.1X3

Denominator Exceptions: None

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IRIS2: Glaucoma – Intraocular Pressure Reduction

Updated December 2025. Changes for the 2026 Performance Year are noted below in red.

- **Care Setting: Ambulatory Care:** Clinician Office/Clinic
- **MIPS Reporting Options:** Traditional MIPS, MVP
- **Reporting Options:**
  - IRIS Registry QCDR for EHR: groups and individuals
  - IRIS Registry QCDR manual data entry: groups and individuals
- **Measure Type:** Intermediate Outcome
- **NQS Domain:** Effective Clinical Care
- **Meaningful Measure Area:** Management of Chronic Conditions
- **Description:** Percentage of glaucoma patient visits where their IOP was below a threshold level based on the severity of their diagnosis.
- **Risk Adjusted:** No
- **Performance Rate:** 1
- **High Priority Measure:** Yes
- **Inverse Measure:** No
- **Proportional Measure:** Yes

To Which Patients Does the Measure Apply?

Denominator: Total number of visits for patients aged between 40 and 85 years, with a minimum of 4 office visits during the prior 2 years, with a glaucoma diagnosis ~~and documentation of the severity of their glaucoma~~:

There are three criteria for inclusion of a patient into the denominator.

1. **Patient characteristics**: Description located in “Denominator” (see above).
2. **Diagnosis codes (ICD-10-CM):** Codes located in “Diagnosis Codes.”
3. **Procedure codes (CPT):** Codes located in “CPT Codes.”

The quality measure also has exclusions for the denominator.

Diagnosis Codes

Diagnosis of glaucoma with documentation of severity

- Open-angle glaucoma, unspecified (ICD-10: H40.10X1, H40.10X2, H40.10X3)
- Pigmentary glaucoma (ICD-10: H40.1311, H40.1312, H40.1313, H40.1321, H40.1322, H40.1323, H40.1331, H40.1332, H40.1333, H40.1391, H40.1392, H40.1393)
- Primary open angle glaucoma (ICD-10: H40.11X1, H40.11X2, H40.11X3)

- Pseudoexfoliation glaucoma (ICD-10: H40.1411, H40.1412, H40.1413, H40.1421, H40.1422, H40.1423, H40.1431, H40.1432, H40.1433, H40.1491, H40.1492, H40.1493)
- Chronic angle-closure glaucoma (ICD-10: 2211, H40.2212, H40.2213, H40.2221, H40.2222, H40.2223, H40.2231, H40.2232, H40.2233, H40.2311, H40.2312, H40.2313, H40.2321, H40.2322, H40.2323, H40.2331, H40.2332, H40.2333, H40.2411, H40.2412, H40.2413, H40.2421, H40.2422, H40.2423, H40.2431, H40.2432, H40.2433)

CPT Codes

- Patient had ≥ 4 encounters during prior 2 years (CPT: 92012, 92014, 99212, 99213, 99214, 99215)

How to Report the Measure

Numerator: Visits where the eye(s) IOP was below a specified threshold based on the severity of their glaucoma

- Mild Stage: IOP ≤ 22mm HG
- Moderate Stage: IOP ≤ 18 mm HG
- Severe Stage: IOP ≤ 15 mm HG

Numerator Exclusions: None

Denominator Exclusions:

- Patients with a diagnosis of low tension glaucoma (ICD-10: H40.12)
- Eyes with a documented severity of indeterminate stage (ICD-10: H40.11X4, H40.1314, H40.1324, H40.1334, H40.1394, H40.1414, H40.1424, H40.1434, H40.1494)
- Eyes with absolute glaucoma blindness (ICD-10: H44.511, H44.512, H44.513, H44.519)
- Eyes with a glaucoma incisional surgery performed within the last 90 days (CPT: 66170, 66172, 66174, 66175, 66179, 66180, 66183, 66184, 66185, 66250, 65820, 65850, 66711, 66984, 66982, 0191T, 03076T, 0449T, 0405T)
- Visual acuity findings: Count fingers (CF or FC), hand motion (HM), light perception (LP), no light perception (NLP)

Denominator Exceptions: None

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IRIS13: Diabetic Macular Edema: Loss of Visual Acuity

Updated December 2025. Changes for the 2026 Performance Year are noted below in red.

- **Care Setting:** Ambulatory Care: Clinician Office/Clinic
- **MIPS Reporting Options:** Traditional MIPS, MVP
- **Reporting Options:**
  - IRIS Registry QCDR for EHR: groups and individuals
  - IRIS Registry QCDR manual data entry: groups and individuals
- **Measure Type:** Outcome
- **NQS Domain:** Effective Clinical Care
- **Meaningful Measure Area**: Promote Effective Prevention & Treatment of Chronic Disease
- **Description:** Percentage of patients with a diagnosis of diabetic macular edema with of loss of less than 3 Snellen lines (which is equivalent to less than 0.3 logMar) of visual acuity within the past 12 months.
- **Risk Adjusted:** No
- **Performance Rate:** 1
- **High Priority Measure:** Yes
- **Inverse Measure:** No
- **Proportional Measure:** Yes

To Which Patients Does the Measure Apply?

Denominator: All patients aged 18 years or older with a diagnosis of diabetic macular edema including documentation of the laterality (OD, OS, OU) who have received anti-VEGF injections, intravitreal injections or laser photocoagulation therapy ~~with 2 visual acuity values with at least one on or after date of treatment~~.

There are three criteria for inclusion of a patient into the denominator.

1. **Patient characteristics**: Description located in “Denominator” (see above).
2. **Diagnosis codes (ICD-10-CM):** Codes located in “Diagnosis Codes.”
3. **Procedure codes (CPT):** Codes located in “CPT Codes.”

The quality measure also has exclusions for the denominator.

Diagnosis Codes

- Diagnosis of diabetic macular edema (ICD-10: E08.311, E08.3211, E08.3212, E08.3213, E08.3311, E08.3312, E08.3313, E08.3411, E08.3412, E08.3413, E08.3511, E08.3512, E08.3513, E09.311, E09.3211, E09.3212, E09.3213, E09.3311, E09.3312, E09.3313, E09.3411, E09.3412, E09.3413, E09.3511, E09.3512, E09.3513, E10.311, E10.3211, E10.3212, E10.3213, E10.3311, E10.3312, E10.3313,

E10.3411, E10.3412, E10.3413, E10.3511, E10.3512, E10.3513, E11.311, E11.3211, E11.3212, E11.3213, E11.3311, E11.3312, E11.3313, E11.3411, E11.3412, E11.3413, E11.3511, E11.3512, E11.3513, E13.311, E13.3211, E13.3212, E13.3213, E13.3311, E13.3312, E13.3313, E13.3411, E13.3412, E13.3413, E13.3511, E13.3512, E13.3513)

~~AND~~

~~2 visual acuity values with at least one on or after date of treatment~~

CPT Codes

Treatment with Anti-VEGF agents *OR* intravitreal steroids *OR* laser photocoagulation

