



# 2024

## DISEASE MANAGEMENT PERFORMANCE MEASUREMENT

AGGREGATE SUMMARY PERFORMANCE REPORT

February 2025



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# EXECUTIVE SUMMARY

<b>13</b> Reporting Organizations	<b>750 K</b> Eligible Individuals
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**Cessation Counseling for Tobacco Use**

**12.21%**

Of patients screened & counseled for tobacco use  
(median rate: 8.13%)

**Unhealthy Alcohol Use**

**1.24%**

Of patients screened & counseled for unhealthy alcohol use  
(median rate: 1.20%)

**Screening for Depression & Follow-Up Plan**

**2.54%**

Of participants screened for depression & received follow-up  
(median rate: 2.84%)

**Diabetes Short-Term Complications Admissions**

**1,788/100K**

Admissions for complications in chronic diabetic adults  
(median rate: 482/100K)

Presented in this report are the 2023 measurement year (2024 reporting year) results based on URAC’s Disease Management Accreditation program performance measures.

URAC includes performance measures in multiple accreditation programs to align and harmonize with national priorities for healthcare quality and delivery improvement. Our priority of consumer protection and empowerment drives our measurement efforts on outcome measures, composite measures, and flexible measures collection. With the emphasis of the ACA on affordable, quality health care and access, it is imperative that performance measurement programs are in place to ensure that savings from cost cutting efforts in health care are not at the expense of the quality of care delivered to patients. The information provided by measures of performance can help stakeholders monitor the quality and accessibility of care across the nation.

Organizations are required to report data for 9 mandatory measures and have the option to report data for 1 exploratory measure.

Below is the list of measures for 2024 reporting:

### MANDATORY MEASURES

1. Screening and Cessation Counseling for Tobacco Use (DM2012-02)
2. Unhealthy Alcohol Use: Screening and Brief Counseling (DM2012-03)
3. Screening for Depression & Follow-Up Plan (DM2012-05)
4. Pediatric Asthma Admission Rate (DM2012-30)\*
5. Chronic Obstructive Pulmonary Disease or Asthma in Older Adults Admission Rate (DM2012-31)
6. Hypertension Admission Rate (DM2012-37)
7. Heart Failure Admission Rate (DM2012-38)
8. Diabetes Short-Term Complications Admissions Rate (DM2012-73)
9. Asthma in Younger Adults Admission Rate (DM2017-01)

### EXPLORATORY MEASURE

1. Patient Activation Measure (DM2012-10)\*

\* Fewer than 5 organizations submitted data for this measure. Analysis and benchmarks were not produced given less than five valid data submissions.

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## DATA VALIDATION PROCEDURES

Kiser Healthcare Solutions, LLC executed standard procedures for data cleaning and validation prior to finalizing the results presented in this report. All organizations' measure submissions were reviewed for measure component quality. For example, numerators and denominators were checked against rates to ensure accuracy. Also, minimum, mean, median, and maximum rates were benchmarked nationally and regionally to ensure accuracy and to identify potential issues at an individual submission level.

Kiser Healthcare Solutions corrected for any data entry and duplicate submission errors based on manual data review and cleaning, documented at the end of this report.

### Basic guidelines for identifying valid submissions:

- Measure denominator is greater than 0
- Organization has indeed stated it is submitting the measure

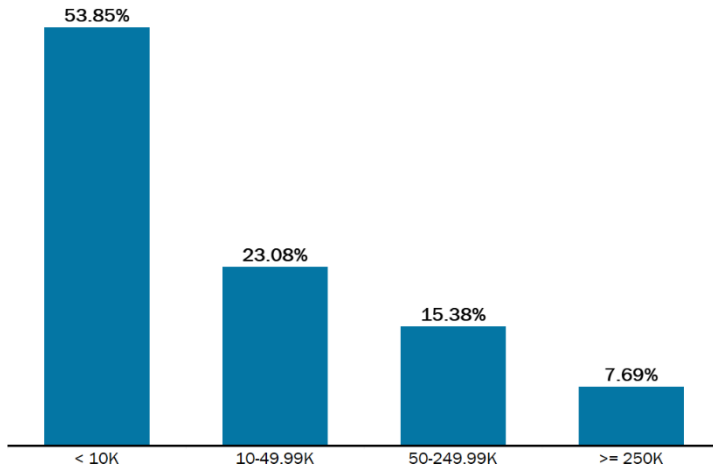
### Basic guidelines for aggregate rates:

- Measure denominator is greater than or equal to 30
- Organization has indeed stated it is submitting the measure
- Minimum of 5 reporting organizations

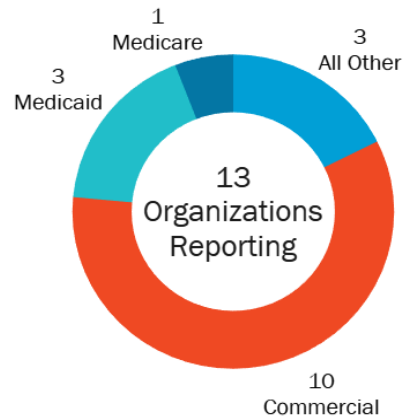
# RESULTS IN AGGREGATE

A total of 13 URAC-accredited Disease Management organizations reported 2023 measurement year data for the 2024 reporting year. The number of covered lives managed by responding organizations was 750,194, ranging from 150 to 391,492; more than half of the organizations had fewer than 10,000 covered lives (**Figure 1**). About three-fourths of responding organizations (n=10) reported a Commercial line of business. Of all lines of business reported among the valid submissions, only Commercial exceeded the minimum of five necessary for measure level reporting (**Figure 2**).

**Figure 1. Reporting by Program Tier Size**  
# of lives managed per organization (n=13)



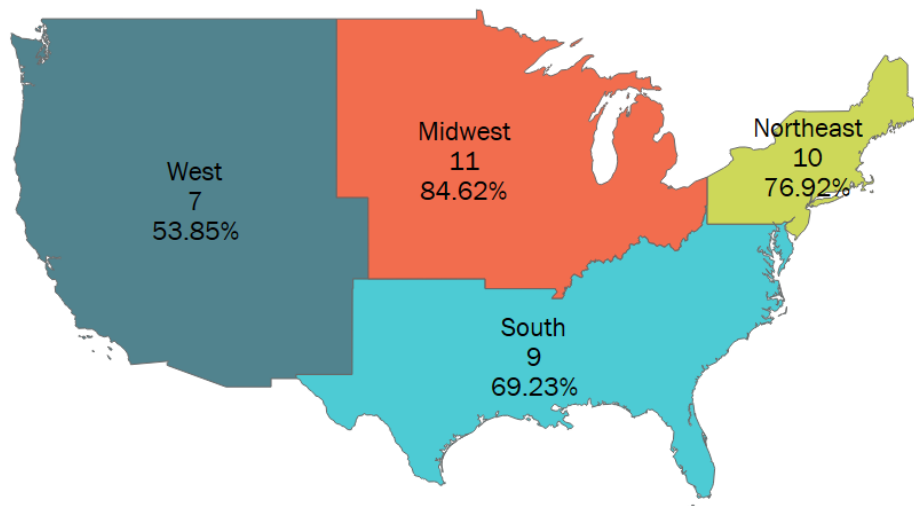
**Figure 2. Lines of Business Served**  
% of reporting organizations by payer (n=13)



## Regional Areas Served

Of the 13 DM organizations that submitted performance measurement data, 38.46% of the organizations (n=5) covered all 4 regions (Northeast, Midwest, South, and West), and 15.38% of the organizations (n=2) covered only a single region. The Midwest had the most organizations submitting (84.62%, n=11) while the West had the fewest (53.85%, n=7) (**Figure 3**).

**Figure 3. Regional Areas Served**  
% of reporting organizations by region (n=13)



Note: Multiple responses accepted.



## SCREENING AND CESSATION COUNSELING FOR TOBACCO USE (DM2012-02)

### Measure Description

This *mandatory* measure assesses the percentage of patients aged 18 years and older who were screened for tobacco use one or more times within 24 months AND who received cessation counseling intervention if identified as a tobacco user.

