

Intermountain Health appreciates the opportunity to provide a public comment in support of adopting the MUC2024-028 Screening for Abnormal Glucose Metabolism in Patients at Risk of Developing Diabetes (Screening).

Screening for prediabetes and undiagnosed type 2 diabetes is critical to improving both prevention and care of type 2 diabetes. The Centers for Disease Control and Prevention (CDC) estimates that approximately 97.6 million American adults have prediabetes.<sup>1</sup> They note that more than 80% of adults with prediabetes are not aware that they have the condition. Additionally, the CDC estimates 38.4 million adults have diabetes with 8.7 million being undiagnosed.<sup>1</sup> The prevalence of prediabetes and diabetes also increases with age.<sup>1</sup> Early identification of both prediabetes and type 2 diabetes is crucial so that patients can receive effective interventions to decrease the likelihood of disease progression or complications. We have seen here at Intermountain that by early identification patients are more likely to participate in an intervention pathway and are more likely at delaying and/or preventing the onset of diabetes.

The Screening measure is based on the United States Preventive Services Task Force (USPSTF) 2021 Prediabetes and Type 2 Diabetes: Screening recommendation.<sup>2</sup> “The USPSTF recommends screening for prediabetes and type 2 diabetes in adults aged 35 to 70 years who have overweight or obesity.”<sup>2</sup>

Furthermore, this measure would address a recommendation from the National Clinical Care Commission (NCCC) to Congress and the Secretary of Health and Human Services (HHS), which called for adopting the Screening measure developed by the American Medical Association as part of a strategy to prevent diabetes among high-risk individuals.<sup>3</sup>

Based on the above recommendations, this measure would be recognized by physicians as clinically appropriate and meaningful for improved patient care. The measure targets an appropriate patient population that would clearly benefit from glucose screening. We believe the measure specifications are feasible to implement by most health care organizations; most organizations routinely capture the data elements in their EHR. Additionally, this measure is both valid and reliable as demonstrated in the testing results.

Intermountain Health believes that screening for abnormal glucose is an important preventive service and is reasonable to include in accountability programs.



Jessica Shields, MS, RD  
Director, Health Promotion & Wellness  
Intermountain Health

References:

<sup>1</sup>CDC. (2024, July 23). National Diabetes Statistics Report. Retrieved November 15, 2024, from Diabetes website: <https://www.cdc.gov/diabetes/php/data-research/>

<sup>2</sup>US Preventive Services Task Force. (2021). Screening for Prediabetes and Type 2 Diabetes: US Preventive Services Task Force Recommendation Statement. JAMA, 326(8), 736–743. <https://doi.org/10.1001/jama.2021.12531>

<sup>3</sup>Report to Congress on Leveraging Federal Programs to Prevent and Control Diabetes and Its Complications. National Clinical Care Commission, 2021, <https://health.gov/about-odphp/committees-workgroups/national-clinical-care-commission/report-congress>.