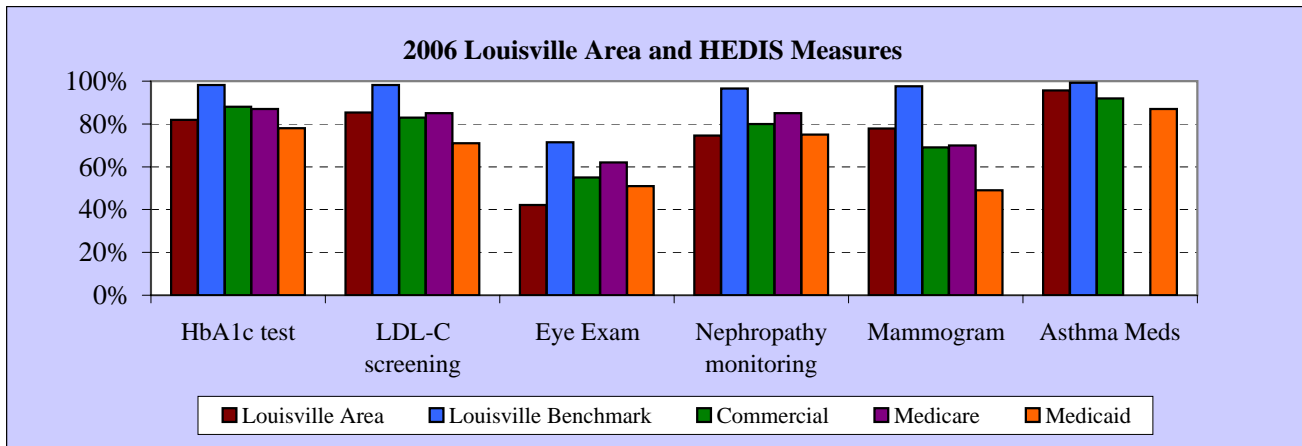




Aggregate Louisville Area Report on Select Preventive Care Measures 2006 Data

The **Kentuckiana Health Alliance Quality Improvement Consortium (KHAQI-C)** is pleased to announce the release of the second annual *KHAQI-C Consolidated Measurement Report*. This report was sent to healthcare providers in the Louisville metropolitan area to provide feedback on the quality of care their patients received in diabetes screening and treatment, breast cancer screening, and pediatric asthma. **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 provider data was NOT publicly shared.

Diabetes Measures	Louisville Area ¹ Claims Data Only			Louisville Benchmark ² Claims Data Only			2006 HEDIS Trends ³ Claims Data Plus Chart Reviews		
	Den	Num	Rate	Den	Num	Rate	Commercial	Medicare	Medicaid
HbA1c Tested	11,153	9,130	82%	1,116	1,096	98%	88%	87%	78%
LDL-C Screening Performed	11,153	9,525	85%	1,143	1,122	98%	83%	85%	71%
Eye Exam (retinal) Performed	11,153	4,696	42%	1,123	802	71%	55%	62%	51%
Nephropathy Monitored	11,153	8,324	75%	1,177	1,137	97%	80%	85%	75%
Mammography									
Mammogram Performed	34,958	27,200	78%	3,742	3,652	98%	69%	70%	49%
Asthma Medication									
Appropriate Medication	1,408	1,348	96%	148	147	99%	92%	NA	87%



Notes:

- Louisville Area includes Jefferson, Oldham, and Bullitt counties in Kentucky and Floyd, Harrison, Clark, and Scott counties in Indiana. Measures reflect overall performance of all Louisville area providers as available from the participating plans' administrative data.
- Louisville Benchmark is an average rate for the top-ranked providers in the Louisville area whose patients together account for 10% of the total population in this report with respect to each measure.
- "The State of Health Care Quality 2007" National Committee for Quality Assurance

Explanation of 2007 HEDIS Criteria

Diabetes Measures:

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 2006.

Numerator statement

HbA1c testing

An HbA1c test performed in 2006, as identified by claim/encounter or automated laboratory data.

LDL-C screening

An LDL-C test performed in 2006, 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 2006
- 2) a *negative* retinal exam (no evidence of retinopathy) by an eye care professional in 2005

For exams performed in 2005, an automated result must be available.

Monitoring for diabetic nephropathy

Screening for nephropathy or evidence of nephropathy, as documented through administrative data. Members who have been screened for urine microalbumin, or members who have nephropathy, as demonstrated by either evidence of treatment for nephropathy, a visit to a nephrologist, a positive urine macroalbumin test, or evidence of ACE inhibitor/ARB therapy in 2006.

Mammography Measure:

Eligible Population

Female members 40–69 years of age who had no more than one gap in enrollment of up to 45 days during 2005 and 2006.

Numerator statement

Breast Cancer Screening: One or more mammograms during 2005, 2006.

Asthma Measure:

Eligible Population

Members 5–17 years of age who are identified as having persistent asthma and who had no more than one gap in enrollment of up to 45 days in 2005, 2006. This includes children who met at least one of the criteria below, during both 2005 and 2006 (criteria need not be the same across both years).

- 1) at least one ED visit with asthma as the principle diagnosis
- 2) at least one acute inpatient discharge with asthma as the principle diagnosis
- 3) at least four outpatient asthma visits, with asthma as one of the listed diagnoses and at least two asthma medications dispensed
- 4) at least four asthma medications dispensed (on four separate occasions)

Numerator statement

Use of Appropriate Medications: Dispensed at least one prescription for inhaled corticosteroids, nedocromil, cromolyn sodium, leukotriene modifiers, or methylxanthines during 2006.