



## California Physician Performance Initiative (CPPI)

### Clinical Quality Measure Specifications 2009

#### Diabetes Care for Adults: Nephropathy Screening Test (NPH)

##### Measure:

Adult patients 18-75 years old, who have Type 1 or Type 2 diabetes. This test is for people who do not have kidney disease. It shows the percent of patients who have had a microalbuminuria test for kidney disease during October 1, 2007 through September 30, 2008 or evidence of nephropathy.

##### Reasons for this measure:

Diabetes is the leading cause of end-stage renal disease accounting for 44% of new cases. People with diabetes are much more likely than the general population to develop acute and chronic kidney problems, such as renal insufficiency, end-stage renal disease and diabetic nephropathy. These serious complications can require long-term kidney dialysis or kidney transplant. Importantly, early detection of kidney disorders can lead to earlier treatment, and slow or prevent further deterioration of the kidneys and help avoid dialysis or transplant. One of the first signs of kidney problems is protein in the urine. It is therefore very important that patients with diabetes have a test at least once a year that measures microalbuminuria.

##### Eligible Population:

Adults with diabetes between the ages 18 and 75 years old, as of September 30, 2008.

##### Codes to Identify Patients with Diabetes:

Two methods are used to identify patients with diabetes: pharmacy data and claim/encounter data.

##### Prescriptions to Identify Members with Diabetes:

Description	Prescription
Alpha-glucosidase inhibitors	<ul style="list-style-type: none"> <li>• acarbose</li> <li>▪ miglitol</li> </ul>
Amylin analogs	<ul style="list-style-type: none"> <li>• pramlintide</li> </ul>
Antidiabetic combinations	<ul style="list-style-type: none"> <li>• glimepiride-pioglitazone</li> <li>• glimepiride-rosiglitazone</li> <li>• glipizide-metformin</li> <li>• glyburide-metformin</li> </ul> <ul style="list-style-type: none"> <li>• metformin-pioglitazone</li> <li>• metformin-rosiglitazone</li> <li>• metformin-sitagliptin</li> </ul>
Insulin	<ul style="list-style-type: none"> <li>• insulin aspart</li> <li>• insulin aspart-insulin aspart protamine</li> <li>• insulin detemir</li> <li>• insulin glargine</li> </ul> <ul style="list-style-type: none"> <li>• insulin lispro</li> <li>• insulin lispro-insulin lispro protamine</li> <li>• insulin regular beef-pork</li> <li>• insulin regular human</li> </ul>

	<ul style="list-style-type: none"> <li>• insulin glulisine</li> <li>• insulin inhalation</li> <li>• insulin isophane beef-pork</li> <li>• insulin isophane human</li> <li>• insulin isophane pork</li> <li>• insulin isophane-insulin regular</li> </ul>	<ul style="list-style-type: none"> <li>• insulin regular pork</li> <li>• insulin zinc beef-pork</li> <li>• insulin zinc extended human</li> <li>• insulin zinc human</li> <li>• insulin zinc pork</li> </ul>
Meglitinides	<ul style="list-style-type: none"> <li>• nateglinide</li> <li>• repaglinide</li> </ul>	
Miscellaneous antidiabetic agents	<ul style="list-style-type: none"> <li>• exenatide</li> <li>• pramlintide</li> <li>• sitagliptin</li> </ul>	
Sulfonylureas	<ul style="list-style-type: none"> <li>• acetohexamide</li> <li>• chlorpropamide</li> <li>• glimepiride</li> </ul>	<ul style="list-style-type: none"> <li>• glipizide</li> <li>• glyburide</li> <li>• tolazamide</li> <li>• tolbutamide</li> </ul>
Thiazolidinediones	<ul style="list-style-type: none"> <li>• pioglitazone</li> <li>• rosiglitazone</li> </ul>	

Note: *Glucophage/metformin* is not included because it is used to treat conditions other than diabetes; members with diabetes on these medications are identified through diagnosis coding only. NCQA has provided a complete list of medications and NDC codes on its Web site ([www.ncqa.org](http://www.ncqa.org)).

