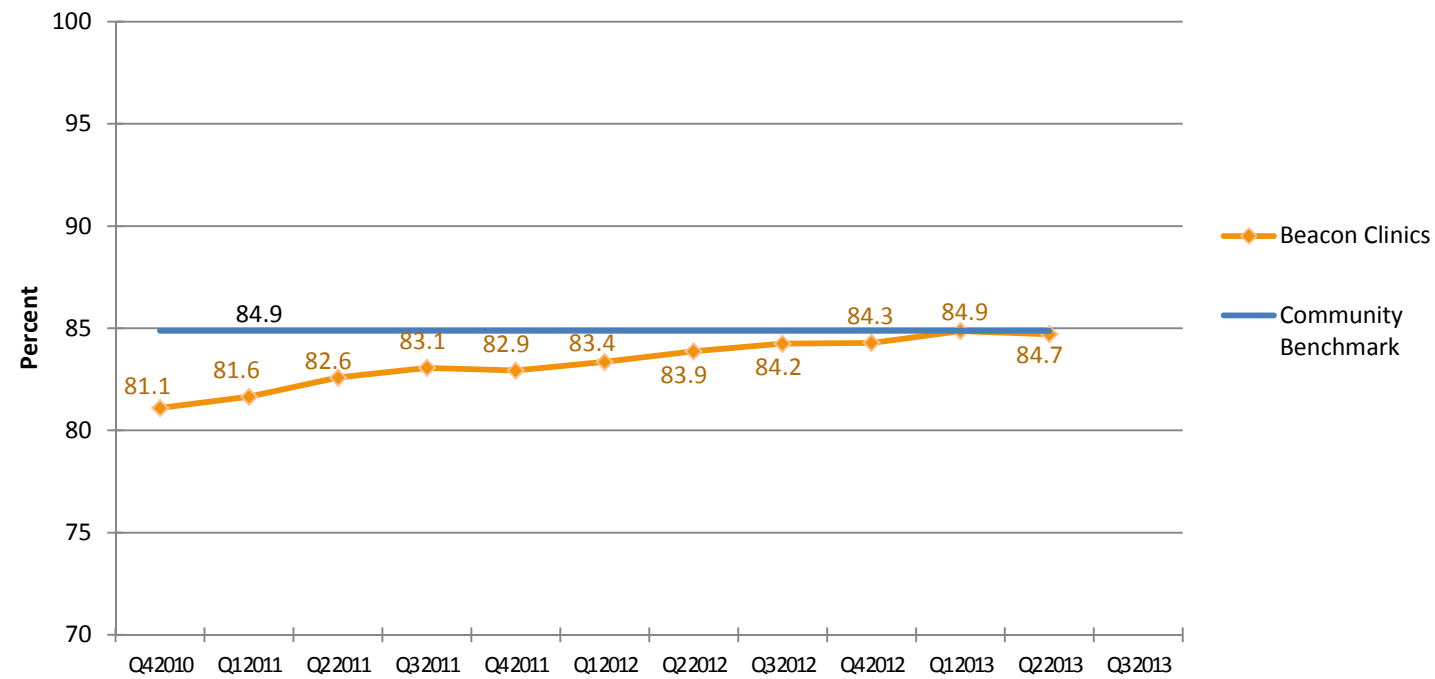
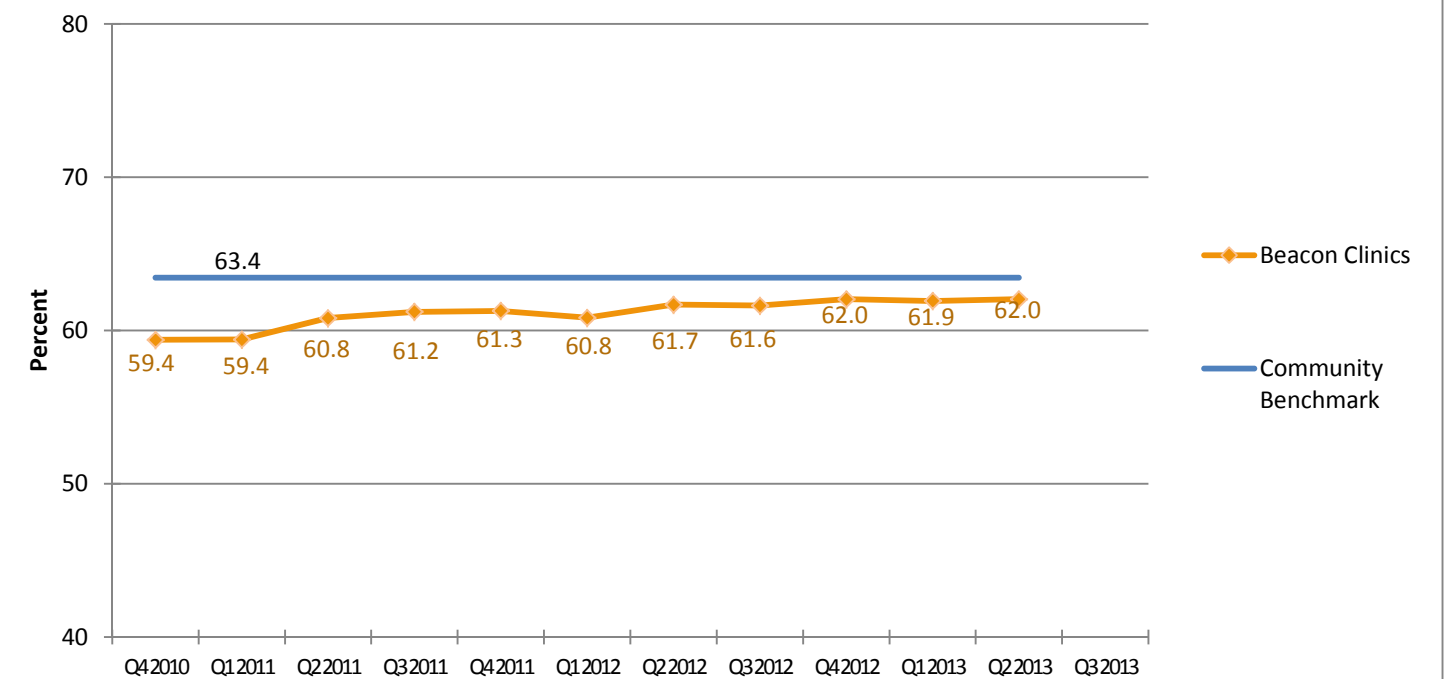