- Bevacizumab (Avastin®) injections (CPT: 67028 and HCPCS: J9035; CPT: 67028 and HCPCS: J3490; CPT: 67028 and HCPCS: J3590; CPT: 67028 and HCPCS: C9257; CPT: 67028 & HCPCS: J7999; CPT: 67028 & HCPCS: Q5107; CPT: 67028 & HCPCS: Q9977)
- Ranibizumab (Lucentis®) injections (CPT: 67028 and HCPCS: J2778)
- Aflibercept (EYLEA®) injections (CPT: 67028 and HCPCS: J0178)
- Aflibercept (EYLEA® HD) injections (CPT: 67028 and HCPCS: J3490, J3590 or C9399; J0177 as of 4/1/24)
- Brolucizumab (Beovu®) injections (CPT: 67028 and HCPCS: J0179)
- Farcimab (Vabysmo®) injections (CPT: 67028 and HCPCS: J2777)
- Ranibizumab-eqrn (Cimerli®) injections (CPT: 67028 and HCPCS Q5128)

OR

- Fluocinolone acetonide (Iluvien®) injections (CPT: 67028 and HCPCS: J7313)
- Dexamethasone (Ozurdex®) injections (CPT: 67028 and HCPCS: J7312)
- Triamcinalone (Kenalog®) injections (CPT: 67028 and HCPCS: J3301)
- Triamcinolone acetonide (Triesence®) injections (CPT: 67028 and HCPCS: J3300)

OR

- Laser photocoagulation (CPT: 67210, 67228)

How to Report the Measure

Numerator: Patients with two or more recorded visual acuity values within the past 12 months; at least one visual acuity value recorded prior to treatment, at least one visual acuity value recorded after treatment; loss of visual acuity less than 3 Snellen lines (which is equivalent to less than 0.3 logMar).

Numerator Exclusions: None

Denominator Exclusions: Patients with ophthalmic complications of diabetic retinopathy including neovascular glaucoma, traction retinal detachment, vitreous hemorrhage, history of vitreous surgery, history of retinal surgery, development of retinopathy in fellow eye.

Ophthalmic complications of diabetic retinopathy (ICD-10-CM): H40.89, H33.41, H33.42, H33.43, H43.11, H43.12, H43.13

Notes: Loss of less than three Snellen lines would be calculated as follows:

From 20/20 to 20/25 or 20/32 would be considered less than 3 Snellen lines of loss, from 20/20 to 20/40 or greater would be considered 3 Snellen lines of loss
From 20/40 to 20/50 or 20/63 would be considered less than 3 Snellen lines of loss, from 20/40 to 20/80 or greater would be considered 3 Snellen lines of loss
From 20/50 to 20/63 or 20/80 would be considered less than 3 Snellen lines of loss, from 20/50 to 20/100 or greater would be considered 3 Snellen lines of loss
From 20/80 to 20/100 or 20/125 would be considered less than 3 Snellen lines of loss, from 20/80 to 20/160 or great would be considered 3 Snellen lines of loss

The chart shows the conversion of logMAR and Snellen visual acuity (formerly the measure was < 0.3 logMar which is equivalent to less than 3 Snellen Lines)

Visual Acuity Conversion Table

Feet	LogMar
20/200	1.00
20/160	0.90
20/125	0.80
20/100	0.70
20/80	0.60
20/63	0.50
20/50	0.40
20/40	0.30
20/32	0.20
20/25	0.10
20/20	0.00
20/16	-0.10
20/12.5	-0.20
20/10	-0.30

Denominator Exceptions: None

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IRIS17: Acute Anterior Uveitis: Post-treatment Grade 0 anterior chamber cells

Updated December 2025. No changes for the 2026 Performance Year.

- **Care Setting: Ambulatory Care:** Clinician Office/Clinic
- **MIPS Reporting Option:** Traditional MIPS
- **Reporting Options:**
  - IRIS Registry QCDR for EHR: groups and individuals
  - IRIS Registry QCDR manual data entry: groups and individuals
- **Measure Type:** Outcome
- **NQS Domain:**Effective Clinical Care
- **Meaningful Measure Area:** Management of Chronic Conditions
- **Description:** Percentage of patients with acute anterior uveitis post-treatment with Grade 0 anterior chamber cells
- **Risk Adjusted:** No
- **Performance Rate:** 1
- **High Priority Measure:** Yes
- **Inverse Measure:** No
- **Proportional Measure:** Yes

To Which Patients Does the Measure Apply?

Denominator: Patients aged 18 years or older who underwent treatment for acute anterior uveitis

There are two criteria for inclusion of a patient into the denominator.

1. **Patient characteristics**: Description located in “Denominator” (see above).
2. **Diagnosis codes (ICD-10-CM):** Codes located in “Diagnosis Codes.”

Diagnosis Codes

Diagnosis of acute uveitis

- Primary iridocyclitis (ICD-10: H20.011, H20.012, H20.013, H20.019)
- Recurrent acute iridocyclitis (ICD-10: H20.021, H20.022, H20.023, H20.029)
- Unspecified acute and subacute iridocyclitis (ICD-10: H20.00)

How To Report the Measure

Numerator: Patients with Grade 0 anterior chamber cells after treatment within 30 days after onset of treatment and not on topical corticosteroids at 60 days after treatment

Note: Include only procedures performed through October 31 of the reporting period. This will allow the posttreatment period to occur within the reporting year.

Numerator Exclusions: None

Denominator Exclusions: None

Denominator Exceptions: None

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IRIS23: Refractive Surgery: Patients with a postoperative uncorrected visual acuity (UCVA) of 20/20 or better within 30 days

Updated December 2025. No changes for the 2026 Performance Year.

- **Care Setting:** Ambulatory Care: Clinician Office/Clinic
- **MIPS Reporting Option:** Traditional MIPS
- **Reporting Option:**
  - IRIS Registry for EHR Integration: groups and individuals
  - IRIS Registry QCDR manual data entry: groups and individuals
- **Measure Type:** Outcome
- **NQS Domain:**Effective Clinical Care
- **Meaningful Measure Area**: Management of Chronic Conditions
- **Description:** Percentage of patients with an uncorrected visual acuity of 20/20 or better within 30 days
- **Risk Adjusted:** No
- **Performance Rate:** 1
- **High Priority Measure:** Yes
- **Inverse Measure:** No
- **Proportional Measure:** Yes

To Which Patients Does the Measure Apply?

Denominator: All patients aged 18 years or greater and diagnosis of myopia who underwent refractive surgery

There are three criteria for inclusion of a patient into the denominator.

1. **Patient characteristics**: Description located in “Denominator” (see above).
2. **Diagnosis codes (ICD-10-CM):** Codes located in “Diagnosis Codes.”
3. **Procedure codes (CPT):** Codes located in “CPT Codes.”

