

PATIENT POPULATION: Patients 18-75 years of age with a diagnosis of diabetes (Type I or Type II) during the measurement year or the year prior to the measurement year. All payers.

NUMERATOR COMPLIANCE: Per HEDIS®¹, patients in the eligible population must receive screening or monitoring for diabetic retinal disease, as evidenced by one of the following:

TYPE	TIME PERIOD
A retinal or dilated eye exam by an optometrist or ophthalmologist	During the measurement year
A negative retinal or dilated eye exam (negative for retinopathy) by an optometrist or ophthalmologist	In the year prior to the measurement year

EXCLUSIONS

- » Members who do not have a diagnosis of diabetes, in any setting, during the measurement year or the year prior to the measurement year and who had a diagnosis of polycystic ovarian syndrome, gestational diabetes or steroid-induced diabetes in any setting, during the measurement year or year prior to the measurement year.
- » Blindness is **NOT** an exclusion
- » Bilateral eye enucleation any time during the patient's history through the end of the measurement year is now a required exclusion

REQUIREMENTS

- At a minimum, documentation in the medical record must include **one** of the following:
- » A note indicating that an ophthalmoscopic exam was completed by an optometrist or ophthalmologist, including the date when the procedure was performed and the results
 - » A chart or photography indicating the date when the fundus photography was performed, and evidence that results were reviewed by an optometrist, ophthalmologist, or other qualified provider

COMMON DOCUMENTATION INSUFFICIENCIES

- » Evidence claims of eye exam and/or results but not found in the EMR

BEST PRACTICES

- 1 Follow-up calls to patients who have not completed their eye exam. Use care gap lists to identify non-compliant patients.
- 2 Educate patients on risks of retinopathy
- 3 Our Care Coordination team can provide patients with individualized support, education and guidance to help them achieve their best health. To refer a patient please contact us:
(602) 406-7226
CareCoordination@azcarenetwork.org
- 4 Upload eye exam notes into your EMR and label clearly for easy identification
- 5 Ensure workflows are in place to notify and remind providers of when a patient's next eye exam is due. Utilize ACN Provider Portal when chart prepping.
- 6 Check in with patients regarding diabetes care at all visits, regardless of reason for visit.

CODE SUBMISSIONS TO CLOSE GAPS BY CLAIMS

Relevant codes that a primary care provider is the direct biller are listed below. Submission of these codes will close the quality gap through claims with the payer, especially when medical record review is unavailable.

CODE	DESCRIPTION
3072F	Low risk for retinopathy (no evidence of retinopathy in the prior year)
2022F	Dilated retinal eye exam with interpretation by an ophthalmologist or optometrist documented and reviewed
2023F	Dilated retinal eye exam with interpretation by an ophthalmologist or optometrist documented and reviewed; without evidence of retinopathy



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¹HEDIS® stands for Healthcare Effectiveness Data and Information Set and is a registered trademark of the National Committee for Quality Assurance (NCQA)