Current Status and Vision for SETMA Diabetes

Dr Jaweed Akhter

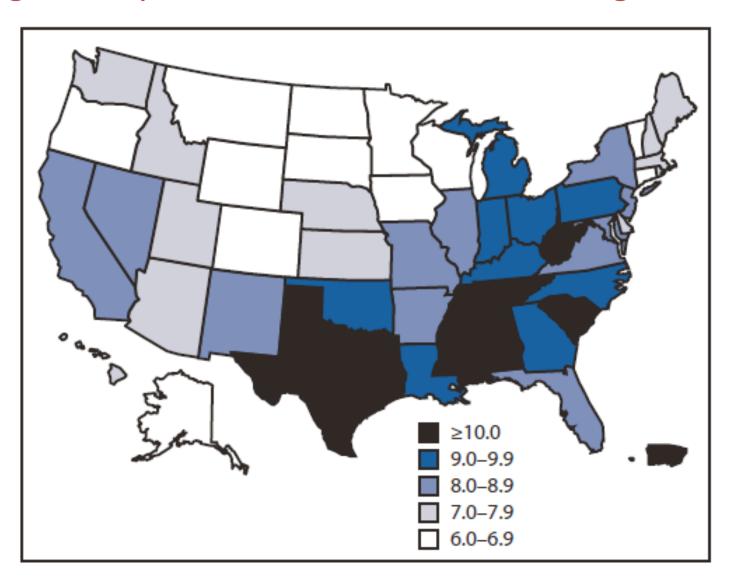




SETMA Diabetes Current Status and Future Vision

- Overview of Diabetes Mellitus in Texas
 - Prevalence, projection and costs
- Current Status SETMA Diabetes
 - Accreditations
 - Management Tools
 - Automating care of Diabetes
 - Documentation of evaluation of standard care
- Clinical Care : Excellence, Opportunities
- Academic Meetings, Provider Updates
- Public Education, Community programs
- Teaching, Training & Research
- Institutional Collaborations
- Summary

Prevalence of diagnosed diabetes among adults aged ≥18 years in the United States during 2010.



Texas Diabetes Control and Prevention Program Diabetes Status in Texas 2012

Prevalence of Diabetes by Race/Ethnicity and Age Group,

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      Age Group
      Caucasian(%)
      African American (%)
      Hispanic (%)
      All Races (%)

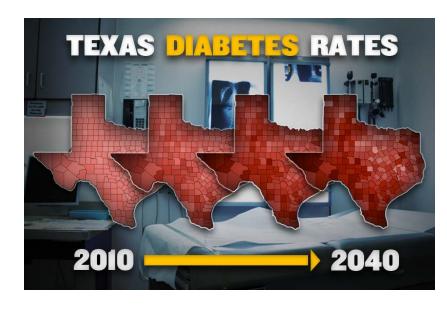
      18 - 44
      2.2 (1.2-3.2)
      8.0 (3.7-12.3)
      4.2 (2.8-5.7)
      3.5 (2.7 -4.3)

      45 - 64
      10.1 (8.7-11.5)
      20.8 (15.9-25.7)
      21.5 (18.2-24.7)
      14.0 (12.7-15.3)

      65+
      19.2 (17.4-21.0)
      38.0 (29.5-46.4)
      32.2 (27.0-37.5)
      23.0 (21.2-24.8)
```

Texas' Diabetic Population Will Quadruple by 2040

Year	Number	Percent
2005/7	1,732,447	9.9%
2010	2,221,727	11.9%
2020	3,903,995	17.1%
2030	5,783,481	20.8%
2040	7,980,225	23.8%





Diabetes in Texas was responsible for an estimated \$18.5 billion in costs during CY2011: \$12.3 billion in direct medical costs and \$6.2 billion in indirect costs





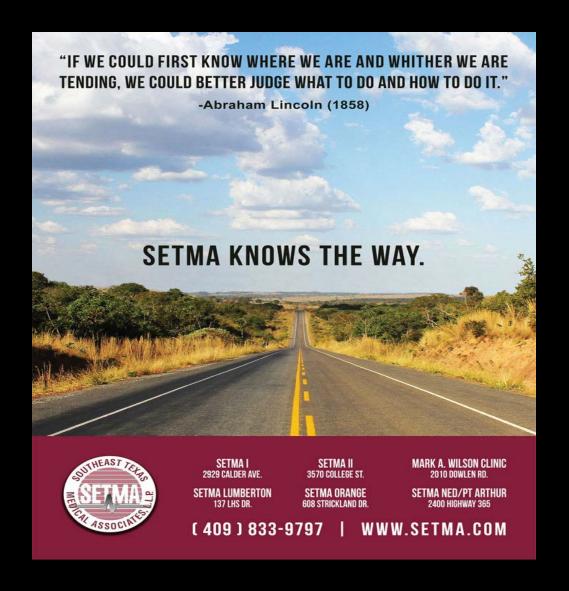
Current Status at SETMA Joslin Diabetes Center

- SETMA's Diabetes Self-Management Education Program and MNT is nationally recognized by the American Diabetes Association
- NCQA Diabetes Recognition : 11 quality measures
- NQF Accreditation has 6 Diabetes specific quality metrics in addition to smoking cessation, weight management
- Healthcare Effectiveness Data and Information Set (HEDIS):
 Diabetes management is an important component
- Individual Provider Reporting since 2009-
- Joint Commission Accreditation highlights overall standard/ quality of the healthcare organization



SETMA Joslin Diabetes Center

- Center offers comprehensive care of complex diabetes cases and preventive management for patients with pre diabetes
- Collaboration with ophthalmology, podiatry, cardiology, vascular surgery and will increasing links mental health, renal, bariatric surgery
