MCT2D CQI User Guide 2.0

Contents

Introduction

The Michigan Data Collaborative (MDC) is a nonprofit healthcare data organization at Michigan Medicine. The Michigan Collaborative for Type 2 Diabetes (MCT2D), a Collaborative Quality Initiative (CQI), has partnered with MDC to produce dashboards supporting their mission to engage and empower clinicians and patients across Michigan to accelerate dissemination and implementation of evidence-based strategies to prevent and reverse progression of Type 2 diabetes and its complications.

MCT2D Patient Data Dashboard

MDC aggregates Blue Cross Blue Shield of Michigan (BCBSM), BCBSM Medicare Advantage (BCBSM MA), Blue Care Network (BCN), BCN Advantage (BCN-A), and Medicaid claims data from participating practices and payer-neutral MiHIN clinical quality (all-payer supplemental) data sourced from Electronic Health Record (EHR) systems. Over time, additional sources of information, such as remote monitoring device data, and social determinants of health information, will be integrated into the MCT2D Population Health Registry.

MDC provides dashboards sourced from the MCT2D Population Health Registry for participating MCT2D organizations. MDC dashboards contain meaningful patient characteristics determined by MCT2D clinicians and expert staff. Through our iterative design process, ongoing updates will accommodate new data and reporting options. Patient-level data is searchable by Provider Organization (PO), Practice, and Provider.

The MCT2D Patient Data Dashboard is compatible with modern browsers such as Google Chrome, Mozilla Firefox, Apple Safari, and Microsoft Edge. Access to the MCT2D Data Dashboard is secured based on user credentials.

The *MCT2D Patient Data Dashboard 2.0* consists of two new Tableau tabs, the Landing Page and Summary Measures tabs, along with an updated User Guide. To access the Patient List, Renal Details, Patient Profile, and Custom Patient Groups Tabs, view the legacy *MCT2D Dashboard*.

Note: MDC protects all patient Personally Identifying Information (PII) as well as information that could identify any Physician Organization (PO), Practice, or Provider by blurring all screenshots included in this guide.

Before You Begin

Access and Setup Guide

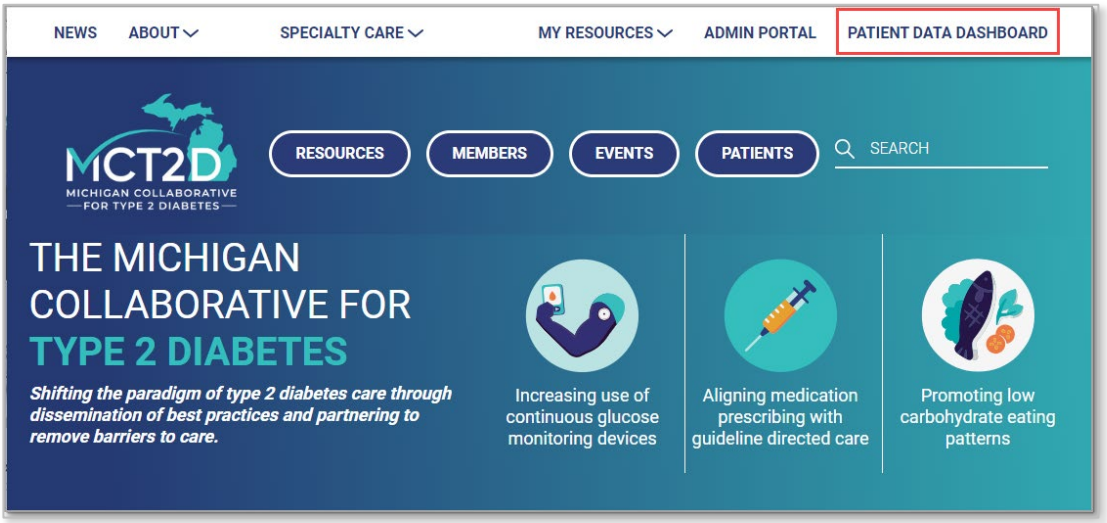
The *Access and Setup Guide* provides detailed information about the steps that you must complete to access the MCT2D CQI dashboard, including setting up a University of Michigan (U-M) user account and Duo two-factor authentication.

If you have general questions about accessing or using the MCT2D dashboard, contact MDC at *MichiganDataCollaborative@med.umich.edu.*

Logging in to MCT2D Patient Data Dashboard from MCT2D

You can access the MCT2D Patient Data Dashboard from the MDC home page OR the MCT2D home page.

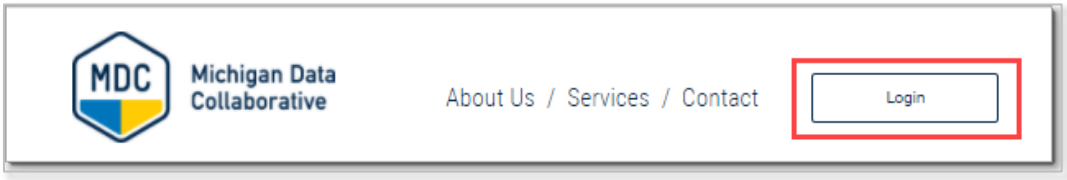
1. From the MCT2D home page (*mct2d.org*), click the **Patient Data Dashboard** button in the upper right corner, as shown below.



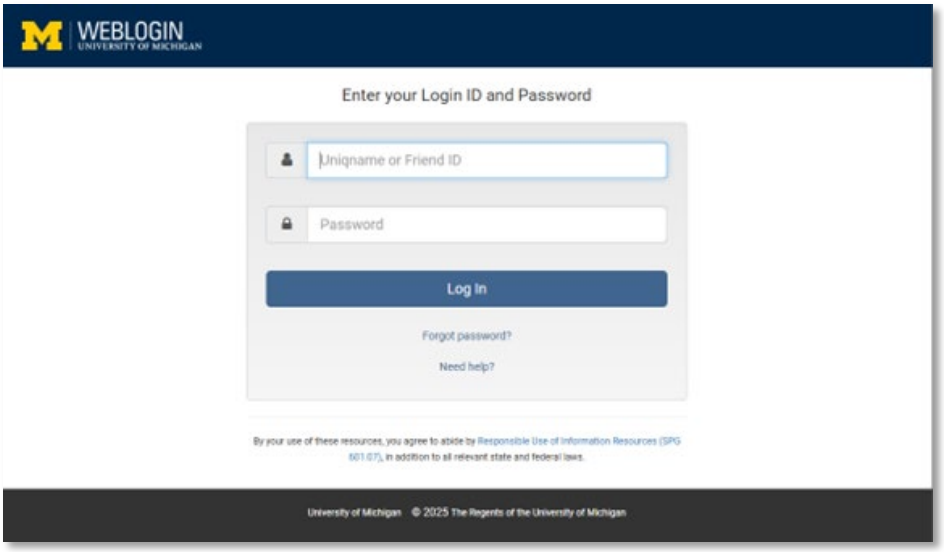
2. If you are not already logged in to the University of Michigan, you will be redirected to the U-M Weblogin page and prompted to enter the following information:
   - **Uniqname**. Type in your U-M uniqname.
   - **Password**. Type in your U-M password.
3. Click **Log In**.
4. Next, you will be required to complete Duo Two-Factor Authentication. To get help installing the Duo app or using two-factor authentication, see the *Access and Setup Guide*.
5. **Approve** the Duo request on your device ***OR*** approve two-factor authentication using the phone call method. Duo will display a three-digit verification code that you enter on your mobile device. Learn more about *Duo Verified Push Notifications*.
6. Next, you will be redirected to the Attestation Tab (see *Attestation Tab, Legacy Dashboard* instructions below).

Logging in to MCT2D Patient Data Dashboard from MDC Home Page

1. Or, to log in to the dashboard from the MDC website, navigate to *michigandatacollaborative.org*, and select the **Login** button in the top navigation bar, as shown below.

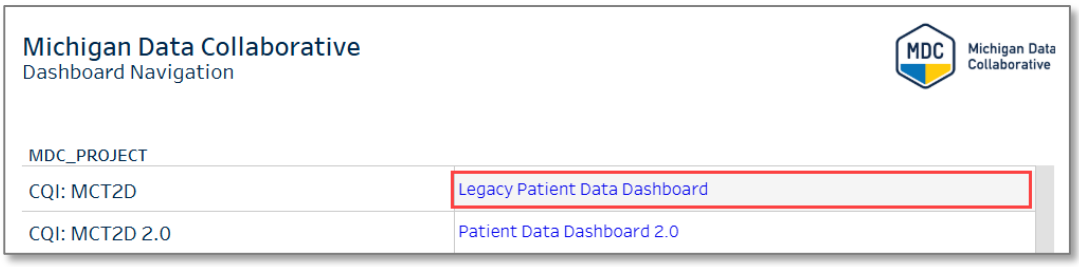


2. If you are not already logged in to the University of Michigan, you will be redirected to the U-M Weblogin page and will be prompted to enter the following information:
   - **Uniqname**. Type in your U-M uniqname.
   - **Password**. Type in your U-M password.
3. Click **Log In**.



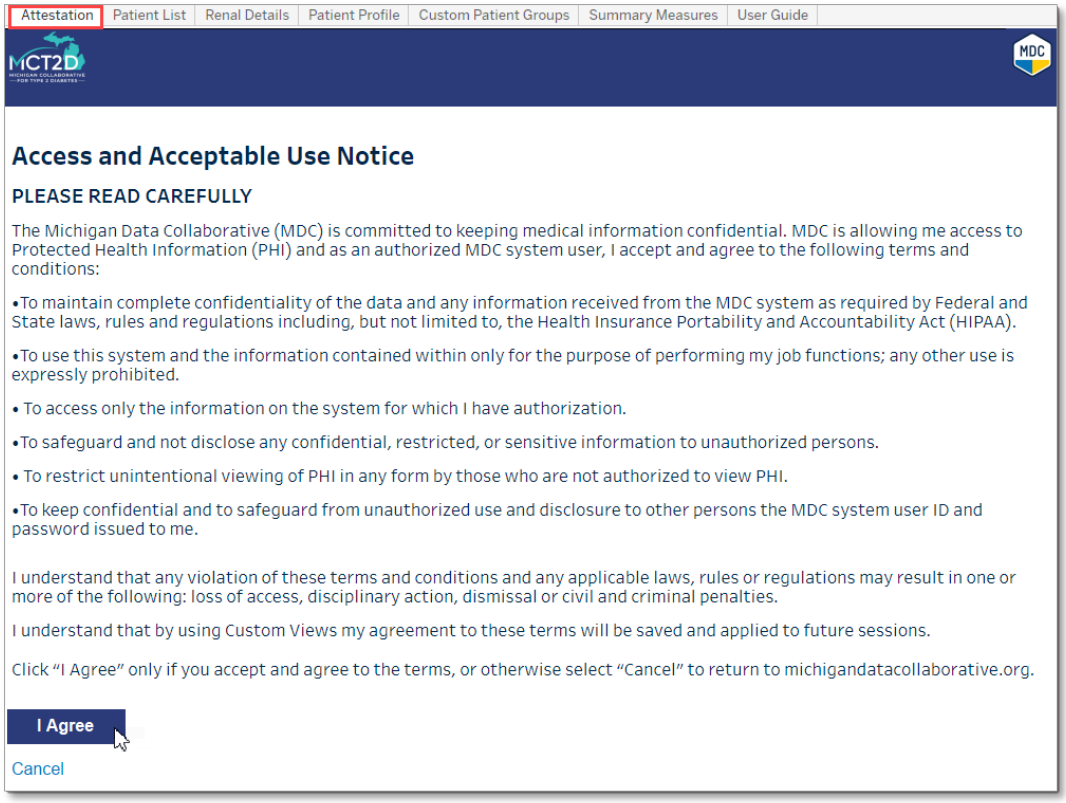
4. Next, you will be required to complete Duo Two-Factor Authentication. Duo will display a three-digit verification code that you enter on your mobile device. Learn more about *Duo Verified Push* Notifications. To get help installing the Duo app or using two-factor authentication, see the *Access and Setup Guide*.
5. Approve the Duo request on your device OR approve two-factor authentication using the phone call method.

6. Next, the MCT2D Dashboard Navigation page will open. After you select **Legacy Patient Data Dashboard**, shown below, you will be directed to the *Attestation Tab, Legacy Dashboard*.



Attestation Tab, Legacy Dashboard

1. On the Attestation Tab, users must attest that they will use the patient information appropriately and maintain confidentiality of all data. Scroll down, review the content, and if acceptable, click **I Agree**.



