

Glycemic Status Assessment for Patients with Diabetes Flowchart

Who: Adult population (**18-75** years old) diagnosed with **Type 1 or 2 Diabetes**
How: Completion of either Hemoglobin A1c (HbA1c) or Glucose Management Indicator (GMI)
When: Every calendar year-include date test performed and test result

CPT® II code the most recent HbA1c result and attach the code to a \$0.01 penny claim -
3044F < 7% **3051F ≥ 7% and < 8%**
3046F > 9% **3052F ≥ 8% and ≤ 9%**

NO reported HbA1c result for current measurement year

Measure NOT Met
Outreach to patient to obtain HbA1c test

Most recent HbA1c result > 9% (Medicare Plans) ≥8% (Commercial Plans)

Measure NOT Met
Outreach to patient to obtain HbA1c repeat test in 3 months
Focus on diet, exercise, and medication compliance

Most recent HbA1c result ≤ 9% (Medicare Plans) < 8% (Commercial Plans)

Measure MET
No further testing unless symptomatic