- Factors for Success: Established brand (SETMA, Joslin), strong primary care referral base, accessible to local target population, meets key performance indicators based on national standards



Where SETMA is at Present others Aspire to be in the Future



Provider	Encounters	A1c >9.0 <= 15%	A1c < 8.0 >= 65%	A1c < 7.0 >= 40%	BP > 140/90 <= 35%	BP < 130/80 >= 25%	>= 60%	Smoking Cessation >= 85%	LDL >= 130 <= 35 %	LDL < 100 >= 50%	Nephropathy >= 85%	Foot Exam >= 80%	Total Points
Akhter	169	45.0%	37.9%	21.3%	7.7%	53.8%	52.1%	75.0%	14.2%	66.3%	78.1%	97.0%	50
Anthony	213	14.1%	74.6%	50.2%	16.4%	40.4%	46.5%	40.0%	9.9%	70.4%	93.0%	99.1%	80
Anwar	269	11.9%	80.3%	55.4%	4.8%	66.9%	57.2%	72.2%	11.2%	66.9%	92.2%	61.7%	75
Arcala, A	30	10.0%	46.7%	23.3%	23.3%	33.3%	3.3%	71.4%	3.3%	43.3%	73.3%	96.7%	52
Arcala, F	84	38.1%	39.3%	27.4%	14.3%	60.7%	8.3%	60.0%	11.9%	54.8%	85.7%	97.6%	55
Aziz	177	23.2%	65.0%	45.2%	36.7%	28.8%	49.7%	83.9%	16.4%	67.2%	91.5%	78.5%	40
Cash	524	25.0%	55.7%	28.2%	5.7%	51.5%	60.7%	51.5%	14.3%	64.7%	83.0%	100.0%	60
Castro	178	15.2%	70.2%	48.3%	34.8%	32.0%	46.1%	74.4%	8.4%	64.0%	93.3%	98.9%	68
Cox	206	14.1%	66.5%	43.7%	10.7%	38.3%	22.8%	68.6%	11.2%	59.7%	69.4%	91.7%	75
Cricchio, M	177	16.4%	68.4%	49.2%	13.6%	49.2%	35.0%	53.3%	11.3%	62.1%	82.5%	89.8%	63
Dao	145	8.3%	77.2%	53.1%	13.8%	53.1%	47.6%	62.1%	11.7%	72.4%	87.6%	93.1%	80
Darden	118	11.9%	76.3%	53.4%	30.5%	34.7%	39.8%	53.3%	12.7%	57.6%	82.2%	80.5%	75
Deiparine, C	155	17.4%	67.7%	42.6%	29.7%	42.6%	41.9%	27.3%	11.0%	74.8%	64.5%	60.6%	58
Duncan	195	16.4%	73.3%	55.4%	15.9%	66.2%	32.8%	46.2%	12.8%	68.7%	81.0%	79.5%	58
Foster	143	25.9%	65.7%	41.3%	16.1%	56.6%	42.0%	54.3%	17.5%	63.6%	88.1%	100.0%	68
George	85	10.6%	80.0%	63.5%	20.0%	35.3%	22.4%	52.6%	15.3%	58.8%	52.9%	92.9%	75
Green	148	13.5%	66.2%	44.6%	25.0%	35.1%	18.9%	53.3%	13.5%	59.5%	71.6%	93.9%	75
Halbert	245	13.5%	79.2%	58.8%	18.0%	40.8%	37.6%	25.5%	15.9%	58.8%	75.1%	62.0%	70
Henderson	185	12.4%	71.9%	49.7%	29.7%	37.3%	43.2%	81.6%	16.2%	62.7%	88.1%	88.6%	80
Holly	50	6.0%	78.0%	54.0%	8.0%	66.0%	74.0%	71.4%	18.0%	72.0%	90.0%	94.0%	90
Horn	143	7.7%	76.9%	60.8%	8.4%	35.0%	39.2%	50.0%	12.6%	61.5%	86.0%	83.9%	80
Kansara	53	7.5%	79.2%	56.6%	5.7%	83.0%	45.3%	0.0%	17.0%	64.2%	83.0%	88.7%	75
Khan	132	10.6%	72.7%	57.6%	24.2%	30.3%	34.1%	60.0%	12.9%	63.6%	71.2%	83.3%	75
Le	125	11.2%	81.6%	59.2%	20.0%	59.2%	33.6%	60.0%	14.4%	67.2%	81.6%	96.0%	75
Murphy	269	12.3%	74.3%	59.1%	23.8%	46.1%	34.6%	6.2%	5.9%	79.9%	91.4%	95.9%	80
Palang	273	10.3%	76.9%	52.7%	18.3%	50.2%	42.5%	82.1%	9.9%	67.0%	66.3%	88.6%	75
Qureshi	138	21.0%	65.9%	47.8%	31.2%	31.9%	42.0%	70.8%	8.0%	63.0%	85.5%	89.9%	68
Read	157	8.3%	79.0%	50.3%	16.6%	48.4%	49.7%	34.8%	17.8%	60.5%	82.2%	83.4%	75

Dilated Eye Exam

		PC	PI Diabetes	Manag	ement			
