

**Table, Supplemental Digital Content 2.** Criteria used to identify diabetes process of care metrics

<b>Metric</b>	<b>Identifying criteria</b>
HbA1C testing	<ul style="list-style-type: none"> <li>• An HbA1c test (HbA1c Tests Value Set) performed during the measurement year, as identified by claim/encounter or automated laboratory data.</li> </ul>
Eye exam	<ul style="list-style-type: none"> <li>• Any code in the Diabetic Retinal Screening Value Set billed by an eye care professional (optometrist or ophthalmologist) during the measurement year.</li> <li>• Any code in the Diabetic Retinal Screening With Eye Care Professional Value Set billed by any provider type during the measurement year.</li> <li>• Any code in the Diabetic Retinal Screening Negative Value Set billed by any provider type during the measurement year.</li> </ul>
Medical attention for nephropathy	<ul style="list-style-type: none"> <li>• A nephropathy screening or monitoring test (Urine Protein Tests Value Set).</li> <li>• Evidence of treatment for nephropathy or ACE/ARB therapy (Nephropathy Treatment Value Set).</li> <li>• Evidence of stage 4 chronic kidney disease (CKD Stage 4 Value Set).</li> <li>• Evidence of ESRD (ESRD Value Set).</li> <li>• Evidence of kidney transplant (Kidney Transplant Value Set).</li> <li>• A visit with a nephrologist, as identified by the organization’s specialty provider codes (no restriction on the diagnosis or procedure code submitted).</li> <li>• At least one ACE inhibitor or ARB dispensing event (Table CDC-L).</li> </ul>

Criteria were adapted from Healthcare Effectiveness Data and Information Set (HEDIS) 2017, Volume 2.<sup>25</sup>