

Glycemic Status Assessment for Patients With Diabetes (GSD) Formerly HBD

Description of Measure

The percentage members ages 18-75 years of age with Type 1 and Type 2 diabetes, who most recent glycemic status (hemoglobin A1c or glucose management indicator) was at the following levels during the measurement year (MY).¹

- Glycemic Status \leq 9.0%

Members may be identified as having diabetes in the year prior (PY) or during the MY.

Members are identified by the following:

- Claims/encounter data – Members had at least two diagnoses of diabetes on different dates of service during the PY or MY.
- Pharmacy data – Members who were dispensed insulin or hypoglycemics/antihyperglycemics during the MY or PY **and** at least one diagnosis of diabetes during the MY or PY.

Documentation

- Documentation in the medical record must include a date when the glycemic status assessment (HbA1c or GMI) was performed and resulted.
- GMI values must include documentation of the continuous glucose monitoring data date range used to derive the value. The recommended date range is 10 - 14 days. The terminal date in the range should be used to assign assessment date.
Example: CGM May 1-14, 2024 – mean glucose level is 107mg/dl. GMI 7.2% - May 14, 2024
- Print out from the continuous blood glucose monitor that includes the date range, average blood glucose level and the GMI.
- Members reported glycemic status assessment (HbA1c or GMI) are eligible for reporting.
- Ranges and thresholds do not meet criteria. A distinct numeric result is required.

CPTII Code	A1c Value
3044F	< 7.0%
3051F	7.0% - 7.9%
3052F	8.0% - 9.0%
3046F	> 9.0%



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Exclusions

Exclusions	Time limit								
<ul style="list-style-type: none"> ■ Members in or using hospice or services ■ Members who died ■ Members receiving palliative care 	Any time during MY								
<p>Members 66 years of age and older by Dec. 31 MY with Advanced Illness and Frailty.</p> <p>Members must meet BOTH frailty and advanced illness criteria to be excluded.</p>	<ul style="list-style-type: none"> ■ Frailty diagnosis on 2 different DOS during the MY ■ Advanced Illness: Either of the following during the MY or PY <ul style="list-style-type: none"> - Advanced illness diagnosis on 2 different DOS - Dispensed a dementia medication <table border="1" data-bbox="699 600 1500 890"> <thead> <tr> <th data-bbox="699 600 1117 684">Dementia Med Description</th> <th data-bbox="1117 600 1500 684">Prescription</th> </tr> </thead> <tbody> <tr> <td data-bbox="699 684 1117 800">Cholinesterase inhibitors</td> <td data-bbox="1117 684 1500 800"> <ul style="list-style-type: none"> • Donepezil • Galantamine • Rivastigmine </td> </tr> <tr> <td data-bbox="699 800 1117 842">Misc. CNS Agents</td> <td data-bbox="1117 800 1500 842"> <ul style="list-style-type: none"> • Memantine </td> </tr> <tr> <td data-bbox="699 842 1117 890">Dementia Combinations</td> <td data-bbox="1117 842 1500 890"> <ul style="list-style-type: none"> • Donepezil-memantine </td> </tr> </tbody> </table>	Dementia Med Description	Prescription	Cholinesterase inhibitors	<ul style="list-style-type: none"> • Donepezil • Galantamine • Rivastigmine 	Misc. CNS Agents	<ul style="list-style-type: none"> • Memantine 	Dementia Combinations	<ul style="list-style-type: none"> • Donepezil-memantine
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<p>Tips for Success</p>	<ul style="list-style-type: none"> ■ HbA1c testing should be completed 2 -4 times annually with result date and distinct numeric result ■ If test results are documented in the progress note, please include the date and result of the A1c ■ Review diabetic services needed at each office visit ■ Order labs to be completed prior to patient appointments ■ Refer patients to disease management or a certified diabetic educator as needed ■ Utilize the Annual Wellness Visit to document a screening schedule ■ Appointment frequency protocol for patients with diabetes every 3 – 6 months ■ Utilize a diabetic EMR template that includes A1c, Med Adh, Statin use, Eye exam, urine protein and foot exam elements ■ Recommend earlier follow up appointments after treatment plan changes

Resources

- I. National Committee for Quality Assurance, HEDIS® Measurement Year 2024 Volume 2 Technical Specifications for Health Plans

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