Has the patier Date of L	ast 07/30/2		Yes	Order Hgl	A1c			
Has the patier Date of L	nt had a Lipid P ast 07/30/2		Yes	Order Lipid	Profile			
•	nt had a urinaly		ie last year?		Yes _	Order Urin	alysis	
Has the patier Date of L		eye exam v	vithin the last year?		No	Add Referral	Below	
Has the patier	nt had a flu sho	t within the	last year?		Yes	Order Flu	Shot	-
Date of L	ast 09/01/2	014						
Is the	patient allergic	to flu vaccir	ne? • Yes • No					
Has the patier	nt had a 10-gra	m monofilan	nent exam within the la	st year?	Yes	Click to Cor	mplete	
Date of L	ast 04/16/20	015						
Is the patient (on Aspirin? tient allergic to	aspirin?	⊙ Yes ⊙ N	0	No	Add Medication	on Below	
Is the patient's	s blood pressu	re controlled	I (<130/80 mmHg)?		Yes			
Today's i	Blood Pressure							
Does the patie	ent have at leas	st one visit s	chedule for the next s	ix months?	Fo	ollow-Up Visit		
Has the Diabe	tes Treatment	Plan been c	ompleted with the last	year?	Yes	Click to Cor	mplete	
Date Las	t Completed	05/20/2014						
Referrals					Active Medicat	tions Doub	le-Click to A	dd/Ed
Status	Ordered	Priority	Order	_	Brand Name		Dose	_
ordered	04/02/2015	Routine	AV Fistula		ASPIR 81		81 mg	
ordered	02/03/2015		Referrals: Holly, Jan	nes. Location	AZITHROMYCIN	N .	1 gram	
completed	11/12/2014		X-ray exam of Finger:	Left 2	CELEBREX		50 mg	
1	1)	HYDROCODON	E-ACETAMINO	10 mq-300) n 🔨 •

Flu Vaccination

PCPI Diabetes Management									
Has the patient h			Yes	Order Hgb	A1c				
Has the patient h			Yes	Order Lipid	Profile				
Has the patient h		_	ast year?		Yes	Order Urina	alysis		
Has the patient h	nad a dilated	eye exam witi	nin the last year?		No A	Add Referral	Below		
Has the patient h Date of Las Is the pat	t 09/01/20	14	st year? • • Yes ○ No		Yes	Order Flu	Shot		
Has the patient h	nad a 10-grai	m monofilamer	t exam within the last ye	ear?	Yes	Click to Con	nplete		
Date of Las	t 04/16/20	15							
Is the patient on	Aspirin? nt allergic to a	aspirin?	⊙ Yes ◯ No		No A	dd Medicatio	n Below		
Is the patient's b	lood pressur	e controlled (<	:130/80 mmHg)?		Yes				
Today's Bio	od Pressure								
Does the patient	have at leas	t one visit sch	edule for the next six mo	onths?	Folio	ow-Up Visit			
Has the Diabetes	s Treatment F	Plan been com	pleted with the last year	?	Yes	Click to Con	nplete		
Date Last C	ompleted	05/20/2014							
Referrals					Active Medicatio	ns Doubl	e-Click to Add/Edi		
Status	Ordered	Priority	Order	_	Brand Name		Dose 🔺		
ordered	04/02/2015	Routine	AV Fistula		ASPIR 81		81 mg		
ordered	02/03/2015		Referrals: Holly, James. L Consult	ocatio	AZITHROMYCIN		1 gram		
completed	11/12/2014		2 _1	CELEBREX		50 mg			
1			X-ray exam of Finger: Left	Þ	HYDROCODONE-	ACETAMINO	10 mq-300 n		

