

Quality Provider Program 2025 Performance Measures

ENDOCRINOLOGY



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Other online resources include:

- [Endocrinology Program Quick Guide](#)
- [Allowable Corrections Guide](#)
- [Frequently Asked Questions \(by Measure\)](#)
- [Intermountain Bone Health and Bone Fragility Care Process Model](#)

Diabetes Care

<p>Description</p>	<p>The percentage of members ages 18 to 75 with diabetes (type 1 or type 2) who had:</p> <ul style="list-style-type: none"> • Glycemic status testing in control • Retinal eye exam performed <p>NOTE: Each of the measures listed above is evaluated and scored separately.</p>
<p>Denominator</p>	<p>Members ages 18 to 75 who have been identified as having diabetes (type 1 or type 2) through the use of claim/encounter data and pharmacy data</p>
<p>Numerator</p>	<p>Members in the denominator who had one of the following during the current measurement year:</p> <ul style="list-style-type: none"> • Most recent hemoglobin A1c (HbA1c) or glucose management indicator (GMI) is <8% • A retinal eye exam performed by an eye care professional* OR a negative retinal eye exam performed in the year prior to the measurement year
<p>Intake and Measurement Periods</p>	<p>January 1 through December 31 of the measurement year</p>
<p>Exclusions</p>	<p>Members who:</p> <ul style="list-style-type: none"> • Are enrolled in hospice or palliative care any time during the measurement year • Died any time during the measurement year <p>NOTE: Blindness does not remove patient from the retinal eye exam measure.</p> <p>Medicare members 66 years and older:</p> <ul style="list-style-type: none"> • Enrolled in an I-SNP or living in a long-term institution any time during the measurement year • With claim-based proof of frailty and advanced illness during the measurement year or were dispensed a dementia medication during the measurement year
<p>Corrections Allowed</p>	<p>“A1c results are available.” “Patient had a diabetic eye exam.”</p>

* To be compliant, a retinal exam performed during the measurement year must include the result and evidence that result was read or reviewed by an optometrist or ophthalmologist; for abnormal retinal eye exams, diabetes eye exams must be repeated annually. An eye exam with result documented as “unknown” does not meet criteria.

For more information, access the [Diabetes Care FAQ](#).

Diabetes Care: Kidney Health Evaluation

Description	The percentage of members ages 18–85 with diabetes (type 1 or type 2) who received a kidney health evaluation, defined by an estimated glomerular filtration rate (eGFR) and a urine albumin-creatinine ratio (uACR)
Denominator	Members 18 to 85 who have been identified as having diabetes (type 1 or type 2) through the use of claim/encounter data and pharmacy data
Numerator	Members who received both of the following during the measurement year on the same or different dates of service: <ul style="list-style-type: none"> • At least 1 eGFR (blood test) • At least 1 uACR* (urine test)
Intake and Measurement Periods	January 1 through December 31 of the measurement year
Exclusions	<p>Members who:</p> <ul style="list-style-type: none"> • Have had ESRD or dialysis by the end of the measurement year • Enrolled in hospice or palliative care any time during the measurement year • Died any time during the measurement year <p>Medicare members:</p> <ul style="list-style-type: none"> • (For those 66 years and older) Enrolled in an I-SNP or living in a long-term institution any time during the measurement year • (For those 66 to 80 years of age) With claim-based proof of frailty and advanced illness or were dispensed a dementia medication during the measurement year • (For those 81 years of age and older by the end of the measurement year) With at least 2 indications of frailty during the measurement year on different dates of service
Correction Allowed	<p>“Patient completed an eGFR, urine albumin, and urine creatinine.”</p> <p>NOTE: All missing KED components can be entered in 1 correction. If submitting both eGFR and uACR results, select the 2-entry option. If only 1 of these components is missing, select the 1-entry option.</p>

* uACR is a quantitative urine albumin and a urine creatinine test with service dates four or less days apart.

