

Eye Exam for Patients with Diabetes (EED) HEDIS® Measures — Provider Tips



Improving Quality Outcomes

Line of Business: ● Medicaid ● Marketplace ● Medicare

Measure Description

The percentage of persons 18-75 years of age with diabetes (type 1 and type 2) who had a retinal eye exam as of December 31 of the measurement period.

Important Information on Retinal Imaging

To improve HEDIS outcomes in closing care gaps for **Eye Exams for Patients with Diabetes (EED)**; it is essential to use the accurate codes based on the services a provider has performed.

Digital Diabetic Retinopathy Screening and Fundus Photography should be performed once per calendar year for members with type 1 or type 2 diabetes when the following conditions are met:

- The screening is conducted by a Primary Care Provider (PCP), optometrist, or ophthalmologist using an FDA-approved retinal imaging device.
- Retinal imaging results must be interpreted by an optometrist, ophthalmologist, or a qualified reading center. To ensure this, PCPs should establish an agreement or contract with one of these professionals or centers for interpretation and reporting.
- The screening is used to detect diabetic retinopathy and/or to monitor and manage patients already diagnosed with the condition.

Appropriate CPT Codes for Digital Retinal Imaging (performed by PCP, optometrist, or ophthalmologist)

Description	CPT Code*	Modifiers
Imaging of retina for detection or monitoring of disease; with remote clinical staff review and report, unilateral or bilateral	92227	N/A
Imaging of retina for detection or monitoring of disease; with remote physician or other qualified healthcare professional interpretation and report unilateral or bilateral	92228	TC = Technical component 26 = Interpretation and report
Automated Eye Exam	92229	N/A
Fundus photography with interpretation and report	92250	TC = Technical component 26 = Interpretation and report

Codes are subject to change.

Appropriate CPT II Codes for Digital Retinal Imaging - Interpretation and Reporting (performed by optometrist or ophthalmologist)

Description	CPTII Code*
Dilated retinal eye exam with interpretation by ophthalmologist or optometrist documented and reviewed	2022F
Dilated retinal eye exam with interpretation by an ophthalmologist or optometrist documented and reviewed, w/o evidence of retinopathy	2023F
Seven (7) standard field stereoscopic photos with interpretation by an ophthalmologist or optometrist documented and reviewed, with evidence of retinopathy	2024F
Seven (7) standard field stereoscopic photos with interpretation by an ophthalmologist or optometrist documented and reviewed, w/o evidence of retinopathy	2025F
Eye Imaging validated to match diagnosis from seven (7) standard field stereoscopic photos, results documented and reviewed, with evidence of retinopathy	2026F
Eye Imaging validated to match diagnosis from seven (7) standard field stereoscopic photos, results documented and reviewed, w/o evidence of retinopathy	2033F
Low risk for retinopathy (no evidence of retinopathy in the prior year) * Only use if the member had a negative retinopathy exam in the prior year.	3072F

Codes are subject to change

Coding Tips – Eye Exam for Patients with Diabetes (EED)

Primary care providers (PCPs) use handheld retinal imaging devices, with image interpretation performed through a contracted agreement with a qualified reading center—either in-network or out-of-network—any provider type

- PCPs should submit both the **CPT code** and **CPT II code** after receiving the interpretation report and results of the retinal imaging.
- Include the appropriate **ICD-10 diagnosis for diabetes and/or diabetic retinopathy**
- **Example: 92250** and **2022F** with **E11.9**

Primary care providers (PCPs) utilize handheld retinal imaging devices, while interpretation is billed by an in-network qualified reading center

- PCPs should submit with **CPT code 92250 with modifier TC** reflects the image was performed.
- Use applicable **CPT II code** to **report results** of the image.
- Include the appropriate **ICD-10 diagnosis code for diabetes and/or diabetic retinopathy**
- **Example: 92250-TC and 2025F with E11.9**

Retinal image interpretation is performed by a qualified reading center—of any provider type—that is contracted as an in-network provider.

- Eye care professionals should submit **CPT code 92250 with modifier 26** for interpretation and report.
- Use applicable **CPT II code** to **report results** of the image.
- Include the appropriate **ICD-10 diagnosis code for diabetes and/or diabetic retinopathy**
- **Example: 92250-26 and 2025F with E11.9**

In-network providers – including optometrists and ophthalmologists, perform both retinal imaging and interpretation.

- Submit the appropriate **CPT code** for **retinal imaging** services performed.
- When billing for imaging, providers must report the negative or positive retinopathy using the appropriate **CPT II code for reporting**.
- Modifiers are not required for this submission.

In Network – Provider contract with Envolve Vision review the HEDIS Training and Tip for EED at:
[https:// www.centenevision.com/providers/hedis.html](https://www.centenevision.com/providers/hedis.html)

Important:

- **Document all retinal images and results in the member’s medical record to meet HEDIS compliance**
- **Do not report 92229 in conjunction with 92133, 92134, 92227, 92228, 92250**
- **When billing CPT II codes use the billed amount of \$0.01**

Note: Federally Qualified Health Centers (FQHCs) and Rural Health Clinics (RHCs) are reimbursed under a Prospective Payment System (PPS). As a result, primary care providers (PCPs) billing for retinal imaging services will be reimbursed only at the contractual rate defined by the PPS structure.”

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