

# HEDIS® Tip Sheet

## Kidney Health Evaluation for Patients with Diabetes (KED)

CarePartners of Connecticut's HEDIS Tip Sheets offer insights into specific HEDIS measures. These best practices and tips can optimize HEDIS scores and identify opportunities to improve patient care.

The KED measure assesses adults aged 18-85 with diabetes who received an estimated glomerular filtration rate (eGFR) AND a urine albumin-creatinine ratio (uACR) during the measurement year.

- **eGFR** is a blood test to assess kidney function by testing for waste products (creatinine) in the blood.
- **uACR** is a urine test to assess kidney damage by testing for proteins (albumin) in the urine.

Annual kidney health evaluation can contribute to early detection and treatment of chronic kidney disease in patients with diabetes.



### Provider Best Practices

- **Educate** patients on how diabetes can damage blood vessels which can lead to loss of kidney function.
- **Reinforce** with patients the importance of preventing kidney damage by:
  - Controlling blood pressure (BP), blood sugars, cholesterol and lipid levels
  - Taking ACE inhibitors or ARBs as prescribed
  - Avoiding potentially harmful medications such as naproxen and ibuprofen
  - Limiting protein and salt in diet
- **Coordinate** patient care with endocrinologists and/or nephrologists, as needed.
- **Ensure** that members have an eGFR **and** uACR each calendar year by ordering annual labs.
- **Submit** lab codes for uACR or submit separate quantitative urine albumin and urine creatinine tests within four days of each other. (A urine albumin test is not sufficient.)
- **Keep** your lab practices and billing up to date with the most recent recommendations to use the CKD EPI creatinine equation that estimates kidney function without a race variable.
- **Verify** that your lab is coding the uACR correctly. Refer to HEDIS specifications when billing for these services to ensure coding accuracy, gap closure, and compliance.



### Additional Resources

The [National Institute of Diabetes and Digestive and Kidney Diseases](#) and the [National Kidney Foundation](#) offer educational content, tools, and resources for providers.

### Did you know?



Approximately **1 in 3** adults with diabetes has chronic kidney disease.

Unlike a dipstick test for albumin, **uACR** is unaffected by variation in urine concentration and sensitive enough to **detect small amounts of urine protein.**

To be compliant for the Kidney Health Evaluation HEDIS measure, members must receive **BOTH** an eGFR and a uACR during the measurement year.

uACR can be a urine albumin creatinine ratio (uACR) or both a quantitative urine albumin and a urine creatinine with service dates four days apart or less.

Patients must have **1 and 2** below **OR 1 and 2a and 2b** below:

<b>1</b>	<b>Estimated Glomerular Filtration Rate Lab Test (eGFR)</b> <i>Must receive one during the measurement year.</i>										
	<b>CPT</b>										
	80047	80048	80050	80053	80069	82565					
	<b>LOINC</b>										
	50044-7	50210-4	50384-7	62238-1	69405-9	70969-1	77147-7	94677-2	98979-8	98980-6	102097-3
<b>SNOMED CT US Edition</b>											
12341000	18207002	241373003	444275009	444336003	446913004	706951006	763355007				
<b>and</b>											
<b>2</b>	<b>Urine Albumin Creatinine Ratio Lab Test (uACR)</b> <i>Must receive one during the measurement year.</i>										
	<b>LOINC</b>										
	9318-7	13705-9	14958-3	14959-1	30000-4	44292-1	59159-4	76401-9	77253-3	77254-1	89998-9

**OR**

<b>1</b>	<b>Estimated Glomerular Filtration Rate Lab Test (eGFR)</b> <i>Must receive one during the measurement year.</i>										
	<b>CPT</b>										
	80047	80048	80050	80053	80069	82565					
	<b>LOINC</b>										
	50044-7	50210-4	50384-7	62238-1	69405-9	70969-1	77147-7	94677-2	98979-8	98980-6	102097-3
<b>SNOMED CT US Edition</b>											
12341000	18207002	241373003	444275009	444336003	446913004	706951006	763355007				
<b>and</b>											
<b>2a</b>	<b>Quantitative Urine Albumin Lab Test</b> <i>Must receive one during the measurement year. Date of service must be within four days of urine creatinine lab test.</i>										
	<b>CPT</b>										
	82043										
	<b>LOINC</b>										
	1754-1	14957-5	21059-1	30003-8	43605-5	53530-2	53531-0	57369-1	89999-7	100158-5	
<b>SNOMED CT US Edition</b>											
104486009	104819000										
<b>and</b>											
<b>2b</b>	<b>Urine Creatinine Lab Test</b> <i>Must receive one during the measurement year. Date of service must be within four days of quantitative urine albumin lab test.</i>										
	<b>CPT</b>										
	82570										
	<b>LOINC</b>										
	2161-8	20624-3	35674-1	39982-4	57344-4	57346-9	58951-5				
<b>SNOMED CT US Edition</b>											
8879006	36793009	271260009	444322008								

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