

CAP for Physicians

Diabetes Mellitus Module Overview

Activity Overview

The AOA's Clinical Assessment Program (CAP) is a web-based performance measurement program that analyzes data abstracted from patient medical records in order to evaluate clinical practices against evidence-based guidelines. The overarching purpose of CAP is to improve patient outcomes and ultimately increase quality of patient care.

Goals of CAP for Physicians:

- To provide a structure for the quantitative evaluation of current osteopathic care provided individually and in the aggregate by osteopathic physicians.
- To identify where quality-of-care improvements can be made in osteopathic physicians' offices and provide educational interventions.
- To provide osteopathic physicians with information on how they are treating their populations.

This web based program is easy to follow. The system provides a structured 3 stage process.

Stage A: Assess performance

Assess current practice using identified performance measures through a self-assessment survey and patient chart reviews

- Complete a self-assessment survey.
- Select 20 medical records based on the indicated parameters such as diagnostic criteria, patient inclusion and exclusion criteria and sampling technology.
- Enter and submit data from patient medical records online for analysis.
- Receive a performance analysis report comparing your performance with other participants and national benchmarks.
- Complete an evaluation on the process.

Stage B: Build and Implement Action Plan

Select from educational interventions and practice improvements designed for sustained improvement in patient care

- Identify an improvement goal and build an Action Plan using the interventions and systems tools within the PI module.
- Complete one educational activity and apply what you have learned in practice for a recommended 90 days (minimum of 30 days).
- Complete an evaluation on the process.

Stage C: Re-assess Performance

- Enter data from 20 additional charts online for patient visits since you have completed Stage B to generate a comparison report .
- Compare your Stage A and Stage C survey and performance results .
- Complete an evaluation on the process .
- Receive 20 credits of AOA Category 1-B Credit .

Patient Selection and Data Collection:

Patient sample criteria for the Diabetes Mellitus Measures Group are patients aged 18 through 75 years with a specific diagnosis of diabetes accompanied by a specific patient encounter:

One of the following diagnosis codes indicating diabetes: 250.00, 250.01, 250.02, 250.03, 250.10, 250.11, 250.12, 250.13, 250.20, 250.21, 250.22, 250.23, 250.30, 250.31, 250.32, 250.33, 250.40, 250.41, 250.42, 250.43, 250.50, 250.51, 250.52, 250.53, 250.60, 250.61, 250.62, 250.63, 250.70, 250.71, 250.72, 250.73, 250.80, 250.81, 250.82, 250.83, 250.90, 250.91, 250.92, 250.93, 357.2, 362.01, 362.02, 362.03, 362.04, 362.05, 362.06, 362.07, 366.41, 648.00, 648.01, 648.02, 648.03, 648.04

Accompanied by One of the following patient encounter codes: 97802, 97803, 97804, 99201, 99202, 99203, 99204, 99205, 99212, 99213, 99214, 99215, 99304, 99305, 99306, 99307, 99308, 99309, 99310, 99324, 99325, 99326, 99327, 99328, 99334, 99335, 99336, 99337, 99341, 99342, 99343, 99344, 99345, 99347, 99348, 99349, 99350, G0270, G0271

Patients having diabetes mellitus who are between the ages of 18 and 75 are eligible for this study. There are several ways of identifying patients for this study, you may pick any of the following methods:

- Use the diagnosis codes and encounter codes to identify the last 20 patients treated at your practice and determine if each of the patients are eligible to be abstracted using the following criteria: 18 - 75 years, with a diagnosis of diabetes. When you have 20 charts that are eligible then enter the data as described in the data dictionary. The most convenient way to do this may be to abstract the information onto the paper abstraction tool available in PDF and, when finished, have an administrative assistant enter the data directly into the web site.
- Or, starting at some point in time, use the diagnosis codes and encounter codes and collect data from the next 20 sequential patients you see with age 18 - 75 years with a diagnosis of diabetes. The paper abstraction tool can be used and then data can be directly entered as above.

These methods can be used for the baseline abstraction of 20 charts and then repeated for the re-measurement abstraction of 20 charts. A total of 40 charts are necessary to complete the project and receive 20 hours of 1B CME activity. A period of at least 1 month must elapse between the baseline and re-measurement abstraction. During this time you may complete any of the interventions available from the website and develop an action plan.

DIABETES MELLITUS CAP PQRS MEASURES

The following measures are CMS 2011 Physician Quality Reporting System (PQRS) measures that are included in the CAP Diabetes Mellitus Module.

#1. Diabetes Mellitus: Hemoglobin A1c Poor Control in Diabetes Mellitus

Percentage of patients aged 18 through 75 years with diabetes mellitus who had most recent hemoglobin A1c greater than 9.0%.

#2. Diabetes Mellitus: Low Density Lipoprotein (LDL-C) Control in Diabetes Mellitus

Percentage of patients aged 18 through 75 years with diabetes mellitus who had most recent LDL-C level in control (less than 100 mg/dl).

#3. Diabetes Mellitus: High Blood Pressure Control in Diabetes Mellitus

Percentage of patients aged 18 through 75 years with diabetes mellitus who had most recent blood pressure in control (less than 140/90 mmHg).

#117. Diabetes Mellitus: Dilated Eye Exam in Diabetic Patient

Percentage of patients aged 18 through 75 years with a diagnosis of diabetes mellitus who had a dilated eye exam.

#119. Diabetes Mellitus: Urine Screening for Microalbumin or Medical Attention for Nephropathy in Diabetic Patients

Percentage of patients aged 18 through 75 years with diabetes mellitus who received urine protein screening or medical attention for nephropathy during at least one office visit within 12 months.

#163. Diabetes Mellitus: Foot Exam

The percentage of patients aged 18 through 75 years with diabetes who had a foot examination.

#110 Preventive Care and Screening: Influenza Immunization for Patients \geq 50 Years Old

Percentage of patients aged 50 years and older who received an influenza immunization during the flu season (September through February).

#226. Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention

*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.*

ADDITIONAL CAP MEASURES

These measures are not PQRS measures but are additional measures that are pertinent to the Osteopathic care for Diabetes Mellitus patients.

Complete Lipid Profile Done

Is there evidence in the medical record that a LDL, HDL, Total Cholesterol and Triglycerides were completed during the year prior to the last patient visit (inclusive of the last visit)? If any element was ordered but not calculated due to high Triglycerides enter yes.

Osteopathic Structural Examination Done

Is there evidence in the medical record that a complete structural examination was done? A complete structural examination must include all of the following components:

1. Evaluation of AP and lateral curvature of the spine or other bony landmark asymmetries.
2. Evaluation of soft tissue abnormalities including tenderness.
3. Evaluation of range of motion or restrictions thereof.

Osteopathic Manipulative Treatment

Is there evidence in the medical record that osteopathic manipulative treatment was done?