



NETWORK *Notification*

Notice Date: August 19, 2024
To: Georgia, Indiana, Kentucky, North Carolina, Ohio, and West Virginia
Marketplace Providers
From: CareSource
Subject: Kidney Health Evaluation for Patients with Diabetes

Summary

To improve quality of care and health outcomes related to chronic kidney disease (CKD) the National Committee for Quality Assurance® (NCQA), in partnership with the National Kidney Foundation®, created a diabetes related HEDIS® measure, Kidney Health Evaluation for Patients with Diabetes (KED).

Importance

In the United States, 37 million adults are estimated to have CKD, and more than 90 percent are unaware of it. One in three American adults are at risk for CKD based on risk factors including diabetes, high blood pressure, heart disease, obesity, and family history. Underrepresented groups are at increased risk for developing CKD. African Americans are three times more likely than Whites, and Hispanics are nearly 1.5 times more likely than non-Hispanics to develop end-stage renal disease (kidney failure).

Measures	CPT Codes
KED	80047, 80048, 80050, 80053, 80069, 82565, 82043, 82570
Other Important Measures and CPT Codes	
Blood Pressure Control for Patients with Diabetes (BPD)	3074F, 3075F, 3077F, 3078F, 3079F, 3080F
Glycemic Status Assessment for Patients with Diabetes (HbA1c with Documented Results)	3044F Most recent A1C < 7.0% 3046F Most recent A1C > 9.0% 3051F Most recent A1C ≥ 7.0% & < 8.0% 3052F Most recent A1C ≥ 8.0% & < 9.0%
Eye Exam for Patients with Diabetes (Exam by Eye Care Professional)	2022F, 2023F, 2024F, 2025F, 2026F, 2033F, 3072F

Using CPT II codes will help:

- * Improve Health Outcomes
- * Improve HEDIS® Measurement
- * Reduce Medical Record Requests

Provider Best Practices

Educate patients the importance of preventing kidney damage by controlling blood pressure, blood sugars, cholesterol, and lipid levels by:

- ✓ Taking angiotensin-converting enzyme (ACEs) inhibitors or angiotensin receptor blockers (ARBs), as prescribed,
- ✓ Avoiding potentially harmful medications such as naproxen and ibuprofen; and
- ✓ Limiting protein and salt in diet.

Coordinate patient care with endocrinologists and/or nephrologists, as needed.

Ensure that patients have an estimated glomerular filtration rate (eGFR) and urine albumin-to-creatinine ratio (uACR) each calendar year by ordering annual labs or adding HEDIS® gap alerts to the EHR system.

Completing the KED provides you with essential information to diagnose CKD and to engage in shared decision making to create an effective treatment plan with the member.

Submit lab codes for uACR or submit separate quantitative urine albumin and urine creatinine tests that occur within four days of each other (a urine albumin test is **not** sufficient).

Verify that your lab is coding the uACR correctly. Refer to HEDIS® specifications when billing for these services to ensure coding accuracy, gap closure, and compliance.

Questions?

If you have questions about HEDIS® measures, please feel free to contact your Provider Engagement Team Representative or Health Partner Services at **1-833-230-2101**.

Note: The MyHealth Rewards program is available to adult CareSource members and can help you increase your quality scores related to diabetes care. Once claims for A1c, Kidney Health (eGFR AND uACR), and/or retinal eye exam are received and processed, members can log into their [My CareSource®](#) portal account to redeem beyond \$75 in gift cards to a variety of retailers.

Resource:

Kidney disease statistics for the United States. (2024, March 5). National Institute of Diabetes and Digestive and Kidney Diseases.

Qualified Health Plans offered in North Carolina by CareSource North Carolina Co., d/b/a CareSource

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