

2009 Diabetes Recognition Program (DRP)



August 2009



Session Agenda

- **NCQA Overview**
- **NCQA Recognition Programs**
- **DRP Application & Survey Process**
- **Benefits of Recognition**

A Brief Introduction

- NCQA is a private, independent non-profit health care quality oversight organization founded in 1990
- NCQA is committed to measurement, transparency, and accountability
- NCQA unites diverse groups around a common goal: improving health care quality

MISSION

To improve the quality of health care

VISION

To transform health care through quality measurement, transparency, and accountability

NCQA Achieving the Mission

- Over 800 plans report HEDIS[®] data to NCQA (Commercial, Medicaid, Medicare, HMO/PPO)
- Over 250 commercial MCO plans are accredited by NCQA
- Over 75 Medicaid plans are accredited by NCQA
- Over 100 Medicare Advantage plans are accredited by NCQA (more than any other accrediting body)
- Over 85.9 million patients are impacted through the plans NCQA accredits
- Over 14,000 clinicians are recognized nationally by NCQA programs

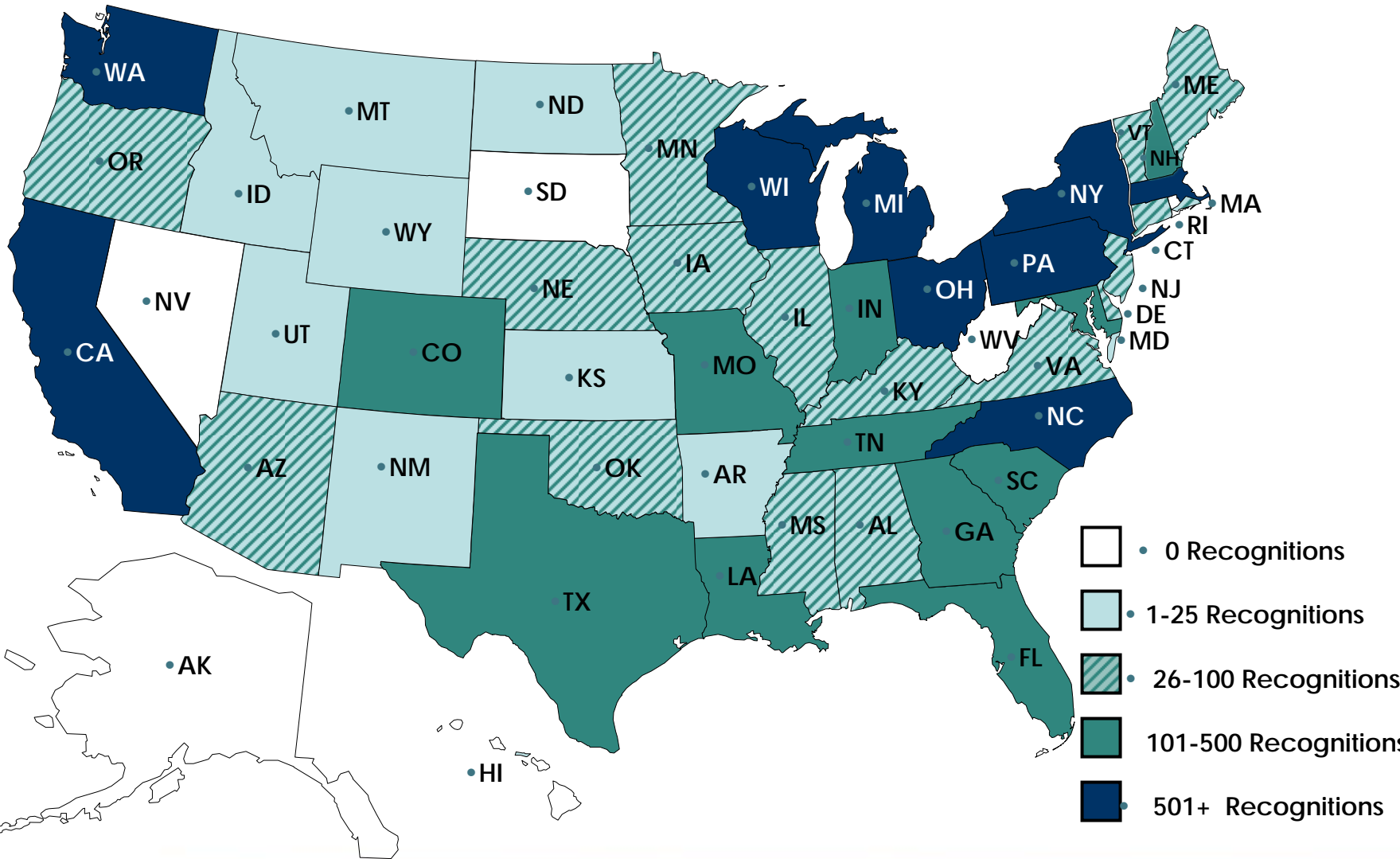
NCQA Recognition Programs

- Current programs: **DRP, HSRP, BPRP, PPC, PCMH**
- What measures included: **Structure, process and outcomes of excellent care management**
- Where they come from: **partnership with leading national health organizations**
- Who rewards recognized clinicians: **many health plans and coalitions of employers**
- Who is recognized: **over 14,000 clinicians nationally**



Number of Physician Recognitions by State

as of 7/31/09



What is the DRP application and survey process?



DRP Basics...

- Developed in partnership with American Diabetes Association (ADA); released in 1997
- Voluntary program; non punitive
- Report only clinicians who earn Recognition
- Use nationally recognized reliable, valid measures

*Over 7,500 clinicians
Recognized Nationally*

*3-year recognition
period*

2009 DRP Adult Measures

- Outcome Measures
 - HbA1c Control >9.0%*
 - HbA1c Control <8.0%
 - HbA1c Control <7.0%
 - Blood Pressure Control \geq 140/90 mm Hg*
 - Blood Pressure Control <130/80 mm Hg
 - LDL Control \geq 130 mg/dl*
 - LDL Control <100 mg/dl
- Process Measures
 - Eye Examination
 - Foot Examination
 - Nephropathy Assessment
 - Smoking Status and Cessation Advice or Treatment

*A measure of poor control

** Pediatric measures available

Who May Apply?

- An individual clinician (i.e., physician or nurse practitioner) or a clinician group
- To be eligible, applicants must:
 - have a current, non restricted license as a doctor of medicine (MD) or doctor of osteopathy (DO) or nurse practitioner (NP)
 - provide continuing care to patients with diabetes
