

2023 Star Measure Tips



Confidence comes with every card.®

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

Hemoglobin A1c Control for Patients with Diabetes (HBD)

Effectiveness of Care HEDIS® Measure

Measure description

Percentage of diabetic patients whose HbA1c was adequately controlled.

Measure population (denominator)

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

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

- Two or more outpatient visits on different dates of service with a diagnosis of diabetes
- One acute inpatient stay with a diagnosis of diabetes
- Patients dispensed insulin or hypoglycemics/antihyperglycemics
 - This includes Semaglutides (except for Wegovy® given for weight loss).
 - Glucophage/Metformin as a solo agent is not included because it's used to treat conditions other than diabetes. Patients with diabetes on these medications are identified through diagnosis codes only.

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.

Measure compliance (numerator)

The last HbA1c of the measurement year. The result must be $\leq 9\%$ to show evidence of control.

Exclusions

- Patients who did not have a diagnosis of diabetes during the measurement year or the year prior and who had a diagnosis of:
 - Polycystic ovarian syndrome or
 - Gestational diabetes or
 - Steroid-induced diabetes

continued



Exclusions (continued)

- 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.

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 level
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). July 2022. "About Chronic Diseases."
<https://www.cdc.gov/chronicdisease/about/index.htm#:~:text=Chronic%20diseases%20such%20as%20heart,in%20annual%20health%20care%20costs>

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