James L. Holly, M.D.

SETMA's Response to the Robert Wood Johnson Foundation Part V
The Primary Care Team Learning from Effective Ambulatory Practices
By James L. Holly, MD
Your Life Your Health
The Examiner
June 28, 2012

(Editor's Note: The Second section of information requested from SETMA by the Robert Wood Johnson Foundation for the Primary Care Team Project, Learning from Effective Ambulatory Practices concerned clinical performance measures both as to process, was a standard-of-care task performed, and to outcomes, did a standard-of-care task reflect that the patient was being treated well. This installment of SETMA's response addresses cholesterol management)

This is the master template for the Lipid Disease Management Tool

The following is the master template in the Lipid Disease Management Tool built by SETMA. This is the link to the full tutorial: Lipids Tutorial

The Lipid Disease Management suite of templates allows all SETMA providers to bring to bear all of the information needed to provide excellent care for all patients. The treatment of cholesterol is important because of its contribution to cardiovascular risk. With this disease management tool, SETMA providers can calculate all twelve of the Framingham Cardiovascular and Cerebrovascular risk scores. In addition, SETMA has added five "What It" Scenarios for each of the scores. With this tool SETMA providers can show patients how a change in their habits will affect their health. This fulfills our goal of letting all patients know, "If you make a change, it will make a difference." With the data collected SETMA providers can also let patients know if they have the Cardiometabolic Risk Syndrome, insulin resistance and how important it is to improve their cholesterol levels.

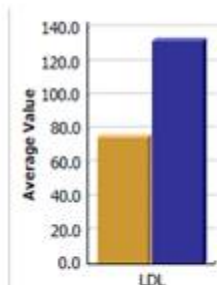With the use of the disease management tool for Lipids, the following auditing and analytics can be done electronically.
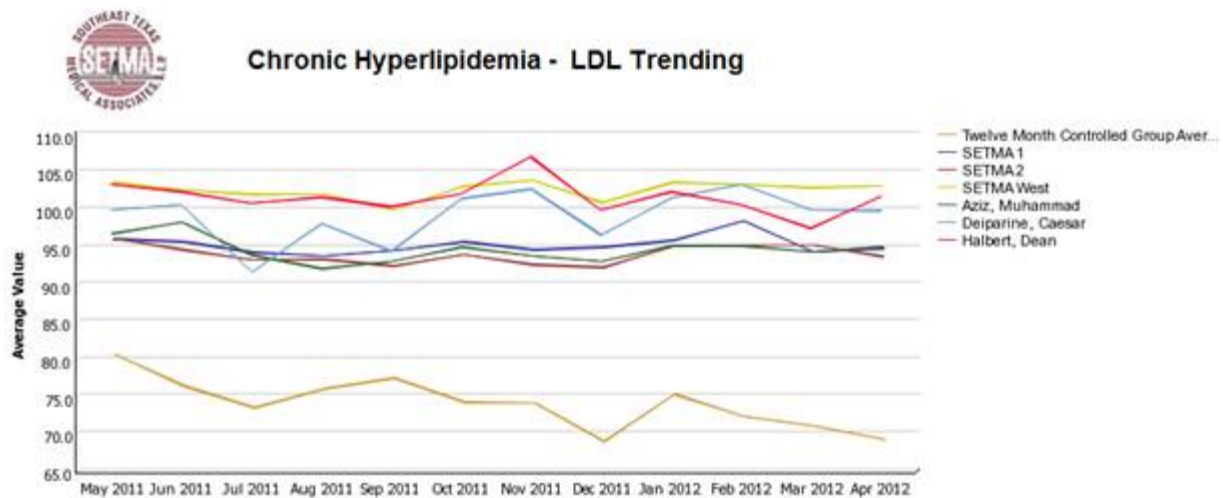
Chronic Hyperlipidemia - LDL Trending

	Average LDL	Standard Deviation
Controlled	75.8	24.2
Selected	132.9	28.5
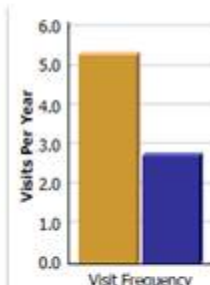
	Visit Frequency
Controlled	5.3
Selected	2.8
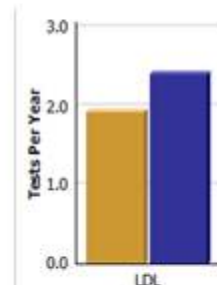
	Yearly LDL Tests
Controlled	1.9
Selected	2.4

In the above graph, the patients, we discover that patients whose cholesterol is treated to goal (those in the gold) are seen 5.3 times per year and those who are not treated to goal (those in purple) are seen only 2.8 times. This suggests that it may be possible to get more patients to goal by seeing them more often.

