



2023

DISEASE MANAGEMENT PERFORMANCE MEASUREMENT

AGGREGATE SUMMARY PERFORMANCE REPORT

February 2024



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EXECUTIVE SUMMARY

14

Reporting Organizations

1.17 M

Eligible Individuals

Presented in this report are the 2022 measurement year (2023 reporting year) results based on URAC’s Disease Management Accreditation program performance measures.

Cessation Counseling for Tobacco Use

9.63%

Of patients screened & counseled for tobacco use
(median rate: 9.86%)

Unhealthy Alcohol Use

3.47%

Of patients screened & counseled for unhealthy alcohol use
(median rate: 1.00%)

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 Depression & Follow-Up Plan

2.73%

Of participants screened for depression & received follow-up
(median rate: 5.78%)

Diabetes Short-Term Complications Admissions

3,651/100K

Admissions for complications in chronic diabetic adults
(median rate: 328/100K)

Organizations are required to report data for 9 mandatory measures and have the option to report data for 1 exploratory measure.

Below is the list of measures for 2023 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 Depression & Follow-Up Plan (DM2012-05)
4. Pediatric Asthma Admission Rate (DM2012-30)*
5. Chronic Obstructive Pulmonary Disease or Asthma in Older Adults Admission Rate (DM2012-31)
6. Hypertension Admission Rate (DM2012-37)
7. Heart Failure Admission Rate (DM2012-38)
8. Diabetes Short-Term Complications Admissions Rate (DM2012-73)
9. Asthma in Younger Adults Admission Rate (DM2017-01)

EXPLORATORY MEASURE

1. Patient Activation Measure (DM2012-10)*

* Fewer than 5 organizations submitted data for this measure. Analysis and benchmarks were not produced given less than five valid data submissions.

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 14 URAC-accredited Disease Management organizations reported 2022 measurement year data for the 2023 reporting year. The number of covered lives managed by responding organizations was 1,174,317, ranging from 305 to 415,111; more than half of the organizations had fewer than 10,000 covered lives (**Figure 1**). About three-fourths of responding organizations (n=11) reported a Commercial line of business. Of all lines of business reported among the valid submissions, only Commercial exceeded the minimum of five necessary for measure level reporting (**Figure 2**).

Figure 1. Reporting by Program Tier Size

of lives managed per organization (n=14)

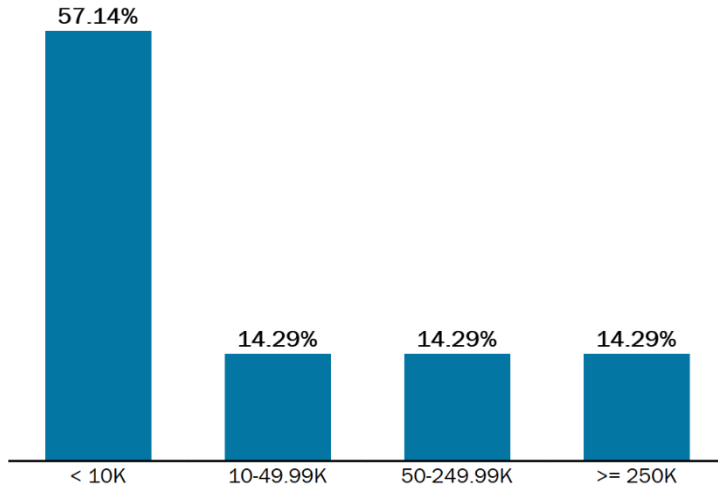
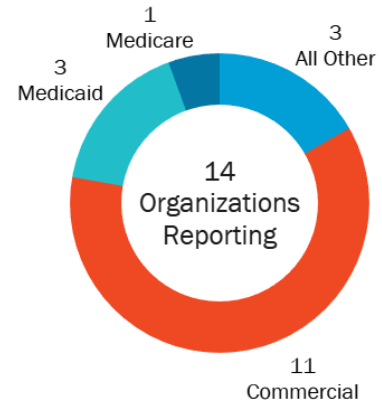


