

## Diabetes: LDL Management & Control (NQF 0064)

<b>EMeasure Name</b>	Diabetes: LDL Management & Control	<b>EMeasure Id</b>	Pending
<b>Version Number</b>	1	<b>Set Id</b>	Pending
<b>Available Date</b>	No information	<b>Measurement Period</b>	January 1, 20xx through December 31, 20xx
<b>Measure Steward</b>	National Committee for Quality Assurance		
<b>Endorsed by</b>	National Quality Forum		
<b>Description</b>	The percentage of patients 18–75 years of age with diabetes (type 1 or type 2) who had LDL-C <100mg/dL.		
<b>Measure scoring</b>	Proportion		
<b>Measure type</b>	Process		
<b>Rationale</b>	<p>This measure assesses the percentage of patients in a specific age demographic who were diagnosed with type 1 or type 2 diabetes and who demonstrate poor low-density lipoprotein (LDL) cholesterol levels. Diabetes mellitus (diabetes) is a group of diseases characterized by high blood glucose levels caused by the body's inability to correctly produce or utilize the hormone insulin . It is recognized as a leading cause of death and disability in the U.S. and is highly underreported as a cause of death. Diabetes of either type may cause life-threatening, life-ending or life-altering complications, including poor cholesterol, specifically LDL. Clinical guidelines recommend lifestyle modifications that include reducing intake of saturated fat, trans fat and cholesterol; weight loss; and increased physical activity (ADA 2009). Statin therapy is suggested for eligible patients whose levels are consistently and significantly higher (ADA 2009). This measure facilitates long-term management of LDL cholesterol levels for patients diagnosed with diabetes.</p>		
<b>Clinical Recommendation Statement</b>	<p>American Diabetes Association: In most adult patients, measure fasting lipid profile at least annually. In adults with low-risk lipid values (LDL cholesterol &lt;100 mg/dl, HDL cholesterol &gt;50 mg/dl, and triglycerides &lt;150 mg/dl), lipid assessments may be repeated every 2 years.</p> <p>ACE/AACE: Aggressive management of dyslipidemia in patients with diabetes mellitus is critical; treat patients to achieve the following goal: LDL-C &lt;100 mg/dL (&lt;70 mg/dL is recommended for patients with diabetes mellitus and coronary artery disease).</p>		
<b>References</b>	<p>Standards of Medical Care in Diabetes—2009. Diabetes Care January 2009 32:S6-S12; doi:10.2337/dc09-S006</p> <p>AACE Medical Guidelines for Clinical Practice for the Management of Diabetes Mellitus. Endocrine Practice Vol 13 (Suppl 1) May/June 2007</p>		
<b>Definitions</b>			

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*Please refer to the spreadsheet for this measure for detail regarding data criteria and code lists.*

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### **Population criteria**

- **Initial Patient Population =**
  - AND: “Patient characteristic: birth date” (age)  $\geq 17$  years and  $\leq 74$  years to capture all patients who will reach the ages between 18 and 75 years during the “measurement period”;
- **Denominator =**
  - AND: All patients in the initial patient population;
  - AND:
    - OR: “Medication dispensed: medications indicative of diabetes”  $\leq 2$  years before or simultaneously to “measurement end date”;
    - OR: “Medication order: medications indicative of diabetes”  $\leq 2$  years before or simultaneously to “measurement end date”;
    - OR: “Medication active: medications indicative of diabetes”  $\leq 2$  years before or simultaneously to “measurement end date”;
    - OR:
      - AND: “Diagnosis active: diabetes”  $\leq 2$  years before or simultaneously to “measurement end date”;
      - AND:
        - OR:  $\geq 1$  count(s) of “Encounter: encounter acute inpatient or ED”;
        - OR:  $\geq 2$  count(s) of “Encounter: encounter non-acute inpt, outpatient, or ophthalmology” occurring on 2 different dates;
- **Numerator 1=**
  - AND: “Laboratory test result: LDL test”;
- **Numerator 2=**
  - AND: “Laboratory test result: LDL test”, value  $< 100$  mg/dL;
- **Exclusions =**
  - OR:
    - AND: “Diagnosis active: polycystic ovaries”;
    - AND NOT:

