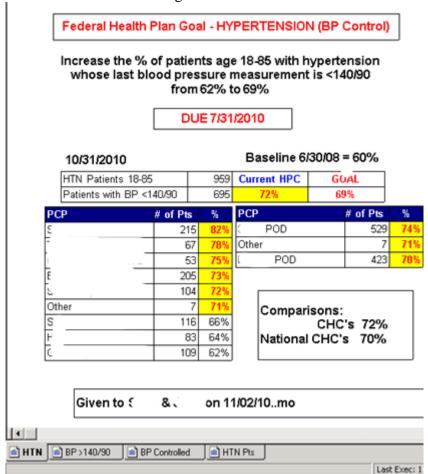
PPC 8: Performance Reporting and Improvement Element C: Reporting to Physicians

As shown in the screen shots in PPC8A and the uploaded excel sheets in PPC8B, most of the data we report on is done at a clinic, POD, and provider level. Provider teams utilize this data during team meetings and POD meetings to make improvement plans. We also



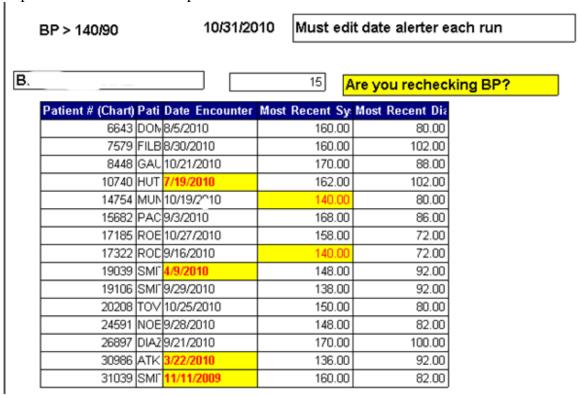
This shows the measure reported by practice and by provider. The note in the box at the bottom documents that patient lists were given to POD supervisors for team distribution and review at team meetings.



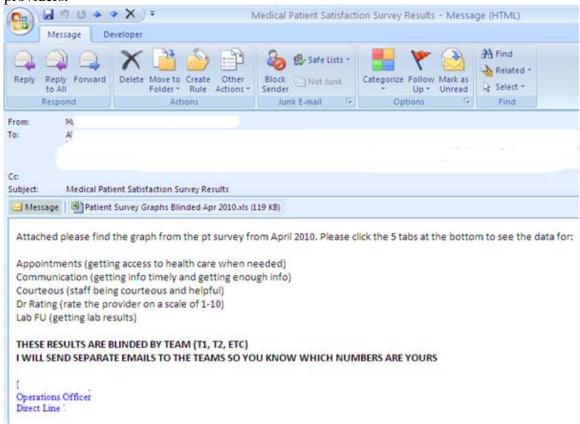
GIT 'R DONE: DM

	Goals	CHC	F		N	R) \$		T	q
DM Pts- Total #		451	70	58	7ر	47	131	56	34	18
Average A1c	7.00	7.50	7.19	7.27	7.59	7.93	7.45	7.58	7.38	8.59
% 2A1c 90 days apart	90%	82 %	94 %	83 %	62 %	72 %	87 %	82 %	88 %	61 %
% BP less 130/80	40%	53 %	46%	37%	59%	61%	65%	38%	73%	33%
% SMG	70%	94 %	96 %	97 %	86 %	94 %	90 %	96 %	97 %	100 %
% ACE or ARB	75%	90 %	100 %	83 %	85 %	81 %	91 %	85 %	94 %	33 %
% LDL < 100	70%	46 %	56%	42%	79%	34%	53%	24%	30%	100%

Here is a blinded list of patients who are not in compliance. Teams use this list to plan improvement and to contact patients:



For 8B: Email with blinded patient satisfaction results sent to all staff, including providers.



Example of blinded data sent in above email:



