

Best Practices

Kidney Health Evaluation

FROM *HealthTeam Advantage*

Diabetes is the leading cause of chronic kidney disease (CKD). Kidney health evaluation and management can prevent complications and stop or slow down further progression of kidney damage!

To meet HEDIS® Measurement Year 2024 specifications, our goal is to ensure our providers are considering all labs when caring for patients at risk for CKD. To close care gaps, diabetic patients must receive both a blood draw and a urinalysis during the measurement year (preferably at the same time):



- ◆ **Estimated glomerular filtration rate (eGFR)**
- ◆ **Urine albumin creatinine ratio (ACR)**—The ACR is identified by a Urine Albumin Creatinine Ratio test (uACR) OR a Quantitative Urine Albumin test AND a Urine Creatinine test (with service dates no more than 4 days apart).

Helpful Hints

- ◆ **Order and complete labs during the patient appointment (see codes below).**
- ◆ **Educate patients about the importance of screening and medication compliance.**
- ◆ **Review all diabetic services provided at each office visit to prevent missed services.**

Codes to Know

- ◆ **Estimated Glomerular Filtration Rate Lab Test (eGFR)**
CPT: 80047, 80048, 80050, 80053, 80069, 82565
- ◆ **Quantitative Urine Albumin Test** CPT: 82570
- ◆ **Urine Creatinine Lab Test** CPT: 82043



1. "Chronic Kidney Disease in the United States, 2021."
Atlanta, GA: US Department of Health and Human Services,
Centers for Disease Control and Prevention; 2021. [www.cdc.gov/
kidneydisease/publications-resources/ckd-national-facts.html](http://www.cdc.gov/kidneydisease/publications-resources/ckd-national-facts.html)



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