

2024 Star Measure Tips



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One in a series of tip sheets that look at key Healthcare Effectiveness Data and Information Set measures, commonly referred to as HEDIS® measures.

Glycemic Status Assessment for Patients with Diabetes (GSD)

Effectiveness of Care HEDIS® Measure

Measure description

Percentage of diabetic patients whose glycemic status was adequately controlled.

Measure population (denominator)

Patients 18-75 years old with diabetes (Type 1 or Type 2).

Either of the following during the measurement year or the year prior to the measurement year:

- **Encounter data:** at least two diagnoses of diabetes on different dates of service
- **Pharmacy data:** dispensed insulin or hypoglycemics/antihyperglycemics AND have at least one diagnosis of diabetes
 - This includes semaglutides

Did you know?

- Small changes in diet and exercise can significantly impact diabetes.
- Diabetes is one of the nation's leading causes of death and disability.
- Type 1 diabetes occurs at every age and in people of every race, shape and size.

Diabetes medications

Alpha-glucosidase inhibitors	Amylin analogs	Antidiabetic combinations	Biguanides
Insulin	Meglitinides	Sulfonylureas	Thiazolidinediones
Glucagon-like peptide-1 (GLP I) agonists	Dipeptidyl peptidase-4 (DDP-4) inhibitors	Sodium glucose cotransporter 2 (SGLT2) inhibitor	

Measure compliance (numerator)

The last glycemic status assessment of the measurement year. The result must be ≤ 9% to show evidence of control. Documentation of either of the following that includes the result and date performed are acceptable:

- Hemoglobin A1c (HbA1c)
- Glucose Management Indicator (GMI)

continued



Exclusions

- Received hospice services any time during the measurement year
- Are age 66 and older with advanced illness and frailty (for additional definition information, see the *Advanced Illness and Frailty Guide*)
- Deceased during the measurement year
- Received palliative care during the measurement year

Helpful HEDIS hints

- HbA1c should be completed two to four times each year and include the result date and distinct numeric result.
- Order labs to be completed prior to patient appointments.
- Educate patients about the importance of routine screening and medication compliance.
- Review diabetic services needed at each office visit.
- Patient-reported HbA1c or GMI results are acceptable as long as the date and result are documented in the medical record.
- The glucose management indicator (GMI) value reported from a continuous glucose monitor (CGM) is acceptable.

Note: HbA1c home kits (e.g., patient purchased from drug store) are not acceptable. The test must be processed in a lab.

Tips for coding

When HbA1c reports are received, or the patient reports their HbA1c results, submit the appropriate CPT® II code on a \$0.01 claim.

CPT® II code	Most recent HbA1c
3044F	< 7%
3046F	> 9%
3051F	≥ 7% and < 8%
3052F	≥ 8% and ≤ 9%

Document and bill exclusions annually (see the *Advanced Illness and Frailty Guide* for details).

Resources

1. American Diabetes Association (ADA). 2022. "The Path to Understanding Diabetes Starts Here." diabetes.org/diabetes
2. Centers for Disease Control and Prevention (CDC). 2022. "Diabetes and Prediabetes." cdc.gov/chronicdisease/resources/publications/factsheets/diabetes-prediabetes.htm

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