

# PROVIDER BULLETIN

## HEDIS News You Can Use Retinal Eye Exam Comprehensive Diabetes Care



### Importance of Retinal Eye Exams

The best way to manage eye problems related to diabetes is through the early detection of retinal abnormalities, regular monitoring, and prompt treatment. Early detection and treatment typically begins with a Retinal Eye Exam (REE).

People with diabetes have many competing priorities and challenges and forget or skip their REE. Through the collaborative efforts with you, their Eye Care Specialist, their PCP, and interventions conducted by our health plan; together we can ensure the best possible care for our member's vision health.

This bulletin offers tips to help Aetna providers deliver high-quality, timely care for this important population and ensure the proper billing of these services..



### Measure Requirements

The CDC measure requires individuals 18-75 years of age with diabetes to have had one of the following:

- A retinal or dilated eye exam 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.



### Documentation Requirements

All Aetna members with diabetes need to have a retinal exam yearly if positive for diabetic retinopathy and every two years if negative. You can help keep their records up to date by doing the following:

- A letter or copy of the eye exam report should be sent to the Primary Care Provider (PCP). The letter or exam reports should include the following:
  - Indicate an ophthalmoscopic exam was completed
  - Indicate the person providing the exam was either an ophthalmologist or optometrist
  - Date when the exam was performed
  - Exam results.
- A chart or photograph of retinal abnormalities indicating the date when the fundus photography was performed and evidence that an eye care professional reviewed the results.



### Gaps In Care

Common reasons why a patient appears to show a retinal exam was not done even though one was completed:

- The member went in for a routine eye exam but did not receive a retinal exam to check for retinopathy
- Incorrect coding was submitted to the health plan
- The medical record is missing complete and detailed information
- Information in the chart is illegible



## Coding Information

To ensure we capture the services you provide our members and to help identify the members who still need to have a retinal exam, be sure to utilize coding that reflects exam compliance. Using proper coding will decrease the need for medical record reviews and chart requests.

Below are a few CPT® II codes\* that can be used for this measure:

CPT II codes:

Eye Exam **WITH** evidence of Retinopathy:

- **2022F 2024F 2026F**

Eye Exam **WITHOUT** evidence of Retinopathy:

- **2023F 2025F 2033F**
- **3072F:** Low risk for retinopathy (no evidence of retinopathy in prior year)

\*\*Please refer to your coding specialist for a complete list of CPT codes



## How Aetna Helps

- We contact members to encourage them to go get a retinal eye exam, and to discuss eye health concerns as it relates to diabetes.
- We work with members to find out why they are not getting their exams and assist them to help overcome these barriers. For example, some have concerns about driving with dilated eyes; we will discuss information about our transportation services and provide the telephone number.
- If a member tells us they have had a retinal eye exam done this year or the year before; we will contact eye care office to obtain the medical record
- Diabetic Eye Mailer sent to members  
[..\CDC\DRE\19SA130 FL Q3-diabetes retin-flyer\\_E-S\\_v1.pdf](..\CDC\DRE\19SA130 FL Q3-diabetes retin-flyer_E-S_v1.pdf)



## Here For You

Thank you for the excellent care provided to our members!

For questions or for more information, send an email to:

[FLMedicaidQualityDept@aetna.com](mailto:FLMedicaidQualityDept@aetna.com)



## BEST PRACTICES

### Tips to improve compliance of Retinal Eye Exams

- Inform patients of the risks of diabetic retinopathy
- Schedule the member's next appointment before they leave the office
- Consider creating a form you can complete during their retinal exam. After the exam, send the form to the patient's PCP to become part of the patient's chart.
- Be sure you're coding services correctly.
- If your practice uses electronic medical records, use flags or system reminders to alert staff when screenings are due
- If your practice uses hard copy charts, consider a template to identify the last date of all necessary screenings, as well as the next time patients should be screened.
- Deputize staff to send appointment reminders and call patients to remind them of upcoming appointments or to schedule necessary screenings

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