The graphs below present measures of diabetes care quality in Salt Lake, Tooele, and Summit counties. The 36 primary care clinics represented here worked with HealthInsight in the Beacon Community Program—a three-year initiative in 17 U.S. communities funded by the Office of the National Coordinator for Health Information Technology—to improve care for diabetes patients. The graphs show a Community Benchmark, an achievable quality score, and the average actual scores for the Beacon clinics over three years. These benchmarks can be used as care quality goals for healthcare providers and health insurance plans in our community.

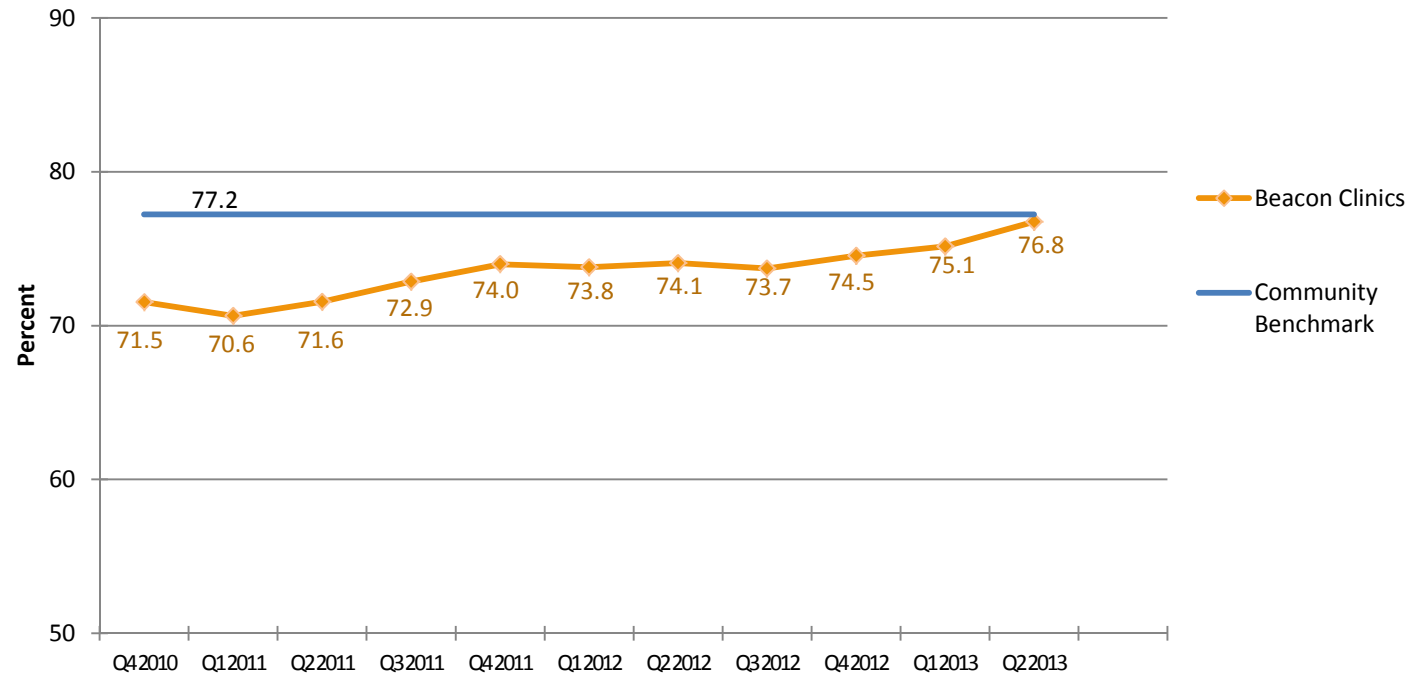
Percent of HbA1c Screenings, by Quarter, for Beacon Clinics with Community Benchmark



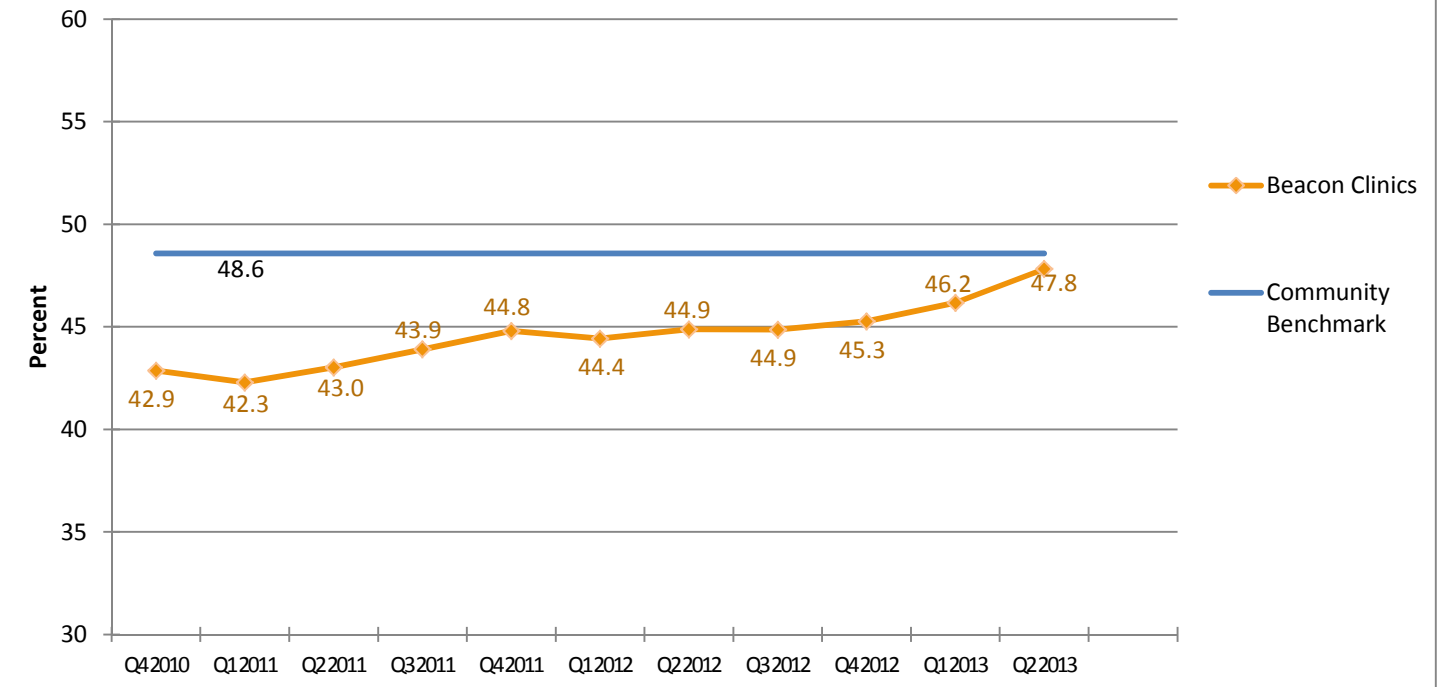
Percent of HbA1c In-Control, by Quarter, for Beacon Clinics with Community Benchmark



