Prediabetes Screening Guide

Definition of Prediabetes[1]

Criteria for defining prediabetes in non-pregnant adults:

HbA1c of 5.7%-6.4%

Screening Tests Consistent with Prediabetes[2] *(One result sufficient for diagnosis)*

- **A** An HbA1c level of **5.7%-6.4%**
- **B** A fasting plasma glucose level of **100 to 125 mg/dL**
- **C** 2 hour 75g glucose tolerance test result of **140 to 199 mg/dl**

Why We Care

Prediabetes significantly increases the risk of developing type 2 diabetes, cardiovascular disease, and kidney disease if left untreated.[3]

Without lifestyle changes, approximately **1 in 5 people with prediabetes will develop type 2 diabetes within five years.**[4]

Only 19% of patients with prediabetes are aware of their diagnosis.[5]

We can do better!

Who should I screen?	**Adults aged 35 to 70 years who have overweight or obesity (BMI ≥ 25).**
How often?	**Every 3 years.**
Consider these factors	**Consider screening at an earlier age (<35) if a patient:** • Is from a population with a disproportionately high prevalence of diabetes (American Indian/Alaska Native, Black, Hawaiian/ Pacific Islander, Hispanic/ Latino). • Has a family history of diabetes. • Has a history of gestational diabetes or polycystic ovarian syndrome. **Consider screening at a lower BMI (≥23) if the patient is of Asian descent.**
Based on USPSTF recommendations[2]	

Preventive Interventions (Individualize care to your patient's needs)

- **Refer to a Diabetes Prevention Program (DPP):** DPP is the gold standard of care for patients with prediabetes, and is covered by Medicare, Medicaid, and by many commercial insurance plans with a confirmed prediabetes diagnosis.
- **Prescribe lower carbohydrate eating patterns and increased physical activity to patients.** Intensive diet and lifestyle changes reduce the incidence of diabetes by 58% over 3 years.[6]
- **Offer metformin:** Metformin has been shown to reduce the incidence of diabetes by 31%.[3]

Coding and Billing for Prediabetes Screening

Medicare

Medicare covers HbA1c, fasting plasma glucose, and glucose tolerance tests when associated with ICD-10-CM diagnosis code Z13.1.

HCPCS/CPT Codes	
83036	*Hemoglobin A1C*
82947	*Glucose; quantitative, blood (except reagent strip)*
82950	*Glucose; post glucose dose (includes glucose)*
82951	*Glucose Tolerance Test (GTT); three specimens (includes glucose)*

ICD-10-CM Diagnosis Code	
Z13.1	*Encounter for screening for diabetes mellitus*
R73.03	*Prediabetes*

*Screening is covered **2 times within a 12-month period.** Patients **do not have coinsurance or a deductible** for diabetes screenings.*

Indicates commonly used codes

Scan for CMS Update

Commercial

Commercial insurance plans are generally required to cover prediabetes screening using the codes above for adults 35–70 who are overweight or obese. Patient coinsurance and deductibles typically don't apply to prediabetes screenings. However, it's always a good idea to have patients check with their insurance plan for details on screening coverage and other related services such as diabetes prevention programs.

[1] American Diabetes Association 2025 doi:10.2337/dc25-S002
[2] Davidson 2021 doi:10.1001/jama.2021.12531
[3] Echouffo-Tcheugui 2023 doi:10.1001/jama.2023.4063
[4] Nicolaisen 2023 doi:10.1016/j.diabres.2023.110829
[5] Centers for Disease Control and Prevention 2024 National Diabetes Statistics Report
[6] Crandall 2025 doi:10.2337/dc25-0014

*Visit **www.MCT2D.org** to find resources, coverage information, and more!*

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