2. Next, you will be redirected to the Patient List Tab.

Navigating the *Legacy* MCT2D Data Dashboard Tabs

The ***Legacy MCT2D Data Dashboard*** contains seven tabs. These are at the ***very top*** of the page, in light gray, above the navy-blue bar that reflects the current tab:

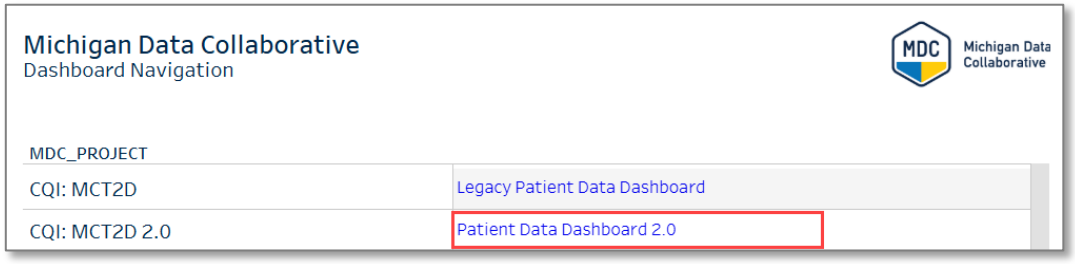
- Attestation
- Patient List
- Renal Details
- Patient Profile
- Custom Patient Groups
- User Guide

MCT2D Patient Data Dashboard 2.0

The MCT2D Patient Data Dashboard is a population health dashboard designed to empower you with tools for quality improvement and population health management.

Dashboard 2.0 introduces a new Landing Page with FAQs and a Summary Measures Tab with three new measure categories: Outcome Measures, Screening Measures, and Prescribing Measures. The legacy dashboard still retains its full functionality and features. The legacy dashboard will continue to be available as we transition all elements to the new MCT2D Patient Data Dashboard 2.0.

After you log in to the MCT2D Patient Data Dashboard, select Patient Data Dashboard 2.0 on the Dashboard Navigation page, as shown below.



Navigating the Patient Data Dashboard 2.0

The MCT2D Patient Data Dashboard 2.0 opens to the Landing Page tab. The following tabs display at the ***top*** of the page:

- Landing Page
- Summary Measures (2.0)

Landing Page, Dashboard 2.0

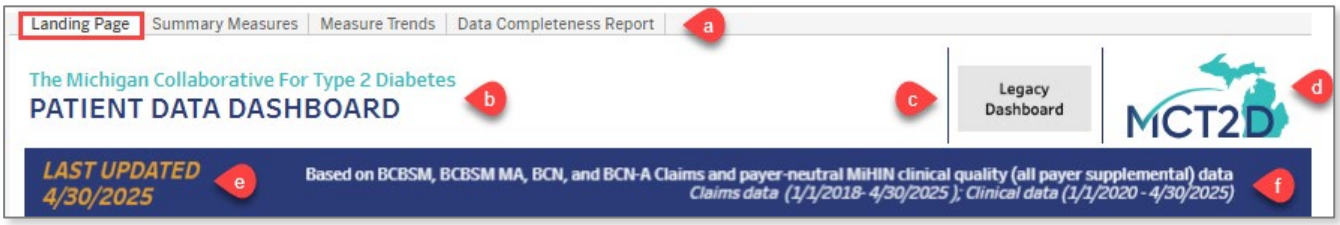
To navigate to the Dashboard 2.0 Landing Page, follow the log in instructions in *Logging in to the Dashboard from the MDC Home Page*.

The **Landing Page** extends beyond a single screen. Scroll down to view the entire page with the following subsections:

1. Landing Page Header (top)
2. Dashboard navigation icons (middle)
3. Welcome & FAQs (bottom)

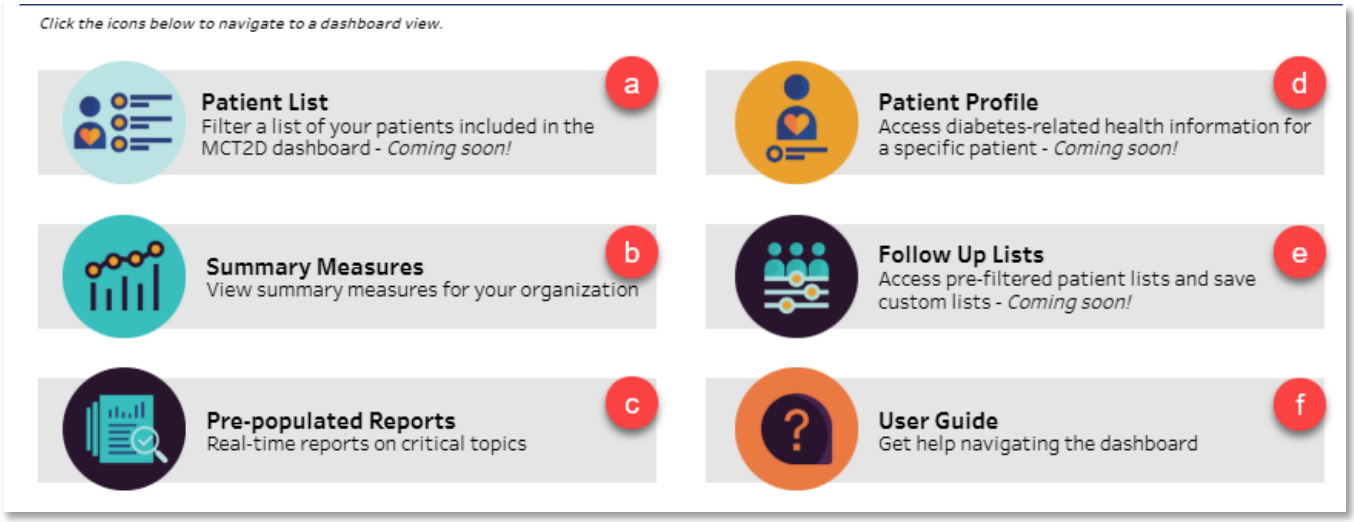
Landing Page Header

1. The **Landing Page Header** includes:
    a. **Tabs** across the top: Landing Page, Summary Measures, Measure Trends, Data Completeness Report.
    b. Dashboard title. ***The Michigan Collaborative for Type 2 Diabetes Patient Data Dashboard***
    c. **Legacy Dashboard** button. Click the button to access MCT2D Legacy Dashboard.
    d. **MCT2D logo** in top right corner. Click the logo to access MCT2D.org website.
    e. **Last Updated**. Date dashboard was last updated.
    f. **Data sources and date ranges**.



Dashboard 2.0 Navigation Icons

2. The **Dashboard 2.0 navigation icons** in the middle of the Landing page include:
    a. **Patient List**. *Coming Soon!* Continue to access the legacy Patient List page.
    b. **Summary Measures**. Click the **Summary Measures** icon to view summary measures for your organization.
    c. **Pre-populated Reports**. Click to view Measure Trends and Data Completeness Reports.
    d. **Patient Profile**. Continue to access the legacy Patient Profile page.
    e. **Follow Up Lists**. *Coming soon!* Available with subsequent release.
    f. **User Guide**. Click the *User Guide* icon to get help navigating the dashboards.



Welcome & FAQs

MCT2D Patient Data Dashboard 2.0 FAQs include the following.

What patients are included in the dashboard?

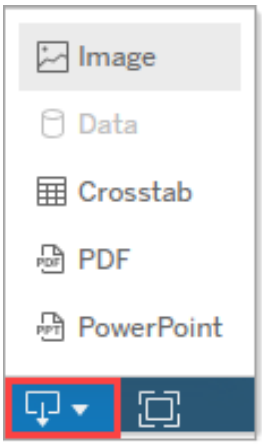
- *Patients included in the MCT2D Patient Data Dashboard must (1) meet the below qualifying MCT2D criteria and (2) be attributed to an MCT2D participating physician. Qualifying criteria include:*
  - ***Type 2 diabetes diagnosis*** *AND/OR*
    (based on diagnosis code contained within BCB5M, BCBSM MA, BCN, or BCN-A medical claims)
  - ***Most recent clinical A1c ≥ 6.5*** *AND/OR*
    (based on service type code submitted to MiHIN in the All-Payer Supplemental files (APS) files for those organizations participating in MiHIN's Quality Measures Information (QMI) use case, or A1c ≥ 7 in claims data.)
  - ***Diabetes medication filled within the past six months***
    (based on NDC codes contained within BCBSM, BCBSM MA, BCN, or BCN-A pharmacy claims. Note: Incretin Mimetics FDA indicated for weight loss only will not qualify a patient)
  - ***Exclusion: Diagnosed with type 1 diabetes***
    (based on diagnosis code contained within BCBSM, BCBSM MA, BCN, or BCN-A medical claims)
- *Date Ranges of Data.*
  - *BCBSM, BCBSM MA, BCN, or BCN-A medical and pharmacy claims: January 2018 to the present.*
  - *Payer-neutral MiHIN clinical quality (all-payer supplemental) data received in the APS files for organizations participating in QMI use case: January 2020 to the present.*

What does "pharmacy coverage" represent in the dashboard?

- *"Pharmacy Coverage" means the patient has medication (sometimes including CGM) coverage through BCBSM or BCN. However, some patients may have pharmacy coverage through a separate entity that is not affiliated with BCBSM or BCN (referred to as a "carve out"). The MCT2D dashboard does not have medication information for patients with carve outs or who were identified via the PO Active Care Relationship Service (ACRS) and have no associated claims data.*

How do I export data?

- *To download data and visualizations, click the **Download** icon on the right side of the toolbar. Choose a format from the Download popup window: Image, Data, Crosstab, PDF, or PowerPoint.*
  - *If a download format is grayed out, it is not available.*
  - *Downloads will ONLY contain data if the graph is currently visible.*
  - *Only sheets that are currently visible will contain content when downloading Crosstabs (Excel or CSV format), PDFs, or PowerPoints. We recommend using the default Image, Data, PDF, and PowerPoint download options.*



What data will be added in the future?

- *Future data sources to be included in the Patient Data Dashboard include patients meeting the above qualifying criteria present in:*
  - *Claims data from organizations participating in MiHIN's Health Claims Use Case.*
  - *Social Determinants of Health screening data*
  - *Additional sources of clinical data for existing patients such as Consolidated Clinical Document Architecture (CCDA) data.*
- *Over the next few years, clinical data captured for these patients will expand to incorporate data variables from the following data sources submitted to MiHIN:*
  - *https://mihin.org/exchange-ccda/*
  - *Admission, Discharge, Transfer Notifications (ADTs)*
  - *Lab Orders*
  - *Social Determinants of Health Social Needs Screening (SDOH)*

What should I do if data is missing?

- *If you find missing or inconsistent data within the Patient Data Dashboard, please contact michigandatacollaborative@med.umich.edu. You should expect to receive a response within 1 business day.*

Who should I contact if I need help with this dashboard?

- *If you have any questions regarding data displayed within the Patient Data Dashboard, please contact michigandatacollaborative@med.umich.edu or ccteam@mct2d.org. You should expect to receive a response within 1-2 business days.*

Summary Measures Tab, Dashboard 2.0

To navigate to the Dashboard 2.0, follow the log in instructions in *Logging in to the Dashboard from the MDC Home Page*.

To navigate to the Summary Measures 2.0, click the Summary Measures Tab at the top of the Dashboard 2.0 page.

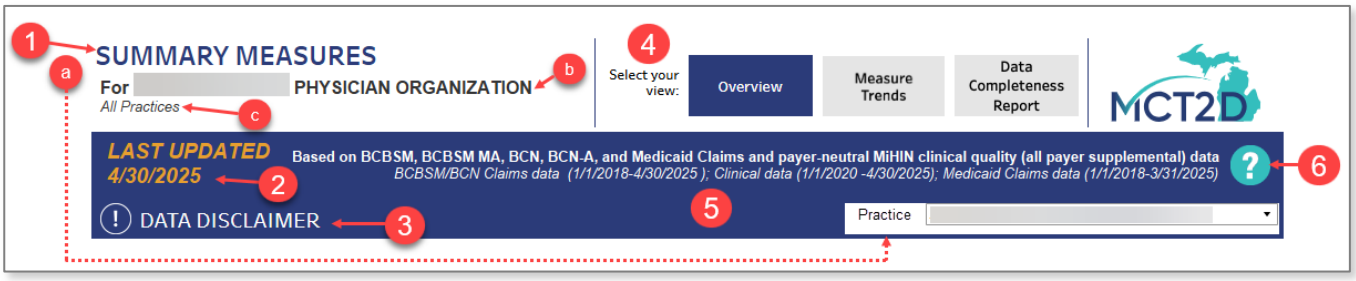
Summary Measures are aggregated at the Provider Organization (PO) level by default. For Practice Users, Summary Measures are aggregated at the Practice Level.