 - have had face-to-face contact with and submit data on a sample of patients with diabetes

What is the Process?

- Review program information
 - www.ncqa.org/DRP
- Purchase the “2009 DRP Package”
 - Package contains all the information needed to apply for Recognition
- Review materials & sign Agreement
 - DRP Requirements
 - Recognition Review Agreement and BA Agreement
 - Data Collection Tool (Web-based)
- Identify the patient sample
 - Patient sample must be identified using the DRP patient selection methodology or a random sample methodology approved in advance by NCQA
- Abstract medical record data
- Enter data in Data Collection Tool
- Submit completed materials to NCQA

Guidelines for Identifying Patient Sample

- The patient sample must:
 - be identified using the DRP patient identification methodology or a random sample methodology approved in advance by NCQA.
 - be selected across the entire patient population regardless of the patient's method of payment (e.g., health plan, Medicare, Medicaid, employer, self-pay or other payment mechanism.)
 - include all eligible patients (i.e., eligible patients must not be excluded from the sample).

Sample Size Requirement - Individual

Individual Clinician

- 1 clinician (physician or nurse practitioner) practicing in any setting who provides continuing care to patients with diabetes

Sample Size

- 25 patients per clinician

Public reporting on Web Site

- Listed by individual names

Sample Size Requirement – Group

Clinician Group

- An entity (e.g., group practice) of 2 or more clinicians:
 - who practice at the same site
 - who share responsibility for a common panel of patients

Sample Size

- A maximum of 200 patients as shown in the table below:

Number of clinicians in Group	Sample Size Requirement
2	50
3	75
4	100
5	125
6	150
7	175
8	200
9 or more	200

Public reporting on Web Site

- Listed by group or site name only

Patient Selection Methodology

- Pick a “Start Date”
 - The date applicants begin to select the patient sample
- On each day moving backward from the start date, consecutively evaluate the eligibility of each patient seen for an office visit
- Select patients meeting the 3 eligibility criteria until the required sample size is met
 - May not go back more than 12 months from the start date to select patients

Eligible Patient Definition

- An eligible patient is one who meets 3 criteria:
 - Is 5 years of age or older
 - pediatric patients 5 – 17 years
 - adult patients 18 – 75 years
 - has had a diagnosis of diabetes or notation of prescribed insulin or oral hypoglycemics/antihyperglycemics for at least 12 months
 - has been under the care of the applicant clinician (or clinician group*) for at least 12 months.