Diagnosis Codes

- Diagnosis of myopia (H52.11 (right eye), H52.12 (left eye), H52.13 (bilateral))

CPT Codes

- Refractive surgery treatment (CPT: S0810 (PRK), S0800 (LASIK)

How to Report the Measure

Numerator: Patients receiving refractive surgery with a postoperative uncorrected visual acuity of 20/20 or better within 30 days (could be earlier at last postoperative visit).

Note: Include only procedures performed through November 30 of the reporting period. This will allow the postoperative period to occur within the reporting year.

Numerator Exclusions: None

Denominator Exclusions: None

Denominator Exceptions: None

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IRIS38: Endothelial Keratoplasty - Dislocation Requiring Surgical Intervention

Updated December 2025. No changes for the 2026 Performance Year

- **Care Setting: Ambulatory Care:** Clinician Office/Clinic
- **MIPS Reporting Option:** Traditional MIPS
- **Reporting Option:**
  - IRIS Registry QCDR for EHR: groups and individuals
  - IRIS Registry QCDR manual data entry: groups and individuals
- **Measure Type:** Outcome
- **NQS Domain:** Effective Clinical Care
- **Meaningful Measure Area**: Management of Chronic Conditions
- **Description:** Percentage of endothelial keratoplasty patients with a rebubbling or revision or repair procedure within 90 days after surgery
- **Risk Adjusted:** No
- **Performance Rate:** 1
- **High Priority Measure:** Yes
- **Inverse Measure:** Yes
- **Proportional Measure:** Yes

To Which Patients Does the Measure Apply?

Denominator: Patients aged 18 years or older who underwent an endothelial keratoplasty surgery.

There are three criteria for inclusion of a patient into the denominator.

1. **Patient characteristics**: Description located in “Denominator” (see above).
2. **Procedure codes (CPT):** Codes located in “CPT Codes.”

The quality measure also has exclusions for the denominator

CPT Codes

Corneal graft procedure (CPT: 65756 with modifier RT, LT)

How To Report the Measure

Numerator: Patients with a surgical intervention within 90 days of endothelial keratoplasty surgery.

Numerator Exclusions: None

Note: Include only procedures performed through September 30 of the reporting period. This will allow the postoperative period to occur within the reporting year.

Surgical intervention – rebubbling, revision or repair (CPT: 66020, 66250)

Denominator Exclusions:

- Adherent leukoma: H17.01, H17.02, H17.03
- Pupillary membranes: H21.41, H21.42, H21.43
- Adhesions and disruptions of iris and ciliary body: H21.501, H21.502, H21.503
- Anterior synechiae (iris): H21.511, H21.512, H21.513
- Goniosynechiae: H21.521, H21.522, H21.523
- Iridodialysis: H21.531, H21.532, H21.533,
- Posterior synechiae (iris): H21.541, H21.542, H21.543,
- Recession of chamber angle: H21.551, H21.552, H21.553,
- Pupillary abnormalities: H21.561, H21.562, H21.563
- Other disorders of iris and ciliary body: H21.81, H21.82, H21.89,
- Anterior chamber IOL
- Aphakia: H27.01, H27.02, H27.03
- Dislocation of lens: H27.10, H27.111, H27.112, H27.113, H27.121, H27.122, H27.123, H27.131, H27.132, H27.133
- Hypotony of eye: H44.40, H44.411, H44.412, H44.413, H44.421, H44.422, H44.423, H44.431, H44.432, H44.433, H44.441, H44.442, H44.443
- Open wound of eyeball: S05.11XA, S05.12XA, S05.21XA, S05.22XA, S05.31XA, S05.32XA, S05.41XA, S05.42XA, S05.51XA, S05.52XA, S05.61XA, S05.62XA, S05.71XA, S05.72XA, S05.8X1A, S05.8X2A, S05.91XA, S05.92XA
- Prior glaucoma filtering surgery: CPT 66170, 66172, 66179, 66180, 66183, 66184, 66185
- Prior pars plana vitrectomy: CPT 67036, 67039, 67040, 67041, 67042, 67043
- Prior penetrating keratoplasty: CPT 65730, 65750, 65755

Denominator Exceptions: None

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IRIS39: Glaucoma – Intraocular Pressure Reduction Following Trabeculectomy or an Aqueous Shunt Procedure

Updated December 2025. No changes for the 2026 Performance Year.

- **Care Setting: Ambulatory Care:** Clinician Office/Clinic
- **MIPS Reportion Options:** Traditional MIPS, MVP
- **Reporting Options:**
  - IRIS Registry QCDR for EHR: groups and individuals
  - IRIS Registry QCDR manual data entry: groups and individuals
- **Measure Type:** Outcome
- **NQS Domain:** Effective Clinical Care
- **Meaningful Measure Area:** Management of Chronic Conditions
- **Description:** Percentage of patients who underwent trabeculectomy or aqueous shunt procedures who had IOP reduced by 20% or more from their pretreatment between 3 and 4 months of treatment or a reduction in overall number of glaucoma medications.
- **Risk Adjusted:** No
- **Performance Rate:** 1
- **High Priority Measure:** Yes
- **Inverse Measure:** No
- **Proportional Measure:** Yes

To Which Patients Does the Measure Apply?

Denominator: Patients aged between 40 and 85 years with a diagnosis of open-angle glaucoma, pigmentary glaucoma, primary open-angle glaucoma, pseudoexfoliation glaucoma or chronic angle glaucoma and who underwent a trabeculectomy or an aqueous shunt procedure.

There are three criteria for inclusion of a patient into the denominator.

1. **Patient characteristics**: Description located in “Denominator” (see above).
2. **Diagnosis codes (ICD-10-CM):** Codes located in “Diagnosis Codes.”
3. **Procedure codes (CPT):** Codes located in “CPT Codes.”

The quality measure also has exclusions for the denominator.

Diagnosis Codes

Diagnosis of glaucoma with documentation of severity

- Open-angle glaucoma, unspecified (ICD-10: H40.10X1, H40.10X2, H40.10X3)

- Low-tension glaucoma (ICD-10: H40.1211, H40.1212, H40.1213, H40.1221, H40.1222, H40.1223, H40.1231, H40.1232, H40.1233)
- Pigmentary glaucoma (ICD-10: H40.1311, H40.1312, H40.1313, H40.1321, H40.1322, H40.1323, H40.1331, H40.1332, H40.1333, H40.1391, H40.1392, H40.1393)
- Primary open angle glaucoma (ICD-10: H40.1111, H40.1112, H40.1113, H40.1121, H40.1122, H40.1123, H40.1131, H40.1132, H40.1133)
- Pseudoexfoliation glaucoma (ICD-10: H40.1411, H40.1412, H40.1413, H40.1421, H40.1422, H40.1423, H40.1431, H40.1432, H40.1433, H40.1491, H40.1492, H40.1493)
- Chronic angle glaucoma (ICD-10: H40.2211, H40.2212, H40.2213, H40.2221, H40.2222, H40.2223, H40.2231, H40.2232, H40.2233, H40.2311, H40.2312, H40.2313, H40.2321, H40.2322, H40.2323, H40.2331, H40.2332, H40.2333, H40.2411, H40.2412, H40.2413, H40.2421, H40.2422, H40.2423, H40.2431, H40.2432, H40.2433)

CPT Codes

- Trabeculectomy procedure (CPT: 66170, 66172 with modifier RT, LT, -50)

OR

- Aqueous shunt procedure (CPT: 66179, 66180, 66183, 0449T with modifier RT, LT, -50, 0450T with modifier RT, LT, -50)

How to Report the Measure

Numerator: Patients with a reduction in IOP ≥ 20% from the pretreatment level or a reduction in the overall number of glaucoma medications. The procedure must be performed during the performance year.

Note: Include only procedures performed through August 31 of the reporting period. This will allow the posttreatment period to occur within the reporting year.

Numerator Calculation

% change between pretreatment IOP (Do not include IOP values taken on the day of procedure) and the lowest IOP measures between 3 and 4 months postoperatively OR a reduction in the overall number of glaucoma medications

Calculation is based on the IOP of the eye that underwent the procedure. Medications are by patient, if it cannot be identified by eye level

Numerator Exclusions: None

Denominator Exclusions:

- Eyes with absolute glaucoma blindness (ICD-10: H44.511, H44.512, H44.513)
- Visual acuity findings: Count fingers (CF or FC), Hand motion (HM), Light perception (LP), No light perception (NLP)

Denominator Exceptions: None

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IRIS50: Amblyopia: Interocular visual acuity

Updated December 2025. No changes for the 2026 Performance Year.

- **Care Setting:** Ambulatory Care: Clinician Office/Clinic
- **MIPS Reporting Option:** Traditional MIPS
- **Reporting Option:**
  - IRIS Registry QCDR for EHR: groups and individuals
  - IRIS Registry QCDR manual data entry: groups and individuals
- **Measure Type:** Outcome
- **NQS Domain:** Effective Clinical Care
- **Meaningful Measure Area:** Management of Chronic Conditions
- **Description:** Percentage of newly diagnosed amblyopic patients with one or more of the following:
  - A corrected interocular (or if not reported, the uncorrected) visual acuity difference < 0.23 logMAR 3-12 months after first diagnosis of amblyopia
  - An improvement in the corrected visual acuity of the amblyopic eye of 3 or more Snellen lines (> or = 0.30 logMAR) 3-12 months after first diagnosis of amblyopia
  - A final visual acuity in the amblyopic eye equal to 20/30 or better (less than or equal to 0.18 logMAR) 3-12 months after first diagnosis of amblyopia
- **Risk Adjusted:** No
- **Performance Rate:** 1
- **High Priority Measure:** Yes
- **Inverse Measure:** No
- **Proportional Measure:** Yes

To Which Patients Does the Measure Apply?

Denominator: All patients aged between 3 to 7 years at diagnosis of amblyopia with recognized visual acuity difference of greater than 0.29 logMAR between right and left eye (IOD criterion is to exclude bilateral ametropic amblyopia).

There are two criteria for inclusion of a patient into the denominator.

1. **Patient characteristics**: Description located in “Denominator” (see above).
2. **Diagnosis codes (ICD-10-CM):** Codes located in “Diagnosis Codes.”

The quality measure also has exclusions for the denominator.

Diagnosis Codes

- Amblyopia (ICD-10: H53.001, H53.002, H53.003, H53.021, H53.022, H53.023, H53.031, H53.032, H53.033)

How to Report the Measure

Numerator: Patients with interocular visual acuity difference of < 0.23 logMAR* or an improvement of three or more Snellen lines (> or = 0.30 logMAR)** in the amblyopic eye or a final visual acuity in the amblyopic eye of 20/30 or better (< or = 0.18 logMAR)*** recorded between 3 and 12 months after first use of amblyopia diagnosis code

*Difference in visual acuity values between right and left eye (inter-eye)

**Difference between baseline and visual acuity at 3-12 months in the amblyopic eye (intra-eye)

***Absolute visual acuity, not a difference

Numerator Exclusions: None

Denominator Exclusions: Patients with diagnosis of deprivation amblyopia (ICD 10: H53.01), cataract (ICD –10: H26.01-.06), aphakia (ICD-10: H27.00, H27.01, H27.02, H27.03), or pseudophakia (ICD-10: Z96.1)

Denominator Exceptions: None

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IRIS54: Complications After Cataract Surgery

Updated December 2025. No changes for the 2026 Performance Year.

- **Care Setting:** Ambulatory Care: Clinician Office/Clinic
- **MIPS Reporting Options:** Traditional MIPS, MVP
- **Reporting Option:**
  - IRIS Registry QCDR for EHR: groups and individuals
  - IRIS Registry QCDR manual data entry: groups and individuals
- **Measure Type:** Outcome
- **NQS Domain:** Effective Clinical Care
- **Meaningful Measures Area**: Management of Chronic Conditions
- **Description:** Percentage of eyes of patients aged 18 years and older with a diagnosis of cataract who had cataract surgery and had the following complications within 90 days after cataract surgery: prolonged inflammation, incision complications, iris complications, retinal detachment, cystoid macular edema, corneal complications or return to the operating room.
- **Risk Adjusted:** No
- **Performance Rate:** 1
- **High Priority Measure:** Yes
- **Inverse Measure:** Yes
- **Proportional Measure**: Yes

To Which Patients Does the Measure Apply?

Denominator: Eyes of patients aged 18 years and older with a diagnosis of cataract who had cataract surgery.

- This measure is to be calculated *each time* a procedure for uncomplicated cataracts is performed during the reporting period. This measure is intended to reflect the quality of services provided for the patients receiving cataract surgery.
- Include only procedures performed through Sept. 30 of the reporting period. This will allow the postoperative period to occur within the reporting year.
- Clinicians who indicate modifier 55, postoperative management only OR modifier - 56, preoperative management only, *will not* qualify for this measure

There are two criteria for inclusion of a patient into the denominator.

1. **Patient characteristics**: Description located in “Denominator” (see above)
2. **Procedure codes (CPT):** Codes located in “CPT Codes”

CPT Codes

66840, 66850, 66852, 66920, 66930, 66940, 66982, 66983, 66984, 66987, 66988

How To Report the Measure

Numerator: Eyes of patients aged 18 years and older with a diagnosis of cataract who had cataract surgery and had the following complications within 90 days after cataract surgery: prolonged inflammation, incision complications, iris complications, retinal detachment, cystoid macular edema, corneal complications or return to the operating room.

Lower rate indicates better performance.

