



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 1) 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 $\leq 9\%$ 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 results are acceptable as long as the date and result are documented in the medical record.
- The glucose management indicator (GMI) value is acceptable from:
 - A continuous glucose monitor (CGM)
 - Patient reported

The date range used must be documented. The last date in the range should be used to assign the GMI date. (GMI is only captured through LOINC codes)

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

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

Resources

1. American Diabetes Association (ADA). 2024. "The Path to Understanding Diabetes Starts Here." diabetes.org/about-diabetes
2. Centers for Disease Control and Prevention (CDC). 2024. "Testing for Diabetes and Prediabetes: A1c." cdc.gov/diabetes/diabetes-testing/prediabetes-a1c-test.html

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