

Provider Bulletin

HEDIS® News You Can Use

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



Importance of the SSD measure

People with schizophrenia or bipolar disorder who have diabetes face a higher risk of metabolic syndrome and diabetes-related death than those with diabetes alone. Early proactive screening supports timely treatment and better long-term management.

This bulletin offers information on any measure changes, best practice suggestions, links to codes and free resources.



Measure requirements

For persons 18-64 with schizophrenia, schizoaffective disorder, or bipolar disorder, who were dispensed an antipsychotic medication and had diabetes screening in the measurement year.

For more detailed measure info, go to [MC Gap Closure Reference Guide](#)



Coding information

Screening for this measure via a glucose or HbA1c test

- Glucose lab test
- HbA1C lab test
- HbA1c test result or finding

For up-to-date, measure specific codes to use, go to

[MC Gap Closure Reference Guide](#)



Common reasons for Gaps in Care

1. Unclear provider responsibility for ordering tests, monitoring.
2. Poor data exchange between PCP and MHP (mental health provider).
3. Missed appointments.
4. Limited awareness of screening importance and antipsychotic risks.

For members assigned but choosing not to establish care, go to [MC PCP Change Request Form](#)



How Mercy Care helps

1. Provider outreach to both prescribing providers and assigned PCPs to help raise awareness of need of member screening.
2. Lab partner Sonora Quest offers all tests, no fasting required
3. For members with travel limitations (DDD), **mobile in-home lab services** are available.
4. Promote communication between PCP and MHP to share information.



Great resources

NAMI

[Metabolic side effects of psychiatric medications](#)



Best Practices Tips to improve results

1. **Consent verification:** Obtain member consent for information exchange between providers.
2. **Trigger points for communication between PCP and MHP:** Medication initiation or change; lab orders or results; treatment plan updates.
3. **Remind & re-schedule:** Use automated reminders; reschedule missed appointments.
4. **Lab access:** Arrange for labs to be done while in office or schedule labs before leaving.

**Thank you for the care you provide
to our members**