



2015

Clinical quality corner

One of a series of tip sheets that look at key Healthcare Effectiveness Data and Information Set measures

Comprehensive diabetes care: retinal eye exam

This measure looks at the percentage of adults ages 18-75 with diabetes (Type 1 and Type 2) who had a retinal eye exam to screen for diabetic retinal disease. The frequency of the exam is determined by the results.

Qualifying eye exams

- A retinal or dilated eye exam by an eye care professional (optometrist or ophthalmologist) performed annually unless the result is negative for retinal disease. If negative, the exam would be done every other year.

Documentation

Requires one of the following:

- A note or letter from ophthalmologist, optometrist, primary care physician or other health care professional stating that the ophthalmoscopic exam was completed by an eye care professional, and including the date and result of the exam
- A chart or retinal photograph indicating the date that it was performed and evidence of the test being read by an eye care professional or a qualified reading center operating under the direction of a medical director who is a retinal specialist
- A negative retinal or dilated exam by eye care professional in the year prior to the current year stating "retinopathy not present" or "normal findings" on dilated or retinal eye exam

Did you know?

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

(Continued on the back)

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, do they need another one this year?

A. No. As long as there is documentation of a negative exam, the date of the exam and documentation that the exam was done by an eye care professional, then they do not need an exam this calendar year. For example, if your patient had a negative exam in 2014 — and the exam is properly documented — then they will not need one again until 2016.

Q. How do I code for retinal eye exams?

A. It will differ based on the type of provider you are. Following are all the procedure codes related to retinal eye exams:

*92250, *3072F, *2022F, *2024 F, *2026 F, *S0625, *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, *92019, *92134, *92225- *92228, *92230, *92235, *92240, *92250, *92260, *99203- *99205, *99213 - *99215, *99242- *992455, S0620, S0621, S3000

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