

Eye Exam for Patients With Diabetes (EED)

Patients 18–75 years of age with diabetes (type 1 or type 2) who had a retinal eye exam. This includes persons with diabetes who had one of the following:

- A retinal or dilated eye exam by an eye care professional (optometrist or ophthalmologist) in the measurement period; or
- A negative retinal or dilated eye exam (negative for retinopathy) by an eye care professional in the year prior to the measurement period.

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.
- Bilateral eye enucleation any time during the patient’s history through the end of the measurement year is now a required exclusion.
- Blindness is NOT an exclusion.

Relevant Codes

The following codes may support gap closure through claims. Compliance depends on meeting HEDIS-defined criteria, including timing, documentation, and qualifying services—not code submission alone.

Code	Description
2022F	Dilated retinal eye exam with interpretation by an ophthalmologist or optometrist documented and reviewed; with evidence of retinopathy (DM)
2023F	Dilated retinal eye exam with interpretation by an ophthalmologist or optometrist documented and reviewed; without evidence of retinopathy (DM)

Common Documentation Insufficiencies

- Eye exam performed but results not documented in the EMR.

Documentation 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; or
- 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.

Best Practices

- Follow-up calls to patients who have not completed their eye exam. Use care gap lists to identify non-compliant patients.
- Educate patients on risks of retinopathy.
- Upload eye exam notes into your EMR and label clearly for easy identification.
- Ensure workflows are in place to notify and remind providers of when a patient's next eye exam is due. Utilize Innovaccer Dashboards and/or InNote when chart prepping .
- Check in with patients regarding diabetes care at all visits, regardless of reason for visit.