



# UMA/UPQC

## Tip of the Week

### “Diabetes: Hemoglobin A1c Control”

#### Background

In order to improve the Clinical Care for an At-Risk Population, patients aged 10-85 with a diagnosis of diabetes must have a hemoglobin A1c reported each year.

The measure reports those diabetic patients in poor control (HbA1c > 9%).

For this measure, a lower score is better.

#### How Do I Do This?

- Check the HbA1c at least once in the calendar year
- Document the HbA1c result in CareScreen Quality Registry noting the date and value
- Tip: If an HbA1c was not done, it is counted as missing, and adversely affects the calculation

#### How Do I Get Credit?

Document the HbA1c in your medical record

AND

Bill using CPT II code 3046F (most recent HbA1c > 9%)

OR

Bill using CPT II code 3045F (most recent HbA1c 7-9%)

OR

Bill using CPT II code 3044F (most recent HbA1c < 7%)