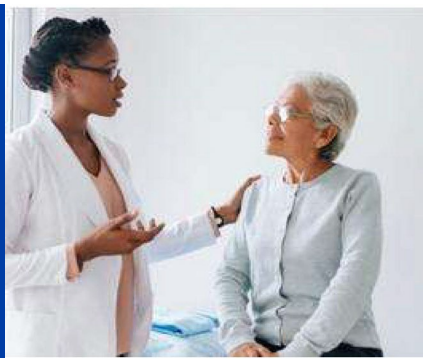
HEDIS® MEASURES

Eye Exam for Patients with Diabetes (EED)

Glycemic Status Assessment for Patients with Diabetes (GSD)

Kidney Health Evaluation for Patients with Diabetes (KEO)



AmeriHealth Caritas Ohio

Measure Overview

Eye Exam for Patients with Diabetes (EED): Measures the percentage of members 18-75 years of age with diabetes (types 1 and 2) who had a retinal eye exam.

Any of the following meet criteria:

- A retinal or dilated eye exam by an eye care professional 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.
- Evidence of bilateral enucleation or acquired absence of both eyes on or before the measurement year.
    - Single enucleation if the other eye was appropriately examined.

Required Exclusions:

- Bilateral absence of eyes any time during the member's history through the end of the measurement year.
- Bilateral eye enucleation any time during the member's history through the end of the measurement year
    - Unilateral eye enucleation with a bilateral modifier (CPT Modifier code SO).
    - Two unilateral eye enucleations with service dates 14 days or more apart.
    - Left unilateral eye enucleation (ICD-10-PCS code 08T1XZZ) and right unilateral eye enucleation (ICD-10-PCS code 08TOXZZ) on the same or different dates of service.
    - A unilateral eye enucleation and a left unilateral eye enucleation (ICD-10-PCS code 08T1XZZ) with service dates 14 days or more apart.
    - A unilateral eye enucleation and a right unilateral eye enucleation (ICD-10-PCS code 08TOXZZ) with service dates 14 days or more apart.
- Members who use palliative care services, hospice services or elect to use a hospice benefit any time during the measurement year.
- Members who died during the measurement year.
- Members 66 years of age and older with frailty and advanced illness during the measurement year.

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Glycemic Status Assessment for Patients with Diabetes (GSD): Measures the percentage of members 18-75 years of age with diabetes (types 1 and 2) whose most recent glycemic status (HbA1c or GMI) was at the following level during the measurement year:

- Glycemic Status >9.0%*

** A lower rate indicates better performance.*

Required Exclusions:

- Members who use palliative care services, hospice services or elect to use a hospice benefit any time during the measurement year.
- Members who died during the measurement year.
- Members 66 years of age and older with frailty and advanced illness during the measurement year.

Kidney Health Evaluation for Patents with Diabetes (KEO): Measures the percentage of members 18-85 years of age with diabetes (type 1 and type 2) who received a kidney health evaluation, defined by an estimated glomerular filtration rate (eGFR) *and* a urine albumin-creatinine ratio (uACR), during the measurement year.

Required Exclusions:

- Members with a diagnosis of ESRD any time during the member's history on or prior to December 31 of the measurement year.
- Members who had dialysis any time during the member's history on or prior to December 31 of the measurement year.
- Members who use palliative care services, hospice services or elect to use a hospice benefit any time during the measurement year.
- Members who died during the measurement year.
- Members 66 years of age and older with frailty and advanced illness during the measurement year.

Ways to Improve Measure Performance

- Implement a year-round outreach program for diabetic members who have not yet had their annual eye exam, kidney health evaluation or HbA1c or GMI. Use multiple communication channels, including secure texts, emails, and phone calls.
- Document the **date of the dilated or retinal exam, results, eye care provider name** and **credentials** in the member's record.
- Educate members on the importance of regular exams and the risks associated with diabetes. Use plain language and culturally sensitive materials to explain why screenings are critical, which can significantly increase compliance.
- Ensure that claims include the correct CPT II codes to accurately report that the required exams were performed. This reduces the need for manual medical record review.
- Use every member visit as an opportunity to address care gaps. If a diabetic member comes in for a different issue, use the visit to perform a retinal screening, get labs for KEO and HbAlc or schedule a follow-up appointment.

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- Reach out to members who cancel appointments and assist them with rescheduling as soon as possible.

Description of Criteria

Retinal Eye Exam Description	**Criteria**
Retinal Eye Exams	CPT:92235,92230,92250,99245,99243,99244, 99242,99205,99203,99204,99215,99213,99214, 92018,92019,92004,92002,92014,92012,92202, 92201,92134 **HCPCS:S0621,S0620,S3000**
Retinal Imaging	**CPT:92227,92228**
Diabetes Mellitus without Complications (in year prior to MY with Diabetic Retinal Screening)	**ICDI0CM:** EI0.9, EII.9, E13.9
Low Risk for Retinopathy (none present in prior year)	**CPT-CAT-11:** 3072F
Eye Exam without Evidence of Retinopathy	**CPT-CAT-11:** 2023F, 2025F, 2033F
Eye Exam with Evidence of Retinopathy (in the MY only)	**CPT-CAT-11:** 2022F, 2024F, 2026F
Unilateral Eye Enucleation (with Bilateral Modifier or 2 Unilateral Enucleations More than 14 Days apart)	CPT:65091,65093,65101,65103,65105,65110, 65112,65114
Glycemic Status Description	**Criteria**
HbAlc Lab Test	CPT:83036,83037
HbAlc Result or Finding	**CPT-CAT-11:** • Less than 7.0: 3044F • Greater than or equal to 7.0 and less than 8.0: 3051F • Greater than or equal to 8.0 and less than or equal to 9.0: 3052F • Greater than 9.0: 3046F
Kidney Health Description *(All three are required}*	**Criteria:**
Estimated Glomerular Filtration Rate	CPT:80047,80048,80050,80053,80069,82565
Quantitative Urine Albumin	**CPT:82043**
Urine Creatinine	**CPT:82570**
Service dates of quantitative urine albumin test and urine creatinine test must be four or less days apart.	

Note: LO/NC and SNOMED codes can be captured through electronic data submissions. Please contact your Account Executive for more information.

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