



2020

DISEASE MANAGEMENT  
PERFORMANCE MEASUREMENT

AGGREGATE SUMMARY PERFORMANCE REPORT

February 2021



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**APPENDIX.....ERROR! BOOKMARK NOT DEFINED.**



# EXECUTIVE SUMMARY

<b>16</b> Reporting Organizations	<b>1.10M</b> Eligible Individuals
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Presented in this report are the 2019 measurement year (2020 reporting year) results based on URAC’s Disease Management Accreditation program performance measures.

**Cessation Counseling for Tobacco Use**

**9.92%**

Of patients screened & counseled for tobacco use  
(median rate: 44.65%)

**Unhealthy Alcohol Use**

**4.32%**

Of patients screened & counseled for unhealthy alcohol use  
(median rate: 30.82%)

URAC includes performance measures in multiple accreditation programs to align and harmonize with national priorities for healthcare quality and delivery improvement. Our priority of consumer protection and empowerment drives our measurement efforts on outcome measures, composite measures, and flexible measures collection. With the emphasis of the ACA on affordable, quality health care and access, it is imperative that performance measurement programs are in place to ensure that savings from cost cutting efforts in health care are not at the expense of the quality of care delivered to patients. The information provided by measures of performance can help stakeholders monitor the quality and accessibility of care across the nation.

**Screening for Clinical Depression**

**1.27%**

Of participants screened & received follow-up  
(median rate: 0.72%)

**Diabetes Short-Term Complications Event Rate**

**0.50%**

Complication events in chronic diabetic adults  
(median rate: 33.77%)

Organizations are required to report data for 9 mandatory measures and have the option to report data for 5 exploratory measures.

Below is the list of measures for 2020 reporting:

### MANDATORY MEASURES

1. Screening and Cessation Counseling for Tobacco Use (DM2012-02)
2. Unhealthy Alcohol Use: Screening and Brief Counseling (DM2012-03)
3. Screening for Clinical Depression & Follow-Up Plan (DM2012-05)
4. Pediatric Asthma Event Rate (DM2012-30) \*
5. Chronic Obstructive Pulmonary Disease or Asthma in Older Adults Event Rate (DM2012-31)
6. Hypertension Event Rate (DM2012-37)
7. Heart Failure Event Rate (DM2012-38)
8. Diabetes Short-Term Complications Event Rate (DM2012-73)
9. Asthma in Younger Adults Admission Rate (DM2017-01)

### EXPLORATORY MEASURES

1. Patient Activation Measure (DM2012-10)
2. Proportion of Days Covered: Rates by Therapeutic Category (DM2012-12)
3. Drug-Drug Interactions (DM2012-13)
4. Adherence to Non-Warfarin Oral Anticoagulants (DM2015-01)\*
5. Medication Therapy for Persons with Asthma (DM2012-26)\*

\* Fewer than five organizations submitted data for this measure. Analysis and benchmarks were not produced given less than five valid data submissions.

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## DATA VALIDATION PROCEDURES

Kiser Healthcare Solutions, LLC executed standard procedures for data cleaning and validation prior to finalizing the results presented in this report. All organizations' measure submissions were reviewed for measure component quality. For example, numerators and denominators were checked against rates to ensure accuracy. Also, minimum, mean, median, and maximum rates were benchmarked nationally and regionally to ensure accuracy and to identify potential issues at an individual submission level.

Kiser Healthcare Solutions corrected for any data entry and duplicate submission errors based on manual data review and cleaning, documented at the end of this report.

### Basic guidelines for identifying valid submissions:

- Measure denominator is greater than 0
- Organization has indeed stated it is submitting the measure

### Basic guidelines for aggregate rates:

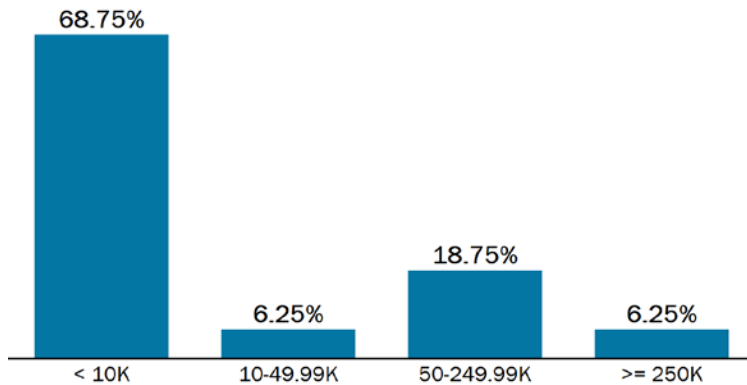
- Measure denominator is greater than or equal to 30
- Organization has indeed stated it is submitting the measure
- Minimum of 5 reporting organizations