	LDL Controlled < 70	BP Controlled < 130/80	Smoking Cessation Provided
Controlled	87.8%	55.7%	88.1%
Selected	0.0%	46.5%	88.9%

	Lipid Medications
Controlled	1.2
Selected	0.7

	Appt Not Kept
Controlled	0.6
Selected	0.3
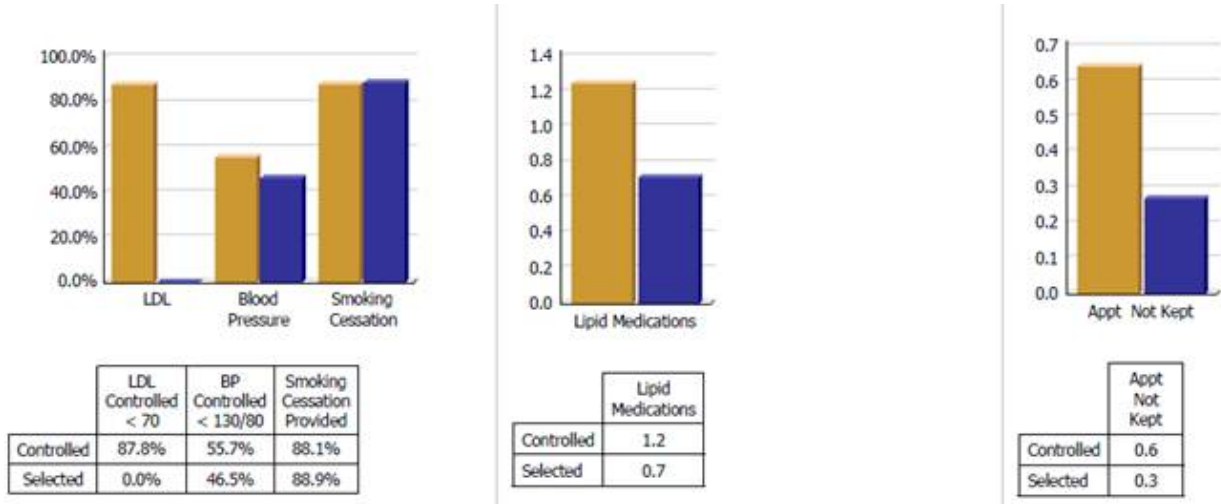
As we analyze the care of patients by "financial class," i.e., by how their care is paid for, we see once again that our Medicare Advantage patients (HMO) are better treated than our Medicare Fee For Service (FFS) patients. This suggests that a financial barrier may exist with our FFS Medicare patients who have to pay to see us. Our HMO patients do not have to pay for office visits or blood tests. The better control of those who have no cost and the poor control of those who have cost suggest that at least in this population, the cost may be a barrier to the patient getting excellent care.

	African American	Asian	Caucasian	Hispanic	Other/ None
Controlled	22.9%	0.6%	72.2%	2.5%	1.8%
Selected	28.9%	1.5%	65.6%	2.1%	2.0%

