MCT2D Performance Measure - CGM Year 1

Specialty: Endocrinology
Measurement Year: 07/01/2025 - 08/31/2026
Reward Year: 03/01/2027 - 02/28/2028

Eligible Population (Denominator)

For all BCBSM/BCN/BCBS-MA/BCN-A patients attributed to an MCT2D participating endocrinology practice who are:

- aged 18 and above
- meet the MCT2D criteria for inclusion in the data registry and
- have had at least one claim for a CGM device within the 12-month intervention period for a CGM device claim (including 95251).

Reward Amount

Moving forward, BCBSM will not have separate participation and performance measure VBR. It will be part of a single scorecard that adds up to 100 points, consisting of both performance measures and participation measures. Different point thresholds will constitute different VBR earnings, with a point threshold required for 102% VBR, 103% VBR, and 105% VBR. The points thresholds are as follows:

- ≥ 55 to < 70 points= 102% VBR
- ≥ 70 to < 85 points = 103% VBR
- 85+ points = 105% VBR

Eligible Physicians

Any endocrinologist who is part of a continuing practice (started in MCT2D prior to 2025) is deemed eligible for VBR by BCBSM is eligible to participate in the performance measure.

Measurement Population

- ***Practice level measurement*:** All continuing endocrinology practices, irrespective of the size of their patient population, will be measured at the practice level.

Measurement Definition (Numerator)

The percent of eligible patients (see above) who have had at least one 95251 billing claim within the 14-month period.

Goal Rate

Practices must achieve a 5% absolute improvement on their baseline rate (e.g. if baseline rate was 54.5%, the goal rate is 59.5%), up to the collaborative wide (PCP and endocrinology practices) 95th percentile benchmark of 89.59%. Practices that are already above the 95th percentile benchmark will be asked to maintain performance throughout the measurement period.

Baseline Data

Final baseline data is determined based on the April 2025 data refresh. The baseline measurement period for CGM device claims is from 01/01/2024 through 12/31/2024. The baseline measurement period for a 95251 billing claim is from 01/01/2024 through 02/28/2025.

Intervention Period Data

Determination of if a patient is on a CGM device (Denominator): 07/01/2025 - 06/30/2026
Determination of 95251 Billing (Numerator): 07/01/2025 - 08/31/2026

Please note, CGM device claims and 95251 claims collected between 03/01/2025 - 06/30/2025 will NOT count towards meeting the measure. We do not expect that you will have been actively working on the measure during this period. If a patient has a 95251 record during this timeframe, it will not be part of the final percentage calculation as it is outside the measurement year. The purpose of having a 14 month intervention period is to ensure clinical appropriateness for repeat testing on all patients, meaning that not capturing data from this period will not negatively impact practices interpreting CGM data at least once per year.

The population denominator will be allowed to change based on patient attribution until 5/31/2026, at which point it will be held steady, such that new patients are not added to the denominator for the final 3 months. Thus key dates are as follows:

1) 05/31/2026 = last date that a new patient can be attributed to your practice
    a) Note: patients that leave your practice after this date will still fall out of your denominator.
2) 06/30/2026 = the last date for a CGM device claim
3) 08/31/2026 = last date for 95251 billing

MCT2D analysis of the data demonstrated that the number of attributed patients remains fairly stable throughout the year, such that this should not negatively impact practices. The reason for not locking into the population at the beginning of the performance year is to allow for the normal movement of providers and their patients between practices and places of employment, instead of the removal of these patients from the denominator at subsequent data refreshes. To be as fair as possible, the locking of the population for the last 3 months is to limit occurrences

where a patient is attributed to a physician near the end of the performance year, and the practice is held accountable for ensuring that patient receives a CGM data interpretation.

Data Releases and Progress Reporting

MCT2D will be using the MCT2D data extracts from the Michigan Data Collaborative to track performance on the metric MCT2D. The anticipated release schedule is below. Please note, 2026 dates may shift slightly.

- 10/31/2025 (data through 08/31/2025)
- 12/30/2025 (data through 10/31/2025)
- 01/30/2026 (data through 11/30/2025)
- 03/31/2026 (data through 01/31/2026)
- 04/30/2026 (data through 02/28/2026)
- 06/30/2026 (data through 04/30/2026)
- 07/31/2026 (data through 05/31/2026)
- 09/30/2026 (data through 07/31/2026)
- 10/30/2026 (data through 08/31/2026)

Practices will receive reports on current performance at the following timepoints:

- Baseline report: July 2025
- November 2025
- April 2026
- August 2026
- Final performance report: February 2027

Data Reconciliation Plan

We will use the January 2027 data release to calculate final performance in order to ensure full data completeness, though the performance year will end on 8/31/2026 and patients who have a 95251 code billed after that date will not be included. MCT2D will submit a list of physicians who earned the VBR to BCBSM by January 2027 and BCBSM will review and reconcile data in order to finalize and pay VBR on 3/1/2027.

