

A photograph of a female doctor in a white lab coat with a stethoscope, holding a tablet and talking to a male patient in a hospital gown. The image is partially covered by a blue semi-transparent banner.

Diabetes Recognition Program (DRP)

October 2018



Agenda

Overview

Recognition Process

Benefits of Recognition

Resources

DRP Basics...

Over 7,000 clinicians
Recognized
nationally


Launched in 1997.

Voluntary program;
non punitive.

Uses nationally
recognized
measures.

3-year Recognition
period

DRP Measures



Outcome Measures

Process Measures

HbA1c Control >9.0%*

HbA1c Control <8.0%

HbA1c Control <7.0%

B/P Control $\geq 140/90$ mm Hg*

Eye Examination

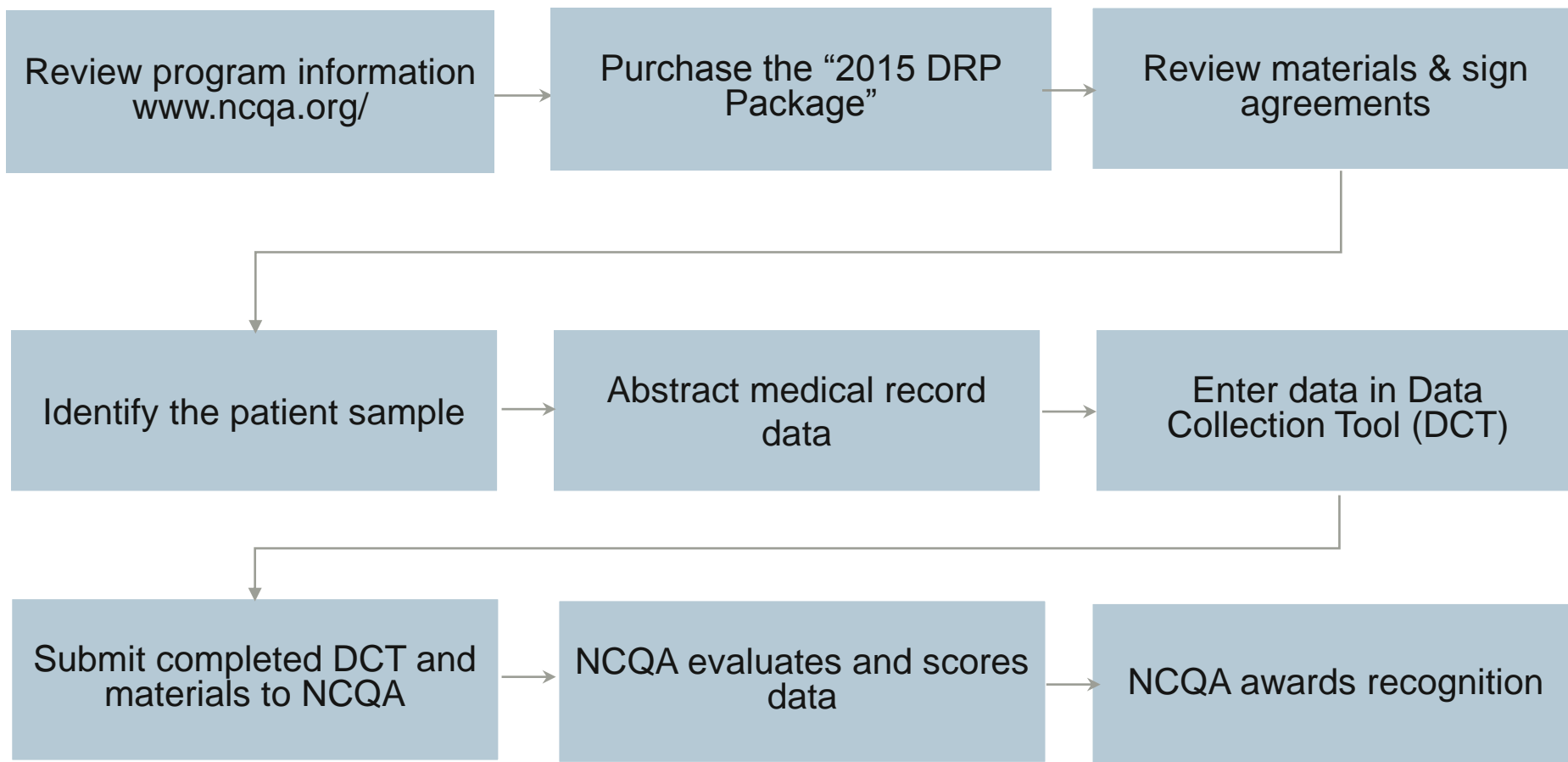
Nephropathy Assessment

Foot Examination

Smoking / Tobacco Use
Cessation Assistance

* A measure of poor control.

What is the process?



Who May Apply?

Eligible clinicians are:

- an individual clinician (i.e., MD, DO, APRN or PA) or a clinician group.

To be eligible, clinicians must:

- have a current, non restricted license as a MD, DO, APRN or PA.
- provide continuing care to patients with diabetes, e.g., primary care clinicians, endocrinologists.
- have had face-to-face contact with and submit data on care delivered for a 12-month period to a sample of patients with diabetes.

Patient Identification

The DRP patient sample:

1

Is identified using the DRP patient identification methodology or a random sample methodology approved in advance by NCQA .

2

Is selected across the entire patient population.

3

Includes all eligible patients.

Patient Selection Methodology

Pick “Start Date”

The date applicants begin to select the patient sample.

Identify Eligible Patients

On each day moving backward from the start date, consecutively evaluate the eligibility of each patient seen for an office visit.

An eligible patient is one who meets 3 criteria:

- is 18 – 75 years of age.
- has had a diagnosis of diabetes 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 Patient Sample

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.

Sample Size – Individual Recognition

Individual Clinician

One clinician practicing in any setting who provides continuing care to patients with diabetes.

