

Measure:

Comprehensive Diabetes Care (CDC): Hemoglobin A1c (HbA1c) testing

Measure Description:

The percentage of patients 18-75 years of age with diabetes (Type 1 and Type 2) who had: Hemoglobin A1c (HbA1c) testing

Data Source:	NQF #:	
MMIS	0057	
Measure Steward:	Measure Steward Version:	
NCQA	2013	
Measure Calculation Description		
Numerator:		

An HbA1c test performed during the measurement year. (Table 29.1)

Table 29.1: Codes to Identify HbA1c Tests

Description	CPT
HbA1c Tests	83036, 83037

Denominator:

Of the hospital's New Jersey Low Income population, those patients aged 18-75 years of age as of December 31 of the measurement year who had a diagnosis of diabetes (type 1 or type 2).

Two methods are provided to identify patients with diabetes during the measurement year, or the year prior to the measurement year.

1. Pharmacy data – Patients who were dispensed insulin or oral hypoglycemic/ antihyperglycemics during the measurement year or the year prior to the measurement year. (Table 29.2) (Refer to Appendix A-15 for NDC codes)

Description		Prescription	
Alpha-glucosidase inhibitors	Acarbose	• Miglitol	
Amylin analogs	Pramlinitide		
Antidiabetic combinations	 Glimepiride-pioglitazone Glimepiride-rosiglitazone Glipizide-metformin 	Glyburide-metforminMetformin-pioglitazoneMetformin-rosiglitazone	 Metformin- sitagliptin Saxagliptin Sitagliptin- simvastatin
Insulin	 Insulin aspart Insulin aspart-insulin aspar protamine Insulin detemir Insulin glargine 	 Insulin isophane human Insulin isophane-insulin Insulin lispro Insulin lispro-insulin lispro-insulin 	n regular

Table 29.2: Prescriptions to Identify Patients With Diabetes



	Insulin glulisineInsulin inhalationInsulin isophane beef-pork	Insulin regular humanInsulin zinc human	
Meglitinides	Nateglinide	Repaglinide	
Miscellaneous antidiabetic agents	• Exenatide	• Liraglutide • Metformin- repaglinide	• Sitagliptin
Sulfonylureas	AcetohexamideChlorpropamide	GlimepirideGlipizideGlyburideTolazamide	Tolbutamide
Thiazolidinediones	Pioglitazone	Rosiglitazone	

2. Claims data -

- a. Patients who had two face-to-face encounters, in an outpatient setting or nonacute inpatient setting (Table 29.3), on different dates of service, with a diagnosis of diabetes. (Table 29.4)
- b. Patients who had one face-to-face encounter in an acute inpatient or ED setting (Table 29.3), with a diagnosis of diabetes (Table 29.4), during the measurement year or the year prior to the measurement year. Services may be counted over both years.

Table 29.3: Codes to Identify Visit Type

Description	СРТ	UB Revenue
Outpatient	99201-99205, 99211-99215, 99217-99220, 99241- 99245, 99341-99345, 99347-99350, 99384-99387, 99394-99397, 99401-99404, 99411, 99412, 99420, 99429, 99455, 99456	051x, 0520-0523, 0526-0529, 057x- 059x, 082x-085x, 088x, 0982, 0983
Nonacute inpatient	99304-99310, 99315, 99316, 99318, 99324-99328, 99334-99337	0118, 0128, 138, 0148, 0158, 019x, 0524, 0525, 055x, 066x
Acute inpatient	99221-99223, 99231-99233, 99238, 99239, 99251- 99255, 99291	010x, 0110-0114, 0119, 0120-0124, 0129, 0130-0134, 0139, 0140-0144, 0149, 0150- 0154, 0159, 016x, 020x, 021x, 072x, 0987
ED	99281-99285	045x, 0981

Table 29.4: Codes to Identify Diabetes

Description	ICD-9-CM Diagnosis
Diabetes	250, 3572, 3620, 36641, 6480

Exclusion(s):

- 1. Diagnosis of active polycystic ovaries. (Table 29.5)
- 2. Diagnosis of active gestational diabetes. (Table 29.5)
- 3. Diagnosis of active steroid induced diabetes. (Table 29.5)

Table 29.5: Codes to Identify Required Exclusions

Description	ICD-9-CM Diagnosis		
Gestational Diabetes	6488, 64880, 64881, 64882, 64883, 64884		
Steroid induced diabetes	2518, 9620		
Polycystic ovaries	2564		



Result:

The result is expressed as a percentage.

Measure Qualifications:

The following link(s) may be used to obtain additional information regarding the original measure specification. This is provided without assurances.:

http://www.ncqa.org/HEDISQualityMeasurement/HEDISMeasures.aspx

Measure Collection Description			
Setting of Care:		Reporting Period:	
Multi-setting		Annual; April	
Experience Period:		Baseline Period:	
Calendar Year		CY 2013	
Improvement Target Goal (ITG):	Absolute ITG Value:	
NA		NA	
Attribution Date:		Anchor Date:	
Last day of measurement period		Last day of measurement period	
Claim Type(s): 01, 03, 04, 12, 13, 14, 15, 16, 18	01 - Inpatient Hospital 02 - Long Term Care 03 - Outpatient Hospital 04 - Physician 05 - Chiropractor 06 - Home Health 07 - Transportation 08 - Vision	09 – Supplies, DME 10 – Podiatry 11 – Dental 12 – Pharmacy 13 – EPDST/Healthstart 14 – Institutional Crossover 15 – Professional Crossover	 16 - Lab 17 - Prosthetic and Orthotics 18 - Independent Clinic 19 - Psychologists 21 - Optometrists 22 - Mid Level Practitioner 23 - Hearing Aid
Continuous Eligibility Period: Y	es	Risk Adjustment: No	Sampling: No

Continuous Eligibility/ Risk Adjustment/ Sampling Methodology

The patient is to be continuously enrolled for the measurement year with no more than a 45 day gap during the year.

DSRIP Incentive Impact			
Project Title:	Project Code:	Payment Method:	
Project 11 – Improve Overall Quality of Care for Patients	11.4	Pay for Reporting	
Diagnosed with Diabetes Mellitus and Hypertension			
Project Title:	Project Code:	Payment Method:	
Project 12 – Diabetes Group Visits for Patients and	12.4	Pay for Reporting	
Community Education			
Universal Measure:	Universal Code:	Payment Method:	
No	NA	NA	