Monofilament Exam

		PC	PI Diabetes Mana	ag	ement	
Has the patie			rithin the last year?		Yes Or	der HgbA1c
Has the patie	nt had a Lipid P Last 07/30/20			Yes Ord	er Lipid Profile	
Has the patie	nt had a urinaly Last 07/30/20		ne last year?		Yes Ord	der Urinalysis
Has the patie		eye exam v	vithin the last year?		No Add F	Referral Below
Has the patie	nt had a flu sho Last 09/01/20	_	last year?		Yes Or	der Flu Shot
Has the patie			nent exam within the last year?		Yes Clic	k to Complete
le the no	tient allergic to	aenirin?	⊙ Yes ◯ No			dissiles Aslan
		•	i (<130/80 mmHg)?		Yes	
	Blood Pressure					
Does the pati	ient have at leas	st one visit s	schedule for the next six months?		Follow-U	p Visit
	_	Plan been c 05/20/2014	ompleted with the last year?		Yes Clic	k to Complete
Referrals					Active Medications	Double-Click to Add/Ed
Status	Ordered	Priority	Order	1	Brand Name	Dose 🔺
ordered	04/02/2015	Routine	AV Fistula		ASPIR 81	81 mg
ordered	02/03/2015		Referrals: Holly, James. Location		AZITHROMYCIN	1 gram
completed	11/12/2014		X-ray exam of Finger: Left 2		CELEBREX	50 mg
4		-	May exam of Finger. Cert 2	긔	HYDROCODONE-ACE	TAMINC 10 mg-300 n



Patient

Robert	Test Jr
Home Phone	(409)888-8888
Work Phone	() -
Cell Phone	() -

Sex M	Age 42	Patient's Code Status
Date of Birth	03/25/1970	DNR

Patient has one or more alerts!

Referring Provider

Delparine

Delparine

Delparine

Duncan

Links

Amwair

Click Here to View Alerts

STARS Program	n Measures P	re-Vist/Preventive Screening	Bridges to Excellence <u>View</u>		
Preventive Care SETMA's LESS Initiative I Last Updated 11/16/2012 Preventing Diabetes I Last Updated 03/02/2011 Preventing Hypertension I Smoking Cessation I Care Coordination Referral PC-MH Coordination Review Needs Attention!! HEDIS NOE PORS ACO Elderly Medication Summary Exercise I CHF Exercise I Diabetic Exercise I	Template Suites Master GP I Pediatrics Nursing Home I Ophthalmology Physical Therapy Podiatry Rheumatology Hospital Care Hospital Care Summar Daily Progress Note Admission Orders I	Disease Management Districts Hypertension I Lipids I Acute Coronary Syn I Angina I Asthma Cardiometabolic Risk Syn I CHF I Districts Education Headaches Renal Failure Weight Management I	Last Updated 02/28/2012 06/07/2011 11/16/2012 / / / / / / / / / / / / / / / / / / /	Special Functions Lab Present Lab Future I Lab Resuts I Hydration I Nutrition I Guidelines I Pain Management I Immunizations Reportable Conditions Information Charge Posting Tutorial Drug Interactions I E&M Coding Recommendations Insulin Infusion	

Abdominal U/S

Patient's Pharmacy

> Rx Sheet - New Rx Sheet - Complete

> > Marines Marin Mile.

