



The importance of HEDIS measures in diabetic eye exams

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What is HEDIS?

Health Effectiveness Data and Information Set

Widely used set of performance measures that relate to many significant public health issues such as:

- Cancer
- Heart disease
- Behavioral health
- Diabetes

Developed and maintained by the National Committee for Quality Assurance (NCQA)

CMS contracts with NCQA to collect HEDIS



National Committee for Quality Assurance (NCQA), <https://www.ncqa.org>. Accessed May 2025.



What is HEDIS?

HEDIS data can identify:

- Opportunities for improvement
- Monitor the success of quality improvement initiatives
- Track improvement and provide a set of measurement standards for comparison with other health plans



>90% of America's
health plans use HEDIS

235M+ people are
enrolled in plans that report
HEDIS results

National Committee for Quality Assurance (NCQA), <https://www.ncqa.org>. Accessed May 2025.



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Why is HEDIS important?

- ✓ Improves health outcomes
- ✓ Improves member quality of life
- ✓ Holds health plans and providers accountable

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Domains of care covered by HEDIS

HEDIS includes 90 measures across 6 domains of care



Effectiveness of Care

Measures how well care is delivered and its outcomes



Health Plan Descriptive Information

Provides details about health plans



Access/Availability of Care

Evaluates how easily patients can access necessary care



Utilization and Risk Adjust Utilization

Evaluates how health care services are used



Experience of Care

Assesses patient satisfaction and experiences



Measures Reported Using Electronic Clinical Data Systems

Utilizes electronic health records for reporting

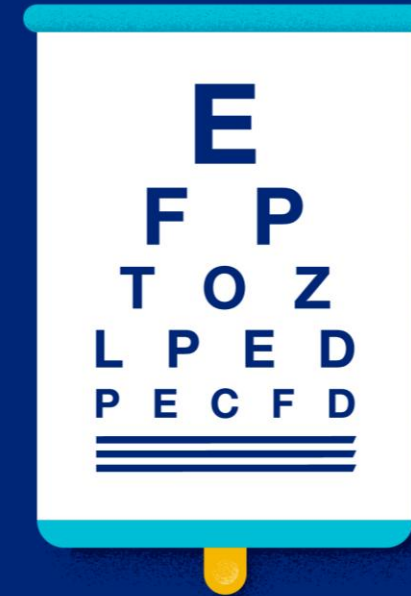
National Committee for Quality Assurance (NCQA), <https://www.ncqa.org>. Accessed May 2025.



Domains of care covered by HEDIS

Complete diabetic care within the **Experience of Care** domain:

- Hemoglobin A1c (HbA1c) testing
- HbA1c poor control (>9.0%)
- HbA1c control (<8.0%)
- Eye exam (retinal) performed
- BP control (<140/90 mm Hg)



Prevalence of diabetic related eye disease in the United States

The risk of blindness **is 25 times higher** in people with diabetes compared to those without diabetes.

Glaucoma, cataracts and other eye disorders **occur earlier and more often** in people with diabetes compared to those without.

Diabetic retinopathy is the **leading cause of blindness** in working-age adults.



>90%

of diabetes-related vision loss can be avoided with early detection and treatment

Centers for Disease Control and Prevention. Diabetes and promoting eye health, <https://www.cdc.gov/diabetes/hcp/clinical-guidance/promote-eye-health.html>. Accessed May 2025.



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Eye exam for patients with diabetes (EED)



HEDIS EED definition

Percentage of members ages 18–75 with diabetes (Types 1 and 2) who had any 1 of the following:

- Retinal or dilated eye exam by an optometrist or ophthalmologist in the measurement year
- Negative retinal or dilated eye exam by an optometrist or ophthalmologist in the year prior to the measurement year

New for 2025

Added:

Bi-lateral eye enucleation (required exclusion)

Gap closure criteria:

- Retinal imaging by a qualified reading center
- Indicated findings from a retinal exam for diabetic retinopathy performed in both eyes

Updated:

The Hybrid Data Collection Method was removed from this measure (reported as Administrative only)

UnitedHealthcare. Quality reference guide: 2025 HEDIS, CMS Part D, CAHPS and HOS measures, <https://www.uhcprovider.com>. Accessed May 2025.

