Memorial Health Network

OCTOBER 2026

Diabetes Control

THE OPPORTUNITY

Diabetes care gaps often stay open when care gets delayed, an external report is not returned, or a result is not coded and submitted to the payer in time. Before year-end, practices can close these gaps by pairing focused follow-up with steady tracking to help ensure HbA1c results, retinal exams, and kidney evaluations are all captured accurately.

WHO SHOULD ACT

This brief is for the physicians, clinicians, and care teams who support chronic disease management, including primary care physicians and endocrinologists.

Different roles, shared outcome:

Primary care physicians and clinicians can address multi-measure gaps at appropriate encounters, and coordinate external retinal exams and specialty results.

Endocrinology physicians and clinicians can address HbA1c and kidney evaluation gaps, coordinate retinal exam completion, and return results to primary care.

PRIORITY PATIENTS

Patients 18–75 years of age with diabetes who have no HbA1c result from the measurement year or whose most recent HbA1c is 8.0% or higher

Patients 18–75 years of age with diabetes who have no qualifying retinal exam documented during the measurement year; a qualifying negative exam from 2025 may satisfy the measure

Patients 18–85 years of age with diabetes who are missing one or both components of the kidney health evaluation

NOTE: MHN provides your Care Gap Report. Check your most recent report for patients with open gaps. Payer claims data typically lags approximately 3 months, so recent visits, screenings, or results may not yet be reflected.

HEDIS MEASURES IN FOCUS

- Glycemic Status Assessment for Patients With Diabetes (GSD) — LEARN MORE
- Eye Exam for Patients With Diabetes (EED) — LEARN MORE
- Kidney Health Evaluation for Patients With Diabetes (KED) — LEARN MORE

MEASURE REQUIREMENTS AT A GLANCE

Glycemic Status Assessment for Patients With Diabetes (GSD)

LEARN MORE

Ages 18–75 *with diabetes*

Most recent HbA1c result during the measurement year above 9.0%

Eye Exam for Patients With Diabetes (EED)

Ages 18–75 *with diabetes*

A qualifying retinal exam completed in 2026; a qualifying negative exam result from 2025 may also satisfy the measure

Kidney Health Evaluation for Patients With Diabetes (KED)

Ages 18–85 *with diabetes*

An eGFR blood assessment and a qualifying urine assessment during 2026; the urine requirement may be met by a uACR or by both a quantitative urine albumin test and a urine creatinine test

KEY ACTIONS

Primary Care

- Review the MHN Care Gap Report and prioritize patients with open diabetes care gaps.
- At clinically appropriate encounters, address overdue HbA1c and kidney testing.
- For kidney evaluation, ensure both eGFR and the required urine assessment are completed.
- Place a retinal exam referral when appropriate, track completion, retrieve the specialist report, and submit the applicable code to the payer.
- Coordinate with endocrinology.

Endocrinology

- Review the most recent HbA1c result and use the CPT II code that corresponds to the result range.
- Confirm completion of both components of the kidney health evaluation during 2026.
- Ask whether a qualifying retinal exam has been completed and request the report.
- Send results and dates of service to the primary care physician or clinician, and ensure the applicable information is submitted to the payer.

BRIDGE THE GAP

CLICK HERE for more documentation tips to properly close diabetes care gaps. Remember, an order or referral alone does not close a gap.

A few practices that help keep the loop closed:

- Use the Care Gap Report and the daily schedule to flag open gaps before the encounter.
- Follow orders, referrals, no-shows, and external reports through completion.
- Confirm the date of service, result, source documentation, and correct code.
- Ensure the completed service and applicable codes are submitted to the payer.

DOCUMENTATION & CODING

MEASURE	CODE	SUMMARY
Glycemic Status Assessment for Patients With Diabetes (GSD)	3044F	< 7.0%
	3051F	≥ 7.0% and < 8.0%
	3052F	≥ 8.0% and ≤ 9.0%
	3046F	> 9.0%
Diabetes Care – Eye Exam (PCP submission)	2022F	Evidence of retinopathy
	2023F	Without evidence of retinopathy
	3072F	Negative screening in prior year (2025)
Diabetes Care – Eye Exam (Any submitter type)	92229	Automated eye exam with AI interpretation
	2022F, 2024F, 2026F	Evidence of retinopathy
	2023F, 2025F, 2033F	Without evidence of retinopathy
	3072F	Negative screening in prior year (2025)
Diabetes Care – Eye Exam (Optometrist/Ophthalmologist submission)	67028, 67030, 67031, 67036, 67039-67043, 67101, 67105, 67107, 67108, 67110, 67113, 67121, 67141, 67145, 67208, 67210, 67218, 67220, 67221, 67227, 67228, 92002, 92004, 92012, 92014, 92018, 92019, 92134, 92201, 92202, 92225-92228, 92230, 92235, 92240, 92250, 92260, 99203-99205, 99213-99215, 99242-99245 HCPCS: S0620, S0621, S3000	Retinal screening
Kidney Health Evaluation – eGFR blood assessment	80047, 80048, 80050, 80053, 80069, 82565	Applicable metabolic, renal, or creatinine testing; must be paired with the required urine test
Kidney Health Evaluation – Urine tests	82043 + 82570	Quantitative albumin and urine creatinine tests must have service dates within 4 days of each other.

EXCLUSIONS

For all measures listed above:

- Hospice services during the measurement year
- Palliative care
- Death during the measurement year
- Age 66 or older with both frailty and advanced illness
- Medicare members age 66 or older who are enrolled in an Institutional Special Needs Plan (I-SNP) or living long-term in an institution (LTI)

Additional Exclusions for:

Eye Exam for Patients With Diabetes (EED)

- Bilateral absence of eyes/enucleation at any time in the patient's history

Kidney Health Evaluation for Patients With Diabetes (KED)

- ESRD or dialysis at any time in the patient's history

CODING REMINDERS

- For retinal exams, the PCP should submit the appropriate CPT II code at the appointment following receipt of the specialist report.
- For kidney evaluations, order the albumin and urine creatinine tests together to help ensure their service dates fall within the required 4-day window.