May be a solo clinician or one clinician applying separately from other clinicians at the practice site.

Sample Size

25 patients per identified clinician.

Public Reporting

Public reporting on website by individual names.

Sample Size – Group Recognition

Clinician Group

An entity of two or more clinicians who:

- practice at the same site.
- share responsibility for a common panel of patients.

Sample Size

Sample size capped at 200 patients:

Eligible Clinicians at Site	Sample Size Requirement
2	50
3	75
4	100
5	125
6	150
7	175
8	200
9 or more	200

Public Reporting

Public reporting on website by group or site name only.

Sample Size – Alternate Sampling Option

Alternate Sampling

For sites with 9 or more eligible clinicians who are applying for individual recognition.

NCQA selects sample of clinicians.

Decision based on mean score of sampled clinicians.

Refer to DRP Requirements, Appendix 3 for details.

Sample Size

25 patients per identified clinician.

Public Reporting

Public reporting on website by individual names.

Example: Selecting the Patient Sample – Step One

Pick the Start Date

The *Start Date* is the date you begin to select the patient sample.

Example

You select April 1, 2017.

Example: Selecting the Patient Sample – Step Two

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 4/1/17, you identify 25 eligible patients who had office visits on the following dates:

Visit Date Identified as Eligible	Number of Patients identified
3/31/17	3
3/30/17	6
3/29/17	5
3/15/17	7
3/04/17	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 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 25 patients identified:

Visit Date Identified as Eligible	12-month Abstraction Period	Number of Patients
3/31/17	3/31/17 – 3/30/16	3
3/30/17	3/30/17 – 3/29/16	6
3/29/17	3/29/17 – 3/28/16	5
3/15/17	3/15/17 – 3/14/16	7
3/04/17	3/04/17 – 3/03/16	4

Abstract Medical Record Data

HbA1c Testing and Control

Patients with HbA1c > 9.0%*

Patients with HbA1c < 8.0%

Patients with HbA1c < 7.0%

** A measure of poor control*

Data Elements

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

Tips

To receive credit for the measure of poor control, no more than 15% of patients can have an HbA1c result >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.