Status Priority Referral

Completed Routine Sotolongo, Rodolfo

Completed Routine Mammogram

Completed Routine Colonoscopy

Completed Routine Colonoscopy

Stat

Describer

Pending Referrals I

Completed

	•	
Þ	٢	

Chart Note

Return Info

Return Doc

Email

Telephone

Records Request

Transfer of Care Doc



Disease Management Tools

- Diabetes Disease Management
 - Comprehensive Diabetes Template
 - Includes specific Diabetes Sys review
 - Includes all standard of care measures
 - Vaccination guidelines
 - Cardiovascular risks
 - HTN, Lipid templates
 - Renal failure template
 - Patient information tools (16) including goals, foot care, meals, insulin, complications
 - individualized Diabetes plan document

Dia	hetes	Manage	emen	4	11 Fries	betes Si	ince Patient	Robert	Tes	it Jr	
		GDM Pr			onth 5		and the second second	Age 4	12 Sex	M	Navigation
Total Control of the				etes Concepts		Pitching	Nandanian and T	0000	Historia	8 805	C Diabetes C General
Diagnostic (Screening Cr	CONTRACTOR OF STREET	ividenced-Base			Current	t Frequenc Daily	y of SMBG		Home
Adherence		11	Al Control to the				100 20-		e services	C. COST	Diab Sys Review
Dental Care Dilated Eye		06/16/2008					Most Recent	appropriate			Diabetic History
Flu Shot		11/04/2011	Metaboli	ic Syndrome		. i	HoA1E	8.0	02/22/2	Control Control	Eye Exam
Foot Exam		02/07/2011	Framing	ham Risk Scores			Previous	U.E	1//	2012	Nasopharynx
Monofilame		02/07/2011	10-Ye	ar General Risk	7.9	%	eAG	182			Cardio Exam
HgbA1C		02/22/2012	10-Ye	ar Stroke Risk	2	%	Mean Plasma C	Sucose	207.5	Insulin	
Pneumovax	-	03/02/2011	Global	Cardio Score	4,4	pts	C-Peptide		11		Foot Exam
Urinalysis	T	//	Weight	Management Lipi	ids Mana	acemer		1/2	11		Neurological Exam
Aspirin Statin	C	Yes No			munizatio		Cholesterol	212	11/15/2	and the latest and th	Complications/Education
Vital Signs		100		E. State			LDL	63	11/15/2	A CONTRACTOR OF THE PARTY OF TH	Initiating Insulin
Height	72.00	Waist	40.00	Finger Stick Glucose			HDL Triphyparides	118	11/15/2	Marie Company	
Weight	210.00	Hips	42.00	Pulse			Triglycerides Trig/HDL Ratio	-	- 1 10 1 40 4	2102	Insulin Pump
BMI	28.48	Chest	42.00	Blood Pressu	ure		Glucose	1,561	11		Lifestyle Changes
Body Fat %	production and the	Abdomen		130	/ 85		Fasting		11		Diabetes Plan
Protein Req	A STATE OF THE PARTY OF THE PAR	Ratio	0.95	BP Ir	n Diabetic	cs	Insuln	3	11		Education Booklet Given On
BMR	2945	BER	3150	Vitals	s Over Ti	ime	HOMA-IR				/ /
							Na		11		Probate Education
Current SQ	Insulin D	lose as of	1	Blood Sugar	rs		K		11	-	Diabetes Education
THE RESERVE OF THE PARTY OF THE		ype Units		The second secon	33		Magnesium		111	-	Telephone Record
	0.00	0.00					BUN Creatinine		11	-	Last DE //
	0.00	0.00			Diar	ini l	- U Microalbumin		111		(20000000 I
	0.00	0.00			Unit	13	Albumin/Creat		11		
	0.00	0.00							- 1	Time	
							Urinalysi	5	Labs Over	1 lime	



Disease Management Tools

Preventing Diabetes

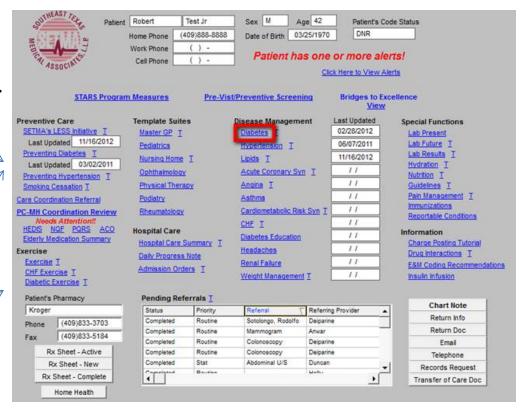
- Screening guidelines & mgmt, prediction based on age, FBG,TG.