ICD-10 Codes

T85.79XA, T81.31XA, H20.051, H20.052, H20.053, H21.531, H21.532, H21.533, H21.561, H21.562, H21.563, H33.012, H33.013, H33.021, H33.022, H33.023, H33.031, H33.032, H33.033, H33.041, H33.042, H33.043, H33.051, H33.052, H33.05, H59.031, H59.032, H59.033, H18.11, H18.12, H18.13, H18.231, H18.232, H18.233

Numerator Exclusions: None

Denominator Exclusions: None

Denominator Exceptions: None

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IRIS58: Improved Visual Acuity after Vitrectomy for Complications of Diabetic Retinopathy within 120 Days

Updated December 2025. No changes for the 2026 Performance Year.

- **Care Setting:** Ambulatory Care: Clinician Office/Clinic
- **MIPS Reporting Options:** Traditional MIPS, MVP
- **Reporting Options:**
  - IRIS Registry QCDR for EHR: groups and individuals
  - IRIS Registry QCDR manual data entry: groups and individuals
- **Measure Type:** Outcome
- **NQS Domain:** Effective Clinical Care
- **Meaningful Measure Area**: Management of Chronic Conditions
- **Description:** Percentage of patients with a 20% or greater improvement in visual acuity within 120 days following vitrectomy for complications of diabetic retinopathy
- **Risk Adjusted:** No
- **Performance Rate:** 1
- **High Priority Measure:** Yes
- **Inverse Measure:** No
- **Proportional Measure:** Yes

To Which Patients Does the Measure Apply?

Denominator: All patients aged 18 years or older with a diagnosis of diabetic retinopathy and had a vitrectomy procedure

There are three criteria for inclusion of a patient into the denominator.

1. **Patient characteristics**: Description located in “Denominator” (see above).
2. **Diagnosis codes (ICD-10-CM):** Codes located in “Diagnosis Codes.”
3. **Procedure codes (CPT):** Codes located in “CPT Codes.”

Diagnosis Codes

- Diagnosis of diabetic retinopathy (E08.311, E08.319, E08.3211, E08.3212, E08.3213, E08.3291, E08.3292, E08.3293, E08.3311, E08.3312, E08.3313, E08.3391, E08.3392, E08.3393, E08.3411, E08.3412, E08.3413,E08.3491, E08.3492, E08.3493, E08.3511, E08.3512, E08.3513, E08.3521, E08.3522, E08.3523, E08.3531, E08.3532, E08.3533, E08.3541, E08.3542, E08.3543, E08.3551, E08.3552, E08.3553, E08.3591, E08.3592, E08.3593, E09.311, E09.319, E09.3211, E09.3212, E09.3213, E09.3291, E09.3292, E09.3293, E09.3311, E09.3312, E09.3313, E09.3391, E09.3392, E09.3393, E09.3411, E09.3412, E09.3413, E09.3491, E09.3492, E09.3493, E09.3511, E09.3512, E09.3513,

E09.3521, E09.3522, E09.3523, E09.3531, E09.3532, E09.3533, E09.3541, E09.3542, E09.3543, E09.3551, E09.3552, E09.3553, E09.3591, E09.3592, E09.3593, E10.311, E10.319, E10.3211, E10.3212, E10.3213, E10.3291, E10.3292, E10.3293, E10.3311, E10.3312, E10.3313, E10.3391, E10.3392, E10.3393, E10.3411, E10.3412, E10.3413, E10.3491, E10.3492, E10.3493, E10.3511, E10.3512, E10.3513, E10.3521, E10.3522, E10.3523, E10.3531, E10.3532, E10.3533, E10.3541, E10.3542, E10.3543, E10.3551, E10.3552, E10.3553, E10.3591, E10.3592, E10.3593, E11.311, E11.319, E11.3211, E11.3212, E11.3213, E11.3291, E11.3292, E11.3293, E11.3311, E11.3312, E11.3313, E11.3391, E11.3392, E11.3393, E11.3411, E11.3412, E11.3413, E11.3491, E11.3492, E11.3493, E11.3511, E11.3512, E11.3513, E11.3521, E11.3522, E11.3523, E11.3531, E11.3532, E11.3533, E11.3541, E11.3542, E11.3543, E11.3551, E11.3552, E11.3553, E11.3591, E11.3592, E11.3593, E13.311, E13.319, E13.3211, E13.3212, E13.3213, E13.3291, E13.3292, E13.3293, E13.3311, E13.3312, E13.3313, E13.3391, E13.3392, E13.3393, E13.3411, E13.3412, E13.3413, E13.3491, E13.3492, E13.3493, E13.3511, E13.3512, E13.3513, E13.3521, E13.3522, E13.3523, E13.3531, E13.3532, E13.3533, E13.3541, E13.3542, E13.3543, E13.3551, E13.3552, E13.3553, E13.3591, E13.3592, E13.3593)

CPT Codes

- Had a vitrectomy procedure to treat complications of diabetic retinopathy (CPT: 67036, 67039, 67040, 67041, 67042)

How to Report the Measure

Numerator: Patients with a 20% or greater improvement in visual acuity within 120 days following vitrectomy

Note: Include only procedures performed through August 31 of the reporting period. This will allow the postoperative period to occur within the reporting year.

Numerator Exclusions: None

Denominator Exclusions: None

Denominator Exceptions: None

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IRIS59: Regaining Vision After Cataract Surgery

Updated December 2025. No Changes for the 2026 Performance Year.

- **Care Setting:** Ambulatory Care: Clinician Office/Clinic
- **MIPS Reporting Option:** Traditional MIPS
- **Reporting Options:**
  - IRIS Registry QCDR for EHR: groups and individuals
  - IRIS Registry QCDR manual data entry: groups and individuals
- **Measure Type:** Outcome
- **NQS Domain:** Management of Chronic Conditions
- **Meaningful Measure Area**: Promote Effective Prevention & Treatment of Chronic Disease
- **Description:** Percentage of eyes of patients aged 18 years and older with a diagnosis of cataract had cataract surgery and had 20/20 best-corrected distance visual acuity or better OR an improvement in best-corrected distance visual acuity achieved within 30 days following the cataract surgery. Weighted average of performance rates reported.
- **Risk Adjusted:** No
- **Performance Rates:** 3 and a weighted average
- **High Priority Measure:** Yes
- **Inverse Measure:** No
- **Proportional Measure:** Yes

Instructions:
This measure is intended to reflect the quality of services provided for the patients receiving cataract surgery.

- Include only procedures performed through November 30 of the reporting period. This will allow the postoperative period to occur within the reporting year.
- Clinicians who indicate modifier 55, postoperative management only OR modifier -56, preoperative management only, will not qualify for this measure.

To Which Patients Does the Measure Apply?

Denominator: Eyes of patients aged 18 years and older with a diagnosis of cataract who had cataract surgery with the criteria for preoperative comorbidities and visual acuity for the three different performance rates.

There are two criteria for inclusion of a patient into the denominator.

1. **Patient characteristics**: Description located in “Denominator” (see above).
2. **Procedure codes (CPT):** Codes located in “CPT Codes.”

The quality measure also has exclusions for the denominator.

