

Comprehensive Diabetes Care (CDC): Retinal Exam

Patient Profile

MVP members 18–75 years of age with Diabetes (Type 1 and Type 2) and who have had a screening or monitoring for diabetic retinal disease, as evidenced by one of the following:

- A retinal or dilated eye exam by an eye care professional (Ophthalmologist or Optometrist) during the current year.
- A negative retinal or dilated eye exam by an eye care professional in the year prior (negative for retinopathy).
- Bilateral eye enucleation anytime during the member's history; through December 31 of the measurement year.

Refer to the *Comprehensive Diabetes Care (CDC) Overview* Tip Sheet for exclusions to this sub-measure.

How to Implement Best Practices and Improve Performance

- At a minimum, a chart notation is required to indicate the exam was performed by an eye care professional (an optometrist or ophthalmologist). The date and the result must be present in the medical record.
- Eye exam results read by a system that provides an artificial intelligence (AI) interpretation meets criteria for this measure.
- A chart or photograph indicating the date when fundus photography was performed and evidence that an eye care professional reviewed the results.
- Evidence that the patient has bilateral eye enucleation or acquired absence of both eyes prior to December 31 of the calendar year.
- Documentation of a negative retinal or dilated eye exam by an eye care professional in the year prior, where results indicate retinopathy was not present. Documentation does not have to state specifically "no diabetic retinopathy" to be considered negative for retinopathy; however, it must be clear that the patient had a retinal exam by an eye care professional and that retinopathy was not present.
- Notation limited to a statement that indicates "diabetes without complications" does not meet criteria.
- Consider the use of a retinal imaging device in your practice to improve rates. Results must be interpreted by an eye care professional (Ophthalmologist or Optometrist) to qualify.
- Remember to check for, and address, delinquent screenings during each visit.
- Refer members to an eye care professional for a retinal eye exam annually.
- Make use of the *Eye Care Consultation for Diabetic Patients Form*, and request that exam results be returned to you from the eye care professional. You can download this form by visiting mvphealthcare.com and selecting *Providers*, then *Quality Programs*, then *Provider Quality Improvement Manual*, then *Diabetes*, then *Supporting Tools for Clinicians*.
- Obtain the eye exam report from the Ophthalmic provider and place it in the patient's medical record.
- Utilize the *MVP Gaps in Care Report (GIC)* for a list of all MVP members still in need of screening.
- Consider the use of a medical record flagging system to alert you to screenings that are overdue.
- Submit all exam results to your local Regional Health Information Organization (RHIO).
- Note that blindness is not an exclusion for the diabetic retinal screening because it is difficult to distinguish between individuals who are legally blind but require a retinal exam and those who are completely blind and therefore do not require an exam.
- Exclude members dispensed on dementia medications: Donepezil, Galantamine, Rivastigmine, and Memantine.

Scheduling Staff Best Practices

- Schedule diabetic eye exams with an Ophthalmologist or Optometrist for patients upon check-out.
- Provide patients with a *Eye Care Consultation for Diabetic Patients Form* that they can bring to the eye care professional, and request that the results be sent to your office. You can download this form by visiting mvphealthcare.com and selecting *Providers*, then *Quality Programs*, then *Provider Quality Improvement Manual*, then *Diabetes*, then *Supporting Tools for Clinicians*.

Information related to all 2020 HEDIS measures has been extracted from the NCQA 2020 HEDIS Technical Specifications Volume 2.

