



BlueCross BlueShield
of North Carolina

MEDICARE

November 2023

Please note, this communication applies to Healthy Blue + MedicareSM (HMO D-SNP) offered by Blue Cross and Blue Shield of North Carolina.

HEDIS 2023 Documentation for Blood Pressure Control for Patients With Diabetes (BPD)

Measure Description

The percentage of members 18 to 75 years of age with diabetes (types 1 and 2) whose blood pressure (BP) was adequately controlled (< 140/90 mm Hg) during the measurement year

What we are looking for in provider records:

- Last BP documented in 2023 regardless of reading
- Evidence of hospice or palliative services in 2023
- Evidence patient expired in 2023
- Documentation of polycystic ovarian syndrome, gestational diabetes, or steroid induced diabetes

Helpful Hints:

- Take a second BP at the end of the office visit if initial BP was > 140/90 and document new BP.
- Consider taking BP at every visit.
- Remind medical staff not to round results. Results must be precise (such as, 139/89).
- Compliance is greater than 139/89.
- Counsel on healthy habits for managing high blood pressure.
- Encourage antihypertensive and other medication adherence.
- Member reported BPs during a telehealth visit are acceptable and should be documented in the members health record
- Review diabetic services needed at each office visit.
- For members who have not been diagnosed with diabetes but take a diabetes medication for off-label use, document why they are taking medication (for example, weight loss, congestive heart failure, chronic kidney disease, etc.).

HEDIS 2023 Documentation for

<https://www.bluecrossnc.com/providers/networks-programs/blue-medicare-providers/healthy-blue-medicare>

Blue Cross and Blue Shield of North Carolina Senior Health, DBA Blue Cross and Blue Shield of North Carolina, is an HMO D-SNP plan with a Medicare contract and a NC State Medicaid Agency Contract (SMAC). Enrollment in Blue Cross and Blue Shield of North Carolina Senior Health depends upon contract renewal.

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Hemoglobin A1c Control for Patients With Diabetes (HBD)

Measure Description

The percentage of members 18 to 75 years of age with diabetes (types 1 and 2) whose hemoglobin A1c (HbA1c) was at the following levels during the measurement year:

- HbA1c control (< 8.0%)
- HbA1c poor control (> 9.0%)

What we are looking for in provider records:

- Last HbA1c documented in 2023 regardless of result
- Evidence of hospice or palliative services in 2023
- Evidence patient expired in 2023
- Documentation of polycystic ovarian syndrome, gestational diabetes, or steroid induced diabetes

Helpful Hints:

- Counsel on healthy habits for managing diabetes.
- If appropriate, set an HbA1c goal of less than 7%.
- Encourage timely HbA1c testing.
- Encourage medication adherence.
- Encourage continuous glucose monitoring.
- In progress notes when documenting HbA1c value include date the test was performed.
- Review diabetic services needed at each office visit.
- For members who have not been diagnosed with diabetes but take a diabetes medication for off-label use, document why they are taking medication (for example, weight loss, congestive heart failure, chronic kidney disease, etc.).

HEDIS 2023 Documentation for Eye Exam for Patients With Diabetes (EED)

Measure Description

The percentage of members 18 to 75 years of age with diabetes (types 1 and 2) who had a retinal eye exam

What we are looking for in provider records:

- Evidence of a retinal eye exam by an eye care professional (optometrist or ophthalmologist) in the measurement year or year prior with results
- Bilateral eye enucleation any time during the member's history
- Evidence of hospice or palliative services in 2023
- Evidence patient expired in 2023
- Documentation of polycystic ovarian syndrome, gestational diabetes, or steroid induced diabetes

Helpful Hints:

- Refer patients to an optometrist or ophthalmologist for a dilated or retinal eye exam annually.
- Fundus/retinal photography is considered imaging and is eligible for use, must be dated and interpreted by an eye care professional.
- Counsel on healthy habits for managing diabetes.
- In progress notes when documenting a retinal eye exam include the name of eye care provider or optometrist/ophthalmologist credentials, date performed, and result.
- Encourage medication adherence.
- Review diabetic services needed at each office visit.
- For members who have not been diagnosed with diabetes but take a diabetes medication for off-label use, document why they are taking medication (for example, weight loss, congestive heart failure, chronic kidney disease, etc.).