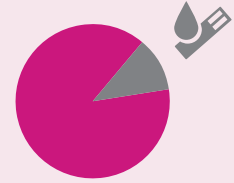


Eye Exam for Patients with Diabetes (EED)

Why It Matters

According to the Centers for Disease Control and Prevention (CDC), diabetes is the most expensive chronic condition in the U.S. and affects **approximately 11.6% of the population.**



Eye disease is one of many complications of unmanaged diabetes and is the leading cause of new cases of blindness in adults of working age. Early detection with regular eye exams is key to minimizing eye disease.¹



Measure Description

The percentage of patients with diabetes (Type 1 and Type 2) that are ages 18-to-75 and a retinal eye exam performed during the measurement year or the year prior, as defined by the following criteria:

- ✓ 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.



Key Tips

- ✓ Educate patients on the risks of Diabetic Eye Disease and encourage scheduling annual exams with optometrist or ophthalmologist.
- ✓ Obtain eye exam reports that include the date of service, servicing provider and credentials, and results.
- ✓ Assist the patient in making eye appointment(s) and track the referral until the eye care provider's report is received.
- ✓ Prior year exam results must indicate retinopathy was not present.

(continued)



MHS Health Wisconsin and Wellcare are affiliated products serving Medicaid and Medicare members, in the State of Wisconsin respectively. The information presented here is representative of our network of products. If you have any questions, please contact Provider Relations.



What Do You Need to Do?

- ✓ Documentation can be in the form of a note or letter prepared by an ophthalmologist, optometrist, primary care provider (PCP) or other health care professional and should include: date of service, the test (indicate a dilated or retinal exam) and result, and the care provider's credentials.
 - Documentation example: "Last diabetic retinal eye exam with John Smith, OD, was June 2024 with no retinopathy."
- ✓ If utilizing fundus photography technology in a primary care setting, ensure the retinal image has been reviewed and interpreted by an eye specialist.
- ✓ Artificial Intelligence (AI) Reports:
 - Acceptable: "Negative for more than mild diabetic retinopathy." This is only considered a negative result when it is a result of an exam read by (AI imaging system).
 - Documentation of provider type for AI Reports:
 - If it is noted that an optometrist or ophthalmologist reviewed the AI results, then choose the appropriate provider type in the dropdown.
 - Some of the reports state they were read by AI and do not list a provider. If so, choose the provider dropdown option, "Results read by a system that provides an AI interpretation."
 - Diabetic Eye Exam by any provider type.

The suggested codes for these services include:

Description	Code
Current year or prior year dilated retinal screening with evidence of retinopathy	CPT II: 2022F, 2024F, 2026F
Current year dilated retinal screening without evidence of retinopathy	CPT II: 2023F, 2025F, 2033F
Prior year dilated negative retinal screening	CPT II: 3072F
Automated Eye Exam	CPT: 92229

References

¹U.S. Centers for Disease Control and Prevention. (n.d.) Overview of Diabetes and Eye disease. Retrieved from www.cdc.gov.