Figure 2. Lines of Business Served

% of reporting organizations by payer (n=14)

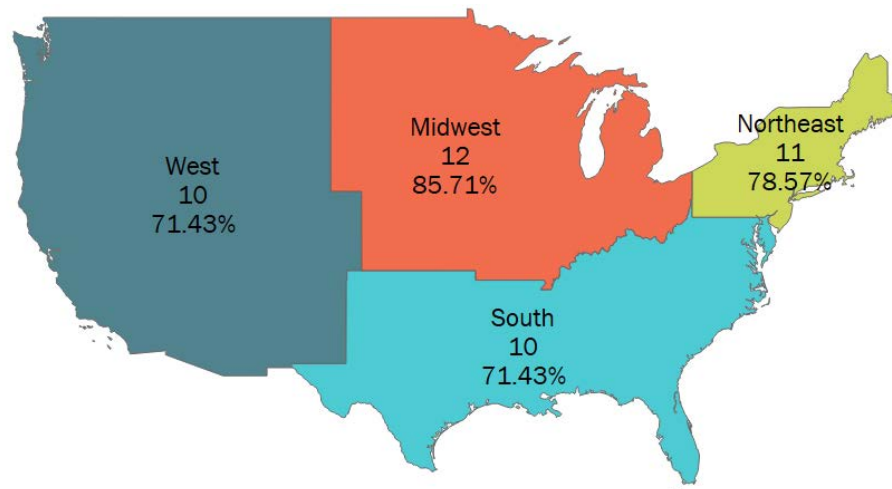


Regional Areas Served

Of the 14 DM organizations that submitted performance measurement data, 57.14% of the organizations (n=8) covered all 4 URAC-specified regions (Northeast, Midwest, South, and West), and 20% of the organizations (n=2) covered only a single region. The Midwest had the most organizations submitting (85.71%, n=12) while the South and the West had the fewest (71.43%, n=10) (**Figure 3**).

Figure 3. Regional Areas Served

% of reporting organizations by region (n=14)



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.

Three rates are reported:

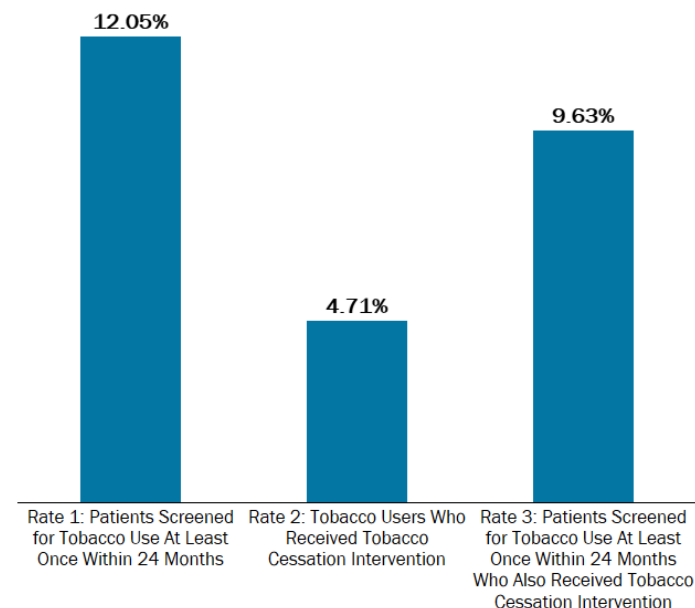
Rate 1: Patients screened for tobacco use

Rate 2: Patients identified as a tobacco user who received tobacco cessation intervention

Rate 3: Patients screened for tobacco use and received tobacco cessation intervention if identified as a tobacco 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, Medicaid, and Medicaid).

Figure 4. Screening & Cessation Counseling for Tobacco Use (Commercial)



Summary of Findings

A total of 11 organizations submitted valid data for this measure. The Commercial line of business is the only line of business with five or more valid submissions.

