Diabetes: HbA1c Poor Control (NQF 0059)

**Measure Basic Information**

**Name and date of specifications used:** Meaningful Use 2014 electronic Clinical Quality Measure (eCQM) Specifications for Eligible Professionals, June 2013 Release.

**URL of Specifications:**
(click on “2014 eCQM Specifications for EP Release June 2013” for the specification files, including quality data model (QDM) data elements).

Note: eCQM specifications have the potential to update every six months. Once certified, electronic health records (EHRs) are not required to be recertified with the updated specifications. OHA will accept year two data submissions from previous releases of the eCQM specifications, but CCOs will need to document the date of the specifications they are using.

**Measure Type:**
- HEDIS □
- PQI □
- Survey □
- Other □
- Specify: Meaningful Use

**Measure Utility:**
- CCO Incentive □
- Core Performance □
- CMS Adult Set □
- CHIPRA Set □
- State Performance □
- Other □
- Specify:

**Data Source:** Electronic Health Records

**Measurement Period:** 2014

OHA’s preferred measurement period for Year Two data submission is calendar year 2014. However, OHA will accept the following measurement periods:

- Calendar Year 2014: 01/01/2014 – 12/31/2014
- Quarter 4 of 2014: 10/01/2014 – 12/31/2014
- Ninety day increments within Quarter 4 of 2014
  - 10/01/2014 – 12/29/2014
  - 10/02/2014 – 12/30/2014
  - 10/03/2014 – 12/31/2014

Please see the Year Two Guidance Document for additional details. The guidance document is available online at: [http://www.oregon.gov/oha/Pages/CCO-Baseline-Data.aspx](http://www.oregon.gov/oha/Pages/CCO-Baseline-Data.aspx).

**2013 Benchmark:** n/a

**2014 Benchmark:** 34%, 2013 National Medicaid 75th percentile. For challenge pool only.
CCOs will need to submit a year two technology plan and data submission to meet the criteria for this measure in 2014. Year two technology plan guidance is available online at: http://www.oregon.gov/oha/Pages/CCO-Baseline-Data.aspx.

The 2014 benchmark will only apply to the 2014 challenge pool. CCOs must meet the benchmark in their year two data submission to receive challenge pool funds associated with this measure.

Note: A CCO could meet the measure and early quality pool funds by submitting the year two technology plan and data on time, but not earn the challenge pool for this measure if they fall short of the benchmark in their data submission.

Changes in Specifications for 2014:

There are no changes in the measure specifications for 2014. Please see section 2.1 of the Year Two Technology Plan Guidance Document for additional changes and requirements for the year two technology plan and data submission. http://www.oregon.gov/oha/Pages/CCO-Baseline-Data.aspx.

Denied claims: n/a

<table>
<thead>
<tr>
<th>Measure Details</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Data elements required denominator:</strong> Patients 18-75 years of age who had a diagnosis of diabetes¹ during or any time prior to the measurement period and who received a qualifying outpatient service during the measurement period:</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Qualifying Outpatient Service</th>
<th>Grouping Value Set²</th>
</tr>
</thead>
<tbody>
<tr>
<td>Office Visit</td>
<td>Office Visit Grouping Value Set (2.16.840.1.113883.3.464.1003.101.12.1001)</td>
</tr>
<tr>
<td>Face-to-Face Interaction</td>
<td>Face-to-Face Interaction Grouping Value Set (2.16.840.1.113883.3.464.1003.101.12.1048)</td>
</tr>
<tr>
<td>Preventive Care Services – Established Office Visit, 18 and Up</td>
<td>Preventive Care Services - Established Office Visit, 18 and Up Grouping Value Set (2.16.840.1.113883.3.464.1003.101.12.1025)</td>
</tr>
<tr>
<td>Preventive Care Services – Initial Office Visit, 18 and Up</td>
<td>Preventive Care Services-Initial Office Visit, 18 and Up Grouping Value Set (2.16.840.1.113883.3.464.1003.101.12.1023)</td>
</tr>
</tbody>
</table>

¹ Diabetes is identified using the Diabetes Grouping Value Set (2.16.840.1.113883.3.464.1003.103.12.1001).

² Grouping Value Sets are lists of specific values (terms and their codes) derived from single or multiple standard vocabularies used to define clinical concepts (e.g. patients with diabetes, clinical visit, reportable diseases) used in clinical quality measures and to support effective health information exchange. Value Sets can be accessed through the Value Set Authority Center (VSAC) at the National Library of Medicine. https://vsac.nlm.nih.gov/
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</thead>
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<tr>
<td>Annual Wellness Visit</td>
<td>Annual Wellness Visit Grouping Value Set (2.16.840.1.113883.3.526.3.1240)</td>
</tr>
</tbody>
</table>

**Required exclusions for denominator:** Patients with a diagnosis of gestational diabetes during the measurement period, using Gestational Diabetes Grouping Value Set (2.16.840.1.113883.3.464.1003.103.12.1010).

Note: only patients with a diagnosis of Type 1 or Type 2 diabetes should be included in the denominator; patients with a diagnosis of secondary diabetes due to another condition should not be included.

**Deviations from cited specifications for denominator:** None.

**Data elements required numerator:** Patients whose most recent HbA1c level (performed during the measurement period) is >9.0%.

Patient is numerator compliant if the most recent HbA1c level >9%, or is missing a result, or if an HbA1c test was not done during the measurement year.

**Required exclusions for numerator:** None.

**Deviations from cited specifications for numerator:** None.

**What are the continuous enrollment criteria:** None.

**What are allowable gaps in enrollment:** n/a

**Define Anchor Date (if applicable):** n/a

For more information:

- Value Sets can be accessed through the Value Set Authority Center (VSAC) at the National Library of Medicine. [https://vsac.nlm.nih.gov/](https://vsac.nlm.nih.gov/)


- Year Two Technology Plan and data submission guidance available online at: [http://www.oregon.gov/oha/Pages/CCO-Baseline-Data.aspx](http://www.oregon.gov/oha/Pages/CCO-Baseline-Data.aspx)