For more information, access the [Diabetes Care FAQ](#).

Medication Adherence: Diabetes*

Description	The percentage of Select Health Medicare members ages 18 and older with a prescription for non-insulin diabetes medication who filled their prescription 80% or more of the time they are supposed to be taking the medication**
Denominator	Members ages 18 and older with at least 2 fills of non-insulin diabetes medication on 2 separate dates during the measurement year
Numerator	Members in the denominator who filled their prescription 80% or more of the time they are supposed to be taking the medication
Intake and Measurement Periods	January 1 through December 31 of the measurement year
Exclusions	Enrollment in hospice care, diagnosis of end-stage renal disease (ESRD), or dialysis coverage dates any time during the measurement year One or more prescriptions for insulin
Corrections	The Centers for Medicare and Medicaid Services (CMS) does not allow for corrections at this time.

* The Select Health pharmacy department conducts outreach phone calls to Select Health Medicare members at risk for noncompliance, as identified through pharmacy claims data.

** Non-insulin diabetes and non-insulin diabetes combination therapy will enter a member into the Medication Adherence: Diabetes measure. There is no consideration for an off-label use of a non-insulin diabetes medication within the methodology of this measure. If a diabetes medication is filled twice in the measurement year, the member will be included in the measure.

For more information, access the [Medication Adherence FAQ](#).

Osteoporosis: Management of Women with a Fracture

Description	The percentage of women ages 67–85 on Select Health Medicare who suffered a fracture and who, in the 180 days (6 months) after a fracture, had EITHER <ul style="list-style-type: none"> • A bone mineral density (BMD) test; OR • A prescription for a drug to treat osteoporosis
Denominator	Women ages 67–85 who suffered a fracture (fractures of the finger, toe, face, and skull not included in this measure)
Numerator	Members in the denominator who had, within 180 days after a fracture. EITHER: <ul style="list-style-type: none"> • Bone mineral density test (BMD) (see Figure 1 below); OR • Dispensed prescription for a drug to treat osteoporosis (see Figure 2 on the next page)
Intake and Measurement Periods	Intake Period: July 1 of the year prior to June 30 of the measurement year Measurement Period: January 1 through December 31 of the measurement year
Exclusions	Members who: <ul style="list-style-type: none"> • Had a BMD test within 24 months prior to the fracture • Received osteoporosis therapy or were dispensed a medication to treat osteoporosis within 12 months prior to the fracture • Enrolled in hospice or palliative care, or died any time during the measurement year Medicare members: <ul style="list-style-type: none"> • (For those 66 years and older) Enrolled in an I-SNP or living in a long-term institution any time during the measurement year • (For those 66 to 80 years of age) With claim-based proof of frailty and advanced illness or were dispensed a dementia medication during the measurement year • (For those 81 years of age and older by the end of the measurement year) With at least 2 indications of frailty during the measurement year on different dates of service
Corrections Allowed	This is a claims-based measure so corrections are not being accepted.

Figure 1. Bone Mineral Density Tests and Associated Codes

CPT Code	Definition
76977	Ultrasound bone density measurement and interpretation, peripheral site(s), any method
77078	Computed tomography (CT) bone mineral density study of the axial skeleton
77080	Dual-energy X-ray absorptiometry (DXA) bone density study of the axial skeleton
77081	DXA of the appendicular skeleton, such as the wrist, heel, or radius
77085	DXA of the axial skeleton, including a vertebral fracture assessment
77086	Vertebral fracture assessment using DXA

Continued...

