

# 2021 HEDIS Measure Tips



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

## Comprehensive Diabetes Care – Retinal Eye Exam (CDC-E)

Effectiveness of Care HEDIS® Measure\*

### HEDIS measure description

The percentage of diabetic adults who had a retinal eye exam to screen for diabetic retinal disease.

**Note:** The frequency of the exam is determined by the results.

### Measure population (denominator)

Adults ages 18 to 75 with diabetes (Type 1 and Type 2) as of December 31 of measurement year.

### Measure compliance (numerator)

Documentation of one of the following:

- A retinal or dilated eye exam by an eye care professional (optometrist or ophthalmologist) in the measurement year
- A **negative** retinal or dilated exam (negative for retinopathy) by an eye care professional (optometrist or ophthalmologist) in the year prior to the measurement year
- Bilateral eye enucleation anytime during the member's history through December 31 of the measurement year. Documentation of prosthetic eye(s) is also acceptable.

**Note:** Blindness is **not** an exclusion for a diabetic eye exam due to difficulties distinguishing "legally blind" individuals who still need an exam from those "completely blind" who don't. Also, hypertensive retinopathy isn't handled differently from diabetic retinopathy when reporting the eye exam indicator.

### Did you know?

- Diabetic retinopathy is the leading cause of blindness in U.S. adults.
- Controlling blood sugar, blood pressure and lipids reduce the risk of developing diabetic retinal disease.
- Early diagnosis and treatment of diabetic retinal disease can prevent blindness.
- Up to 50 percent of patients don't receive proper screening for eye disease or receive it too late for treatment to be effective.

This measure applies to both commercial and Medicare members.

*continued*

## Exclusions

- Members in hospice
- Members deceased during measurement year
- Members receiving palliative care during measurement year
- Members 66 years of age and older as of December 31 of the measurement year with frailty and advanced illness (see advanced illness guide)

## Helpful HEDIS hints

- Documentation must include all the following:
  - Date of retinal exam
  - Type of exam (dilated, retinal) - must be bilateral
  - Result of exam (negative or positive for retinopathy)
  - Eye care professional performing and reading exam (optometrist or ophthalmologist)
- Documentation can include:
  - A copy of the exam or a letter from a credentialed eye care professional
  - A bilateral retinal photograph with evidence the fundus photography was read by a credentialed eye care professional, along with date and results
    - Evidence results were read by a system that provides an artificial intelligence (AI) interpretation is acceptable.
  - A progress note in a medical record that includes all the essential documentation listed above (date, type of exam, result and eye care professional who performed exam)
- Optical coherence tomography is considered imaging and is eligible for use. The fundus/retinal photograph must have the date, result and eye care professional documented.
- Routine eye exams for glasses, glaucoma or cataracts do not count. Must be a retinal/dilated exam.

## Tips for coding

Coding differs based on provider type. Following are all the procedure codes related to retinal eye exams:

Provider type	CPT II and CPT** codes	ICD 10 codes
<b>Primary care physician</b>	Positive exam 2022F, 2024F, 2026F Negative exam 3072F, 2023F, 2025F, 2033F	
<b>Eye care professional only</b>	S0620, S0621, S3000  67028, 67030, 67031, 67036, 67039-67043, 67101, 67105, 67107, 67108, 67110, 67113, 67121, 67141, 67145, 67208, 67210, 67218, 67220, 67221, 67227, 67228  92002, 92004, 92012, 92014, 92018, 92019, 92134, 92225, 92226, 92227, 92228, 92230, 92235, 92240, 92250, 92260  99203-99205, 99213-99215, 99242, 99245, 92201, 92202, 99243, 99244	E10.9, E11.9, E13.9

## Frequently asked questions

### **Q. What should I do if my patient doesn't have vision insurance?**

**A.** Diabetic eye exams are covered under the patient's medical insurance and may be subject to copays and deductibles.

### **Q. If my patient had a negative dilated retinal eye exam last calendar year, does he or she need another one this year?**

**A.** No. As long as there is documentation of a negative exam that includes the date of the exam and proof that the exam was done by an eye care professional, the patient doesn't need an exam this calendar year. For example, if your patient had a negative exam in the prior year — and the exam is properly documented — they won't need one again in the current year.

\* *HEDIS®*, which stands for *Healthcare Effectiveness Data and Information Set*, is a registered trademark of the National Committee for Quality Assurance, or NCQA.

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