	Self Pay	Blue Cross	HMO Capitated	HMO Fee For Service	Legal	Medicaid	Medicare	PPS-Outreach	Workmans Comp
Controlled	7.5%	4.7%	59.4%	0.0%	0.0%	0.9%	26.9%	0.5%	0.0%
Selected	30.7%	21.4%	24.1%	0.1%	0.0%	2.3%	21.2%	0.1%	0.0%
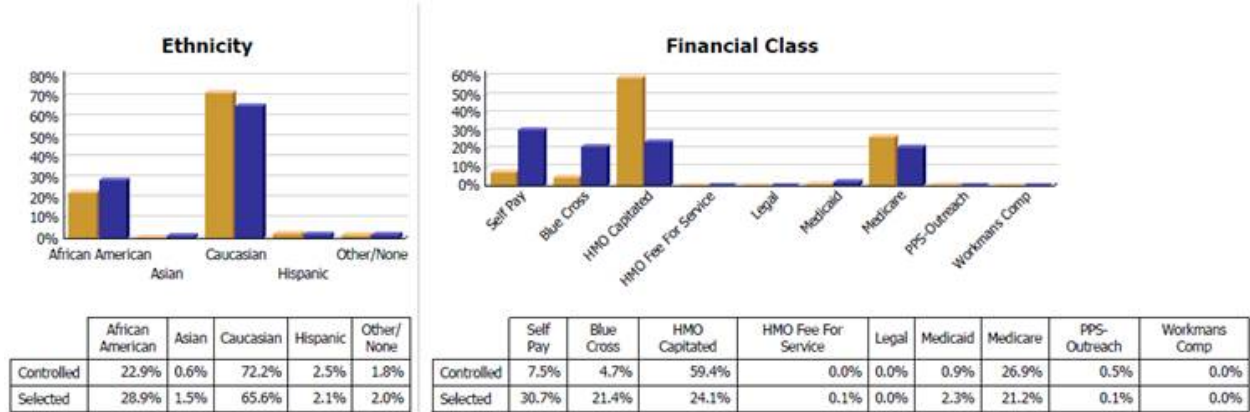
The above Ethnicity audit shows that we have not eliminated ethnic disparities in care of patients with dyslipidemia. We believe this may be cultural due to dietary choices and we are working on it.

There is no nationally endorsed quality metric set for lipids, therefore SETMA design this one and the audit bellows shows our performance.

Lipids Treatment Audit

Most Recent Values Cholesterol 165 09/21/2011 HDL 30 09/21/2011
Triglycercides 111 09/21/2011 LDL 113 09/21/2011

Has the patient had a lipid profile within the last year?	Yes	Click to Order
Has the Lipids Treatment Plan been completed within the last year?	Yes	Click to Generate
Has the patient been assessed for Cardiometabolic Risk Syndrome within the last year?	Yes	Click to Assess
If Cardiometabolic Risk Syndrome present, is it listed as a chronic condition?	No	Click to Add
If most recent LDL > 100, is the patient on a statin?	N/A	Click to Add Med

Is the patient allergic to statins? ● Yes ○ No

Have the following lifestyle changes been recommended if applicable? Yes Click to Add
Stop Smoking, Exercise, Lose Weight, Low Cholesterol Diet, Low Carbohydrate Diet

Has risk stratification for Lipids and Heart Disease been completed within the last year by using the Framingham Cardiovascular Risk Score AND one of the following? Yes Click to Update
Global Cardiovascular Risk Score, Frederickson Classification of Dyslipidemia,
Lipid Disease Management Risk Assessment

Double-click to add MNT referral

Has the patient been referred to Medical Nutrition Therapy at least once? Yes

Referral	Status
SETMA	Completed
Infectious	

Does the patient have Diabetes? Yes

If most recent LDL > 70, is the patient on a statin? N/A

Click to Add Med

Is the patient's HgbA1c below 7.0%? No

Most Recent Result 12.2 10/29/2011

Click to Order

Does the patient have Hypertension? Yes

Is the patient's blood pressure below 140/90? No

Today's Blood Pressures

140	/ 95	mmHg
	/	mmHg
	/	mmHg

The following is the audit of the Lipid Quality Metric set which allows us to see leverage points for improvement.