2020 Coding for Comprehensive Diabetes Care (CDC): Retinal Exam

Codes for CDC-Eye	Use of these codes will make the member a pass for CDC-Eye
Acute Inpatient with Diagnosis of Diabetes and without Telehealth	CPT: 99221-99223, 99231-99233, 99238-99239, 99251-99255, 99291
Bilateral Modifier	CPT: 50
Diabetes	ICD-10 CM: Multiple codes in E10.10 through O24.83 code values.
Diabetes Mellitus Without Complications	ICD-10 CM: E10.9, E11.9, E13.9
Diabetic Retinal Screening	CPT: 67028, 67030-67031, 67036, 67039-67043, 67101, 67105, 67107-67108, 67110, 67112-67113, 67121, 67141, 67145, 67208, 67210, 67218, 67220-67221, 67227-67228, 92002, 92004, 92012, 92014, 92018-92020, 92134, 92225-92228, 92230, 92235, 92240, 92250, 92260, 99203-99205, 99213-99215, 99242-99245 HCPCS: S0620-S0621, S3000
Diabetic Retinal Screening Negative	CPT-CAT-II: 3072F
Diabetic Retinal Screening with Eye Care Professional	CPT-CAT-II: 2022F, 2023F, 2024F, 2025F, 2026F, 2033F
ED	CPT: 99281-99285 UB Rev: 0450-0452, 0456, 0459, 0981
Inpatient Stay	UB Rev: 0164, 0167, 0179, 0219, 0100-1, 0110-14, 0116-24, 0126-34, 0136-44, 0146-54, 0156-60, 0169-74, 0190-94, 0199-0204, 0206-14, 1000-2
Nonacute Inpatient	CPT: 99304-99310, 99315-99316, 99318, 99324-99328, 99334-99337 UB Rev: 0118, 0128, 0138, 0148, 0158, 01900194, 0199, 0524-0525, 0550-0552, 0559-0663, 0669
Observation	CPT: 99217-99220
Online Assessment	CPT: 98969, 99444
Outpatient	CPT: 99201-99205, 99211-99215, 99241-99245, 99341-99345, 99347-99350, 99381-99387, 99391-99397, 99401-99404, 99411-99412, 99420, 99429, 99455-99456, 99483 HCPCS: G0402, G0438-G0439, G0463, T1015 UB Rev: 0510-0517, 0519-0523, 0526-0529, 0982-0983
Telehealth Modifier	CPT Modifier: 95, GT
Telehealth POS	POS: 02
Phone Visit	CPT: 98966, 98967, 98968, 994441-99443
Unilateral Eye Enucleation	CPT: 65091-65093, 65101, 65103, 65105, 65110, 65112, 65114
Unilateral Eye Enucleation Left	ICD-10 PCS: 08B10ZX, 08B10ZZ, 08B13ZX, 08B13ZZ, 08B1XZX, 08B1XZZ
Unilateral Eye Enucleation Right	ICD-10 PCS: 08B00ZX, 08B00ZZ, 08B03ZX, 08B03ZZ, 08B0XZX, 08B0XZZ

