

Table HPC-AD. Percentage of Adults Ages 18 to 75 with Diabetes (Type 1 or Type 2) who had Hemoglobin A1c in Poor Control (>9.0%), as Submitted by States for the FFY 2018 Adult Core Set Report (n = 27 states) [Lower rates are better]

State	Population	Methodology	Denominator	Rate
State Mean				41.6
State Median				39.8
States Reporting Ages 18 to 64 (n=10)				
Connecticut	Medicaid; CHIP	Hybrid	1,393	38.8
Delaware	Medicaid; Dual Eligibles	Hybrid	411	45.8
Georgia	Medicaid	Administrative	48,395	94.7
Maryland	Medicaid; CHIP	Hybrid	3,014	37.8
Massachusetts	Medicaid; Dual Eligibles	Hybrid	3,424	35.7
Mississippi	Medicaid	Hybrid	1,081	56.1
Nevada	Medicaid	Hybrid	822	43.2
New Hampshire	Medicaid	Hybrid	861	32.5
New York	Medicaid; CHIP	Hybrid	12,452	31.5
West Virginia	Medicaid	Hybrid	1,644	40.5
States Reporting Ages 18 to 75 (n=17)				
California	Medicaid	Hybrid	28,024	34.9
Dist. of Col.	Medicaid; CHIP; Dual Eligibles	Hybrid	1,125	48.0
Florida	Medicaid	Administrative & Hybrid	63,130	40.9
Hawaii	Medicaid; Dual Eligibles	Administrative & Hybrid	17,664	41.0
Kentucky	Medicaid; Dual Eligibles	Hybrid	3,124	47.3
Louisiana	Medicaid; CHIP	Hybrid	2,055	50.8
New Jersey	Medicaid; CHIP	Hybrid	3,215	39.9
New Mexico	Medicaid	Hybrid	1,781	48.4
Ohio	Medicaid; CHIP	Hybrid	2,295	49.4
Oregon	Medicaid; Dual Eligibles	Electronic health records	51,153	23.6
Pennsylvania	Medicaid	Hybrid	5,436	34.7
Rhode Island	Medicaid; CHIP	Hybrid	821	28.8
Tennessee	Medicaid	Hybrid	6,876	37.2
Utah	Medicaid; Dual Eligibles	Hybrid	1,581	32.3
Vermont	Medicaid; CHIP	Hybrid	368	31.5
Virginia	Medicaid; CHIP	Administrative	NR	39.8
Washington	Medicaid	Hybrid	2,202	37.4

Source: Mathematica analysis of MACPro reports for the FFY 2018 reporting cycle. More information on the Adult Core Set is available at <https://www.medicaid.gov/medicaid/quality-of-care/performance-measurement/adult-and-child-health-care-quality-measures/adult-core-set/index.html>.

Notes: This measure identifies the percentage of adults ages 18 to 75 with diabetes (type 1 or type 2) who had Hemoglobin A1c in poor control (>9.0%) during the measurement year.

The term "states" includes the 50 states and the District of Columbia.

Means are calculated as the unweighted average of all state rates.

Unless otherwise specified, states used Adult Core Set specifications, based on National Committee for Quality Assurance 2018 specifications. The following states used National Committee for Quality Assurance 2017 specifications: NV and OR. This table excludes AR, which reported the measure but did not use Adult Core Set specifications to calculate the measure.

Unless otherwise specified, the measurement period for this measure was January 1, 2017 to December 31, 2017.

Unless otherwise specified, rates displayed in this table reflect state reporting for Medicaid beneficiaries ages 18 to 64 or ages 18 to 75.

The Adult Core Set specifications include guidance for calculating this measure using the administrative method or the hybrid method. The hybrid method uses a combination of administrative and medical records data to identify services included in the numerator or to determine exclusions from the denominator based

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on diagnoses or other criteria. Unless otherwise specified, administrative data sources are the state's MMIS and/or data submitted by managed care plans; medical record data sources are paper and/or electronic health records.