Lipid Audit

E & M Codes: Clinic Only
Encounter Date(s): 01/01/2011 through 12/31/2011

Location	Provider	Frequency of Lipid Profile	Lipids Treatment Plan	Metabolic Syndrome Assessment	Statin Therapy	Lifestyle Changes	Risk Stratification	Medical Nutrition Therapy	Statin Therapy	Hemoglobin A1c	Blood Pressure Control
SETMA 1	Aziz	96.0%	88.3%	51.2%	67.2%	99.9%	22.5%	2.1%	79.9%	57.3%	76.7%
	Duncan	86.9%	96.5%	88.0%	60.9%	99.4%	49.7%	4.0%	77.5%	68.2%	85.9%
	Halbert	100.0%	100.0%	100.0%	--	100.0%	0.0%	0.0%	--	100.0%	--
	Henderson	90.8%	94.5%	84.1%	57.8%	99.9%	40.6%	5.6%	77.5%	66.8%	85.9%
	Murphy	95.3%	95.3%	87.4%	69.0%	99.8%	33.0%	6.7%	81.9%	71.1%	79.5%
	Palang	66.8%	74.2%	87.4%	62.3%	99.3%	12.8%	1.2%	74.9%	43.1%	81.1%
	Thomas	83.6%	94.7%	84.1%	67.1%	99.5%	38.5%	3.8%	79.6%	43.4%	74.8%
	SETMA 1 Totals :	89.0%	91.0%	79.0%	63.8%	99.7%	32.6%	4.2%	79.2%	62.8%	81.1%
SETMA 2	Abbas	100.0%	100.0%	100.0%	--	100.0%	0.0%	0.0%	100.0%	100.0%	100.0%
	Anthony	90.5%	95.8%	82.1%	62.0%	100.0%	66.1%	5.8%	79.0%	65.8%	80.2%
	Anwar	95.0%	92.1%	88.6%	65.0%	100.0%	82.2%	3.7%	72.7%	65.2%	88.2%
	Cricchio, A	91.1%	74.9%	51.7%	75.0%	99.9%	1.3%	5.7%	81.8%	29.5%	82.7%
	Cricchio, M	91.7%	96.7%	88.8%	63.1%	100.0%	64.0%	7.0%	81.5%	64.7%	74.8%
	Holly	97.2%	99.0%	96.0%	74.3%	100.0%	95.2%	21.1%	89.0%	72.5%	96.0%
	Leifeste	92.7%	95.4%	90.2%	63.8%	99.7%	85.5%	8.6%	83.7%	72.1%	84.3%
	Murphy	100.0%	100.0%	100.0%	--	100.0%	100.0%	0.0%	--	--	100.0%
	Wheeler	90.8%	96.4%	89.8%	56.1%	99.8%	66.5%	6.6%	71.3%	73.2%	70.5%
	SETMA 2 Totals :	92.6%	93.8%	86.0%	63.2%	99.9%	70.4%	6.7%	78.4%	62.6%	81.9%
SETMA West	Curry	91.0%	86.6%	92.2%	51.1%	99.8%	17.7%	20.1%	68.9%	62.0%	74.9%
	Delparine	84.1%	91.5%	42.1%	55.3%	98.8%	56.3%	2.6%	73.8%	57.9%	65.8%
	Halbert	82.5%	93.2%	74.7%	48.3%	98.6%	62.2%	2.9%	69.5%	63.7%	72.3%
	Horn	85.3%	97.3%	49.4%	54.9%	100.0%	53.1%	5.6%	74.5%	67.9%	96.7%
	Qureshi	80.2%	97.8%	76.7%	53.3%	99.6%	59.0%	6.6%	78.3%	53.5%	87.6%
	Satterwhite	81.1%	91.8%	86.7%	55.9%	98.1%	25.4%	10.5%	74.3%	49.6%	68.5%
	Vardiman	81.0%	94.7%	68.8%	52.2%	99.7%	45.5%	6.6%	72.0%	63.2%	72.1%
	SETMA West Totals :	83.6%	93.5%	65.6%	52.5%	99.2%	50.8%	6.2%	72.5%	61.3%	76.9%

SETMA anticipates that a national standard of care for cholesterol auditing will be established and when it is, we will adopt it. At present, we have sent our audit to a number of quality metric development organizations and suggested that this be a starting point for developing of an auditing. All of the data in black in the above audit is to goal and all of that in "red" needs improvement.

There are national accepted standards for lipids such as that which is listed below in the National Committee for Quality Assurance (NCQA) includes cholesterol control in its standards for recognition of health care providers and organizations that perform excellently in the care of patients with diabetes. The LDL (Low Density Lipoprotein) is the "bad cholesterol. The below audit shows how SETMA providers perform on the control of LDL. All of SETMA providers and all SETMA clinics are recognized by NCQA for quality care in diabetes.