# RESULTS IN AGGREGATE

A total of 16 URAC-accredited Disease Management organizations reported 2019 measurement year data for the 2020 reporting year. The number of covered lives managed by responding organizations was 1,097,354, ranging from 812 to 522,782; two-thirds of the organizations had fewer than 10,000 covered lives (**Figure 1**). Three-fourths of responding organizations (n=12) reported a Commercial line of business. No organizations reported a Medicare line of business (**Figure 2**). Of all lines of business reported among the valid submissions, only Commercial exceeded the minimum of five necessary for measure level reporting.

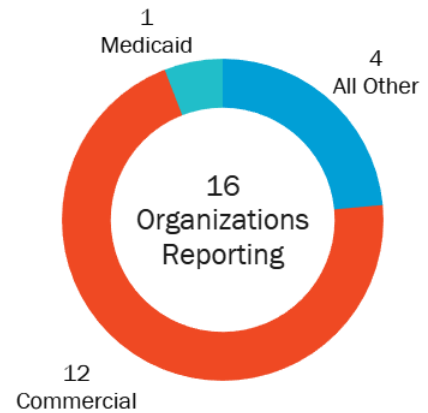
**Figure 1. Reporting by Program Tier Size**

# of lives managed per organization (n=16)



**Figure 2. Lines of Business Served**

% of reporting organizations by payer (n=16)

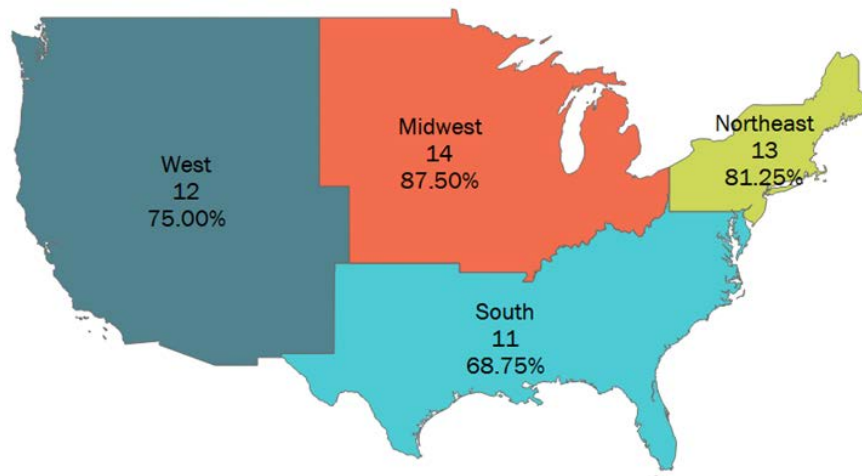


## Regional Areas Served

Of the 16 DM organizations that submitted performance measurement data, 56.25% of the organizations (n=9) covered all 4 URAC-specified regions (Midwest, Northeast, South, and West), and 18.75% of the organizations (n=3) covered only a single region. The Midwest had the most organizations submitting (87.50%, n=14) and the South had the least (68.75%, n=11) (**Figure 3**).

**Figure 3. Regional Areas Served**

% of reporting organizations by region (n=16)



Note: Multiple responses accepted.



## SCREENING AND CESSATION COUNSELING FOR TOBACCO USE (DM2012-02)

### Measure Description

This *mandatory* measure assesses the percentage of patients aged 18 years and older who were screened for tobacco use\* one or more times within 24 months and who received cessation counseling intervention\*\* if identified as a tobacco user.

\* Includes use of any type of tobacco.

\*\* Cessation counseling intervention includes brief counseling (3 minutes or less) and/or pharmacotherapy.

This measure is reported separately for each of the organization’s lines of business that are included in its URAC accreditation (i.e., Commercial, Medicare, and Medicaid).