* *Does not apply to clinicians seeking individual recognition*

Select the Patient Sample

Step 1 – Establish a Start Date

Step 1

- Establish a Start Date
 - The *Start Date* is the date you begin to select the patient sample

Attention

Applicants must submit the completed DCT and supporting materials to NCQA within 180 calendar days of the start date.

Example

- You select May 1, 2009

Select the Patient Sample

Step 2 – Identify Eligible Patients

Step 2

- Identify eligible patients
 - On each day moving backward from the start date, consecutively evaluate the eligibility of each patient seen for an office visit
 - Select patients who meet the 3 eligibility criteria
 - Identify eligible patients until the required sample size is met
 - May not go back more than 12 months from the start date to select patients

Example

- Moving consecutively *backward* from **5/1/09**, you identify 25 eligible patients who had office visits on the following dates:

Visit Date Identified as Eligible	Number of Patients identified
4/30/09	3
4/29/09	6
4/22/09	5
3/26/09	7
3/04/09	4

Abstract Medical Record Data

- After selecting the patient sample, abstract data for patient care completed:
 - for a 12-month period going back from the last visit date that occurred prior to the start date
 - from medical record documentation (electronic or paper), administrative data systems or registries

Abstract Medical Record Data

Determine the 12-month Abstraction Period

- Determine 12-month Abstraction Period
 - When moving backward from the start date, the visit date that a patient is identified as eligible establishes that patient's 12-month abstraction period
 - After determining each patient's 12-month abstraction period, abstract data for care completed for each patient in the sample.

Example

- 12-month abstraction periods for the 25 patients identified :

Visit Date Identified as Eligible	12-month Abstraction Period	Number of Patients
4/30/09	4/30/09 – 4/29/08	3
4/29/09	4/29/09 – 4/28/08	6
4/22/09	4/22/09 – 4/21/08	5
3/26/09	3/26/09 – 3/25/08	7
3/04/09	3/04/09 – 3/03/08	4

Scoring of Measures

Scored Measures	Threshold (% of patients in sample)	Weight
HbA1c Control >9.0 %*	≤15%	12.0
HbA1c Control <8.0 %	60%	8.0
HbA1c Control <7.0%	40%	5.0
Blood Pressure Control ≥140/90 mm Hg*	≤35%	15.0
Blood Pressure Control <130/80 mm Hg	25%	10.0
LDL Control ≥130 mg/dl*	≤37%	10.0
LDL Control <100 mg/dl	36%	10.0
Eye Examination	60%	10.0
Foot Examination	80%	5.0
Nephropathy Assessment	80%	5.0
Smoking Status and Cessation Advice or Treatment	80%	10.0

Total Points = 100.0

Points to Achieve Recognition = 75.0

* A measure of poor control

Data Abstraction

HbA1c Testing and Control

Proportion w/HbA1c > 9.0%*

Proportion w/HbA1c < 8.0%

Proportion w/HbA1c < 7.0%

- **Data Elements**

- Record date and value of most recent HbA1c performed within the 12-month abstraction period

* **A measure of poor control**

- **Tips**

- To receive credit for the measure of poor control, no more than 15% of patients can have HbA1c results >9.0%
 - Patients are included in the numerator if the:
 - HbA1c is >9%
 - HbA1c result is missing
 - the HbA1c was not done within the abstraction period

Data Abstraction

Blood Pressure Measurement

Proportion $\geq 140/90$ mm Hg*

Proportion $< 130/80$ mm Hg

- **Data Elements**

- Record date and value of most recent blood pressure measurement performed within the 12-month abstraction period

* A measure of poor control

- **Tips**

- To receive credit for the measure of poor control, no more than 35% of patients can have B/P measurements $\geq 140/90$
 - Patients are included in the numerator if the:
 - B/P is $\geq 140/90$
 - systolic or diastolic
 - B/P result is missing
 - B/P was not done within the abstraction period

Data Abstraction

Lipid Control

Proportion w/LDL ≥ 130 mg/dl*

Proportion w/LDL < 100 mg/dl

- **Data Elements**

- Record date and value of most recent LDL within the 12-month abstraction period

* A measure of poor control

- **Tips**

- To receive credit for the measure of poor control, no more than 37% of patients can have LDL results ≥ 130 mg/dl
 - Patients are included in the numerator if the:
 - LDL is ≥ 130
 - LDL result is missing
 - LDL was not done within the abstraction period

Data Abstraction

Eye Exam or Retinal Photographs

- **Data Element**

- Record date of most recent retinal or dilated eye exam performed within the 12-month abstraction period
 - May use date within the past two years if patient showed no evidence of retinopathy in the 12 months prior to the abstraction period