- AND: “Diagnosis active: diabetes” <= 2 years before or simultaneously to “measurement end date”;
- AND:
  - OR: “Encounter: encounter acute inpatient or ED” <=2 years before or simultaneously to “measurement end date”;
  - OR: “Encounter: encounter non-acute inpt, outpatient, or ophthalmology” <=2 years before or simultaneously to “measurement end date”;
- OR:
  - AND:
    - OR: “Diagnosis active: gestational diabetes” <=2 years before or simultaneously to “measurement end date”;
    - OR: “Diagnosis active: steroid induced diabetes” <=2 years before or simultaneously to “measurement end date”;
  - AND:
    - OR: “Medication order: medications indicative of diabetes” <=2 years before or simultaneously to “measurement end date”;
    - OR: “Medication dispensed: medications indicative of diabetes” <=2 years before or simultaneously to “measurement end date”;
    - OR: “Medication active: medications indicative of diabetes” <=2 years before or simultaneously to “measurement end date”;
  - AND NOT:
    - AND: “Diagnosis active: diabetes” <=2 years before or simultaneously to “measurement end date”;
    - AND:
      - OR: “Encounter: Encounter acute inpatient or ED” <=2 years before or simultaneously to “measurement end date”;
      - OR: “Encounter: encounter non-acute inpt, outpatient, or ophthalmology” <=2 years before or simultaneously to “measurement end date”;

**Data criteria (QDS Data Elements)**

- **Initial Patient Population =**
  - “Patient characteristic: birth date” using “birth date code list” before the “measurement period”

- **Denominator =**
  - “Diagnosis active: diabetes” using “diabetes code list grouping” before or simultaneously to the “measurement end date”;
  - “Encounter: encounter acute inpatient or ED” using “encounter acute inpatient or ED code list grouping” during the “measurement period”;
  - “Encounter: encounter non-acute inpt, outpatient, or ophthalmology” using “encounter non-acute inpt, outpatient, or ophthalmology code list grouping” during the “measurement period”;
  - “Medication order: medications indicative of diabetes” using “medications indicative of diabetes code list grouping” before or simultaneously to the “measurement end date”;
  - “Medication dispensed: medications indicative of diabetes” using “medications indicative of diabetes code list grouping” before or simultaneously to the “measurement end date”;
  - “Medication active: medications indicative of diabetes” using “medications indicative of diabetes code list grouping” before or simultaneously to the “measurement end date”;
  
- **Numerator =**
  - “Laboratory test result: LDL test” using “LDL test code list grouping” during the “measurement period”;
  
- **Exclusions =**
  - “Diagnosis active: polycystic ovaries” using “polycystic ovaries code list grouping” before or simultaneously to the “measurement end date”;
  - “Diagnosis active: gestational diabetes” using “gestational diabetes code list grouping” before or simultaneously to the “measurement end date”;
  - “Diagnosis active: steroid induced diabetes” using “steroid induced diabetes code list grouping” before or simultaneously to the “measurement end date”;

**Summary calculation**

Calculation is generic to all measures:

- Calculate the final denominator by adding all that meet denominator criteria.
- Subtract from the final denominator all that do not meet numerator criteria yet also meet exclusion criteria. Note some measures do not have exclusion criteria.
- The performance calculation is the number meeting numerator criteria divided by the final denominator.
- For measures with multiple patient populations, repeat this process for each patient population and report each result separately.
- For measures with multiple numerators, calculate each numerator separately within each population using the paired exclusion.

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Measure set	CLINICAL QUALITY MEASURE SET 2011-2012
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