Diabetes Care – Blood Sugar Controlled

Who: All members aged 18-75 years with a diagnosis of type 1 or type 2 diabetes during the measurement year. (Measurement year: the 12-month timeframe between January 1st - December 31st in which the service was rendered).

Why: It's vital that all patients with a diagnosis of diabetes receive appropriate care. People with diabetes are at increased risk of serious health complications including vision loss, heart disease, stroke, kidney failure, amputation of toes, feet or legs, sexual dysfunction, pregnancy complications, and premature death.

What: Percentage of members with diabetes (Types 1 and 2) ages 18-75 whose most recent glycemic status (hemoglobin A1c [HbA1c] or glucose management indicator [GMI]) was at the following levels during the measurement year:

- Glycemic Status <8.0%
- Glycemic Status >9.0%

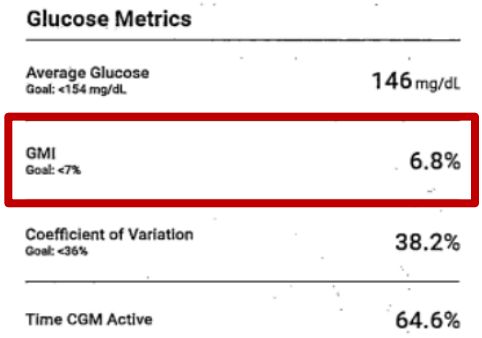
The last glycemic status of the measurement year is to be used.

- **How: HgbA1c collected**
  - At-home point-of-care tests do not count
  - At-home blood spot tests count when processed by a laboratory or provider's office
- **GMI collected via continuous glucose monitoring reports. Reports must be viewable or GMI value documented in the chart.**

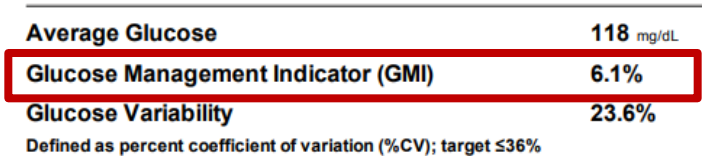
Recent Changes to the Measure

- **Name Change:** Formerly *"Hemoglobin A1c Control for Patients with Diabetes"*
- **Data Source(s) for Measure:**
  - Formerly - HgbA1c (blood test) was the only acceptable measurement
  - Now – "Glycemic Status" includes HgbA1c (blood test) **&/or** GMI (from CGM report) are both acceptable measurements
- Glucose management indicator (GMI) was added as an option to meet numerator criteria.
- Continuous glucose monitoring (CGM) data is acceptable – this is where you find the GMI.
- "Glycemic Status" – HgbA1c (blood test) or GMI (from CGM data) are the 2 sources to meet the measure.
- GMI is the average derived from CGM data (usually over a 3-month period (see examples). Note: if the GMI is not listed on the report, CGM average data cannot be used (i.e. manually calculated).

Dexcom Example



Libre Example



Coding: Blood glucose is identified through claims that indicate results.

- HbA1C: Submit claims for both the test and result
  - Lab Test

HgbA1c Lab Test	CPT-: 83036, 83037

  - Result

HbA1c <7%	CPT-CAT-II: 3044F
HbA1c ≥7% & <8%	CPT-CAT-II: 3051F
HbA1c ≥8% & <9%	CPT-CAT-II: 3052F
HbA1c >9%	CPT-CAT-II: 3046F

- Glucose Management Indicator
- If sharing GMI data electronically with a health plan (not through claims), map GMI to LOINC code 97506-0 with the GMI result value and unit

Type	Code	Example Result	Result Unit
LOINC	97506-0	7.5	%

Exclusions:

- Members in hospice or using hospice services during the measurement year.
- Members receiving palliative care anytime during the measurement year.
- Members who die any time during the measurement year.
- Members 66 years of age or older that are:
  - Enrolled in an institutional SNP (I-SNP) during the measurement year -or-
  - Living long-term in an institution during the measurement year.
- Members aged 66 or older with both frailty **and** advanced illness.

Cut Points: Cut points demonstrate the rates that need to be reached to achieve the specific star rating.

- **1 Star:** Less than 54%
- **2 Star:** 54% to less than 77%
- **3 Star:** 77% to less than 87%
- **4 Star:** 87% to less than 91%
- **5 Star:** Greater than or equal to 91%

Data info:

- **Performance Measure Set:** Medicare Star Measure

- **Quality Measurement Type:** Process
- **Data Type:** Claims
- **CMS National Average:** 84%

Tips for Success:

- Encourage patients who use a Continuous Glucose Monitor (CGM) to also use their EMR Portal (i.e. MyChart, AthenaPatient, etc.) to upload their blood sugar data. Show them where to find assistance, if needed.
- Since the last value in the year is used, have the patient repeat an elevated test prior to the end of the year.
- Educate patients about healthy lifestyle choices
- Utilize extended care team members to support the health and well-being of those with diabetes. Clinical pharmacists, behavioral health clinicians, registered dieticians, care managers, and traditional health workers, all have a role to play from the medical, pharmaceutical, cultural, and social-emotional aspects of managing diabetes.
- Establish workflows where the Behavioral Health Clinician (BHC) sees patients who are newly diagnosed with diabetes and patients with an HbA1c over 9.0%. BHCs work with patients on behavior and lifestyle changes that support diabetes control. BHCs can assess and support risk factors (e.g., binge eating, substance use, mood disorders) that can contribute to poor control.
- Refer patients to Dieticians (RDN or CDE) for diabetes education and support when appropriate.
- Clinics ask patients and/or scrub their schedule to assure those who need labs are connected for scheduling or same-day appointment. Those who have been working on improving DM management and/or are close to 9% can be identified as good candidates for being retested.
- Retesting patients that resulted in HbA1c above 9%. Many clinics that re-test their patients have seen an improvement in test results after engaging in care.

Resources:

- ADCES (Association of Diabetes Care & Education Specialists) https://www.adces.org/ has numerous free trainings
- Poster: "*42 Factors that affect Blood Sugar*" https://api.diatribe.org/sites/default/files/2024-05/42factorsposter.png
- Booklet: "*42 Factors that affect Blood Sugar*" chrome-extension://efaidnbmnnnibpcajpcglclefindmkaj/https://diatribe.org/sites/default/files/2024-05/42factorsexplainedoctober2019.pdf
- 3 Metrics to Leverage in the AGM Report (Reading a CGM report): chrome-extension://efaidnbmnnnibpcajpcglclefindmkaj/https://www.timeinrange.org/wp-content/uploads/2025/06/What-is-the-AGP-report-1.pdf