

## Diabetes Coding for HEDIS

The Diabetes HEDIS measure is comprised of four individual measures and can be reported using CPT or CPT II codes. Below are the codes that correspond to the results of each measurement.

Measure	GSD - Glycemic Status Assessment for Patients with Diabetes	
Codes	Type	Description
3044F	CPT II	Most recent HbA1c level < than 7.0%
3051F	CPT II	Most recent HbA1c level $\geq$ 7.0% and < 8.0%
3052F	CPT II	Most recent HbA1c level $\geq$ 8.0% and $\leq$ 9.0%
3046F	CPT II	Most recent HbA1c level > than 9.0%

Measure	KED - Kidney Health Evaluation for Patients with Diabetes – One code from each group (eGFR test and both uACR tests).		
Codes	Type		Description
80047	CPT	eGFR (blood test)	Basic metabolic panel (Calcium, ionized)
80048			Basic metabolic panel (Calcium, total)
80050			General health panel
80053			Comprehensive metabolic panel
80069			Renal function panel
82565			Creatinine; blood
82043	CPT	+ uACR	Albumin; urine (eg, microalbumin), quantitative
82570	CPT	+ uACR	Creatinine; other source

Measure	BPD - Blood Pressure Control for Patients with Diabetes	
Code	Type	Description
3074F	CPT II	Most recent systolic blood pressure less than 130 mm Hg
3075F	CPT II	Most recent systolic blood pressure 130 – 139 mm Hg
3077F	CPT II	Most recent systolic blood pressure greater than or equal to 140 mm Hg
3078F	CPT II	Most recent diastolic blood pressure less than 80 mm Hg
3079F	CPT II	Most recent diastolic blood pressure 80-89 mm Hg
3080F	CPT II	Most recent diastolic blood pressure greater than or equal to 90 mm Hg

Measure	EED - Eye Exam for Patients with Diabetes	
Code	Type	Description
2022F, 2024F, 2026F	CPT II	Primary care Physician Positive exam
3072F, 2023F, 2025F, 2033F	CPT II	Primary care Physician Negative exam
92229	CPT	Automated eye exam during the measurement year- can be submitted by any provider type.

Please note, correct coding and submission of claims is the responsibility of the submitting provider. Submitting the correct CPT II code helps inform us that you have provided the service and may decrease the need for us to request medical records to review for this information.