9	2	1	2
Commercial	Medicaid	Medicare	All Other

MEASURE	TOTAL NUMERATOR	TOTAL DENOMINATOR	AGGREGATE SUMMARY RATE	MEAN	SUBMISSIONS
Rate 1: Patients screened for tobacco use	17,562	145,701	12.05%	49.91%	9
Rate 2: Patients identified as a tobacco user who received tobacco cessation intervention	6,681	141,923	4.71%	43.11%	6
Rate 3: Patients screened for tobacco use and received tobacco cessation intervention if identified as a tobacco user	13,917	144,462	9.63%	26.72%	9

MEASURE	MIN	10 TH	25 TH	50 TH	75 TH	90 TH	MAX
Rate 1: Patients screened for tobacco use	1.07%	2.92%	7.20%	38.03%	91.65%	96.72%	100%
Rate 2: Patients identified as a tobacco user who received tobacco cessation intervention	2.19%	9.96%	19.69%	30.04%	72.65%	89.34%	93.33%
Rate 3: Patients screened for tobacco use and received tobacco cessation intervention if identified as a tobacco user	2.19%	3.06%	4.00%	9.86%	45.39%	76.20%	85.36%



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 Reporting Organizations

A total of 8 organizations submitted valid data for this measure.

6	2	1	2
Commercial	Medicaid	Medicare	All Other

Summary of Findings

The Commercial line of business is the only line of business with five or more valid submissions. The aggregate summary rate for Commercial is 3.47% (n=6, Range: 0.00 – 14.55%) with a mean rate of 3.44% and a median rate of 1.00%.

LINE OF BUSINESS	TOTAL NUMERATOR	TOTAL DENOMINATOR	AGGREGATE SUMMARY RATE	MEAN	SUBMISSIONS
Commercial	574	16,552	3.47%	3.44%	6

LINE OF BUSINESS	MIN	10TH	25TH	50TH	75TH	90TH	MAX
Commercial	0%	0%	0.09%	1.00%	3.48%	9.32%	14.55%



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

Measure Description

This mandatory measure reports the percentage of participants 12 years and older screened for depression on the date of the encounter or 14 days prior to the date of encounter using an age- appropriate standardized depression screening tool AND, if positive, a follow-up plan is documented on the date of the encounter.

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 Reporting Organizations

A total of 9 organizations submitted valid data for this measure.

8	1	1	2
Commercial	Medicaid	Medicare	All Other

Summary of Findings

The Commercial line of business is the only line of business with five or more valid submissions. The aggregate summary rate for Commercial is 2.73% (n=8, Range: 0.21% - 100.00%) with a mean rate of 18.05% and a median rate of 5.78%.

LINE OF BUSINESS	TOTAL NUMERATOR	TOTAL DENOMINATOR	AGGREGATE SUMMARY RATE	MEAN	SUBMISSIONS
Commercial	3,003	110,078	2.73%	18.05%	8

LINE OF BUSINESS	MIN	10TH	25TH	50TH	75TH	90TH	MAX
Commercial	0.21%	1.04%	2.11%	5.78%	14.30%	40.31%	100%



COPD OR ASTHMA IN OLDER ADULTS ADMISSION RATE (DM2012-31)

Measure Description

This mandatory measure accesses admissions with a principal diagnosis of asthma or chronic obstructive pulmonary disease (COPD) per 100,000 population, ages 40 years and older, during the measurement year. **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 Reporting Organizations

A total of 10 organizations submitted valid data for this measure.

8	1	1	3
Commercial	Medicaid	Medicare	All Other

Summary of Findings

The Commercial line of business is the only line of business with five or more valid submissions. The aggregate summary rate for Commercial is 3,832 per 100,000 (n=8, Range: 7,684 - 0) with a mean rate of 2,459 and a median rate of 1,760.

LINE OF BUSINESS	TOTAL NUMERATOR	TOTAL DENOMINATOR	AGGREGATE SUMMARY RATE	MEAN	SUBMISSIONS
Commercial	235	6,132	3,832	2,459	8

LINE OF BUSINESS	MIN	10TH	25TH	50TH	75TH	90TH	MAX
Commercial	7,684	5,612	3,605	1,760	351	44	0



HYPERTENSION ADMISSION RATE (DM2012-37)

Measure Description

This mandatory measure accesses admissions with a principal diagnosis of hypertension per 100,000 population ages 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 Reporting Organizations

A total of 10 organizations submitted valid data for this measure.

