

Diabetic Screenings

Diabetic Screenings:

HbA1c and Urine Protein Screening (Microalbumin) are recommended for members who have a diagnosis of diabetes.

These tests are offered at no cost to Medicare members who need them. These tests must be completed during 2021 in order for you to be eligible to receive a reward card.

If you have kidney disease and are under the care of a nephrologist, you may not need to have the urine protein test completed. In this case, you may provide evidence of a visit with your nephrologist during 2021.

Note: Members must complete both screenings to be eligible for a reward card.

Provider: Please fill out this form, then fax it and proof of service to 410-779-3957. Please note, both tests and all data fields, including the results, must be completed in order for your CareFirst BlueCross BlueShield Medicare Advantage patient to receive their reward card.

Member Name: _____

Member ID: _____

Member Date of Birth: _____

Date of HbA1C: _____ **Value:** _____

Date of Urine Protein Screening (Microalbumin): _____

Value: _____

	Yes	No	Not Prescribed
ACE Inhibitor or ARB			
Diabetes Medication(s)			
Cholesterol Medication(s)			

Today's Date: _____

Does the patient see a nephrologist? If yes, date of last visit:

Name of Provider/Practice: _____

Location/Address: _____

Location Phone: _____

Location Fax: _____ **NPI:** _____

Name of Office Staff Member Completing this Form:

Provider Signature: _____

Provider Use Only: Please use one of these codes for diabetic tests:

HbA1c: 83036, 83037 (CPT Codes), 3044F, 3046F, 3051F, 3052F (CPT II)
Nephropathy Screening: 3066F or 4010F (CPT II)

2021 Diabetic Screenings

Getting your reward card is easy.



Call your provider to schedule your diabetic screenings. If you prefer, we can assist you in scheduling your visit, just call our Member Services number.

Take this booklet with you to your appointment.



At your appointment, ask your provider to complete the form, sign, and date it.

Write your full name and member identification number (located on the front of your member ID card) on the form.



Ask the office staff to fax the completed form to CareFirst BlueCross BlueShield Medicare Advantage at 410-779-3957.

Your reward card will arrive in the mail within six (6) to eight (8) weeks after we receive the completed form from your doctor and have verified the services. Reward cards cannot be used to buy tobacco or alcohol. Reward cards cannot be converted to cash. You can only receive one (1) reward card for the completion of both the HbA1c and Microalbumin in 2021.

PROVIDER USE:

- Review the patient's medical record and complete the form.
- Make sure the form is signed and dated. By signing this form, you are attesting to the accuracy of information.
- Make sure the patient's name and Member ID are included.
- Please file a copy of the completed form in the patient's medical records.