

Hemoglobin A1c Control for Patients with Diabetes (HBD)

HEDIS® Measurement Year 2023

Measure Description: The percentage of members 18-75 years of age in the measurement year with a diagnosis of diabetes (Type 1 and Type 2) whose hemoglobin A1c was at the following levels during the measurement year:

- HbA1c control (<8.0%)
- HbA1c poor control (>9.0%) (inverted rate)

A level less than 9.0% indicates better performance.

Eligible Population

- Members 18-75 years of age with a diagnosis of diabetes (Type 1 and 2).
- Members who are in hospice or palliative care are excluded from the eligible population.

Measure Compliance (numerator) -HbA1c Testing and Results

Identify the most recent HbA1c test and result during the measurement year. The member is numerator compliant if the result is <8.0%.

The member is not numerator compliant if the result for the most recent HbA1c test is ≥8.0% or is missing a result, or if a test was not done during the measurement year.

At a minimum, documentation in the medical record must include a note indicating the date when the HbA1c test was performed and the result.

Hybrid Measure Note:

The HBD measure is hybrid. Any care not received via claims during the measurement year will result in medical record requests during the HEDIS medical record review project.

Numerator Codes

The complete NCQA approved code set list can be referenced in the coding guide at healthplan.org/providers/patient-care-programs/ quality-measures.

For questions, please contact your practice management consultant. To identify your practice management consultant please refer to healthplan.org/providers/overview/meetpractice-management-consultant.

Code Type	Codes	Description
СРТ	83036, 83037	Diabetes Hemoglobin A1c testing
CPT-CAT-II	3044F	HbA1c less than 7.0%
CPT-CAT-II	3046F	HbA1c greater than 9.0%
CPT-CAT-II	3051F	HBA1c greater than 7.0% and less than 8.0%
CPT-CAT-II	3052F	HbA1c greater than or equal to 8.0% and less than or equal to 9.0%





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Exclusions

Members are excluded from the measure if they meet the following criteria:

- Members 66 years of age and older as of Dec. 31 of the measurement year who have both a frailty and an advanced illness diagnosis.
- Members with a diagnosis of Polycystic ovarian syndrome, gestational diabetes or steroid induced diabetes during the measurement year or the year prior to the measurement year and do not have a diagnosis of diabetes during the measurement year or the year prior to the measurement year.

The Health Plan has a team of member advocates, health coaches, social workers and nurses who can assist you and your patients to remove or overcome any barriers to care through benefit assistance, community resource referrals or enrollment in a THP clinical program. To refer a patient who is a THP member for assistance, call 1.877.903.7504 and let us know what we can do to help your patient receive and adhere to your recommended plan of care.

