



# Diabetes Screening for People with Schizophrenia, Schizoaffective Disorder or Bipolar Disorder Who Are Using Antipsychotic Medications (SSD)

The National Committee for Quality Assurance (NCQA) collects Healthcare Effectiveness Data and Information Set (HEDIS®) measurements. We collect HEDIS data from our providers to measure and improve the quality of care our members receive. The NCQA recommends tracking the HEDIS SSD for our members.

## Why is the HEDIS SSD measure important?

Individuals with serious mental illness who use antipsychotics are at increased risk of diabetes.<sup>1</sup> Diabetes is the seventh leading cause of death in the United States.<sup>2</sup> Diabetes screening for members with schizophrenia, schizoaffective disorder or bipolar disorder who take antipsychotic medications is important for early detection and management.

## SSD Measure Description

HEDIS requires annual diabetes screening for members 18 to 64 years old with schizophrenia, schizoaffective disorder or bipolar disorder if they receive an antipsychotic medication at any time during the year. Screen with either a glucose or HgbA1c test and document the result.<sup>3</sup>

## Medical Record Documentation and Best Practices

- Encourage shared decision-making by educating members and caregivers about:
  - Increased risk of diabetes with antipsychotic medications
  - Importance of screening for diabetes
  - Symptoms of new-onset diabetes
- Order a diabetes screening test every year and build care gap “alerts” in your electronic medical record
- Communicate and coordinate care between behavioral health and primary care physicians (PCPs) by requesting test results, communicating test results or scheduling an appointment for testing
- Reach out to members who cancel appointments and assist them with rescheduling as soon as possible
- Behavioral health practitioners:
  - Order diabetic screening tests for members who do not have regular contact with their PCP
  - Coordinate care and communicate test results to the member’s PCP

## Behavioral Health Codes

### Coding Instructions

Use ICD-10, CPT® and HCPCS to close gaps.

### Glucose Test Codes

**CPT:** 80047-80048, 80050, 80053, 80069, 82947, 82950-82951

### HgbA1c Codes

**CPT:** 83036-83037

**CPT-CAT II:** 3044F-3046F

### Long-Acting Injections

**HCPCS:** C9035, C9037, J0401, J1631, J1942, J2358, J2426, J2794

### Schizophrenia Codes

**ICD-10:** F20.0-F20.5, F20.81, F20.89, F20.9, F25.0-F25.1, F25.8-F25.9

### Bipolar Disorder Codes

**ICD-10:** F30.10-F30.13, F30.2-F30.4, F30.8-F30.9, F31.10-F31.13, F31.2, F31.30-F31.32, F31.4-F31.5, F31.60-F31.64, F31.70-F31.78

### BH Codes

**CPT:** 90791-90792, 90832-90834, 90836-90840, 90847, 90849, 90853, 90867-90870, 90875-90876, 99291

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1 <https://www.ncqa.org/hedis/measures/diabetes-and-cardiovascular-disease-screening-and-monitoring-for-people-with-schizophrenia-or-bipolar-disorder/>; Accessed 1/21/20

2 <https://www.cdc.gov/nchs/fastats/leading-causes-of-death.htm>; Accessed 1/21/20

3 NCQA HEDIS 2020 Technical specifications for health plans, volume 2, Washington DC, 2020

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