Three rates are reported:

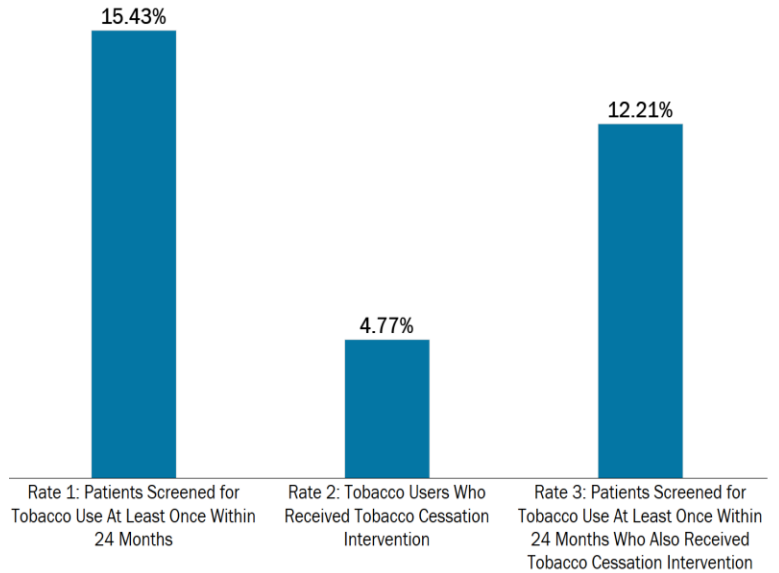
Rate 1: Patients screened for tobacco use

Rate 2: Patients identified as a tobacco user who received tobacco cessation intervention

Rate 3: Patients screened for tobacco use and received tobacco cessation intervention if identified as a tobacco user

This measure is reported separately for each of the organization's lines of business that are included in its URAC accreditation (i.e., Commercial, Medicare, and Medicaid).

Figure 4. Screening & Cessation Counseling for Tobacco Use (Commercial)



### Summary of Findings

A total of 11 organizations submitted valid data for this measure. The Commercial line of business is the only line of business with five or more valid submissions.

Commercial	Medicaid	Medicare	All Other
9	2	1	2

MEASURE	TOTAL NUMERATOR	TOTAL DENOMINATOR	AGGREGATE SUMMARY RATE	MEAN	SUBMISSIONS
Rate 1: Patients screened for tobacco use	20,981	135,938	15.43%	51.06%	9
Rate 2: Patients identified as a tobacco user who received tobacco cessation intervention	6,240	130,866	4.77%	41.54%	6
Rate 3: Patients screened for tobacco use and received tobacco cessation intervention if identified as a tobacco user	16,479	134,953	12.21%	26.77%	9

MEASURE	MIN	10 <sup>TH</sup>	25 <sup>TH</sup>	50 <sup>TH</sup>	75 <sup>TH</sup>	90 <sup>TH</sup>	MAX
Rate 1: Patients screened for tobacco use	1.02%	2.43%	8.04%	51.33%	91.42%	94.73%	100%
Rate 2: Patients identified as a tobacco user who received tobacco cessation intervention	1.79%	8.37%	18.04%	31.02%	72.26%	85.23%	85.71%
Rate 3: Patients screened for tobacco use and received tobacco cessation intervention if identified as a tobacco user	1.79%	1.96%	3.61%	8.13%	50.09%	78.12%	84.75%



## UNHEALTHY ALCOHOL USE: SCREENING & BRIEF COUNSELING (DM2012-03)

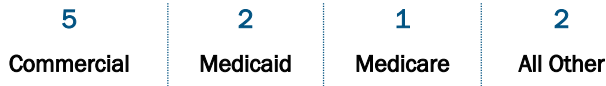
### Measure Description

This mandatory measure assesses the percentage of patients 18 years or older who were screened for unhealthy alcohol use using a systematic screening method at least once within the last 24 months and who received brief counseling if identified as an unhealthy alcohol user.

This measure is reported separately for each of the organization’s lines of business that are included in its URAC accreditation (i.e., Commercial, Medicare, and Medicaid).

### Summary of Reporting Organizations

A total of 7 organizations submitted valid data for this measure.



### Summary of Findings

The Commercial line of business is the only line of business with five or more valid submissions. The aggregate summary rate for Commercial is 1.24% (n=5, Range: 0.00 – 14.36%) with a mean rate of 3.50% and a median rate of 1.20%.

