Diabetes: HbA1c Poor Control >9% (CMS122)

The following is for educational purposed only and is not intended to be clinical or legal advice. The information provided in the Measure Details section is based on specification published by CMS at https://ecqi.healthit.gov/ecqm/ec/2023/cms122v11

Measure Details

Description *

Percentage of patients 18-75 years of age with diabetes who had hemoglobin A1c > 9.0% during the measurement period

Initial Population

Patients 18-75 years of age by the end of the measurement period, with diabetes with a visit during the measurement period

Denominator

Equals Initial Population

Numerator

Patients whose most recent HbA1c level (performed during the measurement period) is >9.0% or is missing, or was not performed during the measurement period

Denominator Exclusion

- Exclude patients who are in hospice care for any part of the measurement period
- Exclude patients receiving palliative care ~~during~~ for any part of the measurement period.
- Exclude patients 66 and older by the end of the measurement period who are living long term in ~~an institution for more than 90 consecutive days during~~ a nursing home any time on or before the end of the measurement period
- Exclude patients 66 and older by the end of the measurement period with an indication of frailty for any part of the measurement period who also meet any of the following advanced illness criteria:
    - Advanced illness with two outpatient encounters during the measurement period or the year prior – OR
    - Advanced illness with one inpatient encounter during the measurement period or the year prior – OR Taking dementia medications during the measurement period or the year prior

Numerator Exclusion

NA

Important Note

This is an inverse measure. The desired score if 0.00%

Overview

What is Documented	When is it Documented	Where in QMER
Qualifying Encounter	During Measurement Period (2023)	Coded SOAP Note
Diagnosis of Diabetes	During Measurement Period (2023)	DxCPT Module
Most recent HbA1c >9%	2022	Orders & Results Module

Exclusions/Exceptions	Where in QEMR
Patients who are in hospice care for any part of the measurement period	History Module
Patients receiving palliative care for any part of the measurement period	History Module
Patients 66 years and old living long term in a nursing home on or before the measurement period	History Module
Patients 66 years and older with an indication of frailty during the measurement period and ○ Advanced illness with two outpatient encounters during the measurement period or the year prior – OR ○ Advanced illness with one inpatient encounter during the measurement period or the year prior – OR ○ Taking dementia medications during the measurement period or the year prior	

2022 to 2023 Changes
NA

Set Up

All codification shown is an example for incrementation, for a full list of accepted codes please visit Value Set Authority Center.

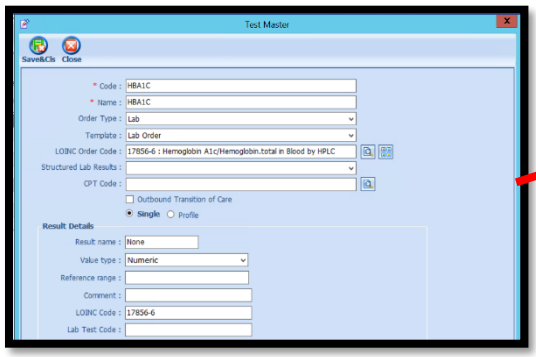
Qualifying Encounter

No set up required

Building HbA1c via Orders and Results

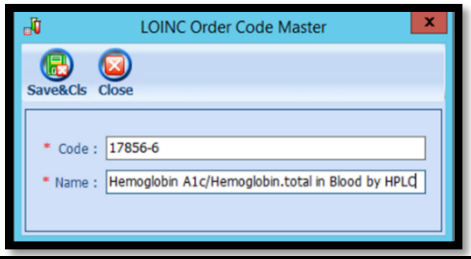
If the test is ordered via Lab Interface, the resulting lab should be sending LOINC in the HL7 message. If resulted internally (in office lab test), build the appropriate result profile in **Edit > Orders & Results**, adding appropriate LOINC (from lab test kit).

1. Log into **QEMR** > Navigate to **Edit** > **Order & Results Setup > New** hot button
2. Complete the Test Master screen as shown below using appropriate LOINC
3. Click **Save & Close**



When searching for the LOINC Order Code if it is not there you will need to create by following the steps listed here:

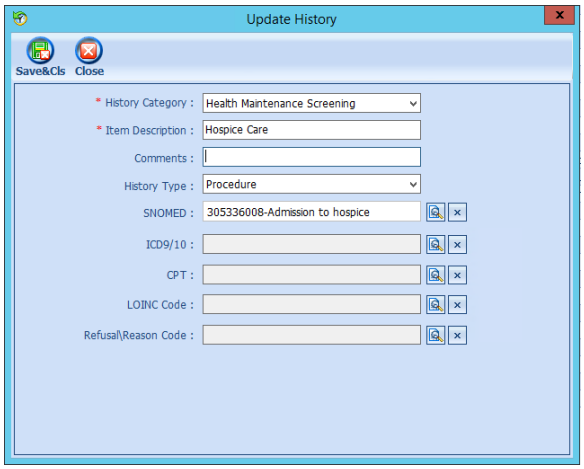
- Click the **Add LOINC Order Code** icon
- Complete the LOINC Order Code Master as shown below
  - **Code**: 17856-6
  - **Name**: HbG1AC
- Click **Save & Close** button

