HEDIS® Tip Sheet

Comprehensive Diabetes Care – Diabetic Eye Exam

Measure Description

Percentage of patients 18-75 years of age with diabetes (type 1 or type 2) who had a retinal eye exam performed during the current year.

Documentation Requirements

Screening and monitoring for diabetic retinal disease:

- A note or letter prepared by an OPH, OPT, PCP or other health care professional indicating that an ophthalmoscopic exam was completed by an eye care professional, including date and results within the current year.
- Documentation of a negative retinal or dilated eye exam (negative for retinopathy) by an eye care professional last year, and results indicate retinopathy was not present.
- Evidence that the patient had a bilateral eye enucleation any time during the patient's history through December 31 of the current year.

A chart or photograph indicating the date when the fundus photography was performed and evidence that an eye care professional reviewed the results. Results may be read by a qualified reading center that operates under the direction of a medical director who is a retinal specialist.

Coding Requirements

CPT: 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, 92225–92228, 92230, 92235, 92240,92250, 92260, 99203–99205,99213, 99214, 99215, 99242–99245

CPT-CATII: 2022F, 2024F, 2026F, 3072F (no evidence of retinopathy in prior year eye exam)

HCPCS: S0620, S0621, S3000

Exclusions

During the past 2 years, patient had no history of diabetes and a diagnosis of either gestational diabetes or steroid-induced diabetes.

Lighthouse HEALTH PLAN