LINE OF BUSINESS	TOTAL NUMERATOR	TOTAL DENOMINATOR	AGGREGATE SUMMARY RATE	MEAN	SUBMISSIONS
Commercial	421	33,977	1.24%	3.50%	5

LINE OF BUSINESS	MIN	10TH	25TH	50TH	75TH	90TH	MAX
Commercial	0%	0.27%	0.67%	1.20%	1.29%	9.13%	14.36%



## SCREENING FOR DEPRESSION & FOLLOW-UP PLAN (DM2012-05)

### Measure Description

This mandatory measure reports the percentage of participants 12 years and older screened for depression on the date of the encounter or 14 days prior to the date of encounter using an age- appropriate standardized depression screening tool AND, if positive, a follow-up plan is documented on the date of the encounter.

This measure is reported separately for each of the organization’s lines of business that are included in its URAC accreditation (i.e., Commercial, Medicare, and Medicaid).

### Summary of Reporting Organizations

A total of 9 organizations submitted valid data for this measure.

<b>8</b>	<b>1</b>	<b>1</b>	<b>2</b>
<b>Commercial</b>	<b>Medicaid</b>	<b>Medicare</b>	<b>All Other</b>

### Summary of Findings

The Commercial line of business is the only line of business with five or more valid submissions. The aggregate summary rate for Commercial is 2.54% (n=8, Range: 0.00% - 100.00%) with a mean rate of 16.61% and a median rate of 2.84%.

LINE OF BUSINESS	TOTAL NUMERATOR	TOTAL DENOMINATOR	AGGREGATE SUMMARY RATE	MEAN	SUBMISSIONS
Commercial	2,333	92,013	2.54%	16.61%	8

LINE OF BUSINESS	MIN	10TH	25TH	50TH	75TH	90TH	MAX
Commercial	0%	0.47%	1.37%	2.84%	10.74%	41.13%	100%





## COPD OR ASTHMA IN OLDER ADULTS ADMISSION RATE (DM2012-31)

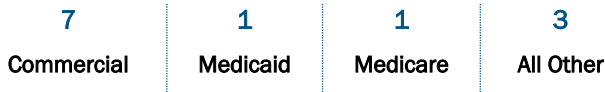
### Measure Description

This mandatory measure accesses admissions with a principal diagnosis of asthma or chronic obstructive pulmonary disease (COPD) per 100,000 population, ages 40 years and older, during the measurement year. **A lower rate represents better performance.**

This measure is reported separately for each of the organization’s lines of business that are included in its URAC accreditation (i.e., Commercial, Medicare, and Medicaid).

### Summary of Reporting Organizations

A total of 9 organizations submitted valid data for this measure.



### Summary of Findings

The Commercial line of business is the only line of business with five or more valid submissions. The aggregate summary rate for Commercial is 2,045 per 100,000 (n=7, Range: 6,471 - 0) with a mean rate of 1,760 and a median rate of 1,384.

LINE OF BUSINESS	TOTAL NUMERATOR	TOTAL DENOMINATOR	AGGREGATE SUMMARY RATE	MEAN	SUBMISSIONS
Commercial	252	12,323	2,045	1,760	7

LINE OF BUSINESS	MIN	10TH	25TH	50TH	75TH	90TH	MAX
Commercial	6,471	4,353	2,174	1,384	57	0	0



## HYPERTENSION ADMISSION RATE (DM2012-37)

### Measure Description

This mandatory measure accesses admissions with a principal diagnosis of hypertension per 100,000 population ages 18 years or older with chronic hypertension during the measurement period. **A lower rate represents better performance.**

This measure is reported separately for each of the organization’s lines of business that are included in its URAC accreditation (i.e., Commercial, Medicare, and Medicaid).

### Summary of Reporting Organizations

A total of 9 organizations submitted valid data for this measure.

<b>8</b>	<b>1</b>	<b>1</b>	<b>2</b>
Commercial	Medicaid	Medicare	All Other

### Summary of Findings

The Commercial line of business is the only line of business with five or more valid submissions. The aggregate summary rate for Commercial is 2,093 per 100,000 (n=8, Range: 11,479 - 0) with a mean rate of 3,560 and a median rate of 2,115.

