HEDIS® Tip Sheet

Effectiveness of Care Measure

wellcare By health net

Eye Exam for Patients With Diabetes

Wellcare By Health Net (Health Net*) wants to help your practice increase HEDIS[1] rates. This tip sheet outlines key details of the Eye Exam for Patients With Diabetes (EED) measure, its codes and guidance for documentation.

Measure

The percentage of members ages 18-75 with diabetes (types 1 and 2) who had a retinal eye exam during the measurement year, as defined by the following criteria:

- Screening or monitoring for diabetic retinal disease as identified by one of the following exams performed in the measurement year or the year prior to the measurement year:
  - Retinal or dilated eye exam must be performed by an eye care professional (optometrist or ophthalmologist) in the measurement year.
  - A negative retinal or dilated eye exam (negative for retinopathy) by an eye care professional in the year prior to the measurement year.
  - Bilateral eye enucleation any time during the member's history through December 31 of the measurement year.

Exclusions

Members who meet any of the following criteria are excluded from the measure:

- Did not have a diagnosis of diabetes in any setting during the measurement year or the year prior and who had a diagnosis of polycystic ovarian syndrome, gestational diabetes or steroid-induced diabetes.
- In hospice or using hospice services any time during the measurement year.
- Died any time during the measurement year.
- Received palliative care any time during the measurement year.
- Medicare members ages 66 and older as of December 31 of the measurement year who are either enrolled in an Institutional SNP (I-SNP) or living long-term in an institution.
- Members ages 66 and older (for all product lines) with frailty and advanced illness.

[1]Healthcare Effectiveness Data and Information Set (HEDIS). National Committee for Quality Assurance (NCQA). HEDIS 2023 Technical Specifications for Health Plans, Volume 2, Washington, D.C., 2022.

(continued)

Best practices

Helpful documentation tips

- Documentation in the patient's medical record must include certification that a dilated or retinal exam was performed.
- Ensure the patient's date of service, test date or result and the provider's credentials are documented in the progress notes.
- The provider must be an optometrist or ophthalmologist to meet compliancy.
- Documentation can be in the form of a note or letter prepared by an ophthalmologist, optometrist, primary care physician, or other health care provider indicating that an ophthalmoscopy exam was completed by an eye care professional (optometrist or ophthalmologist), the date of when the procedure was performed and the results.
- Documentation of a negative retinal or dilated exam by an eye care professional (optometrist or ophthalmologist) in the year prior to the measurement year, where results indicate retinopathy was not present (e.g., documentation of normal findings).
- A chart or photograph indicating the date when the fundus photography was performed and evidence that an eye care professional (optometrist or ophthalmologist) or qualified reading center reviewed the results, or that results were read by a system that provides artificial intelligence (AI) interpretation.
- Obtain eye exam report(s). If the report(s) are not available, document eye care provider's name and credentials in the patient's chart.

How to improve HEDIS scores

- Educate patients on the risks associated with diabetic eye disease.
- Encourage patients to schedule their annual preventive retinal exams with an eye care professional.
- Prepare a standing referral to an eye care professional, assist the patient in making an eye appointment and track the referral until you get the eye care provider's report.

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Helpful coding tips

- Use CPT Category II codes when billing for retinal eye exam.
- Confirm that CPT Category II codes listed on the superbill or within the Electronic Health Record (EHR) are valid.
- Consider adding a $0.01 penny charge when using CPT Category II codes to ensure they are not rejected on the encounter or claim.

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Code sets

Description	CPT/CPT-CAT II/HCPCS codes
Automated Eye Exam	CPT: 92229
Eye Exam With Evidence of Retinopathy	CPT-CAT II: 2022F, 2024F, 2026F
Eye Exam Without Evidence of Retinopathy	CPT-CAT II: 2023F, 2025F, 2033F
Diabetic Retinal Screening Negative in Prior Year[2]	CPT-CAT II: 3072F
Unilateral Eye Enucleation	CPT: 65091, 65093, 65101, 65103, 65105, 65110, 65112, 65114
Unilateral Eye Enucleation - Left	CD-10-PCS: 08T1XZZ
Unilateral Eye Enucleation - Right	CD-10-PCS: 08T0XZZ
Diabetic Retinal Screening	CPT: 67028, 67030, 67031, 67036, 67039, 67040, 67041, 67042, 67043, 67101, 67105, 67107, 67108, 67110, 67113, 67121, 67141, 67145, 67208, 67210, 67218, 67220, 67221, 67227, 67228, 92002, 92004, 92012, 92014, 92018, 92019, 92134, 92201, 92202, 92225, 92226, 92227, 92228, 92230, 92235, 92240, 92250, 92260, 99203, 99204, 99205, 99213, 99214, 99215, 99242, 99243, 99244, 99245 HCPCS: S0620, S0621, S3000
Bilateral modifier	CPT: 50

[2]Must be a negative result to be compliant and the reported date should be the date provider reviewed the patient's eye exam from the prior year.