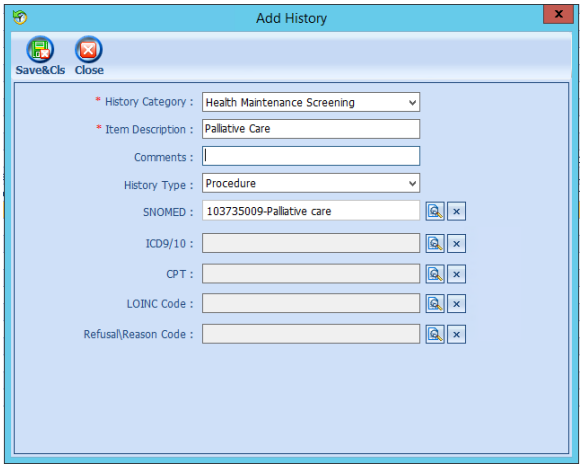


Building History Exclusions

Build the history items below:

1. Log into **QEMR** > Navigate to **Edit** > **History**
2. Highlight ***desired*** **History Category** list on left side bar
3. Click **New** hot button
4. **Complete the Update History** Screen as seen below
5. Click **Save & Close** hot button





Workflow

Qualifying Encounter

Following standard office workflow, document patient visit(s) via SOAP notes and code with CPT and diagnosis codes using either DxCPT, SmartDx or Smart CPT modules.

Diabetes Diagnosis

For this measure a diagnosis of Diabetes must be documented via **Dx and CPT** Follow standard in-office coding workflow for coding exams.

Document Chlamydia Test & Results

Ordering Test

For those who order or perform the testing without a lab interface order and results must be done via the **Orders & Results > Order Entry**

1. Navigate to **Orders & Results > Order Entry** hot button
2. Double-click **HbA1C**
    a. To modify and/or print the prescription for the patient click the ellipsis icon for templates
    b. **Modify** Template if necessary > **Print** > **Save & Close**
3. **Save & Close** the order Entry Screen > **Save & Close** the View Orders and Results Screen

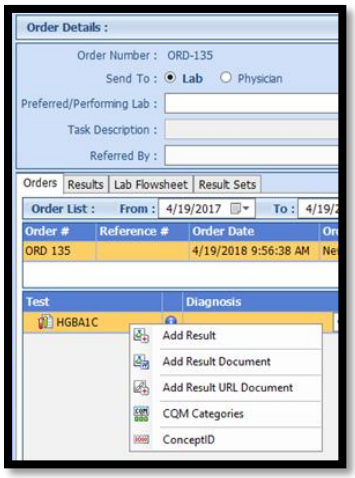
Test Results

After receiving the test results via scanned documents or received fax you must associate it with the order or manually enter the numerical results if testing was done in-house.

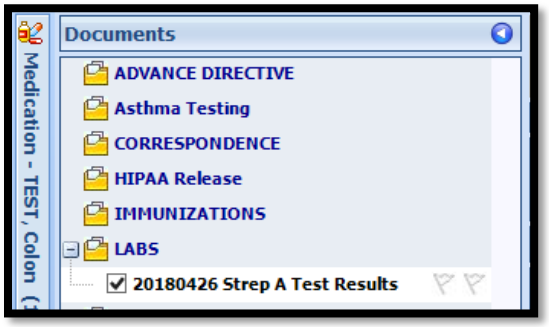
Adding Scanned Results

To associate a document to the test results:

1. Navigate to **Orders & Results > Orders Tab**
2. Right-click on the test you would like to add the results to
3. Click **Add Results Document**



4. You will be brought to the **Scan Documents** screen
    a. Place a **check box** in the document you would like to associate
    b. Click **Save** hot button



Adding Value Results to Order

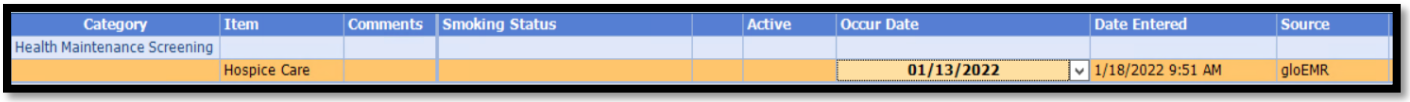
To manually document the test results:

1. Navigate to **Orders & Results > Orders Tab**
2. Right-click on the test you would like to add the results to
3. Click **Add Results**
4. Enter test results in **Value** field **>** Click **Save & Close** hot button

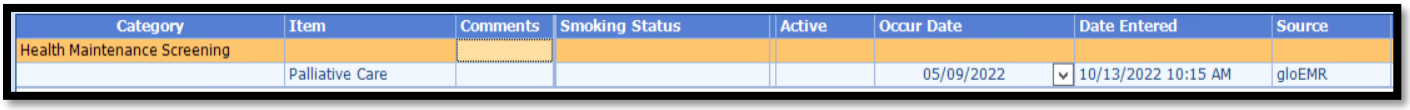
Document Hospice or Palliative Care

To document, follow steps below:

1. Navigate to **History** Module > **Health Maintenance** category
    a. Double-click applicable history item
    b. Enter **Occur Date**



Category	Item	Comments	Smoking Status		Active	Occur Date	Date Entered	Source
Health Maintenance Screening								
	Hospice Care					01/13/2022	1/18/2022 9:51 AM	gloEMR



Category	Item	Comments	Smoking Status	Active	Occur Date	Date Entered	Source
Health Maintenance Screening							
	Palliative Care				05/09/2022	10/13/2022 10:15 AM	gloEMR

Incrementing Details

Occur Dates

To increment ANY measure using the History Module the Occur Dater MUST be documented using appropriate date based upon Measure Description.

Exam Coding

If exam notes (Past Exams) are not coded with Diagnosis Code and CPT code measures will not increment.

Measure Specific Codes

The codification shown in this document are examples of qualifying documentation. To see a full list please visit Value Set Authority Center.

CMS Guidance *

If the HbA1c test result is in the medical record, the test can be used to determine numerator compliance.