The Summary Measures Tab for Dashboard 2.0 includes the following measures:

- **Outcome Measures**. Display near the top of the page.
- **Screening Measures**. Scroll down to see the entire Screening Measures display.
- **Prescribing Measures**. Scroll down to the bottom of the page to see the entire Prescribing Measures display.

Summary Measures 2.0 Header

1. Page title: Summary Measures For [name of User's Physician Organization].
   a. **Practice selector**. PO level users or Practice Users who have access to more than one practice, may switch between practices in the Practice dropdown menu. Practice Users are only able to view measures for their Practices and Providers.
   b. For [PO name]. The PO name will automatically display in the header.
   c. Name of default Practice or Practice selected is displayed.
2. **Date Last Updated** (e.g., 4/30/2025)
3. **Data Disclaimer**. Click the **Information** icon ! to view the data disclaimer.



4. **Select your view**. The Summary Measures page defaults to the Overview View. You may toggle between these options:
   - **Overview**
   - **Measure Trends**
   - **Data Completeness Report**
5. **Dashboard data sources and date ranges**.

Data Source Defined

Summary Measures Data Disclaimer

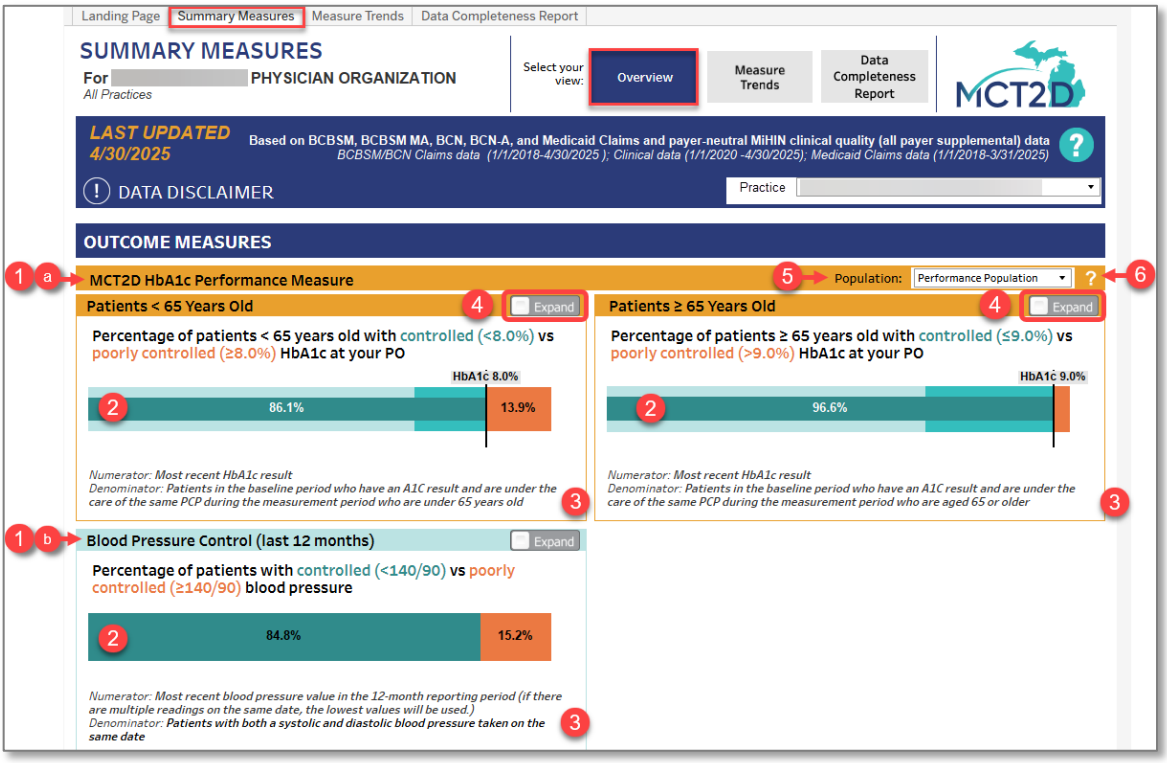
This Summary Measures Overview currently represents the clinical data received from the Michigan Health Information Network Shared Services (MiHIN), and claims data received from BCBSM and BCN for patients with BCBSM commercial, BCBSM MA, BCN commercial or BCN-A insurance, who have a documented Type 2 Diabetes (T2D) diagnosis, and who are attributed to your organization. While measures on the Summary Measures Overview may be similar to HEDIS measures, this dashboard should not be considered a source of truth for HEDIS performance as the numerator and denominator sources, the time frame of the data, and the data completeness may differ from established HEDIS metric standards.

6. **Help icon**. Click the **Help** icon ? to see which patients are included in the Summary Measures Overview.

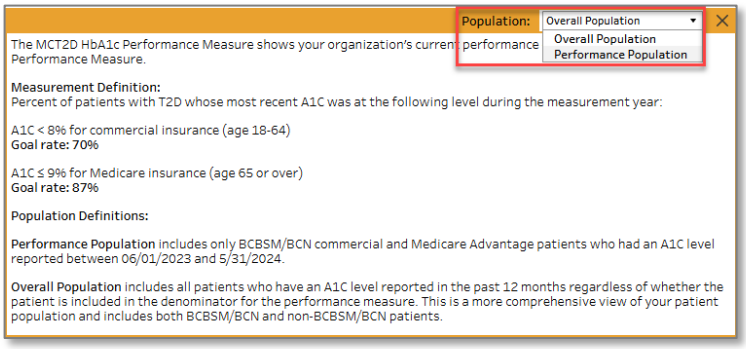
Outcome Measures > Overview

To access the Outcome Measures Overview, navigate to the Dashboard 2.0 **Summary Measures** tab and select **Overview.**

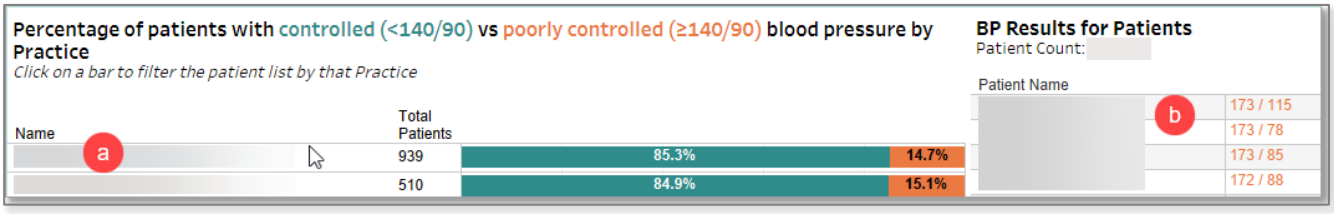
1. Each **Outcome Measures** bar graph displays the percentage of patients with controlled vs poorly controlled measure outcomes. Outcome Measures include:
    a. **MCT2D HbA1c Performance Measure** for Patients < 65 Years Old *and* Patients ≥ 65 Years Old [at your practice/at your PO].
        - For Practice users, "at your practice" displays
        - For PO users, "at your PO" displays
    b. **Blood Pressure Control** (last 12 months). Percentage of patients with controlled blood pressure (<140/90).
2. **Hover over** or **click** any bar graph to activate the tooltip displaying percentages and patient counts for each measure result. Click it again to toggle it off.
   Note: Measure results in each HbA1c bar graph are broken down into subgroups within the range of three different results, as indicated by the bar graph color gradations.
3. A graph footnote describes the Numerator and Denominator for each result.
4. Click the **Expand/Close** button to view/close provider and patient lists for each PO or practice.
5. **Population**. Select from **Performance Population** (default) or **Overall Population** in upper right corner to view each measure definition and goal rates. *Note*: The bar graph footnotes describe the Numerator and Denominator for the specific population selected.



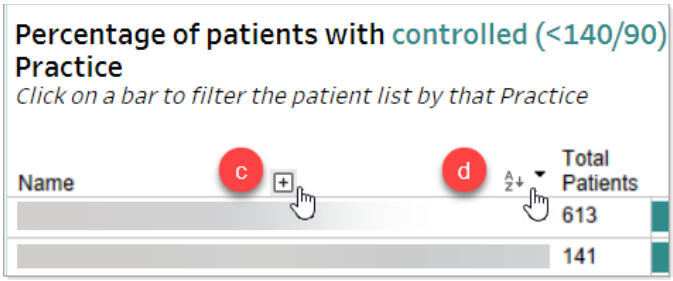
6. **Help**. Click the **Help** icon ? to view the measure definition and goal rates for the selected organization.



7. **In the expanded PO or Practice view, sort by Practice Name, Provider Name, and Patient Name lists**. To see your list of practices for a given measure, click the Expand button next to the measure name, as shown above. The default view displays your practice(s) and the patient list for your practice(s).
   a. Click on a practice bar (on the left) to filter the Patient list (on the right) by that practice.
   b. To view Providers within each Practice List, hover to the right of the Name column and click on the + symbol that appears on hover.



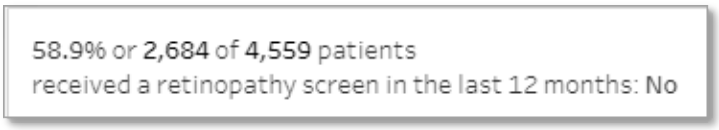
8. To sort Practice, Provider, or Patient list, click on the **Sort** icon A↓Z next to each column.



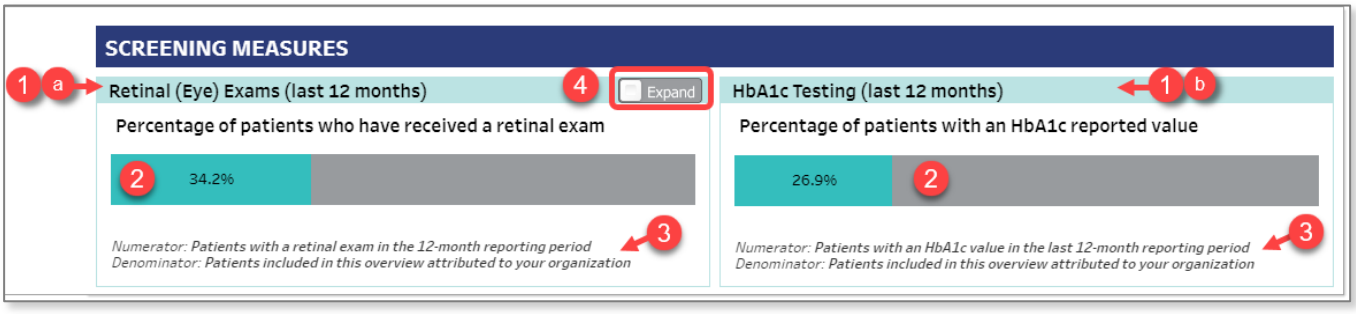
Screening Measures > Overview

To access the Screening Measures Overview, navigate to the Dashboard 2.0 **Summary Measures** tab and select **Overview**, then scroll down past Outcome Measures.

1. Screening Measures include:
   a. **Retinal (Eye) Exams** (last 12 months). Percentage of patients who have received a retinal eye exam.
   b. **HbA1c Testing** (last 12 months). Percentage of patients with an HbA1c reported value. *Note: There is no Expand/Close button for this measure.*
2. Bar graph display and functionality.
   - Displays percentage of patients with reported value.
   - **Hover over** or **click** any bar graph to activate the tooltip displaying the percentages and patient counts for each reported value, as shown below.



