

## Kidney Health Evaluation for Patients with Diabetes (KED)

**Who:** All members aged 18–85 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 members 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:** The percentage of members 18–85 years of age with diabetes (type 1 and type 2) who received a kidney health evaluation within the measurement year.

**How:** Yearly blood test for eGFR AND urine test(s) for Albumin and Creatinine.

**The yearly evaluation must include BOTH 1 AND 2:**

1. Estimated glomerular filtration rate (eGFR)
  - Member-collected samples, such as blood spots, may be used. Samples must be sent to a laboratory or provider’s office for analysis.
2. Urine Albumin-Creatinin test (one option)
  - uACR – **or** –
  - Quantitative Urine Albumin and a Urine Creatinine test within four days of each other

### Coding:

Element	Type	Code(s)	Description
1	CPT	80047-80048, 80050, 80053, 80069, 82565	Estimated GFR Lab test (eGFR)
2a	LOINC	13705-9, 14958-3, 14959-1, 30000-4, 44292-1, 59159-4, 76401-9, 77253-3, 77254-1, 89998-9, 9318-7	Urine Albumin Creatinine Ratio (uACR) Lab Test If this test not done, both tests in #2b must be done
2b	CPT	82043 (Quantitative Urine Albumin) 82570 (Urine Creatinine)	Quantitative Urine Albumin – and – Urine Creatinine Test w/in 4 days of one another

### Exclusions:

- Members in hospice or using hospice services during the measurement year.
- Members receiving palliative care any time during the measurement year.
- Members who die any time during the measurement year.
- Members with evidence of ESRD or dialysis any time during the member's history on or prior to December 31 of the measurement year.
- Members aged 66 to 80 with both advanced illness and frailty.
- Members 81 or older with two frailty indicators on different dates of service.
- Members aged 66 or older who are:
  - Living long-term in an institution during the measurement year -or-
  - Enrolled in an Institutional I-SNP during the measurement year.

### Tips for Success:

- At least yearly, patients with a diagnosis of diabetes for both eGFR and uACR A quantitative urine albumin and a urine creatinine test require service dates four or less days apart.
- Educate patients on how diabetes can affect the kidneys and offer tips to them on preventing damage to their kidneys.
- Collaborate with patients to control their blood pressure, blood sugars, cholesterol and lipid levels.
- Offer education on medications that could be harmful to the kidneys (NSAIDs such as naproxen or ibuprofen).
- Coordinate care with specialists such as an endocrinologist or nephrologist as needed.
- Utilize diabetes population management/registries
- Chart scrubbing
- Create health maintenance alerts in your EMR