

PROVIDER Bulletin



October 20, 2016

This Provider Bulletin applies to the lines of business and provider types checked below:

- | | | |
|--|---|--------------------------------------|
| <input checked="" type="checkbox"/> PHP (Medicare) | <input checked="" type="checkbox"/> Primary Care Physicians | <input type="checkbox"/> Specialists |
| <input checked="" type="checkbox"/> PHC (Medicaid) | <input type="checkbox"/> Ancillary | <input type="checkbox"/> Hospitals |

Annual Eye Exam

Participating Primary Care Providers are encouraged to refer PHP and PHC enrollees to a VSP participating provider for an Annual Eye Exam. Additionally, PHP and PHC enrollees with a documented diabetic history or newly diabetic diagnosis should receive an annual retinal eye exam. A Retinal Eye Exam is covered under both the PHP and PHC vision plans under the Diabetic Eyecare Plus (DEP) program. PHP/PHC believes this will be beneficial to Plan enrollees as an earlier assessment of a chronic conditions resulting in better healthcare outcomes.

Through VSP, PHP/PHC enrollees may access supplemental medical eye-care coverage via VSP's Primary Eye Care (PEC) program. Non-surgical medical eye care such as the detection, treatment and management of ocular and/or systemic conditions that produce ocular or visual symptoms are example of PEC program benefits. Additionally, services covered include diagnosis and test for loss of vision, treatment for conjunctivitis (pink eye), and management of glaucoma and diabetic retinopathy.

For a complete description of VSP's PEC program, questions surrounding annual eye exams, retinal eye exams, applicable CPT Codes and/or applicable ICD-10 Codes, please contact VSP Vision Care at 800.615.1883. To locate a VSP Provider, please visit: www.VSP.com

PHC – Medicaid Benefit	
Optometric and Vision Services	Exams, (including yearly diabetic retinal eye exam) eyeglasses frames, eye glass lenses, repairs to eyeglass covered. Contact lenses covered if medically necessary. Eyeglass frames limited to one (1) pair every two (2) years. Eyeglass lenses limited to replacement once every year. For members under the age of 21, eyeglass frames and lenses limited to replacement two (2) times a year.
PHP – Medicare Benefit	
Optometric Vision Services	Exam to diagnose and treat diseases and conditions of the eye (including yearly glaucoma screening and annual diabetic eye exam): Routine eye exam (up to 1 every year), Contact Lenses, Eyeglasses (frames and lenses); Eyeglass frames, Eyeglass lenses, Eyeglasses or contact lenses after cataract surgery, PHP pays up to \$100 every year for eyewear.

Comprehensive Diabetes Care: Eye Exams
<i>Annually document date and result of <u>retinal</u> eye exam. Example: "Retinal eye exam 6/23/2016 WNL" (With Normal Results)</i>
<p>Diabetic Retinal Screening</p> <ul style="list-style-type: none"> • CPT Codes: 67028, 67030, 67031, 67036, 67039 to 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 to 92228, 92230, 92235, 92240, 92250, 92260, 99203 to 99205, 99213 to 99215, 99242 to 99245, S0620, S0621, S3000, 3072F, 2022F, 2024F, 2026F • HCPCS Codes: S0620, S0621, S3000 <p>Diabetic Retinal Screening Negative</p> <ul style="list-style-type: none"> • CPT: 3072F <p>Diabetic Retinal Screening With Eye Care Professional</p> <ul style="list-style-type: none"> • CPT: 2022F, 2024F, 2026F • HCPCS: S0625

This Provider Bulletin is not intended to replace or conflict with any requirements outlined in your signed Agreement with AHF, PHP or PHC. If you have any questions or suggestions contact the Provider Relations Department at 954.522.3132 or email to remon.walker@phcplans.org