Appendix

Codes used to determine that a patient is on a CGM:

CODE SYSTEM	CODE	DEFINITION
CPT	95249	Personal CGM - Startup/Instruction.
CPT	95251	CGM Data Interpretation.
HCPCS	A9276	Sensor; Invasive (e.g., Subcutaneous), Disposable, For Use With Interstitial Continuous Glucose Monitoring System.
HCPCS	A9277	Transmitter; External, For Use with Interstitial Continuous Glucose Monitoring System
HCPCS	A9278	Receiver (Monitor); External, For Use with Interstitial Continuous Glucose Monitoring System.
HCPCS	K0553	Supply allowance for therapeutic continuous glucose monitor (CGM), includes all supplies and accessories, 1 unit of service = 1 month's supply.
HCPCS	K0554	Receiver (Monitor), dedicated, for use with therapeutic continuous glucose monitor system.
CPT	0446T	Creation of subcutaneous pocket with insertion of implantable interstitial glucose sensor, including system activation and patient training.
CPT	0448T	Removal of implantable interstitial glucose sensor with creation of subcutaneous pocket at different anatomic site and insertion of new implantable sensor, including system activation
HCPCS	A4238	Supply allowance for adjunctive, non-implanted continuous glucose monitor (cgm), includes all supplies and accessories, 1 month supply = 1 unit of service
HCPCS	A4239	Supply allowance for non-adjunctive, non-implanted continuous glucose monitor (cgm), includes all supplies and accessories, 1 month supply = 1 unit of service
HCPCS	A9276	Sensor; Invasive (e.g., Subcutaneous), Disposable, For Use With Interstitial Continuous Glucose Monitoring System.

HCPCS	A9277	Transmitter; external, for use with non-durable medical equipment interstitial continuous glucose monitoring system
HCPCS	A9278	Receiver (monitor); external, for use with non-durable medical equipment interstitial continuous glucose monitoring system
HCPCS	E2102	Adjunctive, non-implanted continuous glucose monitor or receiver as maintained by CMS falls under Miscellaneous Pumps and Monitors
HCPCS	E2103	Non-adjunctive, non-implanted continuous glucose monitor or receiver as maintained by CMS falls under Miscellaneous Pumps and Monitors.
HCPCS	S1030	Continuous non-invasive glucose monitoring device, purchase (for physician interpretation of data, use CPT code)
HCPCS	S1031	Continuous non-invasive glucose monitoring device, rental, including sensor, sensor replacement, and download to monitor (for physician interpretation of data, use CPT code)
HCPCS	S1035	Sensor; invasive (e.g., subcutaneous), disposable, for use with artificial pancreas device system
HCPCS	S1036	Transmitter; external, for use with artificial pancreas device system
HCPCS	S1037	Receiver (monitor); external, for use with artificial pancreas device system
HCPCS	G0308	Continuous glucose monitoring for a 180-day period (effective for services on or after July 1, 2022
HCPCS	G0309	Continuous glucose monitoring for a 180-day period (effective for services on or after July 1, 2022

Pharmacy Claims NDC Codes

CODE	**BRAND_NAME**
57599000019	FREESTYLE LIBRE 10 DAY SENSOR
57599000021	FREESTYLE LIBRE 10-D READER
57599000100	FREESTYLE LIBRE 14 DAY SENSOR

57599000101	SENSOR KIT GLUCOSE FLASH FREESTYLE LIBRE 14DAY
57599000200	Freestyle Libre 14 Day Reader Kit
57599080000	Freestyle Libre 2 Pro 14 Day
57599080300	Freestyle Libre 2 Pro Reader Kit
63000031699	GUARDIAN LINK (3) TRANSMITTER KIT
63000033698	GUARDIAN SENSOR 3
63000035751	GUARDIAN LINK (3) TRANSMITTER KIT
63000035844	GUARDIAN SENSOR 3
76300000260	Medtronic Guardian Connect Transmitter
76300007201	GUARDIAN REAL-TIME SYSTEM
76300007202	GUARDIAN REAL-TIME SYSTEM PEDIATRIC
76300017962	GUARDIAN SENSOR 3
43169070405	GUARDIAN SENSOR 3
43169095568	Guardian Link 3 Transmitter Kit for 630G and 670G, Includes (1) Transmitter, (1) Charger, (1) One-Press Serter, and (2) Testers
08627001301	DEXCOM G4 PLATINUM TRANSMITTER
08627001401	DEXCOM G5 TRANSMITTER
08627001601	DEXCOM G6 TRANSMITTER
08627002011	DEXCOM G4 PLATINUM RECEIVER
08627002021	DEXCOM G4 PLATINUM RECEIVER
08627002031	DEXCOM G4 PLATINUM RECEIVER
08627003011	DEXCOM G4 PLATINUM PEDIATRIC RECEIVER
08627003021	DEXCOM G4 PLATINUM PEDIATRIC RECEIVER
08627003031	DEXCOM G4 PLATINUM PEDIATRIC RECEIVER

08627005011	DEXCOM G4 PLATINUM RECEIVER
08627005021	DEXCOM G4 PLATINUM RECEIVER
08627005031	DEXCOM G4 PLATINUM RECEIVER
08627005104	DEXCOM G5/G4 PLATINUM SENSOR
08627005303	DEXCOM G6 SENSOR
08627006011	DEXCOM G4 PLATINUM PEDIATRIC RECEIVER
08627006021	DEXCOM G4 PLATINUM PEDIATRIC RECEIVER
08627006031	DEXCOM G4 PLATINUM PEDIATRIC RECEIVER
08627008011	DEXCOM G5 RECEIVER
08627008021	DEXCOM G5 RECEIVER
08627008031	DEXCOM G5 RECEIVER
08627009011	DEXCOM RECEIVER KIT
08627009111	DEXCOM G6 RECEIVER
08627007701	DEXCOM G7 SENSOR
08627007801	DEXCOM G7 RECEIVER
57599081800	FREESTYLE LIBRE 3 SENSOR
57599084400	LIBRE 3 Plus - FreeStyle LIBRE 3 Plus Sensor
57599083500	LIBRE 2 Plus - FreeStyle LIBRE 2 Plus Sensor - LIBRE 2 Plus
63000041338	GUARDIAN SENSOR 4, FOR MINIMED® 780G, 5/BX
63000044515	Guardian Link 4 Transmitter For 780G Systems
08627007901	DEXCOM G7 15 DAY

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