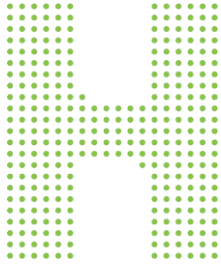
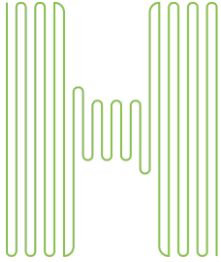


# Schedule your eye exam today!



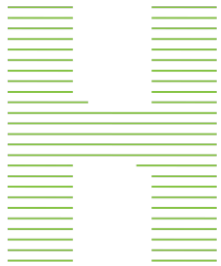
## Why it is worth having an eye exam

Changes in the eye can happen slowly, and you may not feel anything at first. A comprehensive retinal exam may help discover problems that may lead to blindness, such as diabetic retinopathy, cataracts and glaucoma.<sup>1</sup>



## Call your eye doctor

- Ask to schedule your retinal eye exam today.
- Your Humana medical plan may cover the cost of your eye appointment even if you don't have a separate vision plan, when you go to an in-network eye doctor.
- Check your plan benefits or call the number on the back of your Humana ID card for help. You may need a referral to see an eye doctor, also known as an optometrist or ophthalmologist. You may also search for a doctor using our physician finder tool on [Humana.com](http://Humana.com).

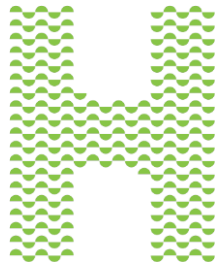


**Please note, that in order for the exam to be covered, the eye doctor must be in-network.**

## Documenting your eye exam correctly is very important

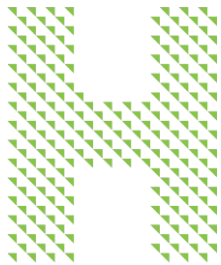
In order to be covered under your medical plan, it is important that your eye exam is captured correctly. Please take this form to your eye doctor and have them fill all the fields and correct CPT code and fax back to Humana.

**Fax: 800-391-2361**



## HUMANA MEMBER INFORMATION (PLEASE PRINT)

<b>Name:</b>		<b>Date of birth:</b>	
<b>Humana member ID number: H</b>			



## EYE CARE OFFICE (PLEASE PRINT)

<b>Date of exam:</b>		<b>Eye care office name:</b>	
<b>Eye care office National Provider Identifier (NPI):</b>			
<b>Rendering optometrist/ophthalmologist name:</b>			
<b>Rendering optometrist/ophthalmologist NPI (if part of a group):</b>			
<b>Street address:</b>			
<b>City, state, ZIP:</b>			
<b>Phone number, including area code:</b>			



Healthcare Effectiveness Data and Information Set (HEDIS®) codes to identify eye exams

CPT	CPT Category II	HCPCS
67028, 67030, 67031, 67036, 67039 – 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 – 92228, 92230, 92235, 92240, 92250, 92260, 99203 – 99205, 99213 – 99215, 99242 – 99245	2022F – 2026F, 2033F, 3072F	S0620, S0621, S3000

CPT code: \_\_\_\_\_

FINDINGS

No retinopathy (diabetic or hypertensive) is found in either eye.

**Retinal exam abnormalities detected, as follows:**

**Non-proliferative changes noted in (circle one):**

Right (grade)	N/A	Mild	Moderate	Severe
	Clinically significant diabetic macular edema?	Yes	No	
Left (grade)	N/A	Mild	Moderate	Severe
	Clinically significant diabetic macular edema?	Yes	No	

**Proliferative changes noted in (circle one):**

Right (grade)	N/A	Active	Regressed/Stable
Left (grade)	N/A	Active	Regressed/Stable

Other \_\_\_\_\_

**Recommended follow-up (circle one):**  
 12 months                      6 months                      Other \_\_\_\_\_

**Additional comments/treatment plan:** \_\_\_\_\_

---

**Physician attestation statement:** I have examined the Humana member listed and confirm he or she has received the services indicated on this form.

\_\_\_\_\_

Rendering optometrist/ophthalmologist signature                      Date

**Fax form to: 800-391-2361**  
**Mail form to: 66 E. Wadsworth Park Drive, Suite 150S, Draper, UT 84020**

<sup>1</sup> “Diabetic Retinopathy,” National Eye Institute, last accessed Feb. 19, 2020, <https://nei.nih.gov/health/diabetic/retinopathy>.