- **Tips**

- Patient self-report is not acceptable
- Use notes, reports, letters or photographs from eye care professionals
- If exam performed by a non eye care professional, documentation must state dilated exam

Data Abstraction

Foot Examination

- **Data Element**

- Record date of most recent foot exam within the 12-month abstraction period

- **Tips**

- May use notes, reports, letters or assessments from podiatrists, PCP or your own examination
- Documentation must support that feet were examined with shoes and socks off

Data Abstraction

Nephropathy Assessment

- **Data Element**

- Record date of most recent nephropathy assessment within the 12-month abstraction period

- **Tips**

- Documentation must include one of the following:
 - Microalbuminuria test
 - Positive urinalysis for protein
 - Medical attention for nephropathy
 - Evidence of ACE/ARB therapy

Data Abstraction

Smoking Status

- **Data Element**

- Document smoking status
- Smokers: Record date that documents counseling or treatment for smoking cessation within the 12-month abstraction period

- **Tips**

- If there is documentation that the patient is a non-smoker, no further documentation is required

Data Collection Tool

The screenshot shows the NCQA website's navigation and content. At the top left is the NCQA logo with the tagline "Measuring quality. Improving health care." To the right are links for "Help" and "Logout", and the user name "User: cmartin@ncqa.org". Below this is a dark blue navigation bar with links for "Home", "My Practice Sites", "Submit Data", "Account Manager", and "Resources". The main content area is titled "5 Easy Steps to Recognition" and contains a paragraph of introductory text followed by a numbered list of five steps. To the right of the main content are three white boxes with rounded corners: "Account Information" with a link to "Modify Account Information", "About NCQA Recognitions" with a bulleted list of recognition types, and "Resources & Tools" with a bulleted list of resource links. At the bottom of the page is a copyright notice and a privacy policy statement.

NCQA Measuring quality. Improving health care.

Home My Practice Sites Submit Data Account Manager Resources User: cmartin@ncqa.org

5 Easy Steps to Recognition

To submit your information for evaluation and recognition, please complete the following steps. If at any time you have questions regarding this process, please contact [NCQA customer support](#) and we'll be happy to assist you.

- 1 Download and Review Materials, Resources and Training Opportunities
- 2 Complete an Electronic Business Associate Agreement (BAA)
- 3 Complete a readiness assessment using the data collection tool
- 4 When ready, submit data for Recognition
- 5 Receive Recognition Decision

[Getting Started - Click Here](#)

Account Information

NCQA

[Modify Account Information](#)

About NCQA Recognitions

- [Diabetes Physician \(DRP\)](#)
- [Heart/Stroke Physician \(HSRP\)](#)
- [Back Pain \(BPRP\)](#)
- [Physician Practice \(PPC\)](#)
- [Medical Home \(PPC-PCMH\)](#)

Resources & Tools

- [Download Materials](#)
- [XML Information & Tools](#)
- [Training Schedules](#)
- [Frequently Asked Questions](#)
- [Glossary](#)

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Data Submission

Materials to submit:

- Signed DRP Recognition Review Agreement (2 copies)
- Completed Data Collection Tool
 - Submitted via secure portal
- Application fee
 - Payable by check or credit card

What Happens Next?

- Within 30 - 60 days of receiving all information needed to complete the application, NCQA reviews and makes recognition decisions
 - 5 percent of applications are selected for audit
- Clinicians or groups achieving Recognition receive:
 - letter of recognition
 - posting to the Recognition Directory
 - certificate of Recognition
 - media kit/marketing and advertising guidelines

Benefits of Recognition

- Distinction in provider directories
- Receive referrals from ADA's National Call Center
- Establish eligibility for pay-for-performance rewards or differential reimbursement from payers and health plans
 - For example:
 - Physician Quality Reporting Initiative (PQRI)
 - Bridges to Excellence (BTE)
- Receive credit toward maintenance of board certification
 - For example:
 - American Board of Family Medicine (ABFM)
 - American Board of Internal Medicine (ABIM)

DRP Contact Information

- **Mailing Address**

NCQA

Diabetes Recognition Program

1100 13th Street, NW, Suite 1000

Washington, DC 20005

- **Customer Support**

(questions on DRP in general, purchasing the Data Collection Tool , etc.)

1-888-275-7585

- **DRP Staff**

(questions on sampling methodology, measures, etc.)

DRP@ncqa.org

- **Web**

www.ncqa.org/DRP

NCQA would like to thank our Diabetes Recognition Program (DRP) Sponsors

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