- Extensive pt information comorbidity,
 types of surgery
 Complications:micronutrient def

LESS Initiative

Wt loss guidelines, drugs.
 Documents

Diabetic Exercise

 Retinopathy, neuropathy, CVD, nephropathy: contraindications, type of exercise





Automating the care of patients with diabetes

- Has the patient had a hemoglobin A1c within the past 3 months?
- Has the patient has a urinalysis in the past year?
- Has the patient had a dilated eye examination in the past year?
- Has the patient had an examination of the feet in the past year including a test of feeling in the feet?
- Has the patient had a test for protein in the urine in the past year?
- Has the patient had a flu immunization in the past year?
- Has the patient had a cholesterol test in the past year?
- Is the patient on a statin drug?
- Is the patient on aspirin?
- If the patient has protein in the urine, is the patient on an ACE Inhibitor or an ARB?

Clinical care: Goals and Strengths

- Challenge is to deliver individualized, quality care, which is cost effective, has impact on our patients lives and has local relevance while overall increasing volume
- Are we positioned to do so?
- Highly Accredited Center
- Excellent Diabetes Educator Staff
- Excellent EHM tools
- Full range of specialized services available: Pumps, CGMS, Inhaled insulin etc
- Strong Primary Care Support
- Linkages with related services
- High Quality Lab support
- Ability to impart training

Clinical Opportunities Diabetes

- Catchment area: approx 400,000
- Est DM population 40,000
- If 5% additional DM new patients to SETMA 2,000 pts
- Est. additional visits per year for DM
- Increase in related specialties visits
- Generation of significant addition relevant investigations, ancillary services and consultations

Referrals

Routine	○ Stat	Insurance	Medicaid Primary	
Diabetes mellitus	250.00	Telephone	(800)925-9126	Return
		Policy #	123456789	Place Order(s)
	Renderir	ng Provider Ja	mes Holly	
Diagnostics				
Provider	Location	n J		□ MRA
Special Procedures		Ultrasound Abdomi Arterial Breast U Carotid Gallblad Pelvic w Renal U Renal A	all Bowel Series vometry g Scan I/Sonogram inal Ultrasound Doppler Lower Extremity Ultrasound I Doppler dder Ultrasound vith Probe Ultrasound artery Ultrasound Extremity Ultrasound Opppler, Lower Extremity und (Other)	MRI CT Cardiac Procedures Adensoine Cardiolite Ambulatroy BP Monitoring CPET Dobutamine Echo Echocardiogram Event Monitor Holtor Monitor IMT Vascular Study Stress Echo Stress Test
_ :	eep Studies Gl			Stress Thalium Tilt Table
Referrals				
Therapy Physical Therapy	Common Referrals Cardiology		SETMA Referra	Endocrinology
Speech Therapy	Dermatology		Cardiology	
Cccupational Therapy	ENT		CHF	Neurology
✓ Medical Nutrition Therapy	General Surgery Gastroenterology		✓ Diabetes E	Ophthalmology ducation Rheumatology
Diabetes	Nephrology		L = - 1:	nitoring
	Neurosurgery		Infusion Th	nerapy
Medical Home Click here for	□ OB/GYN			
Care Coordination	Oncology		Refer To	
Referral Template	Orthopedics		Specialty:	
	Pain Management			
	Plastic Surgery			
	Podiatry			

Care Coordination

Care Coordination	on Referral
	k Phone () -
Please provide care coordination for this patient Alcohol Rehabilitation Assisted Living Disability Application Assistance Drug Rehabilitation Employment Counseling Gift of Life - Mammogram Gift of Life - Prostate Screening Handicap Access, Bath Handicap Access, Home In-Home Provider Services In-Home Safety Evaluation Insurance, Assistance Obtaining Lives Alone Long Term Residence Placement Nutritional Support Protective Services, Adult Protective Services, Child Tobacco Cessation	the areas selected below. SETMA Foundation Dental Care DSME Living Expenses Medication Procedures Transportation Other Provider Comments

