

PUBLIC HEALTH PROGRAM SURVEY- Chronic Disease

Contact Information

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Short Title: *Wisconsin Collaborative Diabetes Quality Improvement Project*

Program Location: Throughout the state of Wisconsin

Objectives and Goals:

The objectives of the Wisconsin Collaborative Diabetes Quality Improvement Project (WCDQIP) are to: evaluate implementation of the Wisconsin Diabetes Mellitus Essential Care Guidelines; share resources, population-based strategies, and best practices; and to improve diabetes care through collaborative quality improvement initiatives. While Wisconsin is performing better, on average, than nationally or regionally, improvements in care are still necessary. This project allows HMOs the opportunity to use their data to address areas that would benefit from quality improvement.

Methods:

Various methods are employed to address quality improvement in HMOs in Wisconsin. One of the primary means by which diabetes care in HMOs is measured is by collecting, analyzing, and tracking Healthcare Effectiveness Data and Information Set (HEDIS®) data from HMOs.

HEDIS® is developed by the National Committee for Quality Assurance (NCQA). The Wisconsin Diabetes Prevention and Control Program partners with the University of Wisconsin Population Health Institute (UWPHI) to collect Comprehensive Diabetes Care measures, as well as select cardiovascular care, asthma care, cancer screening, smoking cessation, and arthritis care measures from each participating HMO.

The UWPHI provides confidential data analysis and reporting, which includes trends in collective performance over time, trends in individual organization performance over time, as well as collaborative, regional, and national performance comparisons. Reporting aggregate data on these measures allows HMOs to evaluate overall trends and how their specific HMO compares to the aggregate, leading to efforts in improving quality. Plans collaborate on a variety of quality improvement projects to improve the quality of diabetes care in their

organizations. The WCDQIP meets quarterly to discuss quality improvement initiatives, best practices, and trends in diabetes care.

Program Length:

1999-Present

The project collects health plan data annually; data collection began in 1999 and continues today. The project began just collecting one Comprehensive Diabetes Care measure, and over the years, expanded into collecting all Comprehensive Diabetes Care measures, as well as adding select cardiovascular care, asthma care, cancer screening, smoking cessation, and arthritis care measures.

Demographic Info:

The populations targeted by this program are individuals with diabetes who are served by Wisconsin’s commercial health plans. We don’t have specific information on income, ethnicity, and rural/urban dwelling.

Overall Cost:

HMOs are not provided with any funding to participate in this project; they voluntarily come to the table as they value the collaboration and partnerships of the many organizations involved. Funding is provided from the Wisconsin Diabetes Prevention and Control Program to the University of Wisconsin Population Health Institute for data analysis and overall project assistance for \$33,000 per year. This does not include the time that staff from the Diabetes Prevention and Control Program contributes.

Funding Sources:

100% Federal (*percentage is an estimate*)

Outcomes:

Overall health plan performance on all Healthcare Effectiveness Data and Information Set (HEDIS®) Comprehensive Diabetes Care measures has improved since the project began in 1999. Since then, HEDIS® has expanded the number of Comprehensive Diabetes Care Measures from four to eight. During this period, Wisconsin has continued to surpass the national average and has performed comparably with the national 90th percentile. Listed below are the results of the original four Comprehensive Diabetes Care Measures that have been tracked since 1999, and represent the WCDQIP average for each measure, as well as the national average in 2007.

	Eye exam	HbA1c testing	HbA1c poor control**	LDL-C screening
1999 (n=16)	63%	84%	29%	70%
2007 (n=14)	67%	93%	21%	85%
2007 National Average	55%	88%	29%	84%

**Lower value desired

For additional information on results, please refer to the Wisconsin Collaborative Diabetes Quality Improvement Project 2007 Summary Report, which can be viewed and downloaded at: <http://dhs.wisconsin.gov/health/diabetes/PDFs/HMOCollabRpt07.pdf>.

Did you make any estimates regarding costs deferred, outbreaks averted or deaths prevented?

No

Additional Information:

As a result of the continued collection and analysis of HEDIS® diabetes and chronic disease measures, the WCDQIP has supported various initiatives targeting quality improvement including implementation of the *Wisconsin Diabetes Mellitus Essential Care Guidelines 2008*, multiple eye exam initiatives including the Wisconsin Lions Foundation eye exam DVD promotion and distribution, and production & distribution of a Chronic Kidney Disease DVD.

Future Plans:

Continuation of this collaborative project is expected to persist into the future. Recently, we invited chronic disease programs to use and report historical HEDIS® data specific to their programs. This is a very successful project, and continued collaboration is expected.