

Data Transparency Project Measures

As part of the Data Transparency Project, clinics will share the data they have for the measures below. Through this collaborative, clinics all across the state will meet to discuss data and share best practices as they work to improve these measures.

In order to be consistent with APCM reporting, clinics will align their reports with UDS specifications at this time. Both the SBIRT and ED Utilization measures do not have UDS specifications and will align behind CCO definitions. For this project, the benchmarks will be the most currently available UDS National Averages.

Data Transparency Measure	Measure Definitions	2017 UDS National Averages <small>*Click here to learn more about UDS National Averages</small>
Colorectal Cancer Screening % of patients aged 50-75 who have had appropriate screening for colorectal cancer	UDS Measure Specifications (page 88)	42.02%
Depression Screening % of patients 12 years and older with a positive depression screen and a documented follow-up plan	UDS Measure Specifications (page 90)	66.15%
Diabetes Poor Control % of patients aged 18-75 with diabetes whose last A1c result was > 9% or who had no test	UDS Measure Specifications (page 104)	32.95%
Emergency Department Utilization Emergency department utilization for Medicaid patients (member month denominator)	CCO Measure Specifications* <small>*Clinics/OPCA will coordinate with CCOs to receive data</small>	N/A
Hypertension % of patients aged 18-85 with hypertension where their last blood pressure reading was considered controlled (<140/90)	UDS Measure Specifications (page 103)	62.71%
SBIRT Screening % of patients 12 years or older with a positive screen receiving brief intervention and referral to treatment	CCO Measure Specifications* <small>*Removed as a 2017 CCO incentive metric</small>	N/A