9	1	1	2
Commercial	Medicaid	Medicare	All Other

Summary of Findings

The Commercial line of business is the only line of business with five or more valid submissions. The aggregate summary rate for Commercial is 2,949 per 100,000 (n=9, Range: 10,534 - 0) with a mean rate of 2,580 and a median rate of 751.

LINE OF BUSINESS	TOTAL NUMERATOR	TOTAL DENOMINATOR	AGGREGATE SUMMARY RATE	MEAN	SUBMISSIONS
Commercial	937	31,771	2,949	2,580	9

LINE OF BUSINESS	MIN	10TH	25TH	50TH	75TH	90TH	MAX
Commercial	10,534	5,585	3,846	751	274	47	0



HEART FAILURE ADMISSION RATE (DM2012-38)

Measure Description

This mandatory measure assesses admissions with a principal diagnosis of heart failure per 100,000 population ages 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 Reporting Organizations

A total of 10 organizations submitted valid data for this measure.

8	1	1	3
Commercial	Medicaid	Medicare	All Other

Summary of Findings

The Commercial line of business is the only line of business with five or more valid submissions. The aggregate summary rate for Commercial is 11,603 per 100,000 (n=8, Range: 40,367 - 0) with a mean rate of 13,981 and a median rate of 7,843.

LINE OF BUSINESS	TOTAL NUMERATOR	TOTAL DENOMINATOR	AGGREGATE SUMMARY RATE	MEAN	SUBMISSIONS
Commercial	553	4,766	11,603	13,981	8

LINE OF BUSINESS	MIN	10TH	25TH	50TH	75TH	90TH	MAX
Commercial	40,367	31,049	26,686	7,843	1,162	660	0



DIABETES SHORT-TERM COMPLICATIONS ADMISSION RATE (DM2012-73)

Measure Description

This mandatory measure assesses admissions for a principal diagnosis of diabetes with short-term complications (ketoacidosis, hyperosmolarity, or coma) per 100,000 population ages 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 Reporting Organizations

A total of 12 organizations submitted valid data for this measure.

9	2	1	3
Commercial	Medicaid	Medicare	All Other

Summary of Findings

The Commercial line of business is the only line of business with five or more valid submissions. The aggregate summary rate for Commercial is 3,651 per 100,000 (n=9, Range: 36,493 - 0) with a mean rate of 5,786 and a median rate of 328.

LINE OF BUSINESS	TOTAL NUMERATOR	TOTAL DENOMINATOR	AGGREGATE SUMMARY RATE	MEAN	SUBMISSIONS
Commercial	277	7,588	3,651	5,786	9

LINE OF BUSINESS	MIN	10TH	25TH	50TH	75TH	90TH	MAX
Commercial	36,493	16,524	2,579	328	225	0	0



ASTHMA IN YOUNGER ADULTS ADMISSION RATE (DM2017-01)

Measure Description

This mandatory measure assesses admissions for a principal diagnosis of asthma per 100,000 population, ages 18 to 39 years, during the measurement year **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 Reporting Organizations

A total of 10 organizations submitted valid data for this measure.

7	1	0	2
Commercial	Medicaid	Medicare	All Other

Summary of Findings

The Commercial line of business is the only line of business with five or more valid submissions. The aggregate summary rate for Commercial is 4,245 per 100,000 (n=7, Range: 64,286 - 0) with a mean rate of 4,245 and a median rate of 328.

LINE OF BUSINESS	TOTAL NUMERATOR	TOTAL DENOMINATOR	AGGREGATE SUMMARY RATE	MEAN	SUBMISSIONS
Commercial	79	1,861	4,245	9,958	7

LINE OF BUSINESS	MIN	10TH	25TH	50TH	75TH	90TH	MAX
Commercial	64,286	28,063	2,606	209	0	0	0