#### Claim/Encounter to Identify Members with Diabetes:

Members who had *two* face-to-face encounters with a diagnosis of diabetes on different dates of service in an outpatient setting or nonacute inpatient setting, or one face-to-face encounter in an acute inpatient or ED setting during the measurement year or the year prior to the measurement year. The organization may count services that occur over both years. Refer to the table below for codes to identify visit type.

#### Codes to Identify Diabetes

Description	ICD-9-CM Diagnosis
Diabetes	250, 357.2, 362.0, 366.41, 648.0

#### Codes to Identify Visit Type

Description	CPT	UB Revenue
Outpatient	92002, 92004, 92012, 92014, 99201-99205, 99211-99215, 99217-99220, 99241-99245, 99341-99345, 99347-99350, 99384-99387, 99394-99397, 99401-99404, 99411, 99412, 99420, 99429, 99455, 99456	051x, 0520-0523, 0526-0529, 057x-059x, 077x, 082x-085x, 088x, 0982, 0983
Nonacute inpatient	99301-99313, 99315, 99316, 99318, 99321-99328, 99331-99337	0118, 0128, 0138, 0148, 0158, 019x, 0524, 0525, 055x, 066x
Acute inpatient	99221-99223, 99231-99233, 99238, 99239, 99251-99255, 99261-99263, 99291	010x, 0110-0114, 0119, 0120-0124, 0129, 0130-0134, 0139, 0140-0144, 0149, 0150-0154, 0159, 016x, 020x-022x, 072x, 080x, 0987
ED	99281-99285	045x, 0981

#### Continuous Enrollment in Health Plan:

The measurement year (October 1, 2007 through September 30, 2008). No more than one gap in enrollment of up to 45 days during the measurement year.

#### Exclusions:

Exclude adults who had a diagnosis of polycystic ovaries who did not have any face-to-face encounters with a diagnosis of diabetes, in any setting, during the measurement year or the year

prior to the measurement year. Diagnosis can occur at any time in the adult's history, but must have occurred by September 30, 2008.

Exclude adults with gestational or steroid-induced diabetes (CDC-O) who did not have any face-to-face encounters with a diagnosis of diabetes (CDC-B), in any setting, during the measurement year or year prior to the measurement year. Diagnosis can occur during the measurement year or the year prior to the measurement year, but must have occurred by December 31 of the measurement year.

Many organizations find a high rate of false positives when they use laboratory data to identify diabetics because diabetes diagnosis codes are frequently reported on laboratory tests used to rule out diabetes; therefore, laboratory data was not used to identify diabetics.

### Numerator Event:

A nephropathy screening test or evidence of nephropathy during the measurement year (October 1, 2007 through September 30, 2008).

Evidence of nephropathy can be determined by a claim or encounter with a code to indicate evidence of treatment for nephropathy, a nephrologist visit, a positive urine macroalbumin test, or evidence of ACE inhibitor/ARB therapy during the measurement year (October 1, 2007 through September 30, 2008).

### Codes to Identify Nephropathy Screening Tests:

Description	CPT	CPT Category II	LOINC
Nephropathy screening test	82042, 82043, 82044, 84156	3060F, 3061F	1753-3, 1754-1, 1755-8, 1757-4, 2887-8, 2888-6, 2889-4, 2890-2, 9318-7, 11218-5, 12842-1, 13801-6, 14956-7, 14957-5, 14958-3, 14959-1, 13705-9, 14585-4, 18373-1, 20621-9, 21059-1, 21482-5, 26801-1, 27298-9, 30000-4, 30001-2, 30003-8, 32209-9, 32294-1, 32551-4, 34366-5, 34535-5, 35663-4, 40486-3, 40662-9, 40663-7, 43605-5, 43606-3, 43607-1, 44292-1

### Evidence of Nephropathy:

Any of the following meet criteria for evidence of nephropathy.