Abstract Medical Record Data

Blood Pressure (BP) Measurement

Patients with BP $\geq 140/90$ mm Hg

* A measure of poor control

Data Elements

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

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.

Abstract Medical Record Data

Eye Examination

Patients have a recent screening for diabetic retinal disease.

Data Elements

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.

Abstract Medical Record Data

Smoking and Tobacco Use Cessation Assistance

Patients who smoke or use tobacco have cessation counseling or treatment.

Data Elements

Document smoking and tobacco use status.

For smokers/tobacco users, record date that documents cessation counseling or treatment within the 12-month abstraction period.

Tips

If there is documentation that the patient is a non-smoker/non-tobacco user, no further documentation is required.

Abstract Medical Record Data

Foot Examination

Patients with diabetes have a recent foot examination.

Data Elements

Record date of most recent diabetic foot examination within the 12-month abstraction period.

Tips

A foot exam must include a visual inspection, sensory exam with monofilament AND pulse exam.

May use notes, reports, letters or assessments from podiatrists, or other clinicians at practice site.

Abstract Medical Record Data

Nephropathy Assessment

Patients with diabetes have a recent nephropathy assessment.

Data Elements

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.

Scoring of Measures

Scored Measures	Threshold (% of patients in sample)	Points
HbA1c Control >9.0 %*	≤15%	15.0
HbA1c Control <8.0 %	65%	10.0
HbA1c Control <7.0%	40%	7.0
Blood Pressure Control ≥140/90 mm Hg*	≤35%	30.0
Eye Examination	60%	12.0
Smoking and Tobacco Use and Cessation and Treatment Assistance	85%	12.0
Nephropathy Assessment	85%	7.0
Foot Examination	80%	7.0

Total Points = 100.0

Points to Achieve Recognition = 70.0

* A measure of poor control.

Data Collection Tool



For more information, submit a question to [Program Clarification Support](#). Select (Recognition Programs).
Has your question been answered already? Access FAQs and other information before you submit your question: [DRP](#) / [HSRP](#)

[Logout](#)

[Home](#) [Practice Sites](#) [Submit Data](#) [Account Manager](#) [Resources](#) [Switch Account](#) [NCQA Administration](#)

User: poole@ncqa.org

5 Easy Steps to Recognition

Complete these steps to submit information for evaluation and NCQA Recognition. If you have questions about this process, contact [NCQA Customer Support](#).

- 1 [Click here](#) to go to **Resources**. (Download and review detailed instruction materials, FAQs and training opportunities.)
- 2 [Click here](#) to go to **Account Manager**. (Set up or edit your account information; complete your legal agreements; add users to your account.)
- 3 [Click here](#) to go to **Practice Sites**. (Enter information about your site and your applicants; setup Data Collection Tools [DCTs] with patient abstraction data; complete a readiness assessment.)
- 4 [Click here](#) to go to **Submit Data**.
- 5 Receive your Recognition decision.

Account Information

NCQA-Young

[Modify Account Information](#)

About NCQA Recognitions

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

Resources & Tools

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

Data for Submission

Application fee

Business Associates Agreement

Diabetes Recognition
Review Agreement

Completed Data Collection Tool

What Happens Next

Decision Timeframe

Within 30 days of receiving all information needed to complete the application, NCQA reviews and makes recognition decisions.