### Summary of Findings

The Commercial line of business is the only line of business with five or more valid submissions. One data submission had an extreme outlier denominator and low performance compared to other organizations reporting in this program resulting in a significant impact to the overall performance. Removing this submission results in an aggregate summary rate of 57.17% (n=10, Range: 3.97 - 100.00%) with a mean rate of 50.09% and a median rate of 46.85%.

LINE OF BUSINESS	TOTAL NUMERATOR	TOTAL DENOMINATOR	AGGREGATE SUMMARY RATE	MEAN	SUBMISSIONS
Commercial	21,314	214,869	9.92%	45.63%	11

LINE OF BUSINESS	MIN	10TH	25TH	50TH	75TH	90TH	MAX
Commercial	1.04%	3.97%	4.54%	44.65%	91.13%	99.19%	100%



## UNHEALTHY ALCOHOL USE: SCREENING & BRIEF COUNSELING (DM2012-03)

### Measure Description

This mandatory measure assesses the percentage of patients 18 years or older who were screened for unhealthy alcohol use using a systematic screening method at least once within the last 24 months and who received brief counseling if identified as an unhealthy alcohol user.

This measure is reported separately for each of the organization’s lines of business that are included in its URAC accreditation (i.e., Commercial, Medicare, and Medicaid).

### Summary of Findings

The Commercial line of business is the only line of business with five or more valid submissions. One data submission had an extreme outlier denominator and low performance compared to other organizations reporting in this program resulting in a significant impact to the overall performance. Removing this submission results in an aggregate summary rate of 40.66% (n=8, Range: 0.00 - 100.00%) with a mean rate of 44.71% and a median rate of 33.49%.

LINE OF BUSINESS	TOTAL NUMERATOR	TOTAL DENOMINATOR	AGGREGATE SUMMARY RATE	MEAN	SUBMISSIONS
Commercial	8,732	202,031	4.32%	39.75%	9

LINE OF BUSINESS	MIN	10TH	25TH	50TH	75TH	90TH	MAX
Commercial	0%	0%	0.03%	30.82%	91.37%	99.19%	100%



## SCREENING FOR CLINICAL DEPRESSION & FOLLOW-UP PLAN (DM2012-05)

### Measure Description

This mandatory measure reports the percentage of participants 12 years and older screened for clinical depression on the date of the encounter using an age- appropriate standardized depression screening tool, and, if positive, a follow-up plan is documented on the date of the positive screen.

This measure is reported separately for each of the organization's lines of business that are included in its URAC accreditation (i.e., Commercial, Medicare, and Medicaid).

### Summary of Findings

The Commercial line of business is the only line of business with five or more valid submissions. One data submission had an extreme outlier denominator and low performance compared to other organizations reporting in this program resulting in a significant impact to the overall performance. Removing this submission results in an aggregate summary rate of 36.12% (n=7, Range: 1.68 - 100.00%) with a mean rate of 49.41% and a median rate of 57.92%.

LINE OF BUSINESS	TOTAL NUMERATOR	TOTAL DENOMINATOR	AGGREGATE SUMMARY RATE	MEAN	SUBMISSIONS
Commercial	3,102	243,621	1.27%	43.23%	8

LINE OF BUSINESS	MIN	10TH	25TH	50TH	75TH	90TH	MAX
Commercial	0.03%	1.18%	6.30%	33.77%	82.95%	91.09%	100%





## CHRONIC OBSTRUCTIVE PULMONARY DISEASE OR ASTHMA IN OLDER ADULTS EVENT RATE (DM2012-31)

### Measure Description

This mandatory measure assesses the number of hospital events for asthma or Chronic Obstructive Pulmonary Disease (COPD) per number of adult members age 40 years and older with a chronic diagnosis of asthma or COPD during the measurement period. A lower rate represents better performance.

This measure is reported separately for each of the organization’s lines of business that are included in its URAC accreditation (i.e., Commercial, Medicare, and Medicaid).

### Summary of Findings

The Commercial line of business is the only line of business with five or more valid submissions.

