

HMO 2008 Diabetes Condition Management Program Summary Report

Year	Age 18-75 yrs eligible population (HEDIS)	Number of diabetic members added through physician referral	Total number of unique diabetics (estimate)* identified during the year	Percent of age 18-75 yrs eligible diabetes population	Interventions							
					Initial population identified for the QI Fund Project ^a		Number of identified diabetic members who received quarterly educational mailings		Number of diabetic members who received influenza vaccination reminders ^b		Number of glucose meters distributed	Number of members sampled for Diabetes Survey ^c
					Number	Percent	Number	Percent	Number	Percent	Number	Number
2004	608,548		28,564	5%	23,367	82%	27,342	96%	NA	NA	2,792	1,100
2005	594,926		28,864	5%	22,885	79%	28,548	99%	24,701	86%	3,828	1,100
2006	606,556		28,995	5%	22,389	77%	28,746	99%	26,120	90%	1,744	800
2007	617,521		36,930	6%	34,529	93%	36,858	100%	32,218	87%	2,149	900
2008	616,402	4	47,718	8%	35,449	74%	46,184	97%	28,107	59%	1,617	700

^a Criteria for identifying diabetics was members age 18 to 75 years with one of the following in the measurement year and prior measurement year:

- 2 face-to face- encounters with different dates of service in an ambulatory/non acute I/P setting
- 1 face-to face- encounter in an acute I/P or ER setting
- 1 prescription of insulin, oral hypoglycemic and/or antihyperglycemics on an ambulatory basis

Starting in 2007, criteria for identifying diabetics also included members with claims/encounter data in outpatient settings.

^b In 2004 influenza vaccination reminders were not sent to members due to vaccine shortage issue for the 2004-05 flu season. Influenza vaccination reminder mailings are sent to all members age 65+ and to members identified with asthma, diabetes and cardiovascular disease. Members who are in more than one of these risk groups are only included in reporting for one.

^c Diabetes survey was sent annually to a random sample of diabetics age 18 to 75 yrs selected from the identified diabetes population.

^d In 2004 to 2006, the focused outreach included members with one of the following:

- **HbA1c poorly controlled (> 9%) during the reporting year**
- Did not have an HbA1c value documented during the reporting year

In 2007, the focused outreach included members that did not receive medical attention for nephropathy in 2006 and who were not treated with ACE/ARB in 2006.

In 2008, the focused outreach included members that had high cholesterol (high value of LDL).

^e HMO Members wishing to opt-out of QI related activities are maintained in a database.

Since its creation in 2007, 3,390 subscriber ids have been added to the HMO opt-out database. Members who opt out are removed from all QI initiatives. Each time a diabetes member list is generated, it is compared to the opt-out list and any opt-out members found are removed.

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Focused Outreach to high risk members ^d	
Number	
8,710	
8,016	
7,175	
4,734	
13,040	

ives.