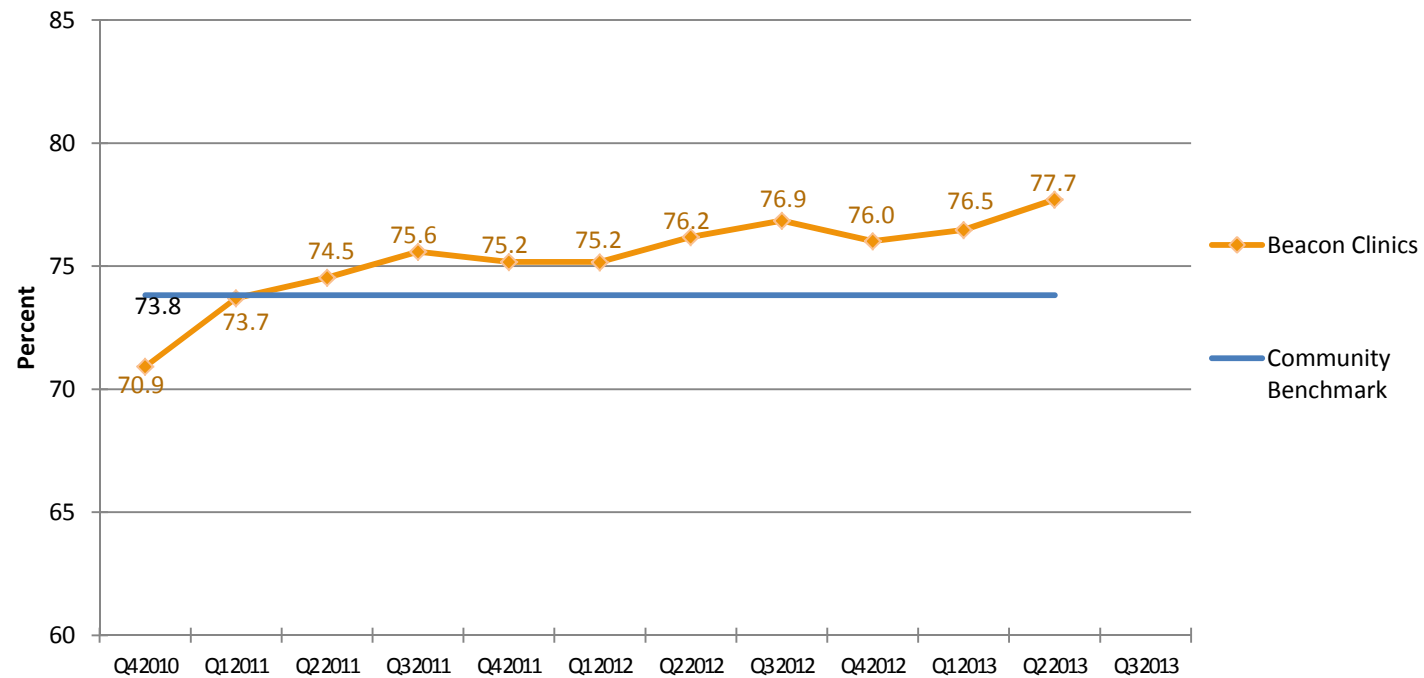
Reported Percent of LDL Screenings, by Quarter, for Beacon Clinics with Community Benchmark



