Comprehensive Diabetes Care (CDC)

Diabetes is a common and costly disease. About 26.5 million Americans currently have diabetes, and 7 million of these cases are undiagnosed. Complications from diabetes cost the U.S. nearly $245 billion each year. Diabetes is also the seventh leading cause of death in the United States. Many complications, such as amputation, blindness, cardiovascular disease, and kidney failure, can be prevented if detected and addressed early.ii iii

HEDIS MEASURE DEFINITION
Patients 18–75 years old with diagnosis of diabetes (Type 1 and Type 2) in compliance with the following:

- HbA1c control
- Retinal eye exam
- Medical attention for nephropathy
- Blood pressure controliv

INFORMATION PATIENT MEDICAL RECORDS SHOULD INCLUDE

HbA1c results:
- HbA1c results (HbA1c should be completed 2-4 times each year)
- The last HbA1c result of the year counts towards the HEDIS score

Retinal eye exam results: Eye exam reports received from an eye care professional for your patient with diabetes:
- Review the report and note if there are any abnormalities. If so, add the abnormalities to the patient’s active problem list and indicate what and when follow up is needed.
- Place the report in the patient’s medical record.

Blood pressure readings: The last blood pressure reading of the year must be less than 140/90 to show evidence of control.

Nephropathy screening test: Patients with diabetes must have a nephropathy screening test or there must be evidence of medical attention for nephropathy during the current year (and every year).
- Documentation should include at least 1 of the following, reported yearly:
  - Urine microalbumin screening
- Treatment with an ACE/ARB
- Evidence of CKD stage 4, ESRD

**INFORMATION PATIENT CLAIMS SHOULD INCLUDE**

**HbA1c results:** When conducting an HbA1c in your office, submit the results on the HbA1c claim with the appropriate CPT® II Code:

<table>
<thead>
<tr>
<th>CPT® II Code:</th>
<th>Most recent HbA1c level</th>
</tr>
</thead>
<tbody>
<tr>
<td>3044F</td>
<td>&lt; 7%</td>
</tr>
<tr>
<td>3045F</td>
<td>7.0 – 9.0%</td>
</tr>
<tr>
<td>3046F</td>
<td>&gt; 9%</td>
</tr>
</tbody>
</table>

**Retinal eye exam results:** When results are received from an eye care professional and the member is on a Medicare Advantage plan, submit the results on a $0.01 claim with one of the following CPT II codes as appropriate:

<table>
<thead>
<tr>
<th>CPT® II Code:</th>
<th>Retinal eye exam findings</th>
</tr>
</thead>
<tbody>
<tr>
<td>2022F</td>
<td>Dilated retinal eye exam with interpretation by an ophthalmologist or optometrist documented and reviewed</td>
</tr>
<tr>
<td>3072F</td>
<td>Low risk for retinopathy (no evidence of retinopathy in the prior year)</td>
</tr>
</tbody>
</table>

**Nephropathy screening:** To report evidence of medical attention for nephropathy during the current year, patient claim should include:

<table>
<thead>
<tr>
<th>CPT® II Code:</th>
<th>Situation</th>
</tr>
</thead>
<tbody>
<tr>
<td>4010F</td>
<td>Use when you prescribe an ACE/ARB</td>
</tr>
<tr>
<td>3066F</td>
<td>Use to indicate kidney transplant or nephrology visit</td>
</tr>
</tbody>
</table>

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i HEDIS is a registered trademark of the National Committee for Quality Assurance (NCQA).
iv Peter Bach et al. HEDIS 2018 Technical Specifications for Health Plans (National

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