

▶ **Prediabetes is a serious condition.**

Use the standardized language of prediabetes and code appropriately.

▶ **The term Borderline Diabetes can be misleading. Use the correct terminology:**

Prediabetes means blood sugar levels are higher than normal and the patient is at greater risk for developing diabetes and cardiovascular disease. Our goal is that a patient understand and respond to the severity of their condition.

Borderline diabetes implies, to a patient, that they aren't immediately at risk. **Prediabetes** implies that they must take action.

IS THE PATIENT AT RISK FOR PREDIABETES?

If the patient has any of the following:

Overweight or obese (BMI greater than 25 kg/m²)* AND positive for at least one of the following:

- Adult age 45 years and older
- Family history of diabetes in first degree relative
- Member of a high-risk ethnic population (African American, Latino, Native American, Asian American and Pacific Islander)
- Hypertension (140/90 mmHg or higher or on therapy for hypertension)
- High Density Lipoprotein (HDL) Cholesterol less than 35 mg/dL
- Triglyceride level greater than 250mg/dL
- History of Gestational Diabetes Mellitus (GDM) or baby over 9 pounds
- Cardiovascular disease
- Acanthosis nigricans
- Polycystic ovarian syndrome
- Medications that predispose to diabetes (i.e. atypical antipsychotics and steroids)

**At-risk BMI may be lower in some ethnic groups*

HOW IS PREDIABETES DIAGNOSED?

If a diagnostic test has not been performed in the past 24 months, use one of the following to determine prediabetes or diabetes status:

DIAGNOSTIC TEST	NORMAL	PREDIABETES	DIABETES
Fasting Plasma Glucose	< 100 mg/dL	100 mg/dL-125 mg/dL	≥ 126 mg/dL
Oral Glucose Tolerance Test	< 140 mg/dL	140 mg/dL-199 mg/dL	≥ 200 mg/dL
A1C	≤ 5.6%	5.7%-6.4%	≥ 6.5%

HOW CAN PREDIABETES BE MANAGED?

If the patient has prediabetes, please follow the American Diabetes Association (ADA) clinical guidelines for treating prediabetes:

- Counsel patient on diagnosis and answer questions
- Explain the National Diabetes Prevention Program (see resources)
- Provide National Diabetes Education Program (NDEP) diabetes risk reduction materials
- Schedule follow-up appointments as needed
- Give positive feedback about lifestyle changes, including exercise and diet modifications of a 5–7% weight loss (if indicated) and 150 minutes of physical activity per week
- Re-evaluate progression to diabetes every year
- Metformin therapy for prevention of type 2 diabetes may be considered for those with prediabetes, especially for those with BMI > 35kg/m², younger than 60 years, and a woman with prior gestational diabetes

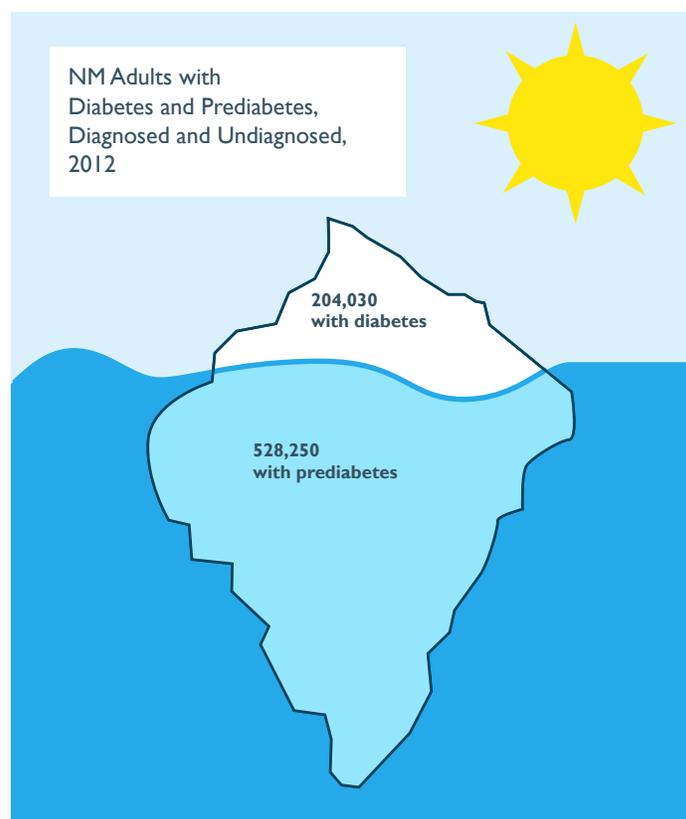
**American Diabetes Association*

PREDIABETES CODING

To code for a prediabetes diagnosis correctly, use the **ICD-9 790.29** and **ICD-10 R73.09** codes.

► **Note:** Medicare covers one glucose test per year if never previously tested and two tests per year for individuals with prediabetes.

NEW MEXICO PREDIABETES BURDEN – AN ESTIMATED 35% OF ADULTS BASED ON NATIONAL DATA



For additional prediabetes information, please visit the following resources:

Local

- National Diabetes Prevention Program: www.stopdiabetesnm.org
- New Mexico Department of Health – Diabetes Prevention and Control Program: www.diabetesnm.org
- Prescription Trails: www.prescriptiontrailsnm.org
- New Mexico Healthcare Takes on Diabetes: www.nmtod.org

National

- National Diabetes Prevention Program (NDPP): <http://www.cdc.gov/diabetes/prevention/prediabetes.htm>
- National Diabetes Information Clearinghouse: www.diabetes.niddk.nih.gov/dm/pubs/diagnosis/
- National Diabetes Education Program: www.ndep.nih.gov
- American Diabetes Association Pre-Diabetes: www.diabetes.org/pre-diabetes.jsp
- National Association for Chronic Disease Directors: www.chronicdisease.org/?NDPP_home

Developed by the Chronic Disease Prevention Council prediabetes workgroup with representatives from: New Mexico Healthcare Takes On Diabetes, Zia Association of Diabetes Educators, New Mexico Department of Health Diabetes Prevention and Control Program, Molina Healthcare, New Mexico Primary Care Association, University of New Mexico Hospitals, Chronic Disease Prevention Council, and United Health Care.

Permission for educational use may be obtained by calling 505-463-5300.

References:

1. American Diabetes Association. Standards of Medical Care in Diabetes. *Diabetes Care*. January 2014; 37(1):S14-S80.
2. American Diabetes Association. Diagnosis and Classification of Diabetes Mellitus. *Diabetes Care*. January 2014;37(1):S81-S90.