



Diabetes Care – Blood Sugar Controlled

Quick Reference Guide

2026

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MEASURE SNAPSHOT

CMS Part C Star Measure: C12 - Diabetes Care - Blood Sugar Controlled

CMS Definition: The percentage of patients with diabetes, ages **18 to 75**, whose most recent **HbA1c** result exceeded **9%**, or who had no HbA1c test during the measurement year.¹

FIELD	ENTRY
CMS measure name	Diabetes Care - Blood Sugar Controlled, GSD
Domain	Managing Chronic (Long Term) Conditions
CMS weighting category	Intermediate Outcome Measure
Weight	3, triple-weighted
Primary data source	HEDIS; laboratory results, claims, and eligible clinical data
Unit of measurement	CMS health plan-level measure; individual clinicians and practices do not receive a C12 Star Rating.
Trend direction	Higher is better ; CMS reverse-scores this rate (100 minus the poor-control rate)
Case-mix adjusted	No ¹
Measurement period	01/01/2024 - 12/31/2024; two years before reporting year ¹
Star measure credit	The most recent glycemic result of the measurement year, at or below 9.0% , an HbA1c, or a glucose management indicator from CGM data where the specification's requirements are met. A patient with no result at all counts as poor control ^{1,2}
Statistical method	Clustering, with Tukey outer-fence outlier deletion applied before cut points are set. Cut points are recalculated each year and are not fixed targets ¹
Not reported for	Prescription Drug Plans. Reported for all other health plan types, including I-SNP-only health plans, though many institutional patients 66 and older exit through the exclusions ¹

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