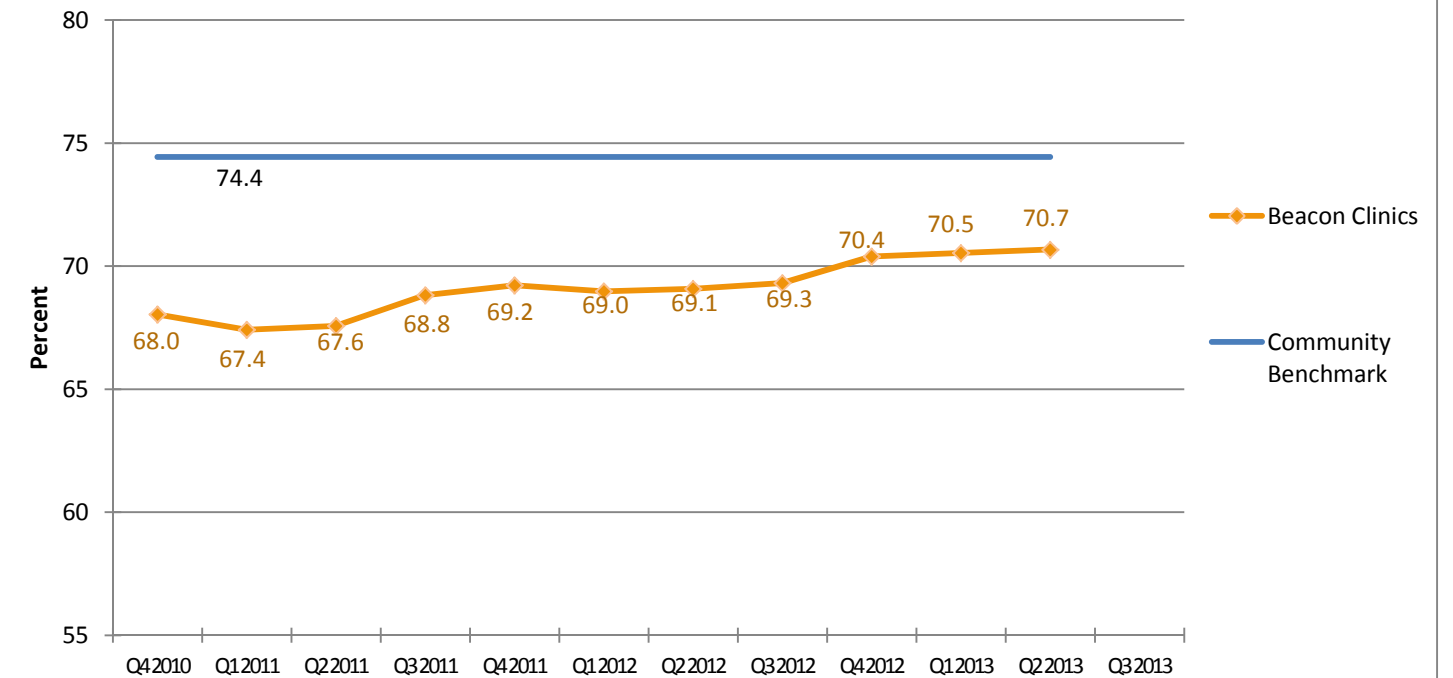
Reported Percent of LDL In-Control, by Quarter, for Beacon Clinics with Community Benchmark



