## **Select Health of South Carolina Corporate Specifications for Gaps in Care**

## **Diabetes HbA1c Test**

- The purpose of this measure is to identify and track members who have diabetes and who have received an HbA1c test as recommended by the American Medical Association (AMA) and by the Centers for Disease Control and Prevention (CDC). \*
- Criteria are based on standards as established under HEDIS<sup>®</sup> 2013 Technical Specifications.

Which Members are Included? (Denominator)	<ul> <li>Members with active coverage with the insurance plan as of the last day of the reporting period</li> <li>Members between 18 and 75 years old during the reporting period with a diagnosis of diabetes from one year prior to the start of the reporting period through the end of the reporting period</li> </ul>
What Provider Data is Included? (Numerator)	Member received at least one HbA1c test during the reporting period
Provider Communication Tools (How providers receive the information)	Claims data is evaluated on a monthly basis for all members. In the event that there is no claim for this specific service, the system generates an automatic notice of care gap. Care Gap status notification is provided by and accessible through NaviNet via:  • Member Eligibility "pop-up" alerts • Care Gap Query Reports • Member Clinical Summary Reports • Monthly NaviNet report updates reflect Gaps In Care for PCP practice panel membership. • Panel membership results include indicators for this Gaps In Care measure as "Missing", "Up-to-date" or "Overdue."

\*For more information visit: <a href="http://www.cdc.gov/diabetes/">http://www.cdc.gov/diabetes/</a>

For detailed code criteria, click here.

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