Clinical areas of focus/development

- Diabetes Mellitus specialized clinics
 - Type 1, Gestational, Pump,
- Diabetes Prevention and Metabolic Syndrome
- Weight Management /Obesity
- Metabolic Bone Disease

Academic Growth

- Clinical Case Meetings
- Practice Guidelines/ Updates; Affiliates Conference call
- Journal Club
- Core Lectures
- Administrative Meetings; SETMA, Joslin
- Involve local diabetologists and endocrinologists

Provider Update activities

- Annual CME Activity
 - Physicians, nurse practitioners, CDE, nurses, trainees etc
 - Highlight practice updates and emerging trends
 - Highlight role of technology in diabetes management and patient safety
 - Attempt to get CME accreditation for activity

Public Education

- Impart Diabetes Education needed to PPP: public, press, politicians/legislators.
- World Diabetes Day Nov 14
- Smaller, quarterly, public education programs
- Get involved in local media on DM and related topics
- Clinic newsletter

Community Programs

- Diabetes Prevention
- Diabetes Screening
- Diabetes Education
- Development of Public Educational Material
- Training of CDE's
- Mental health program
- Insulin Bank

Teaching

- Electives: Local and International medical students
- IMG for clinical and research experience
- Rotating residents from FP, IM programs
- Students of nutrition studies, pharmacy, CDE trainees
- ? Lamar University Collaboration

Research opportunities

- Seek and initiate industry sponsored clinical trials
- Evaluate our own data
- Grants: Capacity building, education, diabetes prevention, adherence promotion
- Collaboration with academic units

Collaborations

- Joslin Clinic affiliate and collaboration status
- Extend formal/informal linkages with state and national diabetes departments
- Networking with ADA, AADA, AACE
- State groups working on Diabetes Prevention
- Establish/enhance international linkages







Summary

- DM is a rapidly growing problem worldwide and in Texas with significant and increasing costs to individuals, families and society
- We have the capacity, management tools to assist the patient achieve the best care based on current standards.
- Our quality metrics are regularly audited and meet all the accredit ting organizations' current standards
- Opportunities to impact diabetes in area, prevention, progression and care
- Clinical opportunities to expand our reach and services
- Training and teaching work can expand
- Public educational activities and CME activities would have benefits
- Consider heath impact, capacity building grants
- Time, finances will be constraints which we will have to work within

NCQA Diabetes Recognition (2010-16)

Diabetes Recognition Program (DRP)

•	Clinical Measures (Required) Criteria 2	2012 Versi	on Points	2015 Version			
•	HbA1c Poor Control >9.0%**	'≤15% of patients in san	nple	12.0	15.0			
•	HbA1c Control <8.0%	65% of patients in sam	ple	8.0	10.0			
•	HbA1c Control <7.0%	40% of patients in sam	ple	5.0	7.0			
•	Blood Pressure Control							
•	≥140/90 mm Hg**≤35% of p	atients in sample		15.0	30.0			
•	Blood Pressure Control							
•	<130/80 mm Hg**25% of pa	atients in sample		10.0	REMOVED			
•	Eye Examination	60% of patients in sam	ple	10.0	12.0			
•	Smoking and Tobacco Use and							
•	Cessation and Treatment Ass	sistance85% of patients	in sample	10.0	12.0			
•	LDL-Control ≥130 mg/dl**	≤35% of patients in san	nple	10.0	REMOVED			
•	LDL-Control <100 mg/dl**	50% of patients in sam	ple	10.0	REMOVED			
•	Nephropathy Assessment	85% of patients in sam	ple	5.0	7.0			
•	Foot Examination	80% of patients in sam	ple	5.0	7.0			
•	Total Points			100.0	100.0			
•	Points Needed to Achieve	e Recognition		75.0	70			