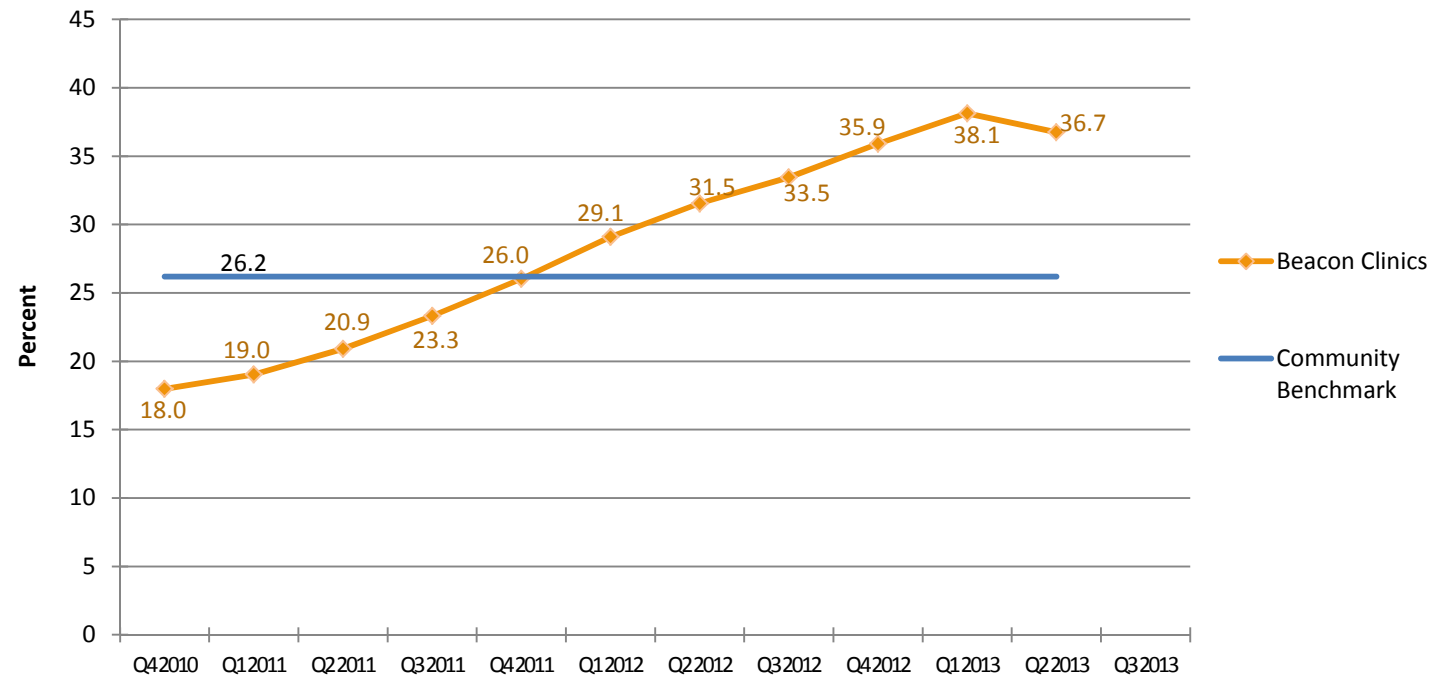
Percent of Blood Pressure In-Control, by Quarter, for Beacon Clinics with Community Benchmark



