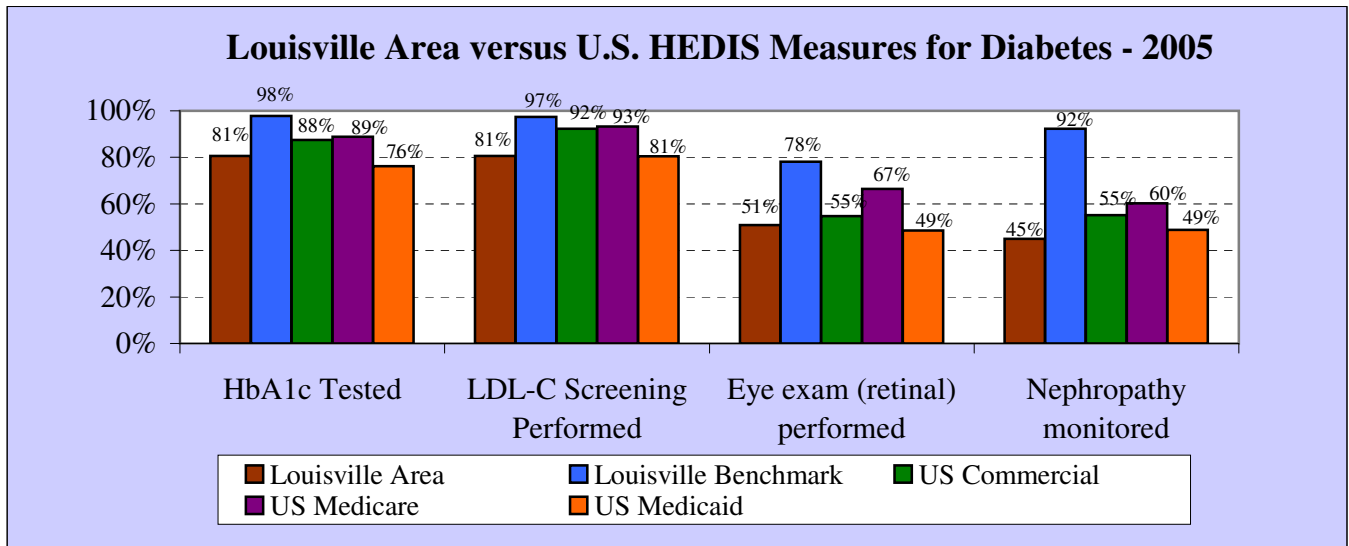




The Kentuckiana Health Alliance Quality Improvement Consortium (KHAQI-C) is pleased to announce the release of the first *Annual KHAQI-C Consolidated Measurement Report*. This report was sent to physicians in the Louisville metropolitan area to provide feedback on the quality of care their patients received in diabetes screening and treatment. Anthem, Humana, and Passport Health provided administrative data for this confidential report. All measures use criteria established by HEDIS. However, this report used administrative data only. No chart review was conducted, although the national statistics provided did include chart review and therefore is not a true comparison. Individual physician data was NOT publicly shared.

Diabetes Measures	Louisville Region <sup>1</sup> Claims Data Only			Louisville Benchmark <sup>2</sup> Claims Data Only			2005 HEDIS Trends <sup>3</sup> Claims Data Plus Chart Reviews		
	Den	Num	Rate	Den	Num	Rate	Commercial	Medicare	Medicaid
HbA1c Tested	7,795	6,280	81%	780	763	98%	88%	89%	76%
LDL-C Screening Performed	7,795	6,278	81%	897	874	97%	92%	93%	81%
Eye exam (retinal) performed	7,795	3,969	51%	898	701	78%	55%	67%	49%
Nephropathy monitored	7,795	3,502	45%	786	725	92%	55%	60%	49%



**Notes:**

- Louisville Area includes Jefferson, Oldham, and Bullitt counties in Kentucky and Floyd, Harrison, Scott, and Clark counties in Indiana. Measures reflect overall performance of all Louisville area physicians as available from the participating plans' administrative data.
- Louisville Benchmark is an average rate for the top-ranked physicians or practices in the Louisville area whose patients together account for 10% of the total diabetes population included in this report.
- "The State of Health Care Quality 2006: Industry Trends and Analysis, 2006," National Committee for Quality Assurance



## **Explanation of Metrics for Louisville Area Data**

### **Eligible Population:**

Members 18–75 years of age with diabetes (type 1 and type 2) who had no more than one gap in enrollment of up to 45 days during the measurement year.

### **Numerator statement:**

#### HbA1c testing

An HbA1c test performed during the measurement year, as identified by claim/encounter or automated laboratory data.

#### LDL-C screening

An LDL-C test performed during the measurement year or year prior to the measurement year, as identified by claim/encounter or automated laboratory data.

#### Eye exam

An eye screening for diabetic retinal disease as identified by administrative data. This includes diabetics who had one of the following:

- 1) a retinal or dilated eye exam by an eye care professional (optometrist or ophthalmologist) in the measurement year
- 2) a *negative* retinal exam (no evidence of retinopathy) by an eye care professional in the year prior to the measurement year.

For exams performed in the year prior to the measurement year, an automated result must be available.

#### Monitoring for diabetic nephropathy

Screening for nephropathy or evidence of nephropathy, as documented through administrative data. The Managed Care Organization is allowed to count toward the numerator members who have been screened for urine microalbumin, or members who have nephropathy, as demonstrated by either evidence of medical attention for nephropathy, a visit to a nephrologist or a positive urine macroalbumin test.