LINE OF BUSINESS	TOTAL NUMERATOR	TOTAL DENOMINATOR	AGGREGATE SUMMARY RATE	MEAN	SUBMISSIONS
Commercial	1,207	30,899	3.91%	5.49%	8

LINE OF BUSINESS	MIN	10TH	25TH	50TH	75TH	90TH	MAX
Commercial	16.67%	9.64%	6.21%	4.60%	3.13%	1.27%	0%



## HYPERTENSION EVENT RATE (DM2012-37)

### Measure Description

This mandatory measure assesses the number of hospital events for hypertension per number of adult members age 18 years or older with chronic hypertension during the measurement period. A lower rate represents better performance.

This measure is reported separately for each of the organization’s lines of business that are included in its URAC accreditation (i.e., Commercial, Medicare, and Medicaid).

### Summary of Findings

The Commercial line of business is the only line of business with five or more valid submissions. One data submission had an extreme outlier denominator and low performance compared to other organizations reporting in this program resulting in a significant impact to the overall performance. Removing this submission results in an aggregate summary rate of 4.13% (n=9, Range: 53.23 - 0.00%) with a mean rate of 8.59% and a median rate of 2.77%.

LINE OF BUSINESS	TOTAL NUMERATOR	TOTAL DENOMINATOR	AGGREGATE SUMMARY RATE	MEAN	SUBMISSIONS
Commercial	421	162,871	0.26%	7.74%	10

LINE OF BUSINESS	MIN	10TH	25TH	50TH	75TH	90TH	MAX
Commercial	53.23%	12.62%	6.94%	1.62%	0.02%	0%	0%



## HEART FAILURE EVENT RATE (DM2012-38)

### Measure Description

This mandatory measure assesses the number of hospital events with a principal diagnosis of heart failure per number of adult members age 18 years and older with diagnosed heart failure. A lower rate represents better performance.

This measure is reported separately for each of the organization’s lines of business that are included in its URAC accreditation (i.e., Commercial, Medicare, and Medicaid).

### Summary of Findings

The Commercial line of business is the only line of business with five or more valid submissions.

LINE OF BUSINESS	TOTAL NUMERATOR	TOTAL DENOMINATOR	AGGREGATE SUMMARY RATE	MEAN	SUBMISSIONS
Commercial	797	9,456	8.43%	15.92%	6

LINE OF BUSINESS	MIN	10TH	25TH	50TH	75TH	90TH	MAX
Commercial	49.38%	37.19%	21.04%	9.09%	4.02%	1.49%	0.64%



## DIABETES SHORT-TERM COMPLICATIONS EVENT RATE (DM2012-73)

### Measure Description

This mandatory measure assesses the number short-term diabetes complication events (ketoacidosis, hyperosmolarity, or coma) in adults 18 years and older per number of chronic diabetic adult members as of the end of the measurement period. A lower rate represents better performance.

This measure is reported separately for each of the organization’s lines of business that are included in its URAC accreditation (i.e., Commercial, Medicare, and Medicaid).

### Summary of Findings

The Commercial line of business is the only line of business with five or more valid submissions.

LINE OF BUSINESS	TOTAL NUMERATOR	TOTAL DENOMINATOR	AGGREGATE SUMMARY RATE	MEAN	SUBMISSIONS
Commercial	379	75,529	0.50%	2.33%	9

LINE OF BUSINESS	MIN	10TH	25TH	50TH	75TH	90TH	MAX
Commercial	12.02%	5.47%	1.82%	0.72%	0.46%	0.34%	0.18%



## ASTHMA IN YOUNGER ADULTS ADMISSION RATE (DM2017-01)

### Measure Description

This mandatory measure assesses the number of admissions for a principal diagnosis of asthma per 100,000 population, ages 18 to 39 years, during the measurement period. A lower rate represents better performance.

This measure is reported separately for each of the organization’s lines of business that are included in its URAC accreditation (i.e., Commercial, Medicare, and Medicaid).

### Summary of Findings

The Commercial line of business is the only line of business with five or more valid submissions.

LINE OF BUSINESS	TOTAL NUMERATOR	TOTAL DENOMINATOR	AGGREGATE SUMMARY RATE	MEAN	SUBMISSIONS
Commercial	275	67,285	0.41%	0.17%	6

LINE OF BUSINESS	MIN	10TH	25TH	50TH	75TH	90TH	MAX
Commercial	0.59%	0.41%	0.20%	0.09%	0.02%	0%	0%