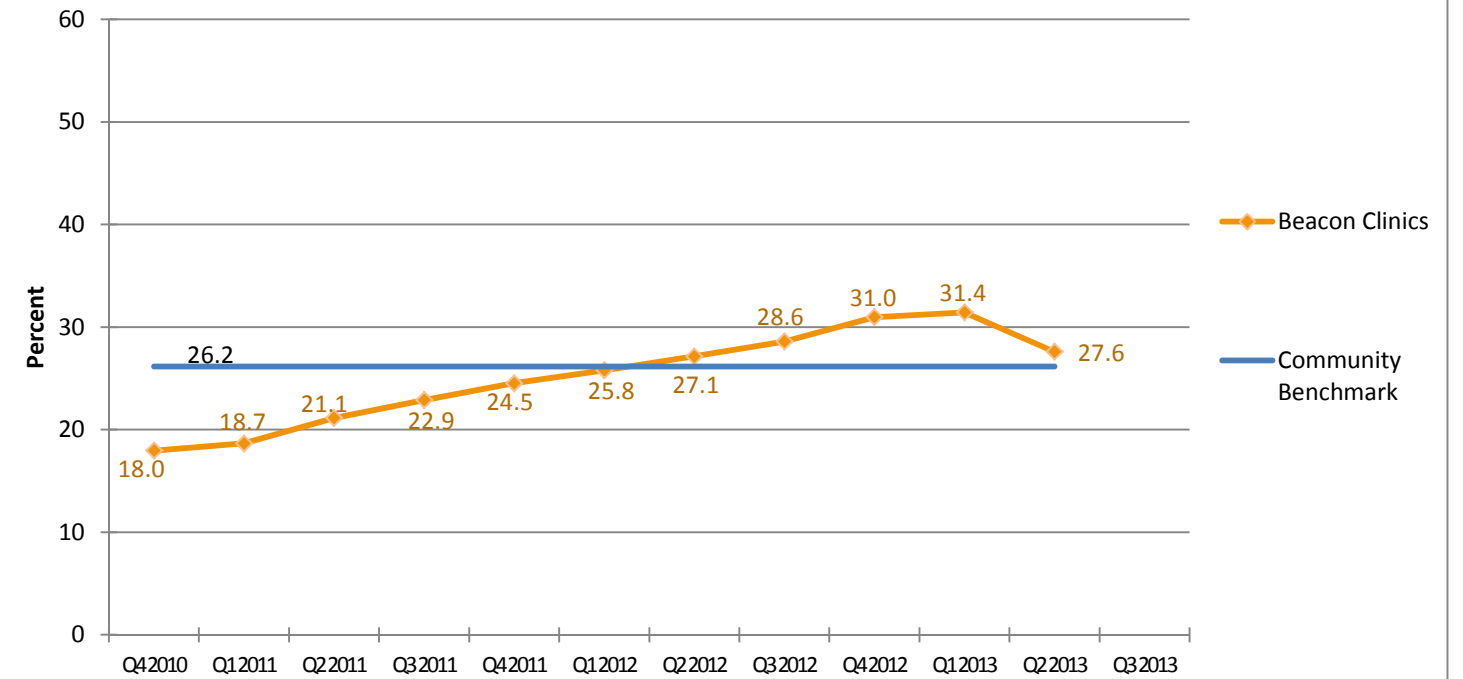
Percent of Nephropathy Screenings, by Quarter, for Beacon Clinics with Community Benchmark



Reported Percent of Eye Exams, by Quarter, for Beacon Clinics with Community Benchmark



Reported Percent of Foot Exams, by Quarter, for Beacon Clinics with Community Benchmark



Data for the graphs was taken at quarterly data pulls throughout each year (Quarter 4 of 2010 to Quarter 2 of 2013). Each quarter represents an entire year's worth of data ending at the specified quarter's end date. For example, Quarter 2 of 2012 is the data for all patients from July 1, 2011 to June 30, 2012.

The results of each diabetes measure shown are the percent of patients that are tested or who are in control of the specified measure for that specific quarter. The Community Benchmark was calculated from each baseline score (Quarter 4, 2010). Community Benchmarks are based on a reduction in failure rate (RFR). RFR is the change in performance from baseline to follow-up in relation to the difference between baseline and a perfect score. Improving from 50% to 75% gives the same RFR score as improving from 90% to 95%. The RFR score goal for the 5 Screening/Test measures is 20. The RFR score goal for the 3 In-Control measures is 10.

Formula for calculating the Community Benchmark for Screening/Testing measures:

$$\text{Community Benchmark} = \text{Baseline Rate} + (20 - (.2 \times \text{Baseline Rate}))$$

Formula for calculating the Community Benchmark for In-Control measures:

$$\text{Community Benchmark} = \text{Baseline Rate} + (10 - (.1 \times \text{Baseline Rate}))$$