CPT Codes

66840, 66850, 66852, 66920, 66930, 66940, 66982, 66983, 66984

How to Report the Measure

Numerator:
Eyes of patients with no comorbidities or additional procedures on the same date as the cataract surgery and a 20/20 or better post-operative best corrected distance visual acuity

AND

Eyes of patients with comorbidities with a pre-operative visual acuity of 20/200 or better and a 2 lines or better improvement in the post-operative best-corrected distance visual acuity from preoperative visual acuity

AND

Eyes of patients with comorbidities with a pre-operative visual acuity of 20/400 or worse and a 1 line or better improvement in the post-operative best-corrected distance visual acuity from pre-operative visual acuity

Numerator Exclusions: None

Denominator Exclusions:

- Eyes of patients with high risk combined cataract surgery and glaucoma surgery procedures: 66987, 66988, 66989, 66991

Table 1: Comorbidities

Comorbidity	Corresponding ICD-10-CM Codes
Acute and Subacute Iridocyclitis	H20.00, H20.011, H20.012, H20.013, H20.021, H20.022, H20.023, H20.031, H20.032, H20.033, H20.041, H20.042, H20.043, H20.051, H20.052, H20.053
Amblyopia	H53.011, H53.012, H53.013, H53.021, H53.022, H53.023, H53.031, H53.032 H53.033, H53.041, H53.042, H53.043
Burn Confined to Eye and Adnexa	T26.01XA, T26.02XA, T26.11XA, T26.12XA,T26.21XA, T26.22XA, T26.31XA, T26.32XA, , T26.41XA, T26.42XA,T26.51XA, T26.52XA, T26.61XA, T26.62XA, T26.71XA, T26.72XA, T26.81XA, T26.82XA,T26.91XA, T26.92XA
Cataract Secondary to Ocular Disorders	H26.211, H26.212, H26.213, H26.221, H26.222, H26.223
Central Corneal Ulcer	H16.011, H16.012, H16.013
Certain Types of Iridocyclitis	H20.21, H20.22, H20.23, H20.811, H20.812, H20.813, H20.821, H20.822, H20.823, H20.9,
Chorioretinal Scars	H31.011, H31.012, H31.013, H31.021, H31.022, H31.023,
Choroidal Degenerations	H35.33
Choroidal Detachment	H31.411, H31.412, H31.413

Choroidal Hemorrhage and Rupture	H31.301, H31.302, H31.303, H31.311, H31.312, H31.313, , H31.321, H31.322, H31.323
Chronic Iridocyclitis	A18.54, H20.10, H20.11, H20.12, H20.13
Cloudy Cornea	H17.01, H17.02, H17.03, H17.11, H17.12, H17.13,
Corneal Edema	H18.11, H18.12, H18.13, H18.221, H18.222, H18.223, ,H18.231, H18.232, H18.233, H18.421, H18.422, H18.423,
Corneal Opacity and Other Disorders of Cornea	H17.01, H17.02, H17.03, H17.11, H17.12, H17.13, H17.89, H17.9
Degeneration of Macula and Posterior Pole	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, H35.341, H35.342, H35.343, H35.351, H35.352, H35.353, , H35.361, H35.362, H35.363, , H35.371, H35.372, H35.373, , H35.381, H35.382, H35.383,
Degenerative Disorders of Globe	H44.2A1, H44.2A2, H44.2A3, H44.2B1, H44.2B2, H44.2B3, H44.2C1, H44.2C2, H44.2C3, H44.2D1, H44.2D2, H44.2D3, H44.2E1, H44.2E2, H44.2E3, H44.21, H44.22, H44.23, H44.311, H44.312, H44.313, H44.321, H44.322, H44.323, H44.391, H44.392, H44.393
Diabetic Macular Edema	E08.311, E08.3211, E08.3212, E08.3213, E08.3311, E08.3312, E08.3313, , E08.3411, E08.3412, E08.3413, E08.3511, E08.3512, E08.3513, , E08.3521, E08.3522, E08.3523, E08.3531, E08.3532, E08.3533, E08.3541, E08.3542, E08.3543, E08.3551, E08.3552, E08.3553, , E08.37X1, E08.37X2, E08.37X3, E09.311, E09.3211, E09.3212, E09.3213, E09.3311, E09.3312, E09.3313, , E09.3411, E09.3412, E09.3413, E09.3511, E09.3512, E09.3513, , E09.3521, E09.3522, E09.3523, E09.3531, E09.3532, E09.3533, E09.3541, E09.3542, E09.3543, E09.3551, E09.3552, E09.3553, E09.37X1, E09.37X2, E09.37X3, , E10.311, E10.3211, E10.3212, E10.3213, , E10.3311, E10.3312, E10.3313, E10.3411, E10.3412, E10.3413, E10.3511, E10.3512, E10.3513, E10.3521, E10.3522, E10.3523, E10.3531, E10.3532, E10.3533, E10.3541, E10.3542, E10.3543, E10.3551, E10.3552, E10.3553, E10.37X1, E10.37X2, E10.37X3, , E11.311, E11.3211, E11.3212, E11.3213, , E11.3311, E11.3312, E11.3313, E11.3411, E11.3412, E11.3413, E11.3511, E11.3512, E11.3513, E11.3521, E11.3522, E11.3523, E11.3531, E11.3532, E11.3533, E11.3541, E11.3542, E11.3543, E11.3551, E11.3552, E11.3553, E11.37X1, E11.37X2, E11.37X3, , E13.311, E13.3211, E13.3212, E13.3213, E13.3311, E13.3312, E13.3313, , E13.3411, E13.3412, E13.3413, , E13.3511, E13.3512, E13.3513, , E13.3521, E13.3522, E13.3523, E13.3531, E13.3532, E13.3533, E13.3541, E13.3542, E13.3543, E13.3551, E13.3552, E13.3553, E13.37X1, E13.37X2, E13.37X3,