Denominators are assumed to be the measure-eligible population for states using the administrative method; states using the hybrid method often reported the sample size for the medical chart review rather than the measure-eligible population. Some states reported exclusions from the denominator, as noted in the state-specific comments below.

AHRQ = Agency for Healthcare Research and Quality; CCO = Coordinated Care Organization; CHIP = Children's Health Insurance Program; CMS = Centers for Medicare & Medicaid Services; CMO = Care Management Organization; CY = Calendar Year; ED = Emergency Department; EHR = Electronic Health Record; EQRO = External Quality Review Organization; FFS = Fee for Service; FFY = Federal Fiscal Year; HEDIS = Healthcare Effectiveness Data and Information Set; HMO = Health Maintenance Organization; ICD = International Classification of Diseases; LOINC = Logical Observation Identifiers Names and Codes; MACPro = Medicaid and CHIP Program System; MCO = Managed Care Organization; MMIS = Medicaid Management Information System; NCQA = National Committee for Quality Assurance; NR = Not Reported; PCCM = Primary Care Case Management; PCP = Primary Care Practitioner.

State-Specific Comments:

- CA: Rate includes managed care population (26 MCOs) ages 18 to 75, representing 90 percent of the population. Rate excludes FFS population, representing 10 percent of the population, and Medicare-Medicaid Dual Eligibles. Denominator is the sample size; measure-eligible population is 415,506.
- CT: Rate includes FFS population. Rate excludes Medicare-Medicaid Dual Eligibles. Denominator is the sample size; measure-eligible population is 31,824. Rate was audited by a certified HEDIS auditor.
- DE: Rate includes managed care population (1 MCO), representing 72 percent of the population. Rate excludes FFS population and enrollees in one MCO, representing 28 percent of the population. Denominator is the sample size; measure-eligible population is 4,293.
- DC: Rate includes managed care population (3 MCOs) ages 18 to 75, representing 50 percent of the population. Rate excludes FFS population and enrollees in one MCO, representing 50 percent of the population. Denominator is the sample size; measure-eligible population is 5,594. MCO rates were audited by certified HEDIS auditors.
- FL: Rate includes managed care population (17 MCOs) ages 18 to 75, representing 67 percent of the population. Rate excludes FFS population, representing 33 percent of the population, and Medicare-Medicaid Dual Eligibles. Rate was derived using both administrative and hybrid method data. Two MCOs used the administrative method and 15 MCOs used the hybrid method. Denominator is the measure-eligible population. MCO rates were audited by a certified HEDIS auditor.
- GA: Rate includes FFS and managed care populations (4 MCOs). Rate excludes Medicare-Medicaid Dual Eligibles and Planning for Healthy Babies (P4HB) demonstration members per CMS Special Terms and Conditions.
- HI: Rate includes managed care population (5 MCOs) ages 18 to 75. Rate was derived using both administrative and hybrid method data. One MCO used the administrative method and four MCOs used the hybrid method. Denominator is the measure-eligible population.
- KY: Rate includes managed care population (5 MCOs) ages 18 to 75, representing 90 percent of the population. Rate excludes FFS population, representing 10 percent of the population. Denominator is the sample size; measure-eligible population is 22,909. Rate was validated by the state's EQRO.
- LA: Rate includes managed care population (5 MCOs) ages 18 to 75, representing 95 percent of the population. Rate excludes FFS population, representing 5 percent of the population, and Medicare-Medicaid Dual Eligibles. Denominator is the sample size; measure-eligible population is 47,926.
- MD: Rate includes managed care population (7 MCOs), representing 78 percent of the population. Rate excludes FFS population and enrollees in one MCO, representing 22 percent of the population, as well as Medicare-Medicaid Dual Eligibles. Denominator is the sample size; measure-eligible population is 40,605. Rate was audited by certified HEDIS auditors.
- MA: Rate includes PCCM and managed care populations (5 MCOs), representing 63 percent of the population. Rate excludes FFS population, representing 37 percent of the population, but most FFS beneficiaries would not be eligible for the measure, including beneficiaries who have other insurance, reside in a long-term care institution, or receive limited or temporary Medicaid benefits. Denominator is the sample size; measure-eligible population is 42,317.
- MS: Rate includes managed care population (2 MCOs), representing 64 percent of the population. Rate excludes FFS population, representing 36 percent of the population, and Medicare-Medicaid Dual Eligibles. Denominator is the sample size; measure-eligible population is 11,887.