NCQA Diabetes Measures
Encounter Date(s): January 1, 2012 to May 31, 2012

Provider	Encounters	A1c >9.0 <= 15%	A1c < 8.0 >= 65%	A1c < 7.0 >= 40%	BP > 140/90 <= 35%	BP < 130/80 >= 25%	Eye Exam >= 60%	Smoking Cessation >= 85%	LDL >= 130 <= 35 %	LDL < 100 >= 50%	Nephropathy >= 85%	Foot Exam >= 80%	Total Points
Ahmed	1,345	17.7%	58.1%	34.9%	7.1%	57.2%	62.7%	75.5%	12.9%	64.0%	76.1%	98.1%	60
Anthony	542	11.1%	77.5%	57.9%	20.1%	53.0%	76.2%	81.4%	11.6%	68.3%	95.6%	92.4%	90
Anwar	583	6.7%	77.4%	57.6%	6.5%	69.0%	68.6%	93.5%	12.0%	63.6%	90.7%	70.5%	95
Aziz	441	10.4%	75.7%	59.6%	19.7%	57.4%	53.1%	93.7%	14.3%	67.3%	90.2%	64.6%	85
Cash	281	14.2%	65.5%	33.5%	5.0%	75.1%	70.1%	72.2%	9.6%	72.2%	76.5%	100.0%	80
Curry	141	8.5%	66.0%	54.6%	20.6%	56.7%	62.4%	100.0%	14.9%	60.3%	76.6%	70.2%	90
Darden	137	11.7%	70.1%	55.5%	13.9%	61.3%	51.8%	96.0%	11.7%	62.0%	67.9%	78.1%	80
Deiparine	439	13.4%	65.6%	49.4%	12.5%	58.5%	36.9%	88.9%	15.3%	57.2%	71.1%	65.6%	80
Duncan	376	8.2%	80.9%	63.0%	6.9%	74.5%	56.1%	94.7%	13.3%	67.6%	85.4%	73.4%	85
Halbert	585	6.7%	78.5%	60.9%	21.9%	53.2%	31.6%	86.4%	18.1%	61.5%	63.4%	60.9%	80
Henderson	376	9.0%	79.8%	63.8%	10.1%	67.0%	50.8%	97.1%	14.6%	64.9%	86.4%	83.2%	90
Holly	123	6.5%	82.9%	65.9%	8.1%	80.5%	83.7%	77.8%	12.2%	68.3%	95.1%	95.9%	90
Horn	365	7.9%	77.0%	61.4%	5.2%	58.6%	44.7%	98.5%	21.9%	53.4%	84.1%	87.4%	85
Leifeste	419	4.3%	84.2%	65.2%	14.8%	60.9%	76.1%	65.0%	9.1%	74.7%	91.6%	85.4%	90
Murphy	633	5.5%	85.6%	66.2%	19.7%	53.1%	46.3%	86.8%	10.4%	73.8%	88.5%	78.8%	85
Palang	498	8.4%	60.2%	46.8%	14.5%	63.7%	23.7%	91.3%	13.7%	54.8%	44.4%	27.5%	72
Qureshi	311	14.5%	66.9%	52.1%	13.2%	67.5%	40.8%	94.0%	15.1%	55.0%	69.5%	82.0%	85
Read	84	11.9%	69.0%	51.2%	22.6%	51.2%	53.6%	87.5%	16.7%	56.0%	90.5%	82.1%	90
Shepherd	109	6.4%	65.1%	46.8%	16.5%	61.5%	35.8%	77.8%	9.2%	40.4%	56.0%	84.4%	65
Thomas	283	13.4%	55.8%	35.3%	11.7%	58.3%	30.4%	97.0%	9.2%	39.2%	54.4%	46.6%	57
Vardiman	111	7.2%	75.7%	57.7%	28.8%	45.0%	47.7%	92.3%	20.7%	56.8%	62.2%	82.0%	85
Wheeler	289	6.2%	85.1%	71.6%	19.7%	55.7%	65.1%	77.5%	15.2%	60.6%	92.7%	82.4%	90