Diabetic Retinopathy without Macular Edema	E08.319, E08.3291, E08.3292, E08.3293, E08.3391, E08.3392, E08.3393, E08.3491, E08.3492, E08.3493, E08.3521, E08.3522, E08.3523, , E08.3531, E08.3532, E08.3533, , E08.3541, E08.3542, E08.3543, , E08.3551, E08.3552, E08.3553, E08.3591, E08.3592, E08.3593, , E09.319, E09.3291, E09.3292, E09.3293, E09.3391, E09.3392, E09.3393, E09.3491, E09.3492, E09.3493, E09.3521, E09.3522, E09.3523, E09.3531, E09.3532, E09.3533, , E09.3541, E09.3542, E09.3543, E09.3551, E09.3552, E09.3553, , E09.3591, E09.3592, E09.3593, E10.319, E10.3291, E10.3292, E10.3293, E10.3391, E10.3392, E10.3393, E10.3491, E10.3492, E10.3493, E10.3521, E10.3522, E10.3523, E10.3531, E10.3532, E10.3533, , E10.3541, E10.3542, E10.3543, E10.3551, E10.3552, E10.3553, E10.3591, E10.3592, E10.3593, E11.319, E11.3291, E11.3292, E11.3293, E11.3391, E11.3392, E11.3393, E11.3491, E11.3492, E11.3493, E11.3521, E11.3522, E11.3523, E11.3531, E11.3532, E11.3533, E11.3541, E11.3542, E11.3543, E11.3551, E11.3552, E11.3553, E11.3591, E11.3592, E11.3593, E13.319, , E13.3291, E13.3292, E13.3293, E13.3391, E13.3392, E13.3393, E13.3491, E13.3492, E13.3493, E13.3521, E13.3522, E13.3523, E13.3531, E13.3532, E13.3533, E13.3541, E13.3542, E13.3543, E13.3551, E13.3552, E13.3553, , E13.3591, E13.3592, E13.3593,
Disorders of Optic Chiasm	H47.41, H47.42, H47.43,
Disorders of Visual Cortex	H47.611, H47.612, H47.621, H47.622, H47.631, H47.632, H47.641, H47.642
Disseminated Chorioretinitis and Disseminated Retinochoroiditis	A18.53, H30.101, H30.102, H30.103, H30.111, H30.112, H30.113, H30.121, H30.122, H30.123, , H30.131, H30.132, H30.133, H30.141, H30.142, H30.143,
Focal Chorioretinitis and Focal Retinochoroiditis	H30.001, H30.002, H30.003, H30.011, H30.012, H30.013, , H30.021, H30.022, H30.023, H30.031, H30.032, H30.033, H30.041, H30.042, H30.043
Glaucoma	H40.10X3, H40.10X4, H40.1113, H40.1114, H40.1123, H40.1124, H40.1133, H40.1134, H40.1213, H40.1214, H40.1223, H40.1224, H40.1233, H40.1234, H40.1313, H40.1314, , H40.1323, H40.1324, H40.1333, H40.1334, H40.1413, H40.1414, H40.1423, H40.1424, H40.1433, H40.1434, H40.20X0, H40.20X1, H40.20X2, H40.20X3, H40.20X4, H40.211, H40.212, H40.213, H40.2213, H40.2214, H40.2223, H40.2224, H40.2233, H40.2234, H40.31X3, H40.31X4, H40.32X3, H40.32X4, H40.33X3, H40.33X4, H40.41X3, H40.41X4, H40.42X3, H40.42X4, H40.43X3, H40.43X4, H40.51X3, H40.51X4, H40.52X3, H40.52X4, H40.53X3, H40.53X4, H40.61X3, H40.61X4, H40.62X3, H40.62X4, H40.63X3, H40.63X4, H40.821, H40.822, H40.823, H40.831, H40.832, H40.833, H40.9, Q15.0
Hereditary Choroidal Dystrophies	H31.20, H31.21, H31.22, H31.23

Hereditary Corneal Dystrophies	H18.501, H18.502, H18.503, H18.511, H18.512, H18.513, H18.521, H18.522, H18.523, H18.531, H18.532, H18.533, H18.541, H18.542, H18.543, H18.551, H18.552, H18.553, H18.591, H18.592, H18.593
Hereditary Retinal Dystrophies	H18.501, H18.502, H18.503, H18.511, H18.512, H18.513, H18.521, H18.522, H18.523, H18.531, H18.532, H18.533, H18.541, H18.542, H18.543, H18.551, H18.552, H18.553
Injury to Optic Nerve and Pathways	S04.011A, S04.012A, S04.02XA, S04.031A, S04.032A, S04.041A, S04.042A
Moderate or Severe Impairment, Better Eye, Profound Impairment Lesser Eye	H54.1131, H54.1132, H54.1141, H54.1142, H54.1151, H54.1152, H54.1213, H54.1214, H54.1215, H54.1223, H54.1224, H54.1225
Nystagmus and Other Irregular Eye Movements	H55.01, H55.02, H55.03, H55.04, H55.09, H55.81, H55.82, H55.89
Open Wound of Eyeball	, S05.11XA, S05.12XA, S05.21XA, S05.22XA, , S05.31XA, S05.32XA, S05.41XA, S05.42XA, , S05.51XA, S05.52XA, S05.61XA, S05.62XA, S05.71XA, S05.72XA, S05.8X1A, S05.8X2A, S05.91XA, S05.92XA
Optic Atrophy	H47.20, H47.211, H47.212, H47.213, H47.22, H47.231, H47.232, H47.233, H47.291, H47.292, H47.293
Optic Neuritis	H46.01, H46.02, H46.03, H46.11, H46.12, H46.13, H46.2, H46.3, H46.8, H46.9
Other and Unspecified Forms of Chorioretinitis and Retinochoroiditis	H30.21, H30.22, H30.23, H30.811, H30.812, H30.813, H30.891, H30.892, H30.893, H30.91
Other Background Retinopathy and Retinal Vascular Changes	H35.021, H35.022, H35.023,
Other Corneal Deformities	H18.711, H18.712, H18.713, H18.721, H18.722, H18.723, , H18.731, H18.732, H18.733
Other Disorders of Optic Nerve	H47.011, H47.012, H47.013
Other Disorders of Sclera	H15.831, H15.832, H15.833, H15.841, H15.842, H15.843
Other Endophthalmitis and other entities	H16.241, H16.242, H16.243, H21.331, H21.332, H21.333, , H33.121, H33.122, H33.123, H44.111, H44.112, H44.113, H44.121, H44.122, H44.123, , H44.131, H44.132, H44.133, , H44.19
Other Proliferative Retinopathy	H35.101, H35.102, H35.103, H35.111, H35.112, H35.113, , H35.121, H35.122, H35.123, , H35.131, H35.132, H35.133, H35.141, H35.142, H35.143, , H35.151, H35.152, H35.153, H35.161, H35.162, H35.163, , H35.171, H35.172, H35.173

Keratoconus	H18.601, H18.602, H18.603, H18.611, H18.612, H18.613, H18.621, H18.622, H18.623
Profound Impairment, Both Eyes	H54.0X33, H54.0X34, H54.0X35, H54.0X43, H54.0X44, H54.0X45, H54.0X53, H54.0X54, H54.0X55
Purulent Endophthalmitis	H44.001, H44.002, H44.003, H44.011, H44.012, H44.013, H44.021, H44.022, H44.023
Retinal Detachment with Retinal Defect	H33.001, H33.002, H33.003, H33.011, H33.012, H33.013, H33.021, H33.022, H33.023, H33.031, H33.032, H33.033, , H33.041, H33.042, H33.043, H33.051, H33.052, H33.053, H33.8
Retinal Vascular Occlusion	H34.11, H34.12, H34.13, H34.231, H34.232, H34.233, H34.8110, H34.8111, H34.8112, H34.8120, H34.8121, H34.8122, H34.8130, H34.8131, H34.8132, H34.8310, H34.8311, H34.8312, H34.8320, H34.8321, H34.8322, H34.8330, H34.8331, H34.8332
Scleritis	H15.021, H15.022, H15.023, H15.031, H15.032, H15.033, H15.041, H15.042, H15.043, H15.051, H15.052, H15.053, H15.091, H15.092, H15.093
Separation of Retinal Layers	H35.711, H35.712, H35.713, H35.721, H35.722, H35.723H35.731, H35.732, H35.733
Visual Field Defects	H53.411, H53.412, H53.413, H53.421, H53.422, H53.423, H53.431, H53.432, H53.433, H53.451, H53.452, H53.453, H53.461, H53.462, H53.47, H53.481, H53.482, H53.483

Denominator Exceptions: None

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IRIS61: Visual Acuity Improvement Following Cataract Surgery and Minimally Invasive Glaucoma Surgery

Updated December 2025. No changes for the 2026 Performance Year.