Audits

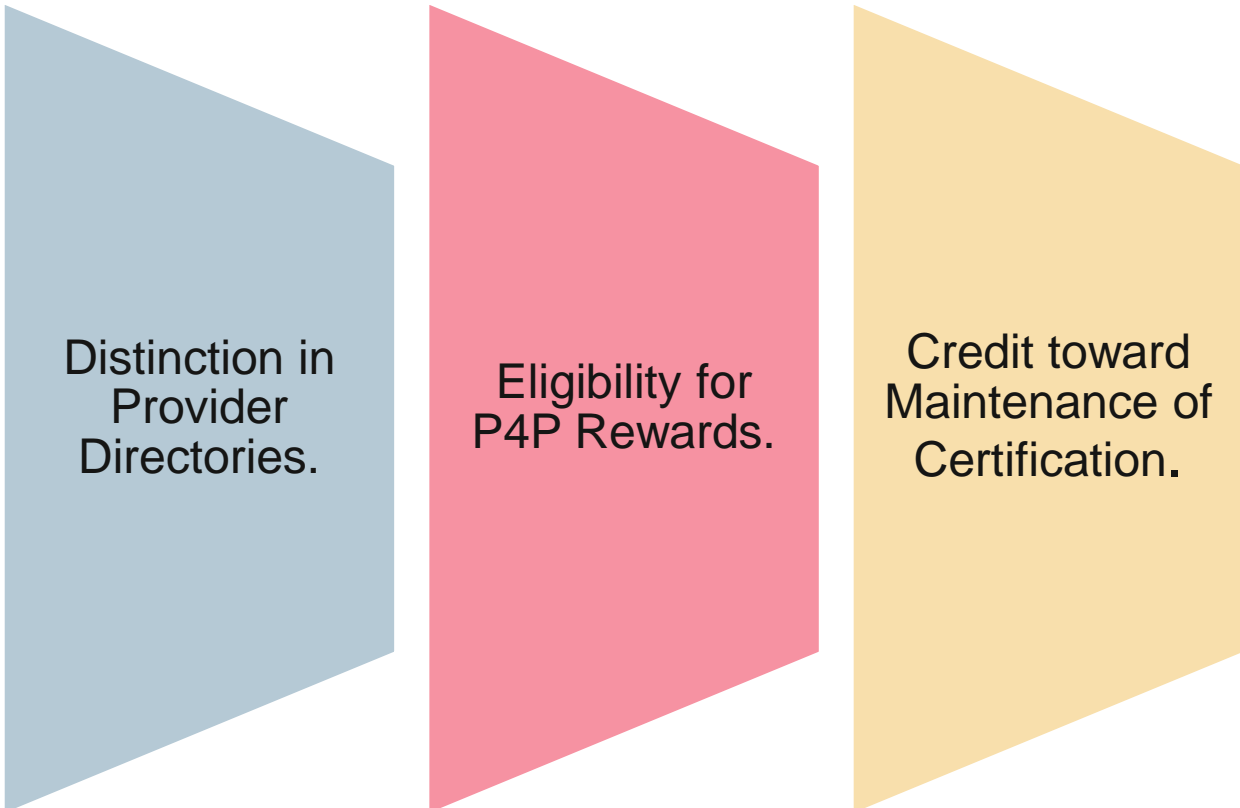
5 percent of applications are selected for audit.

Announcement of Recognition

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.

Eligibility for
P4P Rewards.

Credit toward
Maintenance of
Certification.

Resources – www.ncqa.org

Before

I'm Considering

- Health Plans Using Recognition
- DRP Pricing & Fee Schedule
- Changes to Diabetes Recognition Program (DRP)
- Program Training
- Purchase Materials

During

I'm in Process

- DRP Pricing & Fee Schedule
- Application Fee Check Cover Sheet
- Use of DRP & HSRP in PCMH
- Program Training
- Changes to DRP

After

I'm Recognized

- Seals & Graphics
- Advertising Guidelines
- MOC Credit

Contact Information

Mailing Address:

NCQA
Diabetes Recognition Program
1100 13th Street, NW, Suite 1000
Washington, DC 20005

Customer Support:

- my.ncqa
- 1-888-275-7585

DRP Staff via PCS:

<http://ncqa.force.com/pcs/login>

