

# 2023 Star Measure Tips



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One in a series of tip sheets that look at key Healthcare Effectiveness Data and Information Set measures, commonly referred to as HEDIS® measures.

## Eye Exam for Patients with Diabetes (EED)

Effectiveness of Care HEDIS® Measure

### Measure description

Percentage of diabetic patients who had a dilated or retinal eye exam.

### Measure population (denominator)

Patients 18 - 75 years old with diabetes (type 1 or type 2).

Any of the following during the measurement year or the year prior to the measurement year:

- Two or more outpatient visits on different dates of service with a diagnosis of diabetes
- One acute inpatient stay with a diagnosis of diabetes
- Patients dispensed insulin or hypoglycemics/antihyperglycemics
  - This includes Semaglutides (except for Wegovy® given for weight loss).
  - Glucophage/Metformin as a solo agent is not included because it's used to treat conditions other than diabetes. Patients with diabetes on these medications are identified through diagnosis codes only.

### Did you know?

- Diabetic retinopathy is the leading cause of blindness among adults.
- Anyone with diabetes is at risk for diabetic-related eye disease such as diabetic retinopathy, macular edema, glaucoma, and cataracts.
- The prevalence of diabetic retinopathy is more than twice as common in Mexican Americans, and almost three times as common in African Americans, than in the Caucasian population.

### Measure compliance (numerator)

- Retinal or dilated eye exam by an eye care professional (optometrist or ophthalmologist).
  - Negative eye exam during the measurement year or year prior
  - Positive eye exam during the measurement year (must be done **annually**).
- Bilateral eye enucleation any time during the patient's history

*continued*

## Exclusions

- Patients who did not have a diagnosis of diabetes during the measurement year or the year prior **and** who had a diagnosis of:
    - Polycystic ovarian syndrome **or**
    - Gestational diabetes **or**
    - Steroid-induced diabetes
  - Received hospice services anytime during the measurement year
  - Are age 66 and older with advanced illness and frailty (for additional definition information, see the *Advanced Illness and Frailty Guide*)
  - Deceased during the measurement year
  - Received palliative care during the measurement year
- Note:** Blindness is **not** an exclusion for a diabetic eye exam.

## Helpful HEDIS hints

- A retinal or dilated eye exam must be performed by an eye care professional **annually** for patients with **positive retinopathy**, and every two years for patients without evidence of retinopathy.
  - Date of service, eye exam results, and eye care professional's name with credentials are required.
  - Hypertensive retinopathy is not handled differently from diabetic retinopathy when reporting this measure.
- Review the report and document abnormalities in the active problem list.
- Eye exam result documented as unknown does not meet criteria.
- Document patient reported eye exams with date, result, and eye care provider with credentials in the medical history.
  - If the name of the eye care professional is unknown, document that an optometrist or ophthalmologist conducted the exam.
- Evidence of prosthetic eye(s) is acceptable for enucleation.
  - Unilateral enucleation would still require an exam on the other eye.
- Refer patients to an optometrist or ophthalmologist for a dilated or retinal eye exam annually and explain why this is different than a routine eye exam.
  - Routine eye exams for glasses, glaucoma or cataracts do not count. Must be a dilated/retinal exam.
- Educate patients about the importance of routine screening and medication compliance.
- Review diabetic services needed at each office visit.
- Diabetic eye exams are covered under the patient's medical insurance and may be subject to copays and deductibles.
- Optical coherence tomography is considered imaging and is eligible for use. The fundus/retinal photography must have the date, result and eye care professional with credentials documented.

## Tips for coding

When results are received from an eye care professional, or the patient reports an eye exam, submit the results on a \$0.01 claim with the appropriate CPT® II code.

CPT® II code	Retinal eye exam findings
2022F	Dilated retinal eye exam with interpretation by an ophthalmologist or optometrist documented and reviewed; <b>with evidence of retinopathy</b>
2023F	Dilated retinal eye exam with interpretation by an ophthalmologist or optometrist documented and reviewed; <b>without evidence of retinopathy</b>
CPT® code	Description
92229	Imaging of retina for detection or monitoring of disease; point-of-care automated analysis and report, unilateral or bilateral (interpreted by artificial intelligence)

- If a primary care practitioner's office has equipment to complete retinal imaging with interpretation by artificial intelligence (AI) in their office, the practitioner can report completion of the eye exam by submitting a claim with CPT code 92229, for the services provided **AND** the appropriate CPT II code to report the exam results.
- Document and bill exclusions annually (see the *Advanced Illness and Frailty Guide* for details).

## Resources

1. Medical News Today. 2022. "Why is diabetic eye screening important?" [medicalnewstoday.com/articles/diabetic-eye-exam](https://www.medicalnewstoday.com/articles/diabetic-eye-exam)
2. American Diabetes Association (ADA). May 2022. "May is Healthy Vision Month...Did you Know?" [diabetes.org/sites/default/files/2022-04/FOD\\_HVM\\_0.pdf](https://diabetes.org/sites/default/files/2022-04/FOD_HVM_0.pdf)
3. Centers for Disease Control and Prevention. August 2021 "Diabetic Retinopathy." [cdc.gov/visionhealth/pdf/factsheet.pdf](https://www.cdc.gov/visionhealth/pdf/factsheet.pdf)

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