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NV:	Rate includes managed care population (3 MCOs). Rate excludes FFS population and Medicare-Medicaid Dual Eligibles. Denominator is the sample size; measure-eligible population is 13,133.
NH:	Rate includes managed care population (2 MCOs), representing 86 percent of the population. Rate excludes FFS population, representing 14 percent of the population, and Medicare-Medicaid Dual Eligibles. Denominator is the sample size; measure-eligible population is 2,095. MCO rates were audited by certified HEDIS auditors.
NJ:	Rate includes managed care population (5 MCOs) ages 18 to 75, representing 91 percent of the population. Rate excludes FFS population, representing 9 percent of the population, and Medicare-Medicaid Dual Eligibles. Denominator is the sample size; measure-eligible population is 56,838.
NM:	Rate includes managed care population (4 MCOs) ages 18 to 75. Rate excludes Medicare-Medicaid Dual Eligibles. Denominator is the sample size; measure-eligible population is 27,193.
NY:	Rate includes managed care population (68 MCOs), representing 77 percent of the population. Rate excludes FFS population, representing 23 percent of the population, and Medicare-Medicaid Dual Eligibles. Denominator is the sample size; measure-eligible population is 209,874. State conducted an internal validation of the data.
OH:	Rate includes managed care population (5 MCOs) ages 18 to 75, representing 82 percent of the population. Rate excludes FFS population, representing 18 percent of the population, and Medicare-Medicaid Dual Eligibles. Denominator is the sample size; measure-eligible population is 100,734. MCO rates were audited by a certified HEDIS auditor.
OR:	Rate includes managed care population (16 MCOs) ages 18 to 75 who are included in electronic health records in the state. Rate excludes FFS population and managed care enrollees who are not included in electronic health record data.
PA:	Rate includes managed care population (9 MCOs) ages 18 to 75. Rate excludes Medicare-Medicaid Dual Eligibles. Denominator is the sample size; measure-eligible population is 87,598. Data were submitted by MCOs and compiled by the state's EQRO.
RI:	Rate includes managed care population (2 MCOs) ages 18 to 75, representing 91 percent of the population. Rate excludes FFS population, representing 9 percent of the population, and Medicare-Medicaid Dual Eligibles. Denominator is the sample size; measure-eligible population is 9,482.
TN:	Rate includes managed care population (4 MCOs) ages 18 to 75. Rate excludes Medicare-Medicaid Dual Eligibles. Denominator is the sample size; measure-eligible population is 53,522. Rate was validated by the state's EQRO.
UT:	Rate includes managed care population (4 MCOs) ages 18 to 75, representing 75 percent of the population. Rate excludes FFS population, representing 25 percent of the population. Denominator is the sample size; measure-eligible population is 4,336. MCO rates were audited by certified HEDIS auditors.
VT:	Rate includes accountable care organization (ACO) population ages 18 to 75, representing 18 percent of the population. Rate excludes Medicare-Medicaid Dual Eligibles. Denominator is the sample size; measure-eligible population is 28,593.
VA:	Rate includes managed care population (6 MCOs) ages 18 to 75. Rate excludes Medicare-Medicaid Dual Eligibles. State obtained rate from the NCQA Quality Compass and denominator is not available.
WA:	Rate includes managed care population (5 MCOs) ages 18 to 75, representing 87 percent of the population. Rate excludes FFS population, representing 13 percent of the population, and Medicare-Medicaid Dual Eligibles. Denominator is the sample size; measure-eligible population is 42,827. Rate was audited by the state's EQRO.
WV:	Rate includes managed care population (4 MCOs), representing 80 percent of the population. Rate excludes FFS population, representing 20 percent of the population, and Medicare-Medicaid Dual Eligibles. Denominator is the sample size; measure-eligible population is 20,171. Rate was validated by the state's EQRO.