- A claim/encounter with a code to indicate evidence of treatment for nephropathy during the measurement year.
- A nephrologist visit during the measurement year, as identified by the organization's specialty provider codes (no restriction on the Diagnosis or Procedural code submitted).
- A positive urine macroalbumin test in the measurement year, as documented by claim/encounter or automated laboratory data. Refer to Table CDC-K for codes to identify urine macroalbumin tests. "Trace" urine macroalbumin test results are not considered numerator-compliant.
- Evidence of ACE inhibitor/ARB therapy during the measurement year. Members who had a claim indicating therapy or received an ambulatory prescription or were dispensed an ambulatory prescription for ACE inhibitors or ARBs during the measurement year are compliant as defined in the table below:

## Codes to Identify Evidence of Nephropathy:

Description	CPT	CPT Category II*	HCPCS	ICD-9-CM Diagnosis	ICD-9-CM Procedure	UB Revenue	UB Type of Bill	POS	LOINC
Urine macroalbumin test*	81000-81003, 81005	3062F							5804-0, 20454-5, 24356-8, 24357-6
Evidence of treatment for nephropathy	36145, 36800, 36810, 36815, 36818, 36819-36821, 36831-36833, 50300, 50320, 50340, 50360, 50365, 50370, 50380, 90920, 90921, 90924, 90925, 90935, 90937, 90939, 90940, 90945, 90947, 90989, 90993, 90997, 90999, 99512	3066F	G0257, G0314-G0319, G0322, G0323, G0326, G0327, G0392, G0393, S9339	250.4, 403, 404, 405.01, 405.11, 405.91, 580-588, 753.0, 753.1, 791.0, V42.0, V45.1, V56	38.95, 39.27, 39.42, 39.43, 39.53, 39.93-39.95, 54.98, 55.4-55.6	0367, 080x, 082x-085x, 088x	72x	65	
ACE inhibitor/ARB therapy		4009F							

## Codes for ACE Inhibitors/ARBs

Description	Prescription
Angiotensin converting enzyme inhibitors	<ul style="list-style-type: none"> <li>benazepril</li> <li>enalapril</li> <li>lisinopril</li> <li>perindopril</li> <li>ramipril</li> <li>captopril</li> <li>fosinopril</li> <li>moexipril</li> <li>quinapril</li> <li>trandolapril</li> </ul>
Angiotensin II inhibitors	<ul style="list-style-type: none"> <li>candesartan</li> <li>irbesartan</li> <li>olmesartan</li> <li>valsartan</li> <li>eprosartan</li> <li>losartan</li> <li>telmisartan</li> </ul>
Antihypertensive combinations	<ul style="list-style-type: none"> <li>amlodipine-benazepril</li> <li>benazepril-hydrochlorothiazide</li> <li>candesartan-hydrochlorothiazide</li> <li>captopril-hydrochlorothiazide</li> <li>enalapril-hydrochlorothiazide</li> <li>eprosartan-hydrochlorothiazide</li> <li>fosinopril-hydrochlorothiazide</li> <li>hydrochlorothiazide-irbesartan</li> <li>hydrochlorothiazide-lisinopril</li> <li>hydrochlorothiazide-losartan</li> <li>hydrochlorothiazide-moexipril</li> <li>hydrochlorothiazide-olmesartan</li> <li>hydrochlorothiazide-quinapril</li> <li>hydrochlorothiazide-telmisartan</li> <li>hydrochlorothiazide-valsartan</li> <li>trandolapril-verapamil</li> </ul>

\* A CPT Category II code indicates a positive result for urine macroalbumin; the organization must use automated laboratory data to confirm a positive result for tests identified by CPT or LOINC codes.

**Designated Specialties:** Family Practice, internal medicine, endocrinology and nephrology.

**Measure Definition Source:** NCQA HEDIS 2009.

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