National Committee for Quality Assurance. <https://www.ncqa.org>. Accessed May 2025.



EED requirements

Diabetic eye exams are a crucial component of HEDIS measures, specifically under EED.

Requirements

- ✓ Members **without** retinopathy should have an eye exam every 2 years
- ✓ Members **with** retinopathy should have an eye exam every year



Tests / procedures to close care opportunity

- Bilateral eye enucleation or acquired absence of both eyes
- Dilated or retinal eye exam
- Fundus photography

EED importance

1

Prevents complications

- Diabetic Retinopathy: Leading cause of blindness among adults
- Other eye diseases: Diabetes increases the risk of other eye conditions (macular edema, glaucoma and cataracts)

2

Improves patient outcomes

- Early detection: Regular retinal or dilated eye exams can identify issues before they become severe
- Provides timely treatment: Detecting eye problems early allows for prompt treatment, which can prevent vision loss and other complications

3

HEDIS measures help track and improve the quality of diabetic eye care



Data collection methods

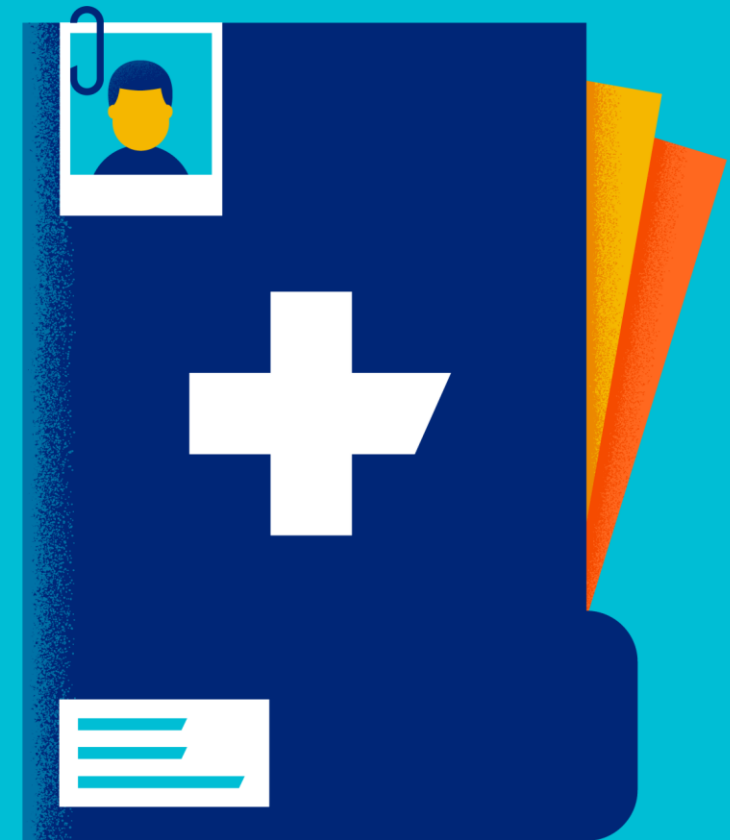
HEDIS data is collected using several methods to ensure comprehensive and accurate measurement of healthcare performance.

