

Coding Reference Guide Measure Year 2024

Eye Exam for Patients with Diabetes (EED)



Measure Description

Members 18-75 years of age with diabetes (Type 1 or Type 2) who had retinal screening or monitoring for diabetic retinal disease during 2023 or 2024.

Any of the following meet criteria:

- A retinal or dilated eye exam by an Optometrist or Ophthalmologist in 2024
- A **negative** retinal or dilated exam (negative for retinopathy) by an optometrist or ophthalmologist in 2023
- Bilateral eye enucleation (removal of both eyes) anytime during the Member’s history through December 31, 2024

Presence or absence of retinopathy **must** be represented by a CPT II code on claims. This may determine whether the Member needs another eye exam in one year or two years. Absence of a CPT II code will result in Members who do not need an exam appearing in gaps in care reports.

Any of the following meet criteria in 2024:

Diabetic Retinal Screening in 2024 (billed by an Optometrist or Ophthalmologist)	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, 92227, 92228, 92230, 92235, 92240, 92250, 92260, 99203, 99204, 99205, 99213, 99214, 99215, 99242, 99243, 99244, 99245
	HCPS: S0620, S0621, S3000
	SNOMED: 274795007, 274798009, 308110009, 314971001, 314972008, 410451008, 410452001, 410453006, 410455004, 425816006, 427478009, 722161008
Eye Exam <u>with</u> Retinopathy in 2024 (billed by any Provider)	CPT-CAT-II: 2022F, 2024F, 2026F Do not include Modifier 1P, 2P, 3P, 8P
Eye Exam <u>without</u> Retinopathy in 2024 (billed by any Provider)	CPT-CAT-II: 2023F, 2025F, 2033F Do not include Modifier 1P, 2P, 3P, 8P

Primary Care Physician (PCP) perform in 2024:	
Automated Eye Exam in 2024 (billed by any Provider)	CPT: 92227, 92228, 92229
Eye Exam <u>with</u> Retinopathy in 2024	CPT-CAT-II: 2022F, 2024F, 2026F Do not include Modifier 1P, 2P, 3P, 8P
Eye Exam <u>without</u> Retinopathy in 2024	CPT-CAT-II: 2023F, 2025F, 2033F Do not include Modifier 1P, 2P, 3P, 8P

PCP's can submit the ICD-10-CM diagnosis codes and the appropriate CPT Category II codes to meet diabetic retinal exam HEDIS technical specifications when documentation shows the exam was performed by a vision Provider.

PCP's who perform a diabetic retinal exam and send the test to a vision Provider to obtain the results of the exam will be reimbursed at a global level. Payment to the Provider who reads the test performed by the PCP remains a business arrangement between those two Providers.

When the exam is performed by the PCP and read by an eye care Provider, **the claim must be billed with the appropriate CPT Category II code (with no modifier) to meet the HEDIS technical specifications indicating the services were performed by a qualified vision Provider. This impacts quality ratings.** *If your office is unable to bill CPT Category II codes, please contact your Professional Relations Representative.*

Any of the following meet criteria during 2023:	
Diabetic Retinal Screening with a Diagnosis of Diabetes without Complications During 2023 (billed by an Optometrist or Ophthalmologist)	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, 92227, 92228, 92230, 92235, 92240, 92250, 92260, 99203, 99204, 99205, 99213, 99214, 99215, 99242, 99243, 99244, 99245
	HCPCS: S0620, S0621, S3000
	SNOMED: 274795007, 274798009, 308110009, 314971001, 314972008, 410451008, 410452001, 410453006, 410455004, 425816006, 427478009, 722161008

