

Prediabetes and Asymptomatic Type 2 Diabetes Clinical Practice Algorithm

Screen patients age 40–70 and who are overweight or obese (BMI ≥ 25 kg/m² or for Asian ≥ 23 kg/m²)^A
Age ≥ 45 years without other risk factors^B

Consider screening younger patients who are overweight or obese and have additional risk factors for diabetes,^B including:

- BMI ≥ 25 kg/m² (for Asian: BMI ≥ 23 kg/m²)
- Physical inactivity (exercises less than 3 times per week)
- Hypertension (>140/90 mmHg or on therapy for hypertension)
- African American, American Indian or Alaska Native, Asian American, Hispanic or Latino, or Native Hawaiian or Pacific Islander
- Family history of diabetes (first degree relative)
- Cardiovascular disease
- HDL <35 mg/dL or Triglycerides >250 mg/dL
- Gestational diabetes or history of baby >9 lbs
- Medications that predispose to diabetes (e.g., glucocorticoids, thiazide diuretics, and atypical antipsychotics)
- Smoking^C
- Polycystic ovarian syndrome
- Acanthosis Nigricans

Perform Fasting Plasma Glucose (FPG) or 75 gm 2-h Oral Glucose Tolerance Test (OGTT) or HbA1c

FPG < 100 or
OGTT < 140 or
HbA1c < 5.7%

No diabetes or prediabetes detected at this time:

- Counsel on lifestyle in context of cardiovascular risk factors.
- Test again in 3 years or consider annually if patient has multiple risk factors.

FPG = 100–125 (IFG) or
OGTT = 140–199 (IGT) or
HbA1c 5.7–6.4%

Results indicate an increased risk for the future development of diabetes and cardiovascular disease^B

Assess patient's readiness for lifestyle change. Depending on readiness and preferences, counsel about diabetes prevention using therapeutic lifestyle changes. Options include:

- 5–7% weight loss
- Healthy diet
- Physical activity (30 minutes, 5 times/week, e.g., brisk walking)
- Consider metformin therapy for adults with prediabetes with BMI >35 kg/m², those aged <60 years, and women with prior gestational diabetes mellitus

Refer to a Diabetes Prevention Program if available in your area to provide support for lifestyle change.

Reassess at next visit:

- Is client achieving their own lifestyle goals?
- Client's personal motivation to prevent or delay onset of type 2 diabetes
- Support self-management goal setting around therapeutic lifestyle changes
- Provide positive feedback
- Reevaluate for progression to diabetes annually

FPG ≥ 126 or
OGTT ≥ 200 or
HbA1c $\geq 6.5\%$

2nd test to confirm diabetes diagnosis.
If 2nd test positive, initiate therapy.^D

^A According to the United States Preventive Services Task Force

^B According to the American Diabetes Association

^C www.cdc.gov/tobacco/campaign/tips/diseases/diabetes.html

^D According to the American Diabetes Association or the American Association of Clinical Endocrinologists Standards of Care

Codes for Prediabetes and Diabetes Screening ^{†,‡}

International Classification of Diseases (ICD)			Current Procedural Terminology (CPT*)	
ICD-9	ICD-10	Medical Diagnosis	CPT Codes	Service Provided
V77.1	Z13.1	Diabetes Screening	CPT 82947	Fasting Plasma Glucose Test
790.2	R73.0	Abnormal Glucose	CPT 82950	Post-meal Glucose (2-hour plasma glucose; 2hPG; 2 hr specimen)
790.21	R73.01	Impaired Fasting Glucose	CPT 82951	Oral Glucose Tolerance (3 specimens with 2 hr value included)
790.22	R73.02	Impaired Glucose Tolerance (oral)	CPT 83036	Hemoglobin A1C
790.29	R73.09	Other Abnormal Glucose NEC	CPT 83036QW	Hemoglobin A1C (used for POC test that is CLIA waived [~DCA])
278.00	E66.9	Obesity, unspecified		
278.01	E66.01	Morbid (severe) Obesity		
278.02	E66.3	Overweight		
Medical Nutrition Therapy (MNT) given by nutrition professional			HCPCS/CPT Codes for actual service delivered	
ICD-9	ICD-10	Medical Diagnosis	CPT Codes	Service Provided
250.xx	E11.xx	Type 2 Diabetes Mellitus	97802-MNT	Initial assessment and intervention, individual, face-to-face with the patient, each 15 minutes
			97803-MNT	Reassessment and intervention, individual, face-to-face with the patient, each 15 minutes
			97804-MNT	Group (2 or more individuals), each 30 minutes
			G0270-MNT	Reassessment and subsequent intervention(s) for change in diagnosis, individual, each 15 minutes
			G0271-MNT	Reassessment and subsequent intervention(s) for change in diagnosis, group (2 or more), each 30 minutes
Diabetes Self-Management Training (DSMT)				
250.xx	E10.xx	Type 1 Diabetes Mellitus	G0108-DSMT	Individual, per 30 minutes
250.xx	E11.xx	Type 2 Diabetes Mellitus	G0109-DSMT	Individual, per 30 minutes
CPT and HCPCS for intensive behavioral therapy for obesity (weight loss): Individual and group visits				
ICD-9	ICD-10	Medical Diagnosis	CPT Codes	Service Provided
	ICD-10-CM Codes	Use code for BMI range of the patient – only if BMI >30	G0447	Face-to-face behavioral counseling for obesity, 15 minutes
V85.30	Z68.30	BMI 30.0 - 30.9, adult	G0473	Face-to-face behavioral counseling for obesity, group (2–10), 30 minutes
V85.31–45	Use codes Z68.31–45	BMI ranging from 31–70 and higher, adult	G0473	Face-to-face behavioral counseling for obesity, group (2–10), 30 minutes
			99212-99215	DPP/obesity/group visits billing: oversight for traditional billing with 99212-99215, plus ICD-9/ICD-10 diagnosis code.
			CPT 0403T	Preventive behavior change, intensive programs of prevention of diabetes using a standardized diabetes prevention program curriculum, provided to individuals in a group setting. Effective on January 1, 2016.

Source: www.cdc.gov/diabetes/prevention/lifestyle-program/deliverers/biling.html (Accessed March 4, 2016).

[†] American Diabetes Association. Standards of medical care in diabetes—2013. *Diabetes Care*. January 2013; 36:511-66. doi: 10.2337/dc13-S011.

[‡] Ackermann RT. Coding Guide for Diabetes and Prediabetes Testing. 2013. (Published here with permission from Ronald T. Ackermann MD, MPH).

* New York State Department of Health. New York State Diabetes Prevention Program (NYS DPP) prediabetes identification and intervention algorithm. New York: NY Dept of Health; 2012.



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