Administrative data

- Claims and encounter data
- Eligibility data
- Provider data
- Interoperability

Hybrid Data (retired as of 2025)

- Combination of administrative data and medical record review



HEDIS EED compliance requirements



Documentation of the eye exam, including:

- Date of service
- Results of the exam
- Name and credentials of the eye care professional
- Using appropriate CPT II codes



Acceptable methods of closing gaps for HEDIS EED measure:

- Retinal screening with results reviewed by a qualified professional or AI system (reading center)
- Comprehensive dilated eye exam by eye care professional



Tips for HEDIS EED compliance

Medical record must indicate that a dilated or retinal exam was performed

- If “dilated” or “retinal” are missing, a notation of “dilated drops used” and findings for macula and vessels will meet the criteria for a dilated exam

Ensure date of service, the test or result and the eye care provider’s credentials are documented

If a copy of the fundus photography is included in your medical record it must include results, date and signature of the reading eye care professional for compliance

To be reimbursable, billing of fundus photography code 92250 must be submitted globally and meet disease state criteria



Medicare STARS ratings

The Medicare STARS rating system is used by the Centers for Medicare & Medicaid Services (CMS) to evaluate the quality of Medicare Advantage plans.

Ratings range from 1-5 stars (5 being highest), based on several factors, including:



Clinical outcomes



Customer service



Patient experience



Administrative performance

CMS. Five-star quality rating system, <https://www.cms.gov/medicare/health-safety-standards/certification-compliance/five-star-quality-rating-system>. Accessed May 2025.



NCQA and Medicare STARS ratings

$$\text{EED} = \frac{\text{Members in EED with closed gaps}}{\text{Total number of members in EED measure}} = \% \text{ of members with closed EED gaps}$$



Used by CMS and NCQA to assign a 1-5 rating based on performance in the EED measure relative to other payors



The EED measure is one of many measures that account for the overall rating of a health plan



Improving care



Consumer choice



Accountability

CMS. Five-star quality rating system, <https://www.cms.gov/medicare/health-safety-standards/certification-compliance/five-star-quality-rating-system>. Accessed May 2025.



CPT II coding for EED measure

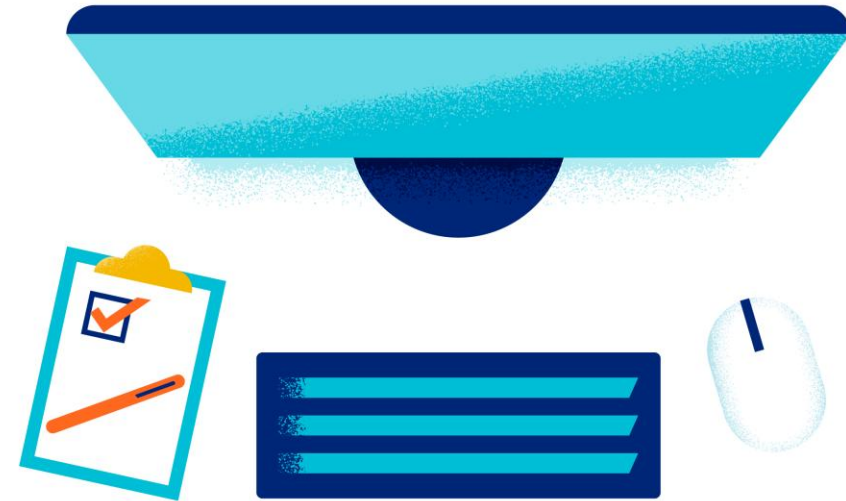
The use of CPT Category II codes are crucial for diabetic eye exams to help identify, track and report quality measures related to diabetes care.

Key points about their importance:

Quality measurement

Performance improvement

Patient management



EED measure CPT II coding standards

CPT II code	Description
2022F	Dilated retinal eye exam with interpretation by an ophthalmologist or optometrist documented and reviewed; with evidence of retinopathy
2023F	Dilated retinal eye exam with interpretation by an ophthalmologist or optometrist documented and reviewed; without evidence of retinopathy
2024F	7 standard field stereoscopic retinal photos with interpretation by an ophthalmologist or optometrist documented and reviewed; with evidence of retinopathy
2025F	7 standard field stereoscopic retinal photos with interpretation by an ophthalmologist or optometrist documented and reviewed; without evidence of retinopathy
2026F	Eye imaging validated to match diagnosis from 7 standard field stereoscopic retinal photos results documented and reviewed; with evidence of retinopathy
2033F	Eye imaging validated to match diagnosis from 7 standard field stereoscopic retinal photos results documented and reviewed; without evidence of retinopathy
3072F	Low risk for retinopathy (no evidence of retinopathy in the prior year)



