Digital Imaging Systems for the Detection and Evaluation of Diabetic Retinopathy and Intraocular Photography

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Approved By:	Highmark Health Options – Market Leadership
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Last Revision Date:	11/10/2021; 10/26/2022
Products:	Medicaid
Application:	All participating hospitals and providers
Page Number(s):	1 of 4

Disclaimer

Highmark Health Options medical policy is intended to serve only as a general reference resource regarding coverage for the services described. This policy does not constitute medical advice and is not intended to govern or otherwise influence medical decisions.

POLICY STATEMENT

Highmark Health Options may provide coverage under the medical-surgical benefits of the Company's Medicaid products for medically necessary benefits.

This policy is designed to address medical necessity guidelines that are appropriate for the majority of individuals with a particular disease, illness or condition. Each person's unique clinical circumstances warrant individual consideration, based upon review of applicable medical records.

The qualifications of the policy will meet the standards of the National Committee for Quality Assurance (NCQA) and the Delaware Department of Health and Social Services (DHSS) and all applicable state and federal regulations.

DEFINITIONS

Highmark Health Options (HHO) – Managed care organization serving vulnerable populations that have complex needs and qualify for Medicaid. Highmark Health Options members include individuals and families with low income, expecting mothers, children, and people with disabilities. Members pay nothing to very little for their health coverage. Highmark Health Options currently serves Delaware Medicaid: Delaware Healthy Children Program (DHCP) and Diamond State Health Plan and Health Plan Plus members.

POLICY POSITION

Prior authorization is not required.

A United States Food and Drug Administration (U.S. FDA) approved digital imaging system is used to acquire a series of standard field color images and/or monochromatic images of the retina of each eye in the physician's office. These photos are then transmitted to a remote center for interpretation and recommendations for treatment by an ophthalmologist.

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1

Retinal tele-screening by digital imaging for the detection and evaluation of diabetic retinopathy in individuals with diabetes mellitus may be considered medically necessary.

Intraocular photography or digital retinal imaging interpretation of artificial intelligence software that is approved by the U.S. FDA may be considered medically necessary when used for the diagnosis of the following (not an all-inclusive list):

- Macular degeneration; or
- Retinal neoplasms; or
- Choroid disturbances; or
- Diabetic retinopathy; or
- To identify Glaucoma; or
- To identify Multiple sclerosis; or
- To identify other central nervous system abnormalities.

Intraocular photography not meeting the criteria as indicated in this policy is considered not medically necessary.

PROFESSIONAL STATEMENTS AND SOCIETAL POSITIONS GUIDELINES

American Diabetes Association – 2020

In 2020, the American Diabetes Association updated its guidelines on standards of medical care for diabetes. Included in the guidelines were specific recommendations for initial and subsequent screening examinations for retinopathy:

- "Adults with type 1 diabetes should have an initial eye examination by an ophthalmologist or optometrist within 5 years after the onset of diabetes. (B)"
- "Patients with type 2 diabetes should have an initial dilated and comprehensive eye examination by an ophthalmologist or optometrist at the time of the diabetes diagnosis. (B)"
- "Eye examinations should occur before pregnancy or in the first trimester in patients with preexisting type 1 or type 2 diabetes, and then these patients should be monitored every trimester and for 1 year postpartum as indicated by the degree of retinopathy. (B)"
- "If there is no evidence of retinopathy for one or more annual eye exams and glycemia is well controlled, then screening every 1–2 years may be considered. (B)"
- "Programs that use retinal photography (with remote reading or use of a validated assessment tool) to improve access to diabetic retinopathy screening can be appropriate screening strategies for diabetic retinopathy. Such programs need to provide pathways for timely referral for a comprehensive eye examination when indicated. (B)"

"Artificial intelligence systems that detect more than mild diabetic retinopathy and diabetic macular edema authorized for use by the FDA represent an alternative to traditional screening approaches. However, the benefits and optimal utilization of this type of screening have yet to be fully determined."

ELIGIBLE PROCEDURE CODES

CPT Codes	Description
92227	Imaging of retina for detection or monitoring of disease; with remote clinical staff review and report, unilateral or bilateral.

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2

92228	Imaging of retina for detection or monitoring of disease; with remote physician or other qualified health care professional interpretation and report unilateral or bilateral.
92250	Fundus photography with interpretation and report.

ELIGIBLE DIAGNOSIS CODES FOR PROCEDURE CODES 92227 AND 92228

Codes						
E08.8	E08.9	E08.00	E08.01	E08.10	E08.11	E08.21
E08.22	E08.29	E08.36	E08.39	E08.40	E08.41	E08.42
E08.43	E08.44	E08.49	E08.51	E08.52	E08.59	E08.65
E08.69	E08.610	E08.618	E08.620	E08.621	E08.622	E08.628
E08.630	E08.638	E08.641	E08.649	E09.8	E09.9	E09.00
E09.01	E09.10	E09.11	E09.21	E09.22	E09.29	E09.36
E09.39	E09.40	E09.41	E09.42	E09.43	E09.44	E09.49
E09.51	E09.52	E09.59	E09.65	E09.69	E09.610	E09.618
E09.620	E09.621	E09.622	E09.628	E09.630	E09.638	E09.641
E09.649	E11.8	E11.9	E11.00	E11.01	E11.21	E11.22
E11.29	E11.36	E11.39	E11.40	E11.41	E11.42	E11.43
E11.44	E11.49	E11.51	E11.52	E11.59	E11.65	E11.69
E11.610	E11.618	E11.620	E11.621	E11.622	E11.628	E11.630
E11.638	E11.641	E11.649	E13.8	E13.9	E13.00	E13.01
E13.10	E13.11	E13.21	E13.22	E13.29	E13.36	E13.39
E13.40	E13.41	E13.42	E13.43	E13.44	E13.49	E13.51
E13.52	E13.59	E13.65	E13.69	E13.610	E13.618	E13.620
E13.621	E13.622	E13.628	E13.630	E13.638	E13.641	E13.649

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3

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POLICY UPDATE HISTORY

10/26/2022	Approved in Medical Policy Committee
11/2022	Approved in QI/UM

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4