   - A footnote displays the numerator and denominator for each reported value.
   - *Note: Patient lists are not available for the Screening Measure results.*
3. A graph footnote displays the Numerator and Denominator for each result.
4. Click the **Expand/Close** button to view or close the list of providers and the list of patients for each PO or practice. *Note: There is no Expand/Close button for the HbA1c Testing measure result, and no practice/provider or patient list views.*



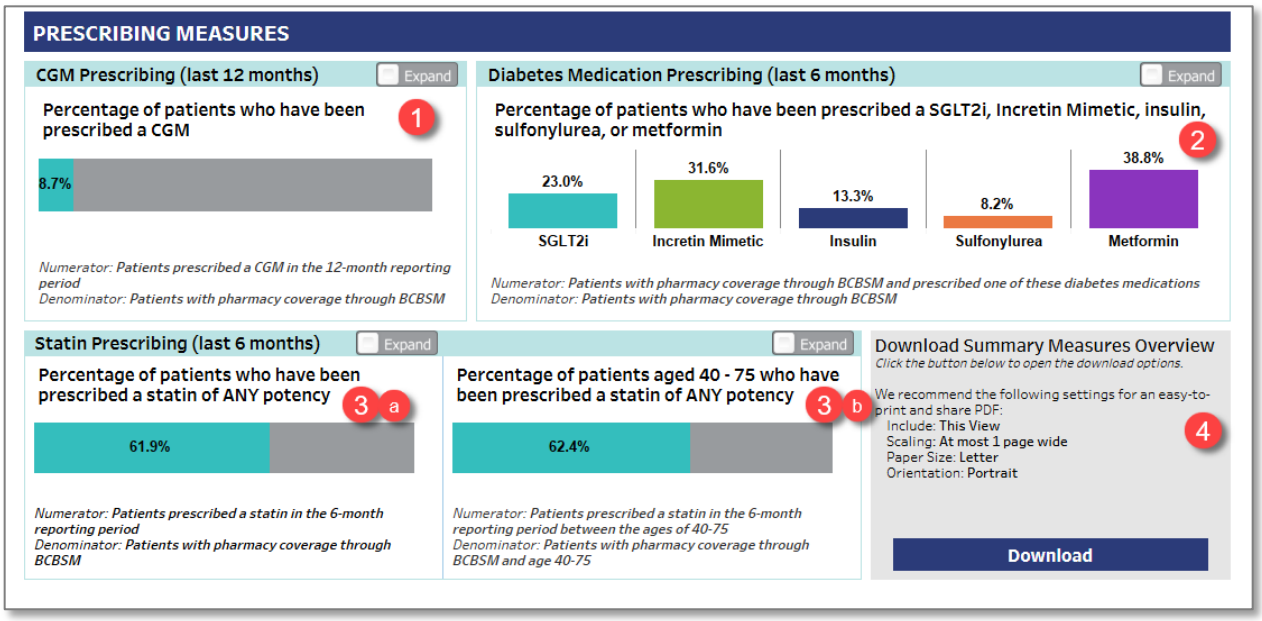
Prescribing Measures > Overview

To access the Prescribing Measures Overview, navigate to the Dashboard 2.0 **Summary Measures** tab and select **Overview**, then scroll down past Screening Measures.

Click the **Expand/Close** button to expand or close each measure result.

Prescribing Measures includes:

1. **CGM Prescribing** (last 12 months). Percentage of patients who have been prescribed a CGM in last 12 months.
2. **Diabetes Medication Prescribing** (last 6 months). Includes individual interactive graphs displaying the percentages of patients who have been prescribed SGLT2i, Incretin Mimetic, insulin, sulfonylurea, or metformin in last 6 months.
3. **Statin Prescribing** (last 6 months).
   a. Percentage of patients prescribed a statin of ANY potency in last 6 months.
   b. Percentage of patients aged 40-75 prescribed a statin of ANY potency in last 6 months.
4. **Download Summary Measures Overview**. Click Download to save .



5. Bar graph display and functionality for CGM and Statin Prescribing follow the general pattern, as described and illustrated previously.
   - Displays percentage of patients with reported value.
   - **Hover over** or **click** any bar graph to activate the tooltip displaying the percentages and patient counts for each result.
   - A graph footnote displays the number and denominator for each result.

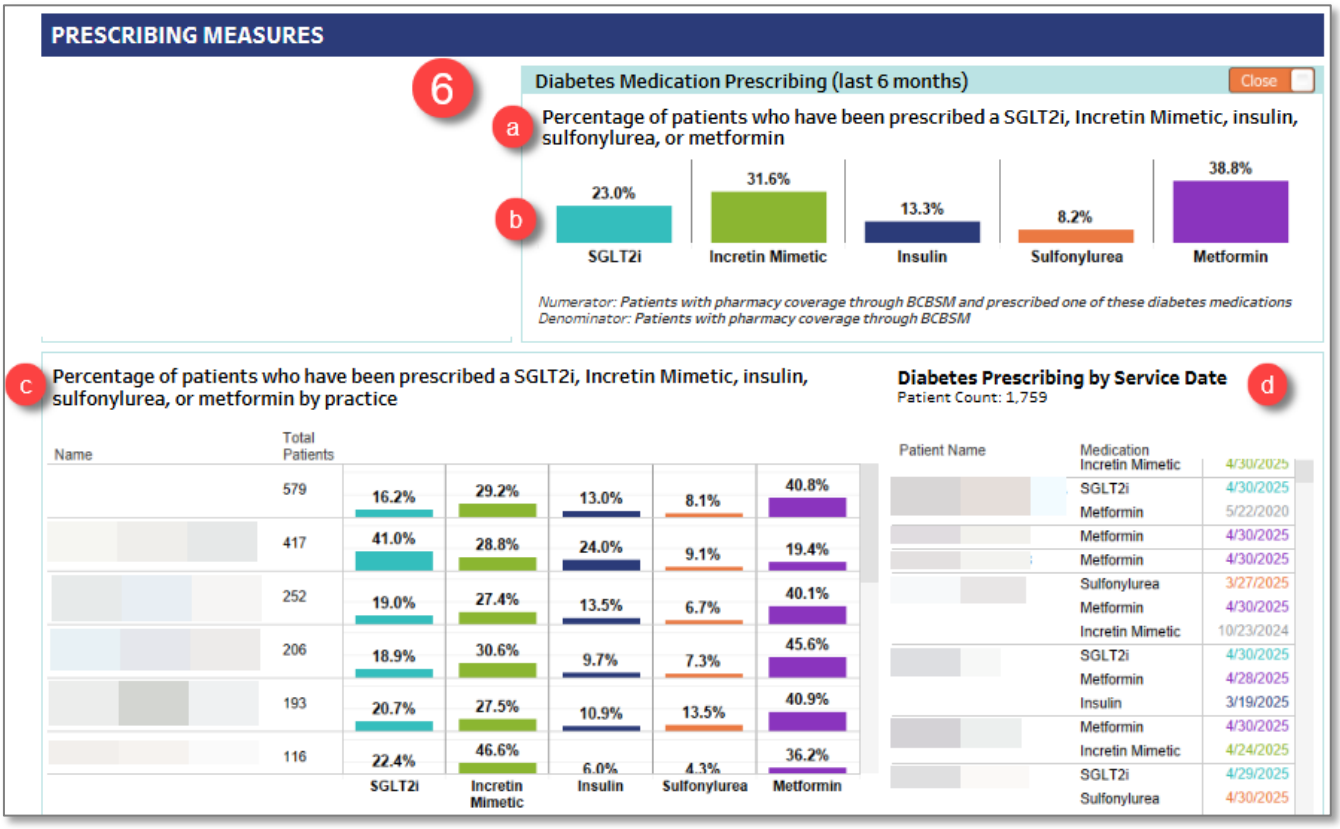
6. The **Diabetes Medication Prescribing** graphs differ from other graphs in their display and functionality, however. Click the **Expand/Close** button in the upper right corner to open or close the expanded view.

   a. Percentage of patients prescribed SGLT2i, Incretin Mimetic, insulin, sulfonylurea, or metformin in last 6 months by practice.

   b. **Hover over** or **click** a bar graph to activate the tooltip. Click on it again to toggle it off. In the example shown below, 31.6% of patients in the selected practice were prescribed Incretin Mimetic in the last 6 months.

   c. List of practices/providers who prescribed a medication with bar graphs showing percentages of each medication prescribed.

   d. List of patient names of the selected practices/providers, name of the prescription, and the date of last service.



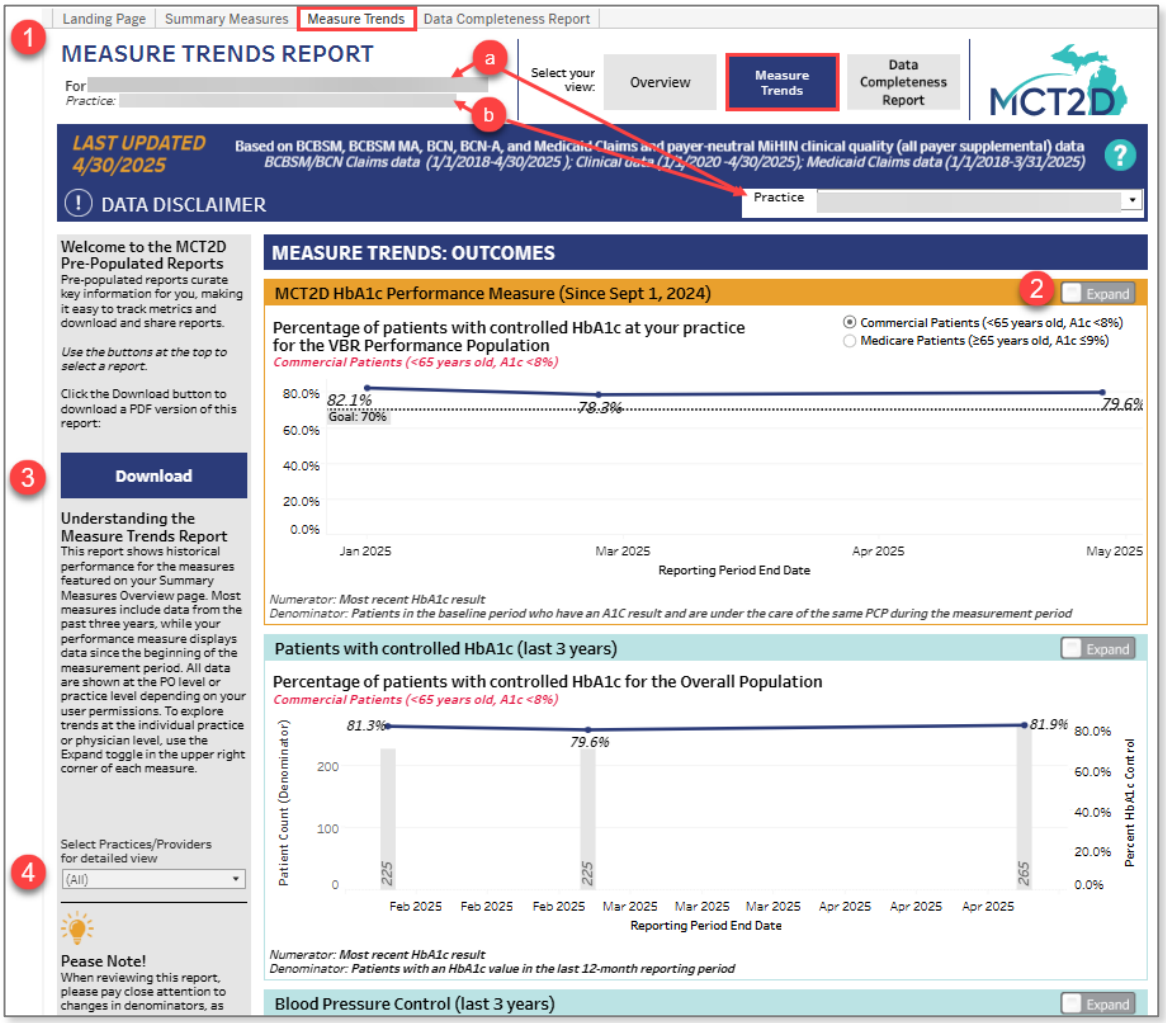
Measure Trends Report

- To access the Measures Trends Report, select the **Measures Trends** tab or button.
- Scroll down to view all Measure Trends reports, as they extend below the first page.

Understanding the Measure Trends Report

This report shows historical performance for the measures featured on your Summary Measures Overview page. Most measures include data from the past three years, except for the HbA1c performance measure, which displays data since the beginning of the measurement period. All data are shown at the PO level or practice level depending on your user permissions. PO users can view their organization's aggregated performance and expand each visualization to compare data across individual practices. Practice users can see their own aggregate data and drill down to view performance at the physician level.

