

## Referring Diabetic Patients for Annual Eye Exam – Federal Employee Program

Many practitioners refer their diabetic patients to eye care specialists for an annual eye examination. It is important for the referring providers to know details about the care a patient gets and to receive communication from you concerning that care. It is important to follow the American Diabetes Association (ADA) position statement on diabetic retinopathy and screening recommendations, which was updated in 2017:

- **Initial Exams:**
  - Within five years of diagnosis for adults who have Type 1 diabetes
  - At the time of diagnosis for adults with Type 2 diabetes
- **Exam Frequency:**
  - Every two years in the absence of retinopathy
  - Annually in the presence of retinopathy
  - At more frequent intervals in the presence of progressive retinopathy and/or deterioration of vision due to disease progression
- **Pregnancy:**
  - Educate women who are planning to be or are pregnant and who also have diabetes about the risk of diabetic retinopathy developing or progressing
  - Perform an eye exam prior to or at the time of diagnosis of pregnancy, during every trimester, and one year after delivery in the presence of pre-existing Type 1 or Type 2 diabetes
- **Exams:**
  - Should not be substituted by retinal photography
  - Should be conducted as mentioned above<sup>1</sup>

### To help improve outcomes, consider the following:

- **Incorporate** ADA recommendations into practice. Following the above recommendations will ensure best practice for patients.
- **Gather** patient information. Ask the patient about their diabetes history, medications they are taking, symptoms they are experiencing and if they have any questions.
- **Educate** your patients. Help them understand why a retinal exam for patients with diabetes is different than an eye exam for glasses and why it is essential to help prevent future problems.
- **Reassure** your patients with diabetes that a yearly retinal exam might be covered by medical insurance.
- **Submit** claims accurately. When submitting a claim for a diabetic patient eye exam, be sure to include “diabetes” as a diagnosis to ensure proper payment. A list of diabetes codes for diabetic eye exams and procedures is included in this communication for your reference.
- **Communicate** eye care exam results with the patient’s Primary Care Physician.

We thank you for furnishing covered services to our Blue Cross and Blue Shield Service Benefit Plan members. Please remember to share eye care exam results with the patient’s PCP. We have included a template for this purpose. Working together, we can improve the care of people with diabetes. Please contact [NMFEPQIPPrograms@BCBSNM.com](mailto:NMFEPQIPPrograms@BCBSNM.com) if you would like further information. You can also learn more about diabetic retinopathy at <http://care.diabetesjournals.org/content/40/3/412>.

This letter is informational. It is not medical advice. Providers must use their own medical judgment in determining the appropriate course of treatment for each patient.

<sup>1</sup>Diabetic Retinopathy: A Position Statement by the American Diabetes Association, Sharon D. Solomon, Emily Chew, Elia J. Duh, Lucia Sobrin, Jennifer K. Sun, Brian L. VanderBeek, Charles C. Wykoff, Thomas W. Gardner, Diabetes Care, Mar 2017, 40 (3) 412-418; DOI: 10.2337/dc16-2641

## Codes to Identify Eye Exams and procedures for Diabetic Retinal Disease\*\*

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 - 99245	3072F	2022F	2024F	2026F				

## HCPCS

<b>S0620</b>	<b>S0621</b>		<b>S3000</b>
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**\*\*Based on NCQA 2019 HEDIS® specifications.**

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<EXAMPLE OF A NOTE TO SEND TO REFERRING PROVIDER>

**(Insert Practice Logo in this Space)**

**Diabetic Eye Examination Report**

**(Insert Practice Name)**

**TO:** \_\_\_\_\_

**RE:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**FAX:** \_\_\_\_\_

**Current Eye Medications:**

\_\_\_\_\_  
\_\_\_\_\_

**Date of Examination:** \_\_\_\_\_

**Dilated fundus examination:** Y N

**Result of Examination:**

- No diabetic retinopathy at this time
- Proliferative diabetic retinopathy
- Non-proliferative diabetic retinopathy

**Glaucoma examination:** Y N

**Result of examination:** Present Suspected Absent

**Other ocular conditions:**

**Recommendations:**

- No treatment is necessary at this time, just yearly monitoring for any changes
- Close monitoring of ocular health status with a review in 3 months
- Close monitoring of ocular health status with a review in 6 months
- Referral to \_\_\_\_\_
- An appointment has been made with \_\_\_\_\_

I have discussed these findings with the above patient and stressed the importance of regular monitoring of eye health. Please let me know if I can provide you with more information. It's a pleasure to participate in the continued care of our mutual patient.

Sincerely,

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