	<p>Diabetes without Complications</p> <p>SNOMED: 111552007, 190412005, 313435000, 313436004, 1217044000, 1217068008, 1481000119100, 31321000119102</p> <p>ICD10: E10.9, E11.9, E13.9</p>
Eye Exam without Retinopathy During 2023 (billed by any Provider)	<p>CPT-CAT-II: 2023F, 2025F, 2033F</p> <p>Do not include the following modifier codes: 1P, 2P, 3P, 8P</p>
Diabetic Retinal Screening without Retinopathy During 2023 (billed by any Provider During 2024)	<p>CPT-CAT-II: 3072F</p> <p>Do not include the following modifier codes: 1P, 2P, 3P, 8P</p>
Eye Enucleation any time during the Member's history through December 31, 2024:	
<p>Unilateral Eye Enucleation and Left or Right ICD10 (If two separate instances, must be ≥14 days apart)</p> <p>OR</p> <p>Left and Right Unilateral Eye Enucleation on the same or different dates of service</p> <p>OR</p> <p>Unilateral Eye Enucleation with a Bilateral Modifier</p>	<p>Unilateral Eye Enucleation</p> <p>CPT: 65091, 65093, 65101, 65103, 65105, 65110, 65112, 65114</p> <p>SNOMED: 59590004, 172132001, 205336009, 397800002, 397994004, 398031005</p>
	<p>Left Unilateral Eye Enucleation</p> <p>ICD10: 08T1XZZ</p>
	<p>Right Unilateral Eye Enucleation</p> <p>ICD10: 08T0XZZ</p>
	<p>Bilateral Modifier</p> <p>CPT Modifier Code: 50</p>

The following will exclude Members from this measure:	
Hospice Encounter During 2024	HCPCS: G9473, G9474, G9475, G9476, G9477, G9478, G9479, Q5003, Q5004, Q5005, Q5006, Q5007, Q5008, Q5010, S9126, T2042, T2043, T2044, T2045, T2046
	SNOMED: 183919006, 183920000, 183921001, 305336008, 305911006, 385765002
	UBREV: 0115, 0125, 0135, 0145, 0155, 0235, 0650, 0651, 0652, 0655, 0656, 0657, 0658, 0659
Hospice Intervention During 2024	CPT: 99377, 99378
	HCPCS: G0182
	SNOMED: 170935008, 170936009, 385763009
Palliative Care Assessment During 2024	SNOMED: 718890006, 718893008, 718895001, 718898004, 718899007, 718901003, 718903000, 718904006, 718957007, 718967002, 718969004, 718971004, 718973001, 718974007, 718975008, 718976009, 761865002, 761866001, 761867005, 457511000124100
Palliative Care Encounter During 2024	ICD10CM: Z51.5 Do not include laboratory claims with POS code 81
	HCPCS: G9054, M1017
	SNOMED: 305284002, 305381007, 305686008, 305824005, 441874000, 713281006, 4901000124101
Palliative Care Intervention During 2024	SNOMED: 103735009, 105402000, 395669003, 395670002, 395694002, 395695001, 443761007, 1841000124106, 433181000124107
Patients who died any time during 2024	

Tips and Best Practices to Help Improve Performance

- Utilize the monthly Gaps in Care Report (GIC) for a list of MVP Members and the services they still needed. Your patient may have had a retinal eye exam prior to their enrollment with MVP. The patient will have an open gap in care for this measure until medical record documentation is submitted to MVP. Please refer to your GIC report for instructions about how to submit medical records to MVP to close gaps in care.
- Encourage billing staff to use CPT Category II codes which are intended to facilitate the collection of information about the quality of care delivered by coding specific services or test results that support performance measures. CPT-CAT-II codes will lower the need for record abstraction and chart review and minimize the administrative burden.
- Consider the use of a retinal imaging device in your practice. An optometrist or ophthalmologist must interpret results.
- Order and schedule eye exam appointments before the patient leaves the office. Have a list of facilities available to share with patients.
- Consider using alerts and flags within the Electronic Health Record (EHR)
- Discuss the importance of early detection and encourage screening and refer annually
- Document preventive care, medical, and surgical history in the medical record with specific dates and results
- Submit results to your local Regional Health Information Organization (RHIO)
- Use correct diagnosis and procedure codes and submit claims and encounter data in a timely manner
- Provide patients with the MVP Eye Care Consultation Form:
 - [MVP Eye Care Consultation for Diabetic Patients \(English\)](#)
 - [MVP Eye Care Consultation for Diabetic Patients \(Spanish\)](#)
- Stock patient areas and exam rooms with educational materials such as those found here:
 - [Diabetes | CDC](#)
 - [Medical Health - MVP Health Care](#)