

2023 MCAS MEASURE: DIABETIC SCREENING FOR PEOPLE WITH SCHIZOPHRENIA OR BIPOLAR DISORDER WHO ARE USING ANTIPSYCHOTIC MEDICATION (SSD)

Measure Steward: National Committee for Quality Assurance (NCQA)

Gold Coast Health Plan's (GCHP) goal is to help its providers gain compliance with their annual Managed Care Accountability Set (MCAS) scores by providing guidance and resources. This tip sheet will provide the key components to the MCAS measure, "Diabetic Screening for People with Schizophrenia or Bipolar Disorder Who Are Using Antipsychotic Medication (SSD)."

Measure Description: The percentage of members 18 to 64 years of age with schizophrenia, schizoaffective disorder or bipolar disorder, who were dispensed an antipsychotic medication and had a diabetes screening test during the measurement year.

Diabetic screening must include one of the following during the measurement year:

- Glucose Test or
- HbA1c Test

Data Collection Method: Administrative¹

SSD Clinical Code Sets

- For billing, reimbursement, and reporting of services completed, submit claims in a timely manner with the appropriate medical codes for all clinical conditions evaluated and services completed.
- Use CPT-II codes to report HbA1c tests results in claims submission.

Codes used to identify members diagnosed with schizophrenia, schizoaffective disorder, or bipolar disorder.

Disorder	ICD-10-CM
Schizophrenia	F20.0, F20.1, F20.2, F20.3, F20.5, F20.81, F20.89, F20.9, F25.0, F25.1, F25.8, F25.9
Bipolar	F30.10, F30.11, F30.12, F30.13, F30.2, F30.3, F30.4, F30.8, F30.9, F31.0, F31.10, F31.11, F31.12, F31.13, F31.2, F31.30, F31.31, F31.32, F31.4, F31.5, F31.60, F31.61, F31.62, F31.63, F31.64, F31.70, F31.71, F31.72, F31.73, F31.74, F31.75, F31.76, F31.77, F31.78, F31.81, F31.89, F31.9

Codes used to identify glucose and HbA1c tests and results.

Test	CPT	CPT II	LOINC
Glucose Test	80047, 80048, 80050, 80053, 80069, 82947, 82950, 82951		10450-5, 1492-8, 1494-4, 1496-9, 1499-3, 1501-6, 1504-0, 1507-3, 1514-9, 1518-0, 1530-5, 1533-9, 1554-5, 1557-8, 1558-6, 17865-7, 20436-2, 20437-0, 20438-8, 20440-4, 26554-6, 41024-1, 49134-0, 6749-6, 9375-7
Glucose Results			
HbA1c Test	83036, 83037		17856-6 4548-4 4549-2 96595-4
HbA1c Results		3044F, 3046F, 3051F, 3052F	



Antipsychotic Medications

Description	Prescription				
Miscellaneous antipsychotic agents	 Aripiprazole Asenapine Brexpiprazole Cariprazine Clozapine Haloperidol 	 Iloperidone Loxapine Lurisadone Molindone Olanzapine Paliperidone 	 Quetiapine Quetiapine fumarate Risperidone Ziprasidone		
Phenothiazine antipsychotics	ChlorpromazineFluphenazinePerphenazine	 Prochlorperazine Thioridazine Trifluoperazine			
Psychotherapeutic combinations	Amitriptyline-perphenazine				
Thioxanthenes	• Thiothixene				
Long-acting injections	 Aripiprazole Fluphenazine decanoate Haloperidol decanoate	OlanzapinePaliperidone palmitateRisperidone			

Exclusion Criteria:

Members with any of the following conditions are excluded from the SSD measure:

- Members diagnosed with diabetes during the measurement year or the year prior to the measurement year.
- Members receiving hospice care during the measurement year.

Best Practices:

Antipsychotic medication increases the risk of developing diabetes through weight gain and by affecting insulin sensitivity and secretion.² To mitigate this potentially adverse effect of antipsychotics, the American Diabetes Association recommends that patients who use antipsychotic medication have annual glucose and/or HbA1c screenings for the prevention and early detection of diabetes.³

Primary Care Providers and Behavioral Health Practitioners:

- Follow the clinical practice guidelines recommended by the <u>American Diabetes Association</u> to complete annual diabetic screening for patients prescribed antipsychotic medication.
- Educate members and caregivers about:
 - » The increased risk of diabetes when taking antipsychotic medication.
 - The importance of screening for diabetes annually.
 - » How to recognize the symptoms of diabetes.
 - » Patient care plans to prevent diabetes.
- Create care gap "alerts" in the electronic medical record (EMR) to notify clinic staff if a member taking antipsychotic medication needs a diabetic blood glucose / HbA1 screening test.
- Ensure the clinic has medication reconciliation protocol to collect and update each patient's current medication list and dosage at each clinic encounter.
- Coordinate care between behavioral health and primary care physicians (PCPs) by:
 - » Requesting test results.
 - » Communicating test results.
 - » Scheduling appointments for testing.
- Create physician standing orders for diabetic screening tests (glucose and/or HbA1c) to improve and expedite care management by authorizing qualified members of the health care team to initiate diabetic screenings.



- Use point-of-care-testing within the clinic to expedite lab testing and to enable prompt diagnosing and the implementation of any required treatment plans while the patient is in the clinic.
- To facilitate coordination of care, document all lab services ordered and completed with the results or findings in the clinical record.
- Contact members who cancel appointments or are no-shows to reschedule appointments.

¹ Measures reported using the *administrative* data collection method report on the entire eligible population and use only administrative data sources (e.g. claims, encounter, lab, immunization registries) to evaluate if services were performed.

² Holt R. (2019). Association Between Antipsychotic Medication Use and Diabetes. *Current diabetes reports*, 19(10), 96. https://doi.org/10.1007/s11892-019-1220-8

³ American Diabetes Association. (2018). *Standards of Medical Care in Diabetes – 2022*. https://diabetesjournals.org/care/issue/45/Supplement 1