

Where we've been...

Diabetes is the sixth leading cause of death by disease in the United States and affects approximately 16 million Americans. Appropriate and timely screening and treatment can significantly reduce the burden of diabetes.

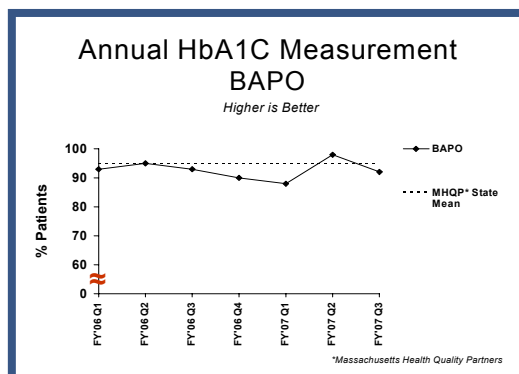
The Massachusetts Health Quality Partners has adopted the national diabetes measures which were developed, tested, and used by the National Committee for Quality Assurance's (NCQA) Health Effectiveness Data and Information Set (HEDIS), in collaboration with the American Diabetic Association (ADA). Using this information, more than 45 BMP physicians have been designated "high quality diabetic care" providers based on the NCQA/ADA recognition. The Diabetes Physician Recognition Program (DPRP) award recognizes physicians who demonstrate, that over time, they have provided high quality care to patients with diabetes.

Our partnership with the International Diabetes Center (IDC) continues as we work with Staged Diabetes Management (SDM) in the adult primary care practices. SDM is a comprehensive program designed to assist the primary care provider in managing diabetes and associated complications through improved quality of care. The use of evidence-based clinical decision-making and education helps to reduce morbidity and mortality and to optimize patient self-management. We are also a site for the IDC Hypertension and Diabetes Initiative, with a focus on blood pressure control for patients with diabetes.

To determine our performance, we review for documentation of an HbA1C, fasting lipid profile, nephropathy assessment and retinal eye exam performed annually, and blood pressure control. Treatment goals for patients with diabetes include treating to target for optimal control of HbA1C <7, LDL <100, and blood pressure less than 130/80.

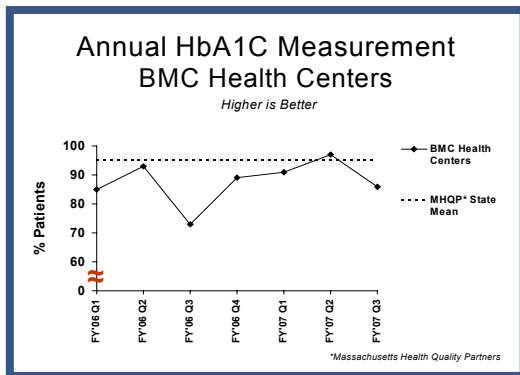
Where we are now...

BAYSTATE AFFILIATED PRACTICE ORGANIZATIONS (BAPO) For FY 2007 YTD, 93% of eligible patients had an HbA1C level measured, 48% of whom were considered to be at target glycemic control (HbA1C < 7.0), compared to the DPRP benchmark of 40%. Eighty-one percent had a fasting lipid profile performed, 50% of whom were considered to be in "excellent control" (LDL < 100), compared to the HEDIS benchmark of 44%. Thirty-seven percent of patients had blood pressure at goal of under 130/80. Additionally, 77% had nephropathy assessment performed.

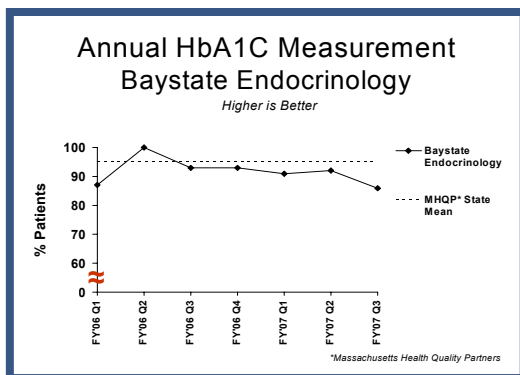


DIABETES MANAGEMENT

BMC HEALTH CENTERS In FY 2007 YTD, 91% of eligible patients had an HbA1C level measured, 36% of whom were considered to be at target glycemic control (HbA1C < 7.0), compared to the DPRP benchmark of 40%. Eighty percent had a fasting lipid profile performed, 45% of whom were considered to be in “excellent control” (LDL < 100), compared to the HEDIS benchmark of 44%. Thirty-eight percent of patients had blood pressure at goal of under 130/80. Additionally, 76% had nephropathy assessment performed.



BAYSTATE ENDOCRINOLOGY AND DIABETES For FY 2007 YTD, 90% of eligible patients had an HbA1C level measured, 32% of whom were considered to be at target glycemic control (HbA1C < 7.0), compared to the DPRP benchmark of 40%. Seventy-five percent had a fasting lipid profile performed, 43% of whom were considered to be in “excellent control” (LDL < 100), compared to the HEDIS benchmark of 44%. Forty-nine percent of patients had blood pressure at goal of under 130/80. Additionally, 70% had nephropathy assessment performed.



Where we are going...

Disease management for chronic conditions is a priority for our system and our communities. BH has demonstrated this through the support and adoption of the Institute of Medicine's Six Aims of Care (STEEEP: safe, timely, effective, efficient, equitable, and patient-centered) in building effective and efficient models of care that underscore our mission to improve the health of people in our communities every day with quality and compassion.