

Diabetes Management (2014)

Benchmark to qualify for bonus payments: At least 83.21% (50th percentile) or 87.32 (75th percentile) of patients with diabetes, age 18 to 75 years, who had Hemoglobin A1c (HbA1c) testing, during the measurement year on or before December 31, 2014.

Measurement Period: Calendar year 2014

Qualifying Service:

CPT Codes for HbA1c tests 83036 or 83037, 3044F, 3045F, 3046F

Qualifying Patients: Patients on the PCP's Illinois Health Connect panel roster as of December 1, 2014 will be identified as a member with diabetes if they:

- Had two face-to-face encounters with different dates of service in an outpatient/office visit or nonacute inpatient setting with diagnosis of diabetes (ICD-9 codes 250x, 357.2, 362.0-362.07, 366.41 or 648.0-648.04) during the measurement year (CY2014) or the year prior to measurement year (CY2013); or
- Had one face-to-face encounter in an acute inpatient or emergency department (ED) setting with diagnosis of diabetes (ICD-9 codes 250x, 357.2, 362.0-362.07, 366.41 or 648.0-648.04) during the measurement year (CY2014) or the year prior to measurement year (CY2013); or
- Were dispensed insulin or oral hypoglycemic/antihyperglycemics (see listed medications in table below) during the measurement year (CY2014) or the year prior to measurement year (CY2013).

Medications to Identify Members With Diabetes

Description	Medications		
Alpha-glucosidase inhibitors	Acarbose Miglitol		
Amylin analogs	Pramlinitide		
Antidiabetic combinations	 Alogliptin-metformin Alogliptin-pioglitazone Glimepiride-pioglitazone Glimepiride-rosiglitazone Glipizide-metformin Glyburide-metformin Linagliptin-metformin Metformin-pioglitazone Metformin-repaglinide Metformin-rosiglitazone Metformin-rosiglitazone Metformin-sixagliptin Sitagliptin-simvastatin 		
Insulin	 Insulin aspart Insulin aspart-insulin aspart protamine Insulin detemir Insulin isophane human Insulin isophane-insulin regular Insulin lispro 		

	Insulin glargine Insulin glulisine	 Insulin lispro-insulin lispro protamine Insulin regular human
Meglitinides	 Nateglinide 	Repaglinide
Miscellaneous antidiabetic agents	AlogliptinExenatideLinagliptin	LiraglutideSaxagliptin
Sulfonylureas	Chlorpropamide	 Glimepiride Glipizide Glipizide Tolazamide
Thiazolidinediones	Pioglitazone	Rosiglitazone

Note: Glucophage/metformin is not included because it is used to treat other conditions than diabetes; members with diabetes on these medications are identified through diagnosis codes only.

Codes to Identify Visit Type

Description	СРТ	UB Revenue
Outpatient	99201-99205, 99211-99215, 99217-99220, 99241-99245, 99341-99345, 99347-99350, 99381-99387, 99391-99397, 99401-99404, 99411, 99412, 99420, 99429, 99455, 99456	0510-0517,, 0519-0523, 0526-0529, , 0982, 0983
Nonacute inpatient	99304-99310, 99315, 99316, 99318, 99324-99328, 99334- 99337	0118, 0128, 0138, 0148, 0158, 0190-0194, 0199, 0524, 0525, 0550-0552, 0559-0663, 0669
Acute inpatient	99221-99223, 99231-99233, 99238, 99239, 99251-99255, 99291	0100, 0101, 0110-0114, 0119, 0120-0124, 0129, 0130-0134, 0139, 0140-0144, 0149, 0150-0154, 0159, 0160, 0164-0167, 0169, 0200-0214, 0219, 0720-0724, 0729, 0987
ED	99281-99285	0450-0452, 0456, 0459, 0981

Codes to Identify Exclusions:

Polycystic ovaries 256.4, Gestational or Steroid-Induced Diabetes 249x, 251.8, 648x, 962.0

Reference: http://professional.diabetes.org/ResourcesForProfessionals.aspx?cid=84
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