



## Comprehensive diabetes care

This measure examines the percentage of adults ages 18-75 with diabetes (Type 1 and Type 2) who had each of the following completed annually:

- Hemoglobin A1C (HbA1C) screening test
- Medical attention to nephropathy
- Eye exam (retinal) performed (doesn't need to be completed annually if result was negative the previous year)
- Blood pressure control (<140/90 mm Hg)

### Controlling HbA1C

- <7% is optimal for most people
- <8% is acceptable in select populations\*
- >9% denotes poor control

For more details, see information on back and the corresponding tip sheet on retinal exams related to comprehensive diabetic care.

### Exclusions

Patients without a diagnosis of diabetes but with a diagnosis of one of the following during the current year or year prior:

- Gestational diabetes
- Steroid-induced diabetes

\*Select populations for HbA1C rate <8% include:

- Any prior or current history of dementia, blindness, stage 4 chronic kidney disease, end stage renal disease, lower extremity amputation, chronic heart failure, cardiomyopathy, thoracoabdominal or thoracic aortic aneurysm or has been diagnosed with atherosclerotic cardiovascular disease or has had a prior myocardial infarction
- If a patient turns 65 during the year or has undergone a coronary artery bypass graft or percutaneous coronary intervention — during the current or previous year

### Tips

**Comprehensive diabetes care measures are collected for HEDIS purposes from two key sources:**

- **Administrative data.** This can include data from claims, lab feeds, pharmacy data and standard supplemental data sources that have been audited, such as electronic medical records.
- **Data from chart reviews.** This is a random sample of medical records selected to review evidence of the data listed and the exclusions. Proper documentation of tests, dates, results and exclusions is essential for chart review purposes.

## HEDIS® requirements

- **HbA1C screening:** Need date and most recent result during current year in chart – use a distinct value for result, not threshold
- **Blood pressure control:** Need date and most recent result during current year in chart – use a distinct value for result, not threshold
- **Eye exam** (must include one of the following):
  - A letter from an eye care specialist, primary care physician or health professional documenting ophthalmoscopic exam by eye care professional, with date and results in current year
  - A chart or photograph of retinal abnormalities reviewed by an eye care professional, with date and results in current year
  - Documentation of a negative retinal exam by an eye care professional from the prior year – see Comprehensive Diabetes Care — Retinal Eye Exam tip sheet for more details
- **Medical attention to nephropathy:** Need a nephropathy screening test or evidence of nephropathy during the current year
  - Nephropathy screening test may include any of the following:
    - 24-hour, spot or timed urine test for microalbumin, with date and result
    - 24-hour urine total protein test, with date and result
    - Random urine test for microalbumin/creatinine or protein/creatinine ratio, with date and result
  - Evidence of nephropathy:
    - Documentation of visit to a nephrologist
    - Documentation of ACE or ARB medication prescribed during the current year
    - Documentation of renal transplant
    - Documentation of medical attention for end stage renal disease, chronic kidney disease, diabetic nephropathy, proteinuria/albuminuria, renal dysfunction or insufficiency, dialysis, acute or chronic renal failure

*\*HEDIS, which stands for Healthcare Effectiveness Data and Information Set, is a registered trademark of the National Committee for Quality Assurance.*