EED measure diagnosis codes

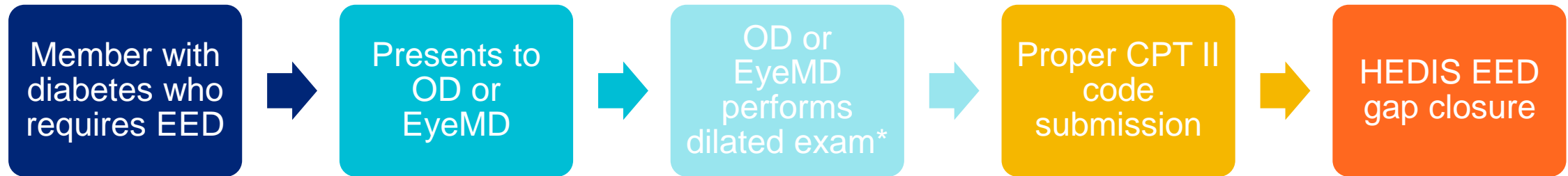
ICD-10 diagnosis codes*	
Nonproliferative Diabetic Retinopathy (NPDR)	
Type 1	Type 2
E10.3211, E10.3212, E10.3213, E10.3291, E10.3292, E10.3293, E10.3311, E10.3312, E10.3313, E10.3391, E10.3392, E10.3393, E10.3411, E10.3412, E10.3413, E10.3491, E10.3492, E10.3493	E11.3211, E11.3212, E11.3213, E11.3291, E11.3292, E11.3293, E11.3311, E11.3312, E11.3313, E11.3391, E11.3392, E11.3393, E11.3411, E11.3412, E11.3413, E11.3491, E11.3492, E11.3493
Proliferative Diabetic Retinopathy (PDR)	
Type 1	Type 2
E10.3511, E10.3512, E10.3513, E10.3521, E10.3522, E10.3523, E10.3531, E10.3532, E10.3533, E10.3541, E10.3542, E10.3543, E10.3551, E10.3552, E10.3553, E10.3591, E10.3592, E10.3593	E11.3511, E11.3512, E11.3513, E11.3521, E11.3522, E11.3523, E11.3531, E11.3532, E11.3533, E11.3541, E11.3542, E11.3543, E11.3551, E11.3552, E11.3553, E11.3591, E11.3592, E11.3593

* This list contains the most common ICD-10 codes



EED gap closure

Preferred method



Alternative method



* Or notates negative for retinopathy last year or bilateral eye enucleation



Best practices for quality care

Educate patients on the importance of retinal eye exams

Verification of member benefits

Send referrals to vision providers and request documentation of exam results

Schedule eye exams annually



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Quality score improvement tips for closing HEDIS EED gaps



Patients' medical records must support CPT I, CPT II, and ICD-10 codes on the claim



CPT codes do not have relative value and can be billed with a \$0 charge amount



Always bill ICD-10 codes to the highest level of specificity

The future of HEDIS

Focusing on 6 core ideas:

1 Allowable adjustments

2 Licensing and certification

3 Digital measures

4 Electronic Clinical Data Systems (ECDS)

5 Equity

6 Telehealth

National Committee for Quality Assurance. <https://www.ncqa.org>. Accessed May 2025.



Overview



Diabetic eye exams are vital for preventing complications, improving patient outcomes, ensuring quality care and maintaining compliance with HEDIS measures.



Regular and properly documented eye exams play a significant role in managing diabetes and enhancing the overall health of patients.



Proper documentation and use of correct CPT II codes are crucial for meeting HEDIS criteria and closing gaps in care.



Educating patients about the importance of regular eye exams, engaging providers in best practices for documentation and implementing member engagement strategies are vital for enhancing compliance and improving care quality.



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