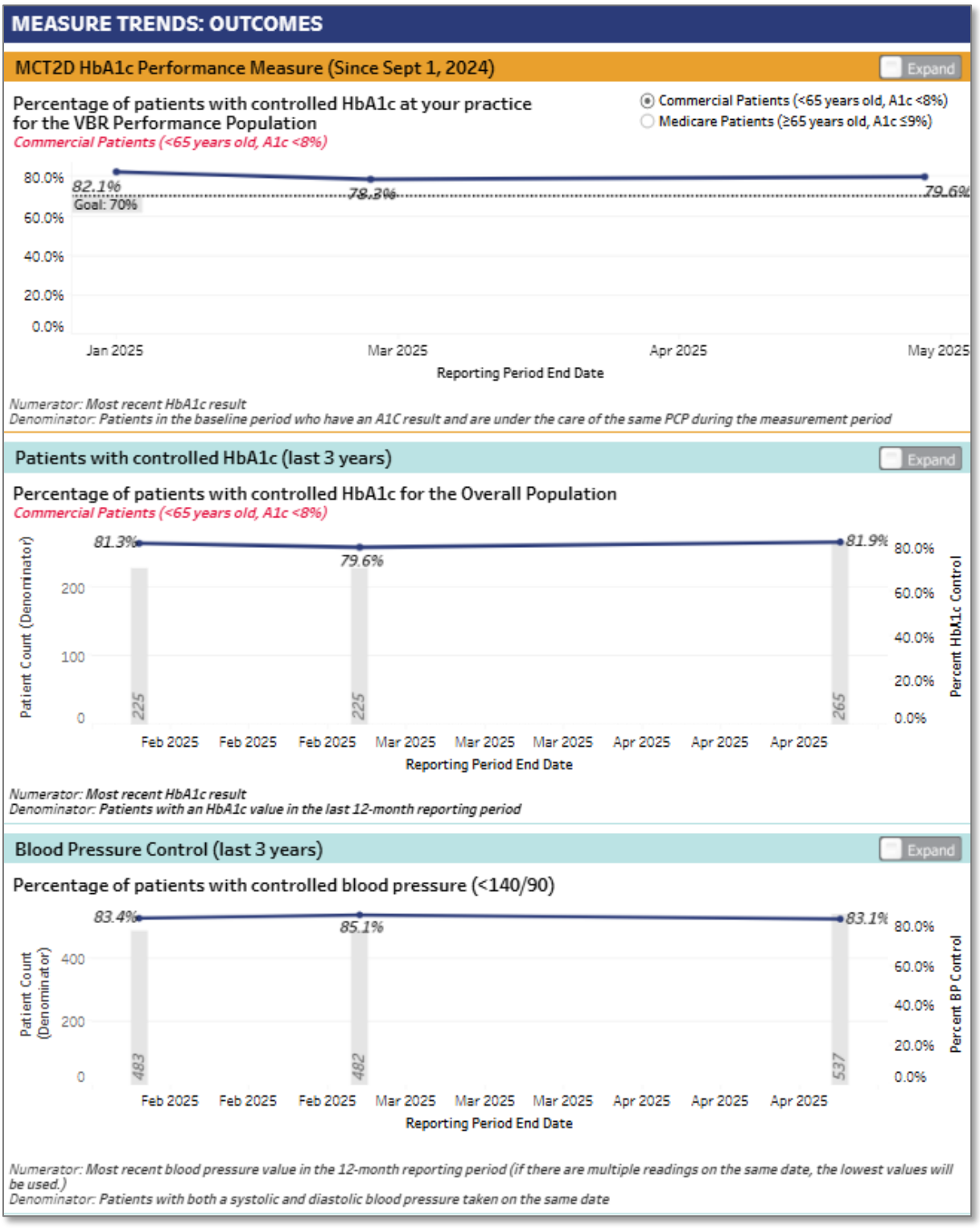
1. View the name of your **Physician Organization** and **Practice** (a) under the Measure Trends page title at the top left, and (b) in the **Practice/PO** dropdown list in the blue header banner.
2. To explore trends at the individual practice or physician level, use the **Expand** toggle in the upper right corner of each graph.
3. Scroll down the left column and choose from the **Select Practice/Providers for detailed view**.
4. Click **Download**.



Measure Trends: Outcomes

Scroll down to view all Measure Trends: Outcomes reports, as they extend below the first page.

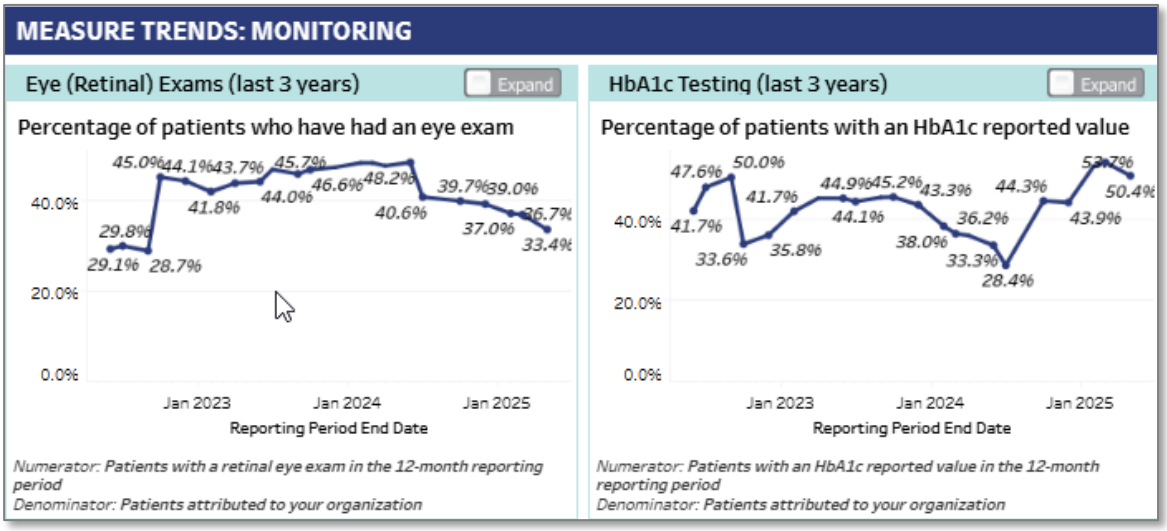
- MCT2D HbA1c Performance Measure
- Patients with controlled HbA1c(last 3 years)
- Blood Pressure Control (last 3 years)



Measure Trends: Monitoring

Scroll down to view the Measure Trends: Monitoring reports.

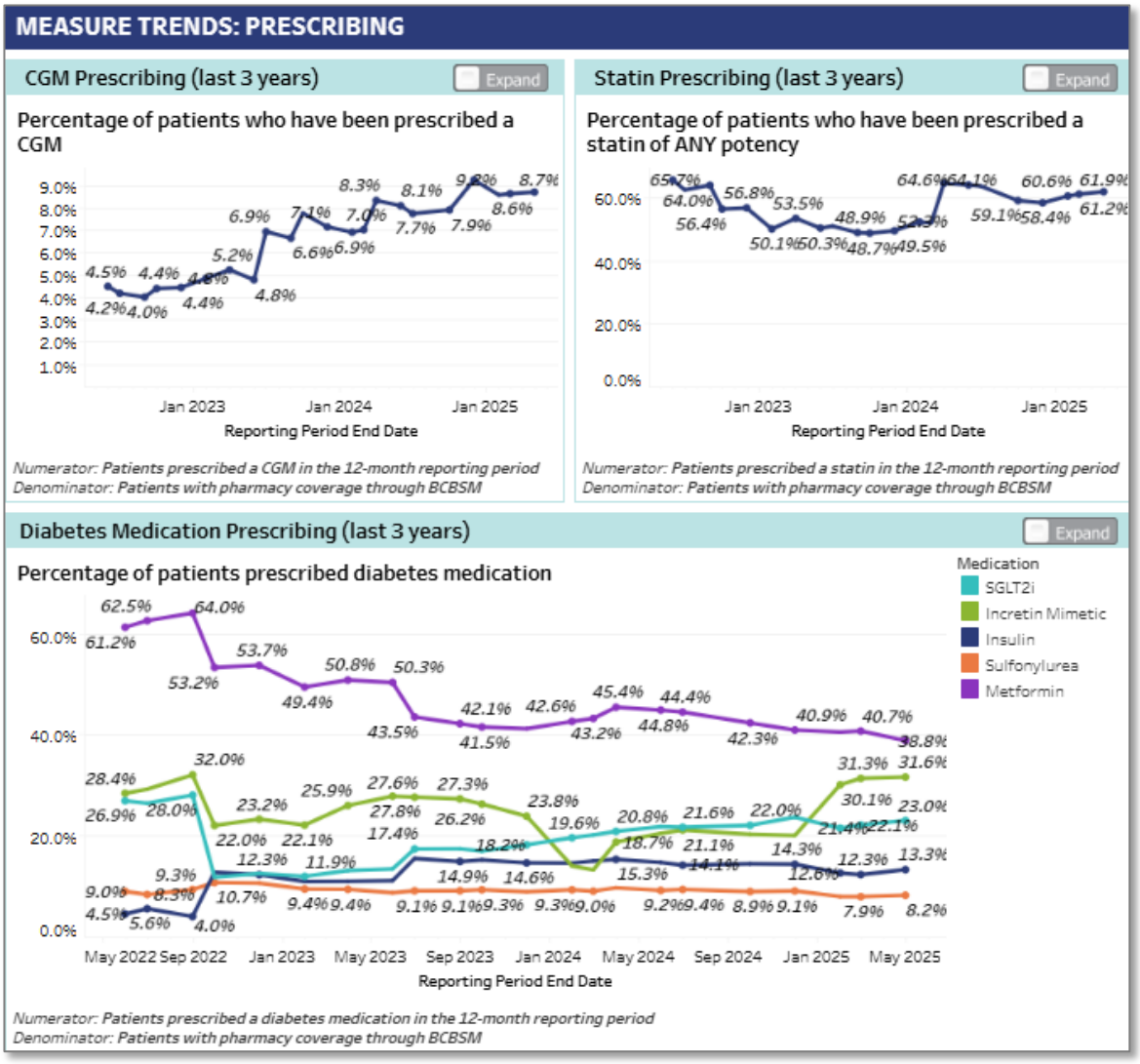
- Eye (Retinal) Exams (last 3 years)
- HbA1c Testing (last 3 years)



Measure Trends: Prescribing

Scroll down to view the Measure Trends: Prescribing reports.

- CGM Prescribing (last 3 years)
- Diabetes Medication Prescribing (last 3 years)



Data Completeness Report

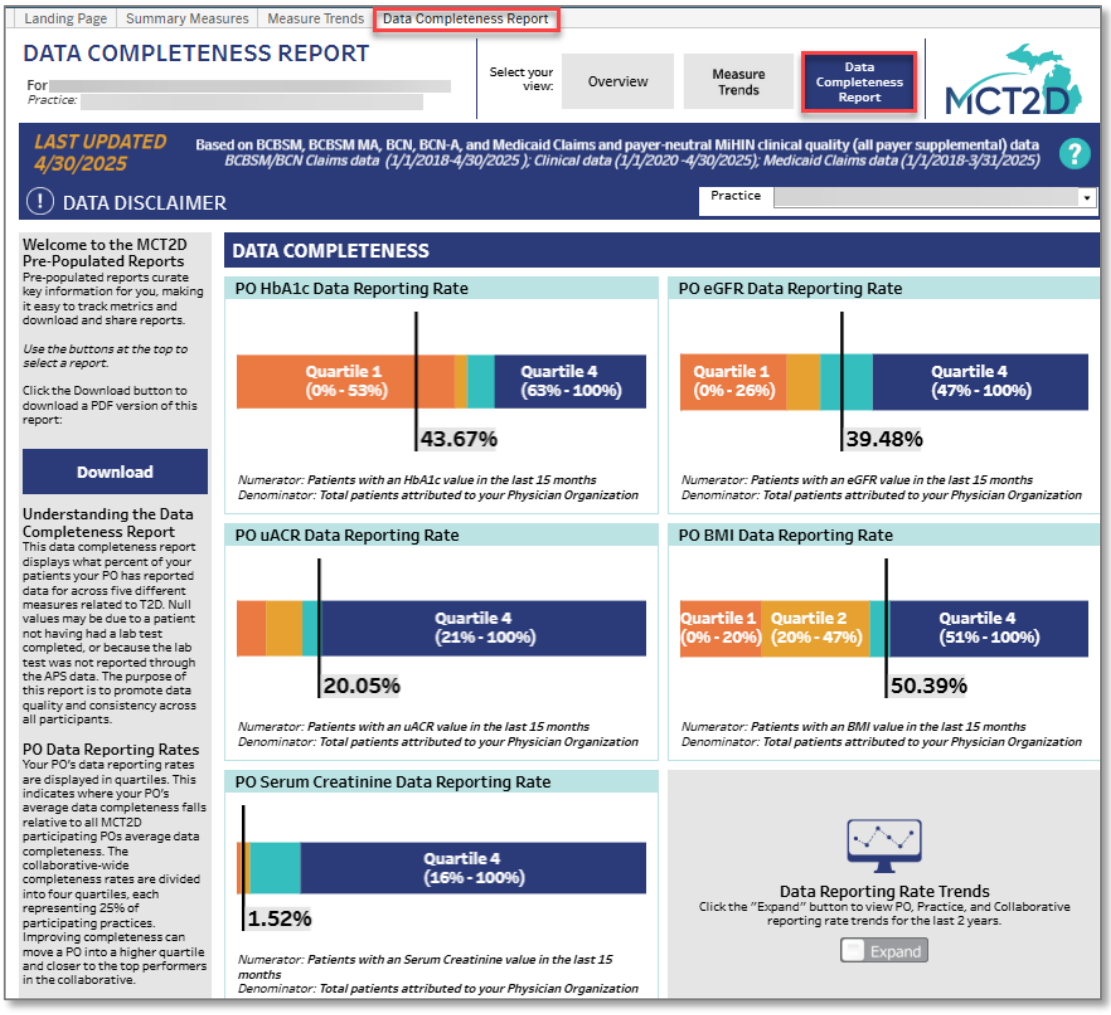
- Select the **Data Completeness Report** tab or button.
- Scroll down to view all Data Completeness Reports, as they extend below the first page.
- Click the **Download** button within the left panel to download a PDF of this report.