2020 Coding for Comprehensive Diabetes Care (CDC): Retinal Exam (continued)	
Exclusion from CDC: Eye	Use of these codes will exclude member from CDC-Eye
Acute Inpatient if Diagnosed with Advanced Illness	CPT: 99221-99223, 99231-99233, 99238-99239, 99251-99255, 99291
Advanced Illness	Over 1700 Codes Ranging From: ICD-10: A81.00, A81.01, A81.09, C25.0-C25.4, C25.7-C25.9, C71.1-C71.9, C77.0-C77.5, C77.8, C77.9, C78.00-C78.02, C78.1, C78.2, C78.30, C78.39, C78.5-C78.7, C78.80, C78.89, C79.00-C79.19, C79.2, C79.31, C79.32, C79.40, C79.49, C79.51, C79.60, C79.70, C79.81, C79.9, C91.00-C91.02, C92.00, C93.00-C94.32, f01.50-F10.97, G10-G31.83, I.09.81-I50.9, J43.0-98.3, K70.10-K74.69, L89.000-89.96, N18.5, N18.6
Dementia	ICD-10 CM: F01.50-F01.51, F02.80-F02.81, F03.90-F03.91, F04, F10.27, F10.97, F13.27, F13.97, F18.17, F18.27, F18.97, F19.17, F19.27, F19.97, G30.0-G30.1, G30.8-G30.9, G31.83
Diabetes Exclusions	Over 200 Codes Ranging From: ICD-10 CM: E08.00-E08.9, E09.01-E09.9, O24.410-024.93
Frailty Device	HCPCS: E0100, E0105, E0130, E0135, E0140-E0141, E0143-E0144, E0147-E0149, E0163, E0165, E0167-E0168, E0170-E0171, E0250-E0251, E0255-E0256, E0260-E0261, E0265-E0266, E0270, E0290-E0297, E0301-E0304, E0424-E0425, E0430-E0431, E0433-E0435, E0439-E0444, E0462, E0465-E0466, E0470-E0472, E0561-E0562, E1130, E1140, E1150, E1160-E1161, E1240, E1250, E1260, E1270, E1280, E1285, E1290, E1295-E1298
Frailty Diagnosis	ICD-10 CM: L89.119, L89.139, L89.149, L89.159, L89.209, L89.309, L89.899, L89.90, M62.50, M62.81, M62.84, W01.0XXA, W01.0XXD, W01.0XXS, W01.10XA, W01.10XD, W01.10XS, W01.110A, W01.110D, W01.110S, W01.111A, W01.111D, W01.111S, W01.118A, W01.118D, W01.118S, W01.119A, W01.119D, W01.119S, W01.190A, W01.190D, W01.190S, W01.198A, W01.198D, W01.198S, W06.XXXA, W06.XXXD, W06.XXXS, W07.XXXA, W07.XXXD, W07.XXXS, W08.XXXA, W08.XXXD, W08.XXXS, W10.0XXA, W10.0XXD, W10.0XXS, W10.1XXA, W10.1XXD, W10.1XXS, W10.2XXA, W10.2XXD, W10.2XXS, W10.8XXA, W10.8XXD, W10.8XXS, W10.9XXA, W10.9XXD, W10.9XXS, W18.00XA, W18.00XD, W18.00XS, W18.02XA, W18.02XD, W18.02XS, W18.09XA, W18.09XD, W18.09XS, W18.11XA, W18.11XD, W18.11XS, W18.12XA, W18.12XD, W18.12XS, W18.2XXA, W18.2XXD, W18.2XXS, W18.30XA, W18.30XD, W18.30XS, W18.31XA, W18.31XD, W18.31XS, W18.39XA, W18.39XD, W18.39XS, W19.XXXA, W19.XXXD, W19.XXXS, Y92.199, Z59.3, Z73.6, Z74.01, Z74.09, Z74.1-.3, Z74.8-9, Z91.81, Z99.11, Z99.3, Z99.81, Z99.89
Frailty Encounter	CPT: 99504, 99509 HCPCS: G0162, G0299, G0300, G0493, G0494, S0271, S0311, S9123, S9124, T1000-5, T1019-22, T1030-31
Frailty Symptom	ICD-10 CM: R26.0-R26.2, R26.89, R26.9, R41.81, R53.1, R53.81, R53.83, R54, R62.7, R63.4, R63.6, R64
Hospice Encounter	HCPCS: G9474-79, Q5003-8, Q5010, S9126, T2042-46 UB Rev: 0115, 0125, 0135, 0145, 0155, 0235, 0650-52, 0655-59
Hospice Intervention	CPT: 99377-78 HCPCS: G08182
Nonacute Inpatient Stay	UB Rev: 0022, 0024, 0118, 0128, 0138, 0148, 0158, 0190-0194, 0199, 0524-0525, 0550-0552, 0559, 0660-0663, 0669, 1000-1002 UBTOB: 0650, 0660, 0667, 0668, 0860, 0180-5, 0187-8, 018F-K, 018M, 018O, 018X, 018Y-Z, 0210-5, 0217-8, 021F-K, 021M, 021O, 021X-Z, 0220-5, 0227-8, 022F-K, 022M, 022O, 022X-Z, 0280-5, 0287-9, 028F-K, 028M, 028O, 028X-Z, 0652-5, 0657-8, 065F-K, 065M, 065O, 065X-Z, 0662-5, 066F-K, 066M, 066O, 066X-Z, 0862-5, 0867-8, 086F-K, 086M, 086O, 086X-Z
Palliative Care	ICD-10 CM: Z51.5