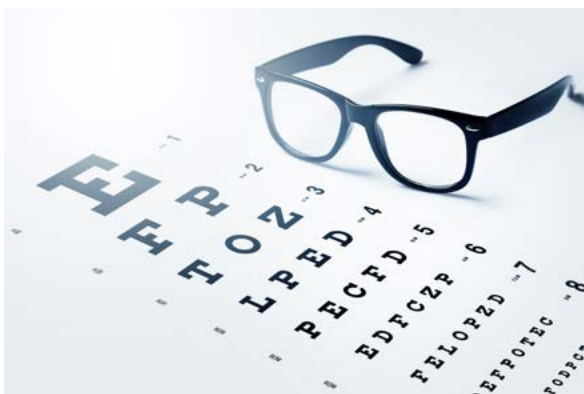


## Eye Exam for Patients with Diabetes (EED)

This measure is the percentage of patients 18–75 years of age with Diabetes (Type 1 or 2) whose had a retinal eye exam during the previous year (Negative Results Only) and current year (Positive or Negative Results).

### Why it Matters:

Many people with diabetes-related eye disease are at risk for vision complications. The most common diabetes-related eye conditions are diabetic retinopathy (DR), diabetic macular edema (DME), cataracts, glaucoma, and vision loss. The good news is that it is preventable with early detection, timely treatment, and appropriate follow-up care. In early stages, diabetic retinopathy may not have any obvious signs or symptoms, but finding it early can help protect your vision, making an annual dilated eye exam essential for those living with diabetes. One of the easiest and most cost-effective ways to detect and manage disease and economic burden is through an annual dilated and comprehensive eye exam.



### Lines of Business Affected:

● Medicaid, ● Medicare, ● Marketplace

### Tips and Best practices to close EED Care Gap

- Be aware of the annual dilated or retinal exam requirement for patients with diabetes.
- Refer your diabetic patients to an acceptable eye care professional annually.
- Help patients schedule their annual diabetic eye exam appointments.
- Educate patients on the eye damage that could be caused by their diabetes.
- Remind patients of open care gaps such as their annual eye exam during outreach calls.
- Be sure that documentation is in patients chart indicating a retinal exam was performed by an eye care professional with a date and the result would be compliant for exams completed in the current year.
- Hypertensive retinopathy should be considered the same as diabetic retinopathy when reporting the eye exam indicator for this measure. Therefore, an eye exam diagnosed as positive or negative for hypertensive retinopathy is counted as positive or negative for diabetic retinopathy.
- Retinopathy Documentation does not specifically have to state “no diabetic retinopathy” to be considered negative for retinopathy; however, it must be clear the patient had a dilated or retinal exam by an eye care professional (optometrist or ophthalmologist) and retinopathy was not present. Notation limited to a statement that indicates “diabetes without complications” does not meet criteria.
- Blindness is NOT an exclusion for a diabetic eye exam because it is difficult to distinguish between individuals who are legally blind but require a retinal exam and those who are completely blind and require no exam.



**USE OF CPT II CODES ON CLAIMS REDUCES THE NEED FOR REQUESTING MEDICAL RECORDS:**

**Diabetic Retinal Screening Negative in Prior Year**

**CPT-CAT-II:** 3072F

**Eye Exam With Retinopathy CPT-CAT-II:**

2022F, 2024F, 2026F

**Eye Exam Without Retinopathy CPT-CAT-II:**

2023F, 2025F, 2033F

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If you need help locating a health care provider or feel that your patient could benefit from Care Management Services, please call to speak with our staff.

**Contact Provider Partnership:**

[HomeStateHealth.com](https://www.HomeStateHealth.com)

Home State: 1-855-694-4663 / TTY: 711

[HomeStateHealth.com](https://www.HomeStateHealth.com)

Show Me Healthy Kids: 1-877-236-1020 / TTY: 711

[Ambetter.HomeStateHealth.com](https://www.Ambetter.HomeStateHealth.com)

Ambetter: 1-855-650-3789 TTY: 1-877-250-6113

[Wellcare.com](https://www.Wellcare.com)

Wellcare: MAPD 1-833-444-9088 / D-SNP: 1-833-444-9089 / TTY: 711

[Wellcare.com/en/Missouri](https://www.Wellcare.com/en/Missouri)

Wellcare By Allwell: MAPD 1-855-766-1452 / D-SNP: 1-833-298-3361 / TTY:711