

New Diabetes Care Measure:




Kidney Evaluation for Patients with Diabetes (KED)



Bridging the quality measure gap for Kidney Evaluation in Patients with Diabetes (KED) is critical for improving patient outcomes and preventing kidney disease progression. Regular kidney function screenings, including Urine Albumin and Creatinine level or Albumin/Creatinine Ratio (uACR), and Estimated Glomerular Filtration Rate (eGFR). Part of a Comprehensive Metabolic Panel to help identify early kidney damage. Maintaining tight control of blood sugar and blood pressure, with targeted levels for HbA1c and blood pressure, is essential to minimizing the risk of kidney-related complications.

The HEDIS® Measure

Evaluates adults 18-85 years of age with diabetes (type 1 and type 2) who received a kidney health evaluation, defined by an estimated glomerular filtration rate (eGFR), and a urine albumin creatinine ratio (uACR) during the measurement year.

-  **18-85 years** At least two diagnoses of diabetes on different dates of service during the measurement or prior year
-  **At least one prescription claim for insulin or oral hypoglycemic medication** dispensed in the 730 days before the end of the measurement period
-  **Must be continuously enrolled for the entire 365-day measurement period**, with no more than one gap of no more than 45 days

Closing the gap

To close the gap, evidence of both the estimated glomerular filtration rate (eGFR) and Urine Albumin and Creatinine level or Albumin/Creatinine Ratio (uACR), in addition to two patient identifiers, are required.

Test	Codes to be utilized when ordering lab test
Estimated Glomerular Filtration rate (eGFR) lab test	CPT*: 80047, 80048, 80050, 80053, 80069, 82565 LOINC: 50044-7, 50210-4, 50384-7, 62238-1, 69405-9, 70969-1, 77147-7, 94677-2, 98979-8, 98980-6
Urine albumin creatinine ratio lab test	LOINC: 13705-9, 14958-3, 14959-1, 30000-4, 44292-1, 59159-4, 76401-9, 77253-3, 77254-1, 89998 9, 9318-7
Quantitative urine albumin lab test	CPT: 82043 LOINC: 100158-5, 14957-5, 1754-1, 21059-1, 30003-8, 43605-5, 53530 -2, 53531-0, 57369-1, 89999-7
Urine creatinine lab test	CPT: 82570 LOINC: 20624-3, 2161-8, 35674-1, 39982-4, 57344-4, 57346-9, 58951-5 <i>Note: If ordered separately, Urine Albumin and Creatinine need to be performed within a four-day window.</i>

Best Practices

The following is a brief overview of helpful steps to keep in mind to ensure a successful new year.



Conduct regular kidney health evaluations for diabetic patients by utilizing electronic health record (EHR) systems to send automated reminders.



Work closely with endocrinologists, nephrologists, and diabetes educators to effectively manage the complexities of diabetic kidney disease.



Educate patients on the importance of kidney health, medication adherence, and lifestyle changes to empower them in their care.



Order eGFR and uACR (urine sample) prior to appointment as part of the Annual Wellness visit.



Make timely referrals to nephrologists for patients with significant kidney damage indicators, such as declining eGFR or proteinuria, to facilitate early intervention and specialized treatment.

Measure is closed via:

- Claims
- Consolidated Clinical Document Architecture (CCDA)
- SFTP/flat files

Note: The information provided above is meant as an overview. Please reference NCQA for additional details.

By adopting these strategies, healthcare systems can bridge quality gaps, enhance patient outcomes, and safeguard long-term kidney health for individuals with diabetes.