

Home Blood Glucose Monitor and Supplies Laboratory Test Results Suggested Clinical Data Elements

Version R1.0a (9/5/2017)

Note: If these CDEs are used:

- 1) CDEs in black Calibri are required
- 2) CDEs in *burnt orange Italics Calibri* are required if the condition is met
- 3) CDEs in blue Times New Roman are recommended but not required

Beneficiary Information CDEs

PBD: Patient/Beneficiary Demographics

PBD1: Patient's first name, last name, and middle initial (text)

PBD2: Patient's date of birth (date: MM/DD/YYYY)

PBD3: Patient's gender (Single selection from the value set: M, F, Other)

PBD4: Patient's Medicare ID (Medicare ID format and check digit)

F2F Encounter CDEs

PND: Provider/NPP Demographics

PND1: Provider or allowed NPP first name, last name, middle initial, and suffix (text).

PND2: Provider NPI (Numeric with check digit)

ENC: Encounter

ENC1: Date of encounter (date: MM/DD/YYYY)

Testing Information CDEs

PPT: Person Performing Testing

PPT1: Laboratory (text)

PPT2: Laboratory NPI (Numeric with check digit)

PPT3: Name of tester (text)

PPT4: Tester credentials (text)

Date of Testing

DOT: Date of Testing

DOT1: Date of testing (date: MM/DD/YYYY)

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Home Blood Glucose Monitor and Supplies Laboratory Tests and Results CDEs

HGMTST: Home Blood Glucose Monitor and Supplies Laboratory Testing Information

HGMTST1: Fasting plasma glucose level: (numeric, mg/dl)

HGMTST2: Random plasma glucose level: (numeric, mg/dl)

HGMTST3: Two-hour oral glucose tolerance test, plasma glucose level: (numeric, mg/dl)

HGMTST4: A1c level: (numeric, %)

HGMTST5: Confirmatory test, if applicable (see guidance) date: (date MM/DD/YYYY)

HGMTST6: Fasting plasma glucose level: (numeric, mg/dl)

HGMTST7: Random plasma glucose level: (numeric, mg/dl)

HGMTST8: Two-hour oral glucose tolerance test, plasma glucose level: (numeric, mg/dl)

HGMTST9: A1c level: (numeric, %)

Provider Signature CDEs

SIGPNP: Physician/NPP Sgnature Elements

SIGPNP1: Physician/NPP signature (image, electronic, or digital)

SIGPNP2: Physician/NPP name (printed) (text)

SIGPNP5: Date of signature (MM/DD/YYYY)

SIGPNP4: Physician/NPP NPI (NPI format)