Osteoporosis: Management of Women with a Fracture, Continued

Figure 2. Osteoporosis Medications

Description	Prescription
Bisphosphonates	<ul style="list-style-type: none"> • Alendronate • Ibandronate • Alendronate-cholecalciferol • Risedronate • Zoledronic acid
Other agents	<ul style="list-style-type: none"> • Abaloparatide • Denosumab • Raloxifene • Romosozumab • Teriparatide

Osteoporosis: Screening of Older Women

Description	The percentage of women ages 65–75 on Select Health Medicare who received osteoporosis screening (see Figure 3 below)
Denominator	Women ages 65–75 who have not received osteoporosis therapy or osteoporosis medication
Numerator	Members in the denominator who received one or more osteoporosis screening tests on or between the members' 65th birthday and December 31 of the measurement year
Intake and Measurement Periods	January 1 through December 31 of the measurement year
Exclusions	<p>Members who:</p> <ul style="list-style-type: none"> • Have a claim for osteoporosis long-acting therapy any time in their history • Were dispensed a prescription to treat osteoporosis within the last 3 years <p>Medicare members:</p> <ul style="list-style-type: none"> • (For those 66 years and older) Enrolled in an I-SNP or living in a long-term institution any time during the measurement year • (For those 66 to 80 years of age) With claim-based proof of frailty and advanced illness or were dispensed a dementia medication during the measurement year • (For those 81 years of age and older by the end of the measurement year) With at least 2 indications of frailty during the measurement year on different dates of service
Corrections Allowed	This is a claims-based measure so corrections are not being accepted.

Figure 3. Osteoporosis Screening Tests

CPT Code	Definition
76977	Ultrasound bone density measurement and interpretation, peripheral site(s), any method
77078	Computed tomography (CT) bone mineral density study of the axial skeleton
77080	Dual-energy X-ray absorptiometry (DXA) bone density study of the axial skeleton
77081	DXA of the appendicular skeleton, such as the wrist, heel, or radius
77085	DXA of the axial skeleton, including a vertebral fracture assessment

Statin Therapy: Diabetes*

Description	The percentage of Select Health Medicare members ages 40 to 75 with diabetes who were dispensed at least 2 diabetes medication fills and received one statin medication fill during the measurement year**
Denominator	Members ages 40 to 75 with at least 2 diabetes medication fills on unique dates of service during the measurement year
Numerator	Members in the denominator who were dispensed at least one statin medication of any intensity in 2025
Intake and Measurement Periods	January 1 through December 31 of the measurement year
Exclusions	Any of the following diagnoses/criteria at any time during the measurement year: <ul style="list-style-type: none"> • Hospice enrollment • End-stage renal disease (ESRD) diagnosis or dialysis coverage dates • Rhabdomyolysis and myopathy • Pregnancy, lactation, and fertility • Cirrhosis • Pre-diabetes • Polycystic ovary syndrome
Preferred Correction Process	Do NOT complete a correction submission. Best practice is to submit an appropriate exclusion code with the visit for the following:*** <ul style="list-style-type: none"> • “Patient has diagnosis of myositis.”: M60.80, M60.819, M60.829, M60.839, M60.849, M60.859, M60.869, M60.879, M60.9 codes • “Patient has diagnosis of myopathy.”: G72.0, G72.89, G72.9 codes • “Patient has diagnosis of rhabdomyolysis.”: M62.82 code • “Patient has diagnosis of lactation.”: O91.03, O91.13, O91.23, O92.03, O92.13, O92.5, O92.70, O92.79, Z39.1 codes • “Patient has diagnosis of polycystic ovarian syndrome (PCOS).”: E28.2 code • “Patient has diagnosis of cirrhosis.”: K70.30, K70.31, K71.7, K74.3, K74.4, K74.5, K74.60, K74.69 codes • “Patient has diagnosis of ESRD.”: I12.0, I13.11, I13.2, N18.5, N18.6, N19, Z91.15, Z99.2 codes • “Patient has diagnosis of pre-diabetes.”: R73.03, R73.09 codes

* This measure is based on the Medicare Statin Use in Persons with Diabetes (SUPD) criteria.

** For members who cannot tolerate statin therapy, a trial of as little as 7 days, if appropriate, would count for compliance.

*** Code must be submitted each year for SUPD exclusion.

For more information, access the [Statin Use in Persons with Diabetes FAQ](#).