- **Care Setting: Ambulatory Care:** Clinician Office/Clinic
- **MIPS Reporting Options:** Traditional MIPS, MVP
- **Reporting Options:**
  - IRIS Registry QCDR for EHR: groups and individuals
  - IRIS Registry QCDR manual data entry: groups and individuals
- **Measure Type:** Outcome
- **NQS Domain:** Effective Clinical Care
- **Meaningful Measure Area**: Management of Chronic Conditions
- **Description:** Percentage of eyes of patients aged 18 years and older with a diagnosis of cataract who had cataract surgery and minimally invasive glaucoma surgery and achieved 20/30 best-corrected distance visual acuity or better within 4 months following the cataract surgery.
- **Risk Adjusted:** No
- **Performance Rate:** 1
- **High Priority Measure:** Yes
- **Inverse Measure:** No
- **Proportional Measure:** Yes

To Which Patients Does the Measure Apply?

Denominator: Eyes of patients aged 18 years and older who underwent a cataract surgery procedure and minimally invasive glaucoma surgery on the same date.

There are two criteria for inclusion of a patient into the denominator.

1. **Patient characteristics**: Description located in “Denominator” (see above).
2. **Procedure codes (CPT):** Codes located in “CPT Codes.”

CPT Codes

- Cataract Surgery
  CPT Codes: 66987, 66988, 66989, 66991

WITHOUT

Modifier -55 (Postoperative management only) OR Modifier -56 (Preoperative management only)

How to Report the Measure

Numerator: 20/30 best-corrected distance visual acuity

Numerator Exclusions: None

Denominator Exclusions:

- Eyes with absolute glaucoma blindness (ICD-10: H44.511, H44.512, H44.513)
- Eyes with these visual acuity findings: Count fingers (CF or FC), Hand motion (HM), Light perception (LP), No light perception (NLP)

Denominator Exceptions: None

Instructions:

This measure is to be calculated each time a procedure for cataracts and a procedure for MIGS is performed during the reporting period. This measure is intended to reflect the quality of services provided for the eyes receiving cataract surgery and MIGS on the same day.

Note: Include only procedures performed through Aug. 31 of the reporting period. This will allow the postoperative period to occur within the reporting year.

Clinicians who indicate modifier 55, postoperative management only OR modifier -56, preoperative management only, will not qualify for this measure

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IRIS63: Exudative Age-Related Macular Degeneration: Gain of Visual Acuity

Updated December 2025. Changes for the 2026 Reporting Year are noted below in red.

- **Care Setting:** Ambulatory Care: Clinician Office/Clinic
- **MIPS Reporting Option:** Traditional MIPS
- **Reporting Options:**
  - IRIS Registry QCDR for EHR: groups and individuals
  - IRIS Registry QCDR manual data entry: groups and individuals
- **Measure Type:** Outcome
- **NQS Domain:** Effective Clinical Care
- **Meaningful Measure Area**: Promote Effective Prevention & Treatment of Chronic Disease
- **Description:** Percentage of patients with a diagnosis of exudative age-related macular degeneration, being treated with anti-VEGF agents, with a gain of 1 Snellen line or more (which is equivalent to 0.1 logMAR or more) of visual acuity within the past 12 months compared to pre-treatment. Weighted average of performance rates reported.
- **Risk Adjusted:** No
- **Performance Rate:** 2, and a weighted average
- **High Priority Measure:** Yes
- **Inverse Measure:** No
- **Proportional Measure:** Yes

To Which Patients Does the Measure Apply?

Denominator:

Rate 1: All patients aged 50 years of older with a diagnosis of exudative age-related macular degeneration ~~and documentation of laterality (OD, OS, OU)~~ with 5 or more treatments with Anti-VEGF Agents over the reporting year.

Rate 2: All patients aged 50 years of older with a diagnosis of exudative age-related macular degeneration ~~and documentation of laterality (OD, OS, OU)~~ with 1 to 4 treatments with Anti-VEGF Agents over the reporting year

There are three criteria for inclusion of a patient into the denominator.

1. **Patient characteristics**: Description located in “Denominator” (see above)
2. **Diagnosis codes (ICD-10-CM):** Codes located in “Diagnosis Codes”
3. **Procedure codes (CPT and HCPCS):** Codes located in “CPT Codes”

Diagnosis Codes

- Exudative age-related macular degeneration (ICD-10: H35.3210, H35.3211, H35.3220, H35.3221, H35.3230, H35.3231)

CPT Codes

Treatment with Anti-VEGF agents

- Bevacizumab (Avastin®) injections (CPT: 67028 and HCPCS: J9035; CPT: 67028 and HCPCS: J3490; CPT: 67028 and HCPCS: J3590; CPT: 67028 and HCPCS: C9257; CPT: 67028 & HCPCS: J7999; CPT: 67028 & HCPCS: Q5107)
- Ranibizumab (Lucentis®) injections (CPT: 67028 and HCPCS: J2778)
- Aflibercept (EYLEA®) injections (CPT: 67028 and HCPCS: J0178)

How to Report the Measure

Numerator: Patients with two or more recorded visual acuity values within the past 12 months, at least one visual acuity value recorded prior to treatment, at least one visual acuity value recorded after treatment; gain of 1 Snellen line or more (which is equivalent to 0.1 logMAR or more) of visual acuity. Visual acuity of the eye(s) being treated will be evaluated.

Notes: Include only procedures performed through November 15 of the reporting period. This will allow the post treatment period to occur within the reporting year.

The chart shows the conversion of logMAR and Snellen visual acuity (formerly the measure was < 0.3 logMar which is equivalent to less than 3 Snellen Lines)

Visual Acuity Conversion Table

Feet	LogMar
20/200	1.00
20/160	0.90
20/125	0.80
20/100	0.70
20/80	0.60
20/63	0.50
20/50	0.40
20/40	0.30
20/32	0.20
20/25	0.10
20/20	0.00

20/16	-0.10
20/12.5	-0.20
20/10	-0.30

Numerator Exclusions: None

Denominator Exclusions: None

Denominator Exceptions: None

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