athena Clinicals®

Quality Management:

Diabetes: Hemoglobin A1c poor control

(NQF 0059)



Overview

How is this measure defined?



The percentage of patients 18-75 years of age with diabetes who had hemoglobin A1c > 9% during the measurement period.

How is this measure satisfied?

Because this measure is an inverse measure, a lower performance rate indicates better clinical care.

This measure is satisfied by the receipt of a lab result with a hemoglobin A1c level greater than 9.0% during the reporting period. This must be the most recent hemoglobin A1c analyte level received. This is automatically determined for labs received via an electronic interface. For lab values on paper, the A1c value can be manually entered by clicking "Edit Document" on the lab results document. The analyte must have "A1c" in its name to be recognized in either case.

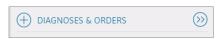


Order and receipt of a Hemoglobin A1c

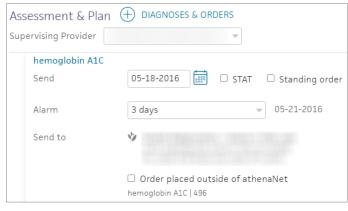
To satisfy the measure with a lab order during a clinical encounter, the provider would order a hemoglobin A1c via the "diagnoses & orders" field. In the A/P section of the encounter, the provider may enter order details and sign the lab order.

Orders may also be placed outside of a clinical encounter through an Order Group.

Results received via an interface will automatically tie to the corresponding order. However, if a hemoglobin A1c result is received via fax, the practice will need to manually edit the document and tie the result back to the original order in order to satisfy the measure. Refer to our <u>Standard Configuration and Resources document</u> for details on how to tie a result to an order.











Manual Satisfaction

The measure can be satisfied manually in the Results column of the Quality Management Tab by entering the most recent lab value and date of the lab performed. Electronic results will automatically replace any manual data entry.

The measure can also be satisfied using a billed code. To do so, the CPT II code **3046F** must be added to the practice fee schedule *and* any relevant encounter's Billing tab.

Refer to our <u>Standard Configuration and Resources document</u> for details on how to:

- · Use the Results column of the Quality Management Tab
- Add a procedure code to the fee schedule, and/or
- Add a procedure code to the encounter's Billing tab.