## Important!

### At Humana, it is important you are treated fairly.

Humana Inc. and its subsidiaries do not discriminate or exclude people because of their race, color, national origin, age, disability, sex, sexual orientation, gender, gender identity, ancestry, marital status or religion. Discrimination is against the law. Humana and its subsidiaries comply with applicable Federal Civil Rights laws. If you believe that you have been discriminated against by Humana or its subsidiaries, there are ways to get help.

- You may file a complaint, also known as a grievance:

Discrimination Grievances, P.O. Box 14618, Lexington, KY 40512-4618

If you need help filing a grievance, call the number on your ID card or if you use a **TTY**, call **711**.

- You can also file a civil rights complaint with the **U.S. Department of Health and Human Services**, Office for Civil Rights electronically through their Complaint Portal, available at

**<https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>**, or at **U.S. Department of Health and Human Services**, 200 Independence Avenue, SW, Room 509F, HHH Building, Washington, DC 20201, **1-800-368-1019**, **800-537-7697 (TDD)**. Complaint forms are available at **<https://www.hhs.gov/ocr/office/file/index.html>**.

- **California residents:** You may also call California Department of Insurance toll-free hotline number: **1-800-927-HELP (4357)**, to file a grievance.

### Auxiliary aids and services, free of charge, are available to you. Call the number on your ID card (TTY: 711)

Humana provides free auxiliary aids and services, such as qualified sign language interpreters, video remote interpretation, and written information in other formats to people with disabilities when such auxiliary aids and services are necessary to ensure an equal opportunity to participate.

### Language assistance services, free of charge, are available to you. Call the number on your ID card (TTY: 711)

ATTENTION: If you do not speak English, language assistance services, free of charge, are available to you. Call the number on your ID card **(TTY: 711)**... ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al número que figura en su tarjeta de identificación **(TTY: 711)**... 注意：如果您使用繁體中文，您可以免費獲得語言援助服務。請致電會員卡上的電話號碼 **(TTY: 711)**... CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số điện thoại ghi trên thẻ ID của quý vị **(TTY: 711)**... 주의 : 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. ID 카드에 적혀 있는 번호로 전화해 주십시오 **(TTY: 711)**... PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tawagan ang numero na nasa iyong ID card **(TTY: 711)**... ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Наберите номер, указанный на вашей карточке-удостоверении **(телетайп: 711)**... ATANSYON: Si w pale Kreyòl Ayisyen, gen sèvis èd pou lang ki disponib gratis pou ou. Rele nimewo ki sou kat idantite manm ou **(TTY: 711)**... ATTENTION: Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le numéro figurant sur votre carte de membre **(ATS: 711)**... UWAGA: Jeżeli mówisz po polsku, możesz skorzystać z bezpłatnej pomocy językowej. Proszę zadzwonić pod numer podany na karcie identyfikacyjnej **(TTY: 711)**... ATENÇÃO: Se fala português, encontram-se disponíveis serviços linguísticos, grátis. Ligue para o número presente em seu cartão de identificação **(TTY: 711)**... ATTENZIONE: In caso la lingua parlata sia l'italiano, sono disponibili servizi di assistenza linguistica gratuiti. Chiamare il numero che appare sulla tessera identificativa **(TTY: 711)**... ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Wählen Sie die Nummer, die sich auf Ihrer Versicherungskarte befindet **(TTY: 711)**... 注意事項：日本語を話される場合、無料の言語支援をご利用いただけます。お手持ちの ID カードに記載されている電話番号までご連絡ください **(TTY: 711)**...

توجه: اگر به زبان فارسی گفتگو می کنید، تسهیلات زبانی بصورت رایگان برای شما فراهم می باشد. با شماره تلفن روی کارت شناسایی تان تماس بگیرید **(TTY: 711)**...

Díí baa akó nínizin: Díí saad bee yáníłti'go Diné Bizaad, saad bee áká'ánída'áwo'déé', t'áá jiik'eh, éí ná hólq, námboo ninaaltsoos yézhí, bee nées ho'dółzin bikáá'ígíí bee hólne' **(TTY: 711)**...

ملحوظة: إذا كنت تتحدث اذكر اللغة، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان. اتصل برقم الهاتف الموجود على بطاقة الهوية الخاصة بك **(TTY: 711)**.

GCHK42UEN 0220

This communication does not guarantee benefits and does not indicate all services received will be covered by your plan. Please refer to your Evidence of Coverage or call Customer Service at the number on the back of your Humana ID card to confirm that the service will be covered by your plan.