



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

As part of a quality initiative to help assess effectiveness of care and services to our members, Blue Cross and Blue Shield of New Mexico (BCBSNM) uses specifications published by the National Committee for Quality Assurance (NCQA) for Healthcare Effectiveness Data and Information Set (HEDIS[®]). HEDIS is one of the most widely used and nationally accepted effectiveness of care measurements available.

Did you know?

- Individuals with serious mental illness who use antipsychotics are at increased risk of diabetes.¹ Diabetes is the seventh leading cause of death in the United States.² Diabetes screening for members with schizophrenia, schizoaffective disorder or bipolar disorder who take antipsychotic medications is important for early detection and management.
- The HEDIS measure for SSD 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. The HEDIS measure recommends screening with either a glucose or HgbA1c test and documenting the result.³

Measurement Structure

The HEDIS measure for SSD requires screening adult members 18 to 64 years old with schizophrenia or bipolar disorder who meet at least one of the following criteria during the measurement year:

- At least one acute inpatient encounter, with any diagnosis of schizophrenia, schizoaffective disorder or bipolar disorder.
- At least two of the following, on different dates of service, where both encounters have any diagnosis of schizophrenia or schizoaffective disorder, or both encounters have any diagnosis of bipolar disorder: outpatient visit, intensive outpatient encounter, partial hospitalization, community mental health center, electroconvulsive therapy, observation visit, ED visit, non-acute inpatient encounter, or telehealth visit.

Sources:

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



Tips & Strategies

We appreciate the care and services you provide to help improve the health and well-being of our members. BCBSNM's Behavioral Health Program is intended to supplement the service and treatment that members receive from their contracted health care providers. Below are a few tips and strategies you may want to discuss with your patients with schizophrenia, schizoaffective disorder or bipolar disorder who take antipsychotic medications.

- 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 the 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 can:
 - 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

The above material is for informational purposes only and is not intended to be a substitute for the independent medical judgment of a health care provider. Health care providers must use their own best medical judgment based upon all available information and the condition of the patient in determining the best course of treatment.

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