LINE OF BUSINESS	TOTAL NUMERATOR	TOTAL DENOMINATOR	AGGREGATE SUMMARY RATE	MEAN	SUBMISSIONS
Commercial	666	31,827	2,093	3,560	8

LINE OF BUSINESS	MIN	10TH	25TH	50TH	75TH	90TH	MAX
Commercial	11,479	8,444	5,714	2,115	237	75	0



## HEART FAILURE ADMISSION RATE (DM2012-38)

### Measure Description

This mandatory measure assesses admissions with a principal diagnosis of heart failure per 100,000 population ages 18 years and older with diagnosed heart failure. **A lower rate represents better performance.**

This measure is reported separately for each of the organization’s lines of business that are included in its URAC accreditation (i.e., Commercial, Medicare, and Medicaid).

### Summary of Reporting Organizations

A total of 9 organizations submitted valid data for this measure.

7	1	1	3
Commercial	Medicaid	Medicare	All Other

### Summary of Findings

The Commercial line of business is the only line of business with five or more valid submissions. The aggregate summary rate for Commercial is 5,255 per 100,000 (n=7, Range: 44,648 - 0) with a mean rate of 14,473 and a median rate of 3,083.

LINE OF BUSINESS	TOTAL NUMERATOR	TOTAL DENOMINATOR	AGGREGATE SUMMARY RATE	MEAN	SUBMISSIONS
Commercial	673	12,807	5,255	14,473	7

LINE OF BUSINESS	MIN	10TH	25TH	50TH	75TH	90TH	MAX
Commercial	44,648	37,676	25,509	3,083	1,280	322	0



## DIABETES SHORT-TERM COMPLICATIONS ADMISSION RATE (DM2012-73)

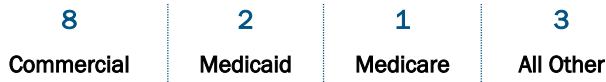
### Measure Description

This mandatory measure assesses admissions for a principal diagnosis of diabetes with short-term complications (ketoacidosis, hyperosmolarity, or coma) per 100,000 population ages 18 years and older per number of chronic diabetic adult members as of the end of the measurement period. **A lower rate represents better performance.**

This measure is reported separately for each of the organization’s lines of business that are included in its URAC accreditation (i.e., Commercial, Medicare, and Medicaid).

### Summary of Reporting Organizations

A total of 11 organizations submitted valid data for this measure.



### Summary of Findings

The Commercial line of business is the only line of business with five or more valid submissions. The aggregate summary rate for Commercial is 1,788 per 100,000 (n=8, Range: 32,479 - 0) with a mean rate of 5,869 and a median rate of 482.

LINE OF BUSINESS	TOTAL NUMERATOR	TOTAL DENOMINATOR	AGGREGATE SUMMARY RATE	MEAN	SUBMISSIONS
Commercial	276	15,438	1,788	5,869	8

LINE OF BUSINESS	MIN	10TH	25TH	50TH	75TH	90TH	MAX
Commercial	32,479	17,585	4,310	482	223	0	0



## ASTHMA IN YOUNGER ADULTS ADMISSION RATE (DM2017-01)

### Measure Description

This mandatory measure assesses admissions for a principal diagnosis of asthma per 100,000 population, ages 18 to 39 years, during the measurement year **A lower rate represents better performance.**

This measure is reported separately for each of the organization’s lines of business that are included in its URAC accreditation (i.e., Commercial, Medicare, and Medicaid).

### Summary of Reporting Organizations

A total of 10 organizations submitted valid data for this measure.

7	1	0	2
Commercial	Medicaid	Medicare	All Other

### Summary of Findings

The Commercial line of business is the only line of business with five or more valid submissions. The aggregate summary rate for Commercial is 3,229 per 100,000 (n=7, Range: 53,237 - 0) with a mean rate of 8,074 and a median rate of 76.

LINE OF BUSINESS	TOTAL NUMERATOR	TOTAL DENOMINATOR	AGGREGATE SUMMARY RATE	MEAN	SUBMISSIONS
Commercial	95	2,942	3,229	8,074	7

LINE OF BUSINESS	MIN	10TH	25TH	50TH	75TH	90TH	MAX
Commercial	53,237	22,416	1,603	76	0	0	0