Understanding the Data Completeness Report

This report shows what percentage of your patients your PO has reported data for across five different measures related to Type 2 Diabetes (T2D). Null values may be due to a patient not having had a lab test completed, or because the lab test was not reported through the APS data. The purpose of this report is to promote data quality and consistency across all participants.

PO Data Reporting Rates

Your PO's data reporting rates are displayed in quartiles. This indicates where your PO's average data completeness falls relative to all MCT2D participating POs average data completeness. The collaborative-wide completeness rates are divided into four quartiles. each representing 25% of participating practices. Improving completeness can move a PO into a higher quartile and closer to the top performers in the collaborative.
Key Consideration: Quartile ranges are based on the completeness rates of all practices at the time of the report and may change with each refresh. Since quartile ranges depend on the data at the time of each report, avoid comparing quartiles across reports directly.



Data Completeness

The following bar graphs are included in the Data Completeness report:

- **PO HbA1c Data Reporting Rate**
- **PO eGFR Data Reporting Rate**
- **PO uACR Data Reporting Rate**
- **PO BMI Data Reporting Rate**
- **PO Serum Creatinine Data Reporting Rate**

Data Reporting Rate Trends - Completeness Trend Reports

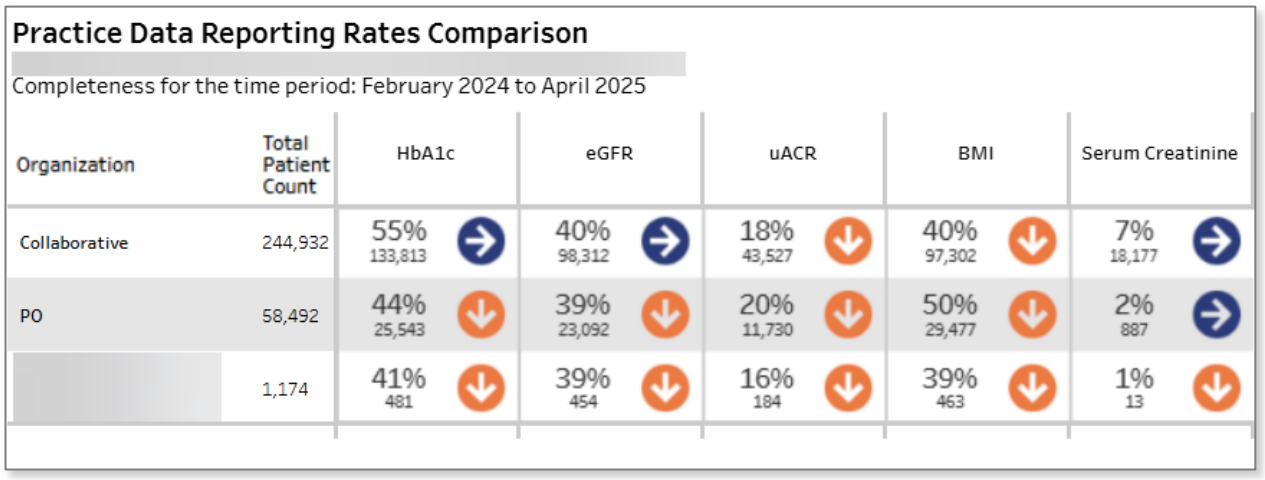
*Click the **Expand**/**Close** button to display or hide these reports.*

Click the **Expand** button to view PO, Practice, and Collaborative reporting rate trends for the last 2 years	
Click the **Close** button to hide reporting rate trends	

- **HbA1c Data Reporting Rate Comparison (last two years)**
- **eGFR Data Reporting Rate Comparison (last two years)**
- **uACR Data Reporting Rate Comparison (last two years)**
- **BMI Data Reporting Rate Comparison (last two years)**
- **Serum Creatinine Data Reporting Rate Comparison (last two years)**

Practice Data Reporting Rates Comparison

This table shows the current data reporting rates for the five measures, broken down by collaborative, PO, and individual practices within your PO. These rates reflect the percentage of patients who had a reported lab value within the past 15 months. The table also includes a trend arrow that indicates whether there has been a significant change in the organization's reporting rate since the previous data refresh.



Practice Data Reporting Rates Comparison

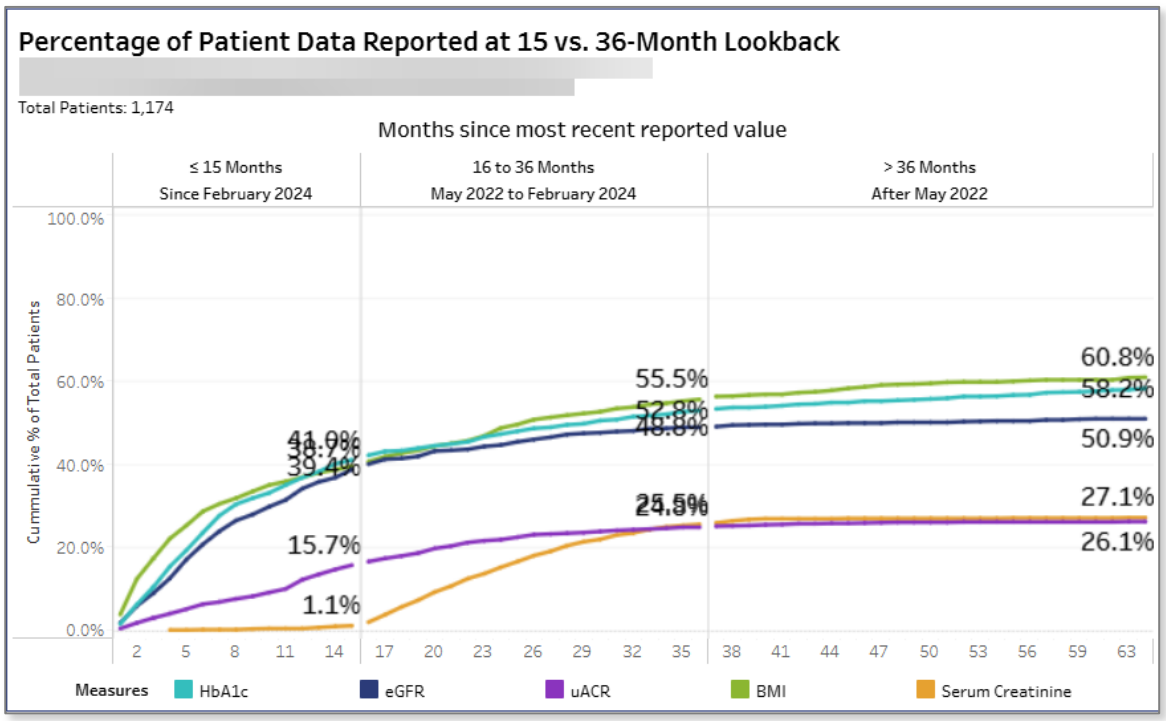
Completeness for the time period: February 2024 to April 2025

Organization	Total Patient Count	HbA1c	eGFR	uACR	BMI	Serum Creatinine
Collaborative	244,932	55% 133,813	40% 98,312	18% 43,527	40% 97,302	7% 18,177
PO	58,492	44% 25,543	39% 23,092	20% 11,730	50% 29,477	2% 887
	1,174	41% 481	39% 454	16% 184	39% 463	1% 13

Table Legend

Rate Increase/Decrease Symbol	Description
	Data reporting rate increased by >= 1 standard deviation of the collaborative's change in reporting rate since the last data refresh
	Data reporting rate has changed by < 1 standard deviation of the collaborative's change in reporting rate since the last data refresh
	Data reporting rate decreased by >= 1 standard deviation of the collaborative's change in reporting rate since the last data refresh
	Data reporting rate was not previously available for this practice

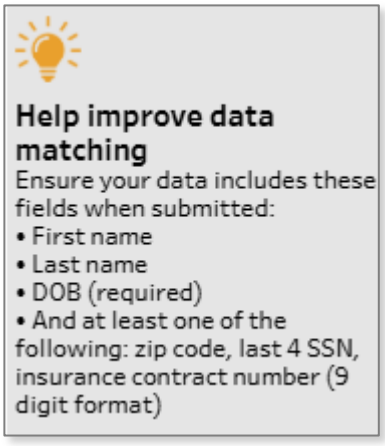
Percentage of Patient Data Reported at 15 vs. 36-Month Lookback



Help improve data matching

Ensure your data includes these fields when submitted:

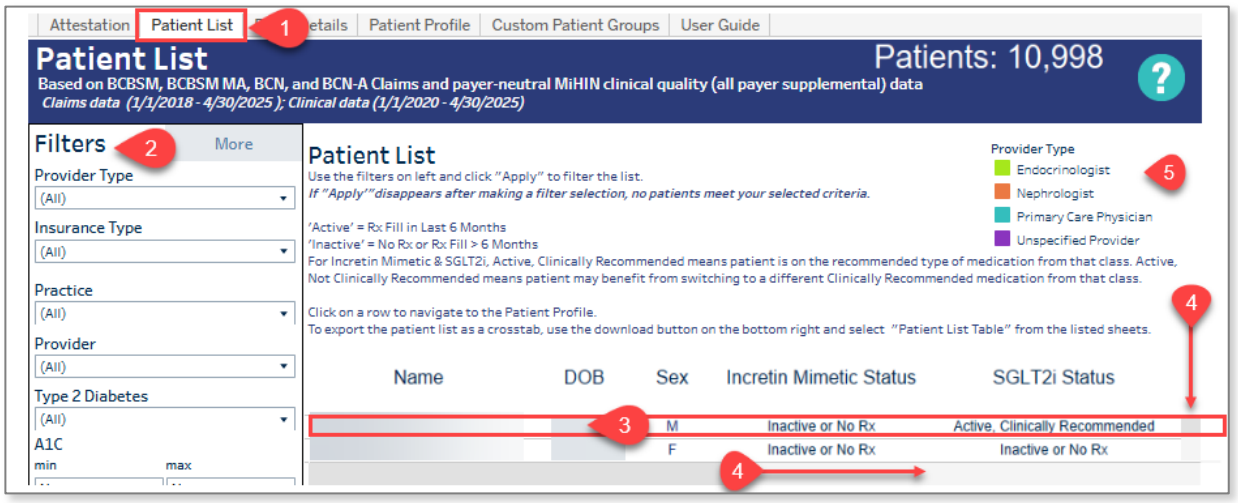
- First name
- Last name
- DOB (required)
- And at least one of the following: zip code, last 4 SSN, insurance contract number (9 digit format)



Legacy Patient List Tab

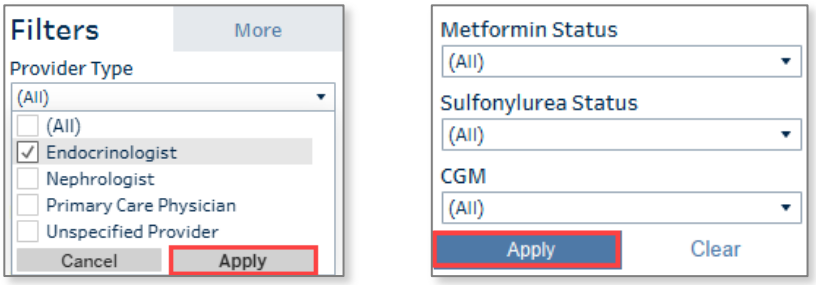
To navigate to the legacy Patient List Tab, follow the log in instructions in *Logging in to the Dashboard from the MDC Home Page*.

1. The Patient List tab includes data for all patients in the MCT2D Data Dashboard.
2. To filter the Patient List, select from the left panel filters and click **Apply** at the bottom of the filters panel.
   Note: The Provider Type filter has its own Apply button within the dropdown menu.
3. Click on a row in the Patient List to display all information for that patient within the **Patient Profile** view.
4. **Scroll** the Patient List to view more information:
   - Click the vertical scroll bar on the right side of the window and scroll down to view more patients.
   - Click the horizontal scroll bar at the bottom of the window and scroll from left to right to view all patient characteristics.
5. The **Provider Type legend** at the top of Patient List indicates the Specialty Type by color, which corresponds to the color of the square icon at the end of each patient row.



6. The Patient List Filters panel has two Apply buttons: one is within the Provider Type dropdown menu, and the other is at the bottom of the Filters panel:

Provider Type Apply button ***Filters Apply button, bottom left***

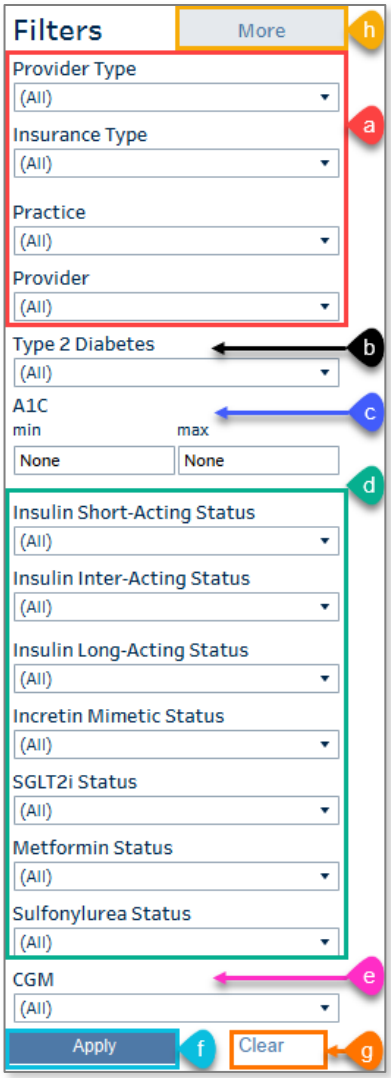


Patient List Filters

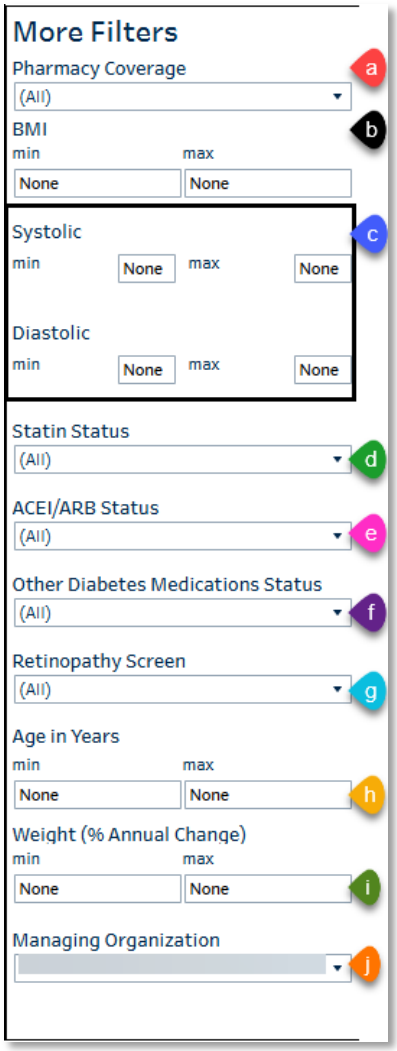
1. Choose from the **Filters** on the left side of the window to identify a population of interest. All your choices will persist as you view data in other tabs, with one exception – they will not persist onto the Renal Details tab.
   a. Select options in the dropdown list to filter by **Provider Type**, **Insurance Type**, **Practice**, and **Provider**.
   b. **Type 2 Diabetes**.
      - For Type 2 Diabetes, choose from the following options: All/Yes/No.
        - All: Any with Type 2 Diagnosis or HbA1c ≥ 6.5 or on a diabetes medication.
        - Yes: Limited to diagnosis codes that are specific to Type 2 Diabetes.

      Note: Some patients are included in the dashboard based on HbA1c levels and may not have a Type 2 diabetes diagnosis.
      Note: See What do the different Type 2 Diabetes Diagnosis filter options mean? for more information.
   c. **A1c** filter options. **None** or type in Min and/or Max values.
   d. Select the medication filters for **Insulin Short-Acting**; **Insulin Inter-Acting**; **Insulin Long-Acting**; **Incretin Mimetic**; **SGLT2i**; **Metformin**; and **Sulfonylurea** by clicking the dropdown list for each to choose from these options:
      - All
      - Active (returns patients who have had the Rx filled within last 6 months of the Claims end date)
      - Inactive Rx or no Rx (No Rx or Rx Fill > 6 Months)
      - For Incretin Mimetic; SGLT2i only:
        - Active Rx, Clinically Recommended – patient is on the recommended type of medication from that class.
        - Active Rx, Not Clinically Recommended – patient may benefit from switching to a different Clinically Recommended medication from that class.

      Note: Default is all options are selected. See What do the different Rx filter options mean? for more information.
   e. **CGM** – Continuous Glucose Monitor. All/Yes/No
   f. Click **Apply** to apply selected filters.
   g. Click **Clear** to clear all selected filters and start a new search. If no results are returned for the current filter selections, no patients meet your selected criteria; therefore, the Apply button will not display.
   h. Click the **More/Less** toggle at the top of the Patient List Filters panel to view or hide the More Filters panel.



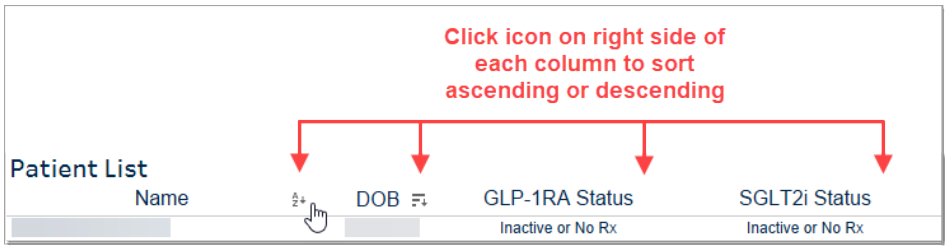
2. The **More Filters** panel includes these additional filters:
   a. **Pharmacy Coverage**. All/Yes/No/Unknown
   b. To set the **BMI** filter, choose either Default (None) or type in the Min and/or Max values.
   c. **Systolic and Diastolic blood pressure**. Choose either Default (None) or type in the Min and/or Max values. These filters work similar to the Age, A1C, BMI, and Weight (% Annual Change) filters. However, users should check the ranges against the two most recent blood pressure readings.
   d. **Statin Status** filters offer the same options as all other medication filters. Select from the following:
      - All
      - Active (returns patients who have had the Rx filled within last 6 months of the Claims end date)
      - Inactive or No Rx
   e. **ACEI/ARB Status** filters offer the same options as all other medication filters.
   f. **Other Diabetes Medications Status** filter has the same options as the other medication filters. Includes any diabetes medication included in the dashboard, but without a stand-alone filter (e.g., Combo DM Med, α-glucosidase-I, Amylin Analog, DPP4-I, Glinide, Thiazolidinedione).
   g. **Retinopathy Screen**. All/Yes/No
   h. **Age in Years**. Set filter for Age by choosing either Default (None) or typing in the Min and Max values
   i. **Weight (% Annual Change)**. Set filter by choosing either Default (None) or typing in the Min and/or Max values.
   j. **Managing Organization**. Select from dropdown list to filter by managing organization.



Note: If no results are returned for the current filter selections, no patients meet your selected criteria; therefore, the Apply button will not display. Click the Clear button at the bottom of the Filters panel to clear your selections and start a new search.

Sort Patient List Data

Sort the Patient List by hovering over the right side of any column heading, then click to toggle the **Sort** icon in ascending/descending order ( ).

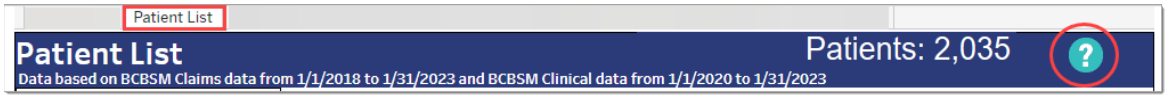


View an individual patient's health measures

To view an individual patient's results, click anywhere on the row. You will be redirected to the *Patient Profile Tab*.

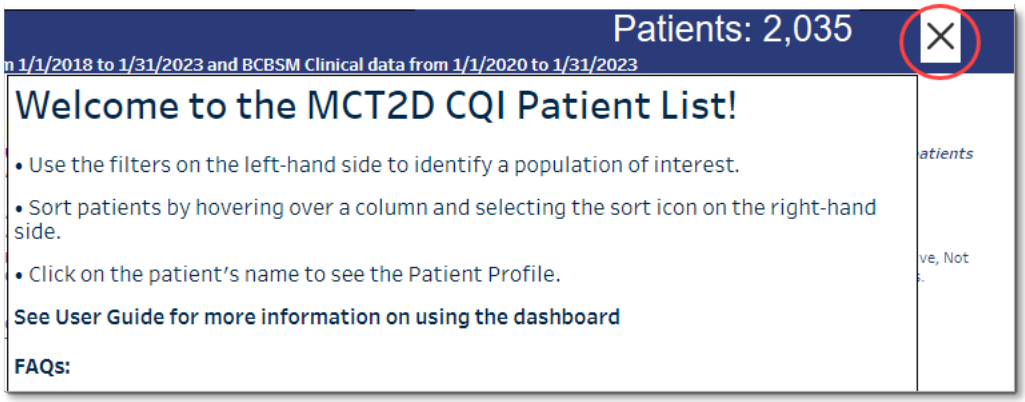
Legacy Data and Dashboard FAQs

1. Click the **Help** icon in the upper right corner of the Patient List, Renal Details, Patient Profile, or Custom Patient Groups windows to view additional information and FAQs.



   The **Welcome to the MCT2D CQI Patient List!** window will open, providing an overview of tab features and data FAQs.

2. To return to the previous page, close the window by clicking Close ( ) in the upper right corner.



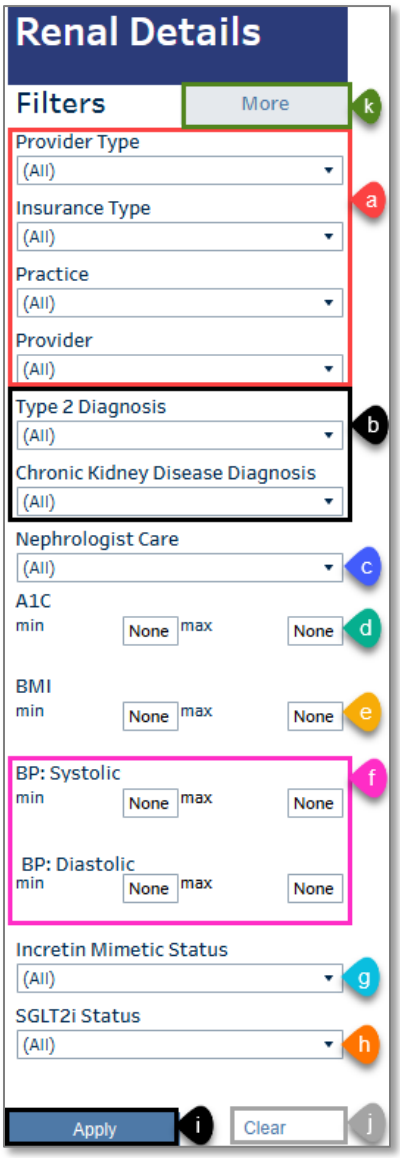
3. **MCT2D CQI Data FAQs**

- What do Null/No Entries mean?
    - Null/No Entries indicate that the patient does not have a valid entry for this field in our database. Please note, we do not have complete medical histories for every patient; relevant information may be available through other sources (e.g., internal patient records).
- How do I include patients with Null records after filtering on the field?
    - Nulls are special values that need to be specifically included in your search when using range filters. To include Null records for a field, enter 'Null' or 'Missing' as either the minimum or maximum value. To return only patients with Null values, enter 'Null' or 'Missing' as both the minimum and maximum values.
- What do the different Type 2 Diabetes Diagnosis filter options mean?
    - 'All' returns patients with a Type 2 Diagnosis or HbA1c > 6.5.
    - 'Yes' returns patients with a Type 2 Diabetes diagnosis.
    - 'No' returns patients who do not have a Type 2 Diagnosis but have an HbA1c value > 6.5 in their history.
- What do the different Rx filter options mean?
    - 'All' returns all patients.
    - 'Active ' returns patients who have had the Rx filled within 6 months of the Claims end date.
    - 'Active, Clinically Recommended' returns patients who have had the Rx filled within 6 months of the Claims end date and who are on preferred medications.
      Note: Clinically Recommended refers to Incretin Mimetic/SGLT2i medications that have proven superior benefits in preventing diabetes complications.
    - 'Active Rx, Not Clinically Recommended' returns patients who have had the Rx filled within 6 months of the Claims end date and who are on non-preferred Incretin Mimetic/SGLT2i.
    - 'Inactive or No Rx' returns patients who are not actively on the Rx.

Legacy Renal Details Tab

The Renal Details tab, shown below, has much of the same functionality as the Patient List tab. For an overview of the features, go to *Legacy Patient List Tab.*

1. To filter the Renal Details, select from the **Filters** on left panel and click **Apply** at the bottom of the Filters panel.



   a. Select desired **Provider Type**, **Insurance Type**, **Practice,** and **Provider** within the dropdown lists.
      - The Provider Type filter has its own **Apply** button within the dropdown menu.

        Note: Practice and Provider filters DO NOT persist between the Renal Details and Patient List tabs.

   b. Select from the dropdown lists for each Diagnosis type:
      - **Type 2 Diabetes Diagnosis** criteria are:
        - All: Any with Type 2 Diagnosis or HbA1c ≥ 6.5 or on a diabetes medication.
        - Yes: Limited to diagnosis codes that are specific to Type 2 Diabetes.
        - No: Some patients are included in the dashboard based on their HbA1c levels or medication history and they may not have a Type 2 diabetes diagnosis.

          Note: See What do the different Type 2 Diabetes Diagnosis filter options mean? for more information.

      - **CKD Diagnosis** criteria are:
        - All: Any patient with or without a CKD diagnosis.
        - Yes: Limited to diagnosis codes that are specific to CKD.
        - No: Patients without CKD diagnosis.

   c. **Nephrologist Care** criteria are:
      - All: Any patient with or without history of nephrologist care.
      - Yes: Patients with history of nephrologist care.
      - No: Patients without history of nephrologist care.

d.-f. To set the filters for **A1c**, **BMI**, **BP: Systolic, and BP: Diastolic,** choose either Default (None) or type in Min and/or Max values.

g.-h. Select the medication filters for the status of **Incretin Mimetic** and **SGLT2i** by clicking the dropdown list for each medication to choose from:

- 'All' returns all patients.
- 'Active' returns patients who had the Rx filled within 6 months of the Claims end date.
- 'Active, Clinically Recommended' returns patients who have had the Rx filled within 6 months of the Claims end date and who are on preferred medications.
- 'Active Rx, Not Clinically Recommended' returns patients who have had the Rx filled within 6 months of the Claims end date and who are on non-preferred Incretin Mimetic/SGLT2i.
- 'Inactive Rx or No Rx' returns patients who are not actively on the Rx.

Note: For more information, see What do the different Rx filter options mean?

i. Click **Apply** to apply selected filters (excluding the Provider Type Apply).

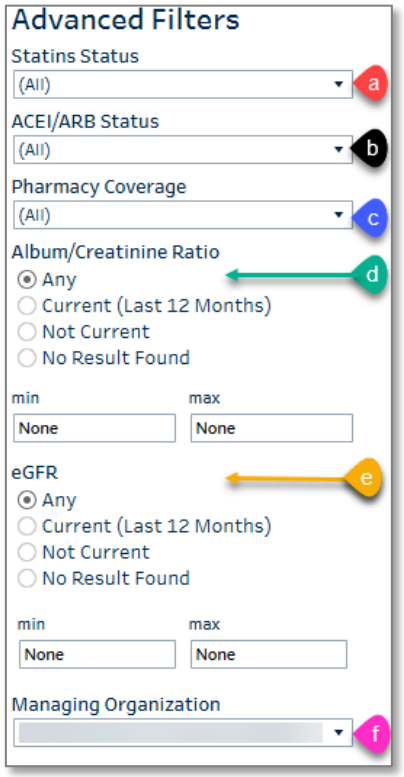
j. Click **Clear** at the bottom of the Renal Details Filters panel to clear selected filters.

k. Click **More** at the top of the Filters panel to view the Advanced Filters panel.

2. **Advanced Filters**. Select from the advanced filters to further refine a population of interest.

a. **Statins Status.** Select one of the following filters from the dropdown list.

- 'All' returns all patients.
- 'Active' returns patients who had the Rx filled within 6 months of the Claims end date.
- Inactive Rx or No Rx' returns patients who are not actively on the Rx.



b. **ACEI/ARB Status**. Last fill date of an angiotensin-converting enzyme inhibitor (ACEI) or angiotensin receptor blocker (ARB). Select from:

- All.
- Active (returns patients who have had the Rx filled within 6 months of the Claims end date).
- Inactive Rx or No Rx returns patients who are not actively on the Rx.

c. **Pharmacy Coverage**: All/Yes/No/Unknown.

d. **Albumin/Creatinine Ratio**. Select from: Any, Current, Not Current, No Result Found. Enter Min and/or Max values, if desired.

e. **eGFR**. Select from Any, Current, Not Current, No Result Found. Enter Min and/or Max values, if desired.

f. **Managing Organization**: Filter the Renal Details by Managing Organization, visible to certain users only.

Sorting the Renal Details List

Click the **Sort** icon ( ) to the right of each column heading to sort by that column in ascending or descending order.

Name. Ascending or descending by patient Last Name + First Name

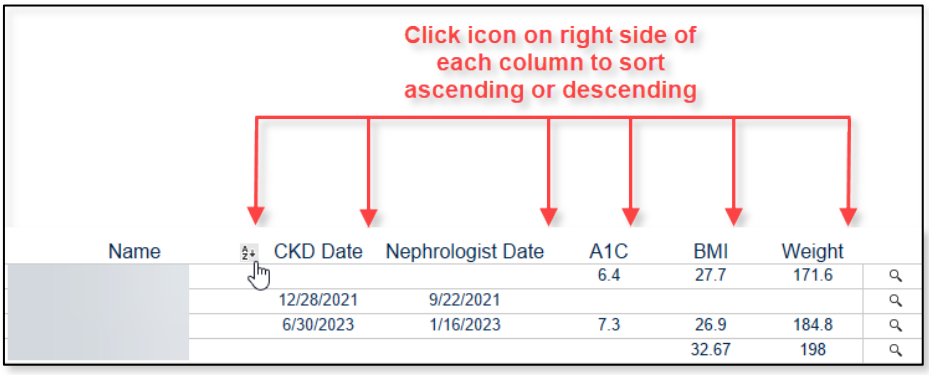
CKD Date. Ascending or descending by CKD within Name + NPI

Nephrologist Date. Ascending or descending by Nephrologist within Name + NPI

A1c. Ascending or descending by A1c

BMI. Ascending or descending by BMI

Weight. Ascending or descending by Weight



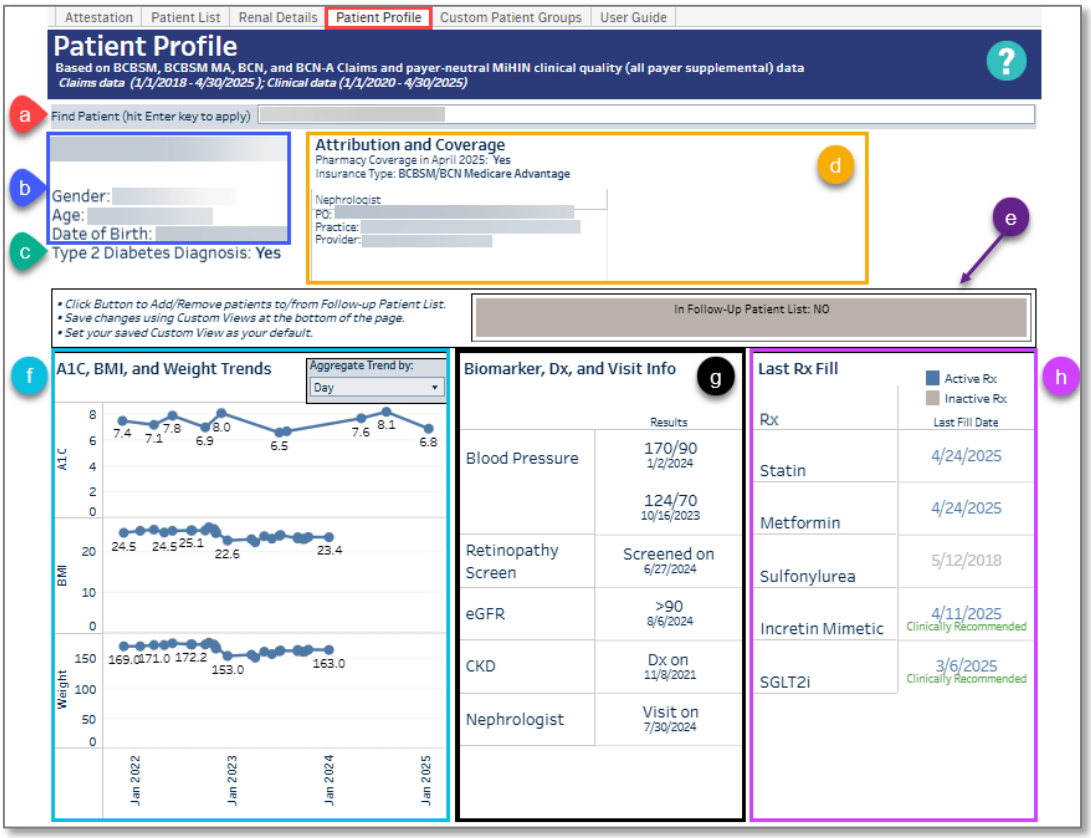
Renal Details Tooltips

Access the Renal Details Tooltip for each patient by hovering over the **Magnifying Glass** icon 🔍 in the last column of the Renal Details patient list (shown above).

Note: The Renal Details Tooltip contains less patient data than is included in the Patient Profile. See the Patient Profile for more extensive, downloadable information.

Legacy Patient Profile Tab

1. When you select an individual patient on the Patient List tab, you will be redirected to the Patient Profile tab for that patient, as shown below.
   a. **Find Patient**. Search for patients by typing their name in the **Find Patient** search bar in the upper left corner. This type-in feature minimizes the number of patients being filtered, which affects dashboard performance.
2. The Patient Profile tab includes the following information for each patient.
   b. Patient demographic data: **Name, Gender, Age, Date of Birth**
   c. **Type 2 Diabetes Diagnosis**: Yes or No
   d. **Attribution and Coverage**: Pharmacy Coverage, Insurance Type
      - Specialty Type (e.g., Nephrologist or Endocrinologist): PO, Practice, Provider
      - Primary Care Physician: PO, Practice, Provider
   e. **In Follow-Up Patient List**: Yes or No
   f. **A1c, BMI, Weight Trends** (by Day, Week, Month, Quarter, or Year)
   g. **Biomarker, Dx, and Visit Info**.
   Note: 'No Entries Found' indicates there is no record present.
      - Blood Pressure: most recent and previous Blood Pressure readings with dates.
      - Retinopathy Screen: indicates whether patient had a Retinopathy Screen and date of last screen. Retinopathy Screen criteria are based on HEDIS definition for diabetes eye exam: (i) Eye exam by eye care professional in measurement year; (ii) Eye exam with negative retinopathy by eye care professional in the year prior to the measurement



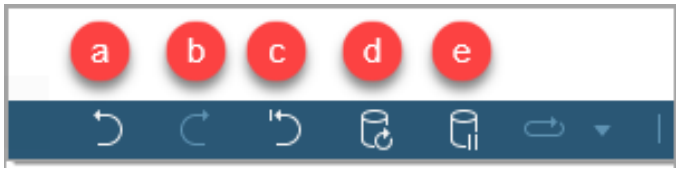
year; (iii) Bilateral eye enucleation any time during the member's history.

- CGM: Most recent date of any indicator of CGM use. If CGM not present, there is no record of a CGM prescription.
- CGM Sensor Days: number of sensor days in the last 12 months.
- eGFR – Estimated Glomerular Filtration Rate: Last service date and result.
- **Albumin/Creatinine ratio**: last service date and result value.
- **CKD**: date of CKD diagnosis.
- **Nephrologist**: most recent Nephrologist visit.

h. **Last Rx Fill**. Active/Inactive Diabetes Medications: black text indicates Active and gray text indicates Inactive.
   - Indicates any Active/Inactive prescriptions
   - Months Since Last Rx Fill (Date)

3. To select a different patient or a different report, click the **Undo** arrow on the bottom toolbar to return to the Patient List tab.
4. **Bottom Toolbar**. Use the bottom toolbar to refine your selections.
   a. **Undo my last action**. Each click of the Undo button will undo a single action – much like the Undo feature in Microsoft Word.
   b. **Redo my last action** allows you to redo the last undo action.
   c. **Reset view** resets the window to the default view.
   d. **Refresh data in this view** will refresh the data in your browser window, retaining all selections.
   e. **Pause data queries while applying actions / Complete updates made while paused**. Click **Pause data** to apply actions without refreshing the browser window. Click **Complete updates** to refresh the browser window after making all desired selections.

