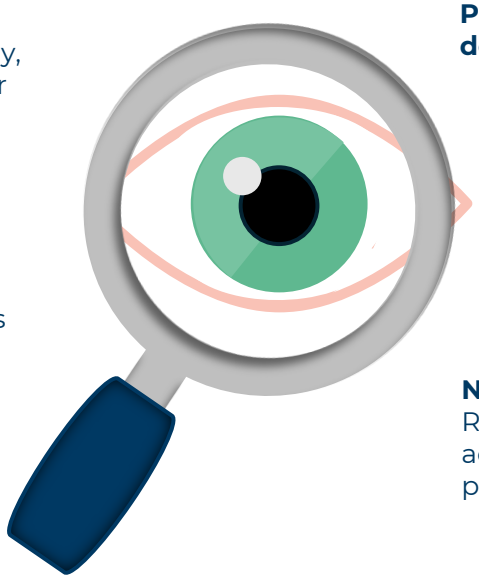
Diabetic Retinopathy

Diabetes significantly increases the risk of various eye diseases, including diabetic retinopathy, macular edema, glaucoma, and cataracts. Diabetic retinopathy, a leading cause of vision loss in diabetics, damages the retina's blood vessels. This damage leads to fluid leakage into the macula, causing blurred vision, and the growth of abnormal, fragile blood vessels that can bleed and obstruct vision. The disease progresses in stages, starting with non-proliferative retinopathy (NPDR), characterized by weakened blood vessels and minor leakage. Advanced proliferative diabetic retinopathy (PDR) involves new blood vessel growth, potentially causing retinal detachment, bleeding into the vitreous, and glaucoma due to increased eye pressure. Untreated proliferative diabetic retinopathy can result in severe vision loss or blindness.

Best Documentation Practices

Be specific
Note the type of retinopathy, the affected eye(s), whether macular edema is present, and any complications.

Link both conditions
Specify the type of diabetes and the causal relationship between the diabetes and the retinopathy.



PCPs should include the following details of the eye exam, if possible

1. Date of the last eye exam
2. Type of eye exam
3. Name of performing provider or location
4. Results
   - Documentation should explicitly state the presence and type of retinopathy.

Note any treatment
Record any treatment the patient is actively receiving, any surgery or procedures, and the outcomes.

M.E.A.T. the Condition

Proper documentation requires at least one of these four elements be present in the documentation for each condition

M
Monitor

How is the patient doing?

Document signs, symptoms, disease progression/regression or ongoing surveillance

E
Evaluate

What is the current state of the condition?

Document current state, test results, medication effectiveness or response to treatment

A
Address/Assess

How will the condition be evaluated?

Document discussion, review of records, counseling, or ordering further tests

T
Treatment

What is being done to help the condition?

Document care, prescribed medications, referral to specialist or other modalities

CMS requires **annual coding and reporting of all chronic conditions**. A condition is not considered present in a given year unless it is appropriately documented and coded in that year.

Diabetic Retinopathy ICD-10 Category Reference Guide

This partial list of Risk Adjustment condition categories and ICD-10 codes (showing only the first five or six digits) is not exhaustive. **For complete codes and all applicable coding instructions, refer to the current ICD-10-CM Alphabetic Index and Tabular List.**

Type 1	Type 2	Diabetes Mellitus
E10.32XX	E11.32XX	With mild nonproliferative diabetic retinopathy with macular edema
E10.33XX	E11.33XX	With moderate nonproliferative diabetic retinopathy with macular edema
E10.34XX	E11.34XX	With severe nonproliferative diabetic retinopathy with macular edema
E10.35XX	E11.35XX	With proliferative diabetic retinopathy with macular edema
E10.352X	E11.352X	With proliferative diabetic retinopathy with traction retinal detachment involving the macula
E10.353X	E11.353X	With proliferative diabetic retinopathy with traction retinal detachment not involving the macula
E10.354X	E11.354X	With proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment
E10.355X	E11.355X	With stable proliferative diabetic retinopathy
E10.359X	E11.359X	With proliferative diabetic retinopathy without macular edema

Coding Examples

Example 1	
Documentation	**Reason for Visit:** Diabetic care follow up for retinopathy. **Assessment & Plan:** Recent eye exam w/ ophthalmology confirmed proliferative diabetic retinopathy both eyes, macular edema OS. Lucentis injections once monthly. Maintain good blood sugar control on Lantus.
ICD-10 Code(s)	E11.3512 Type 2 diabetes mellitus with proliferative diabetic retinopathy with macular edema, left eye; E11.3591 Type 2 diabetes mellitus with proliferative diabetic retinopathy without macular edema, right eye
Rationale	Documentation confirms diabetic retinopathy with specified type and macular edema status. Treatment was recorded. The diabetes type defaults to type 2 without further details.

Example 2	
Documentation	**Fundus Exam:** Macula: Flat, no edema. Normal foveal reflex; Periphery: c/w mild nonproliferative diabetic retinopathy OU. **Assessment:** NPDR OU, mild, T2DM - Counseled regular eye exams/blood sugar control.
ICD-10 Code(s)	E11.3293 Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, bilateral
Rationale	DM type documented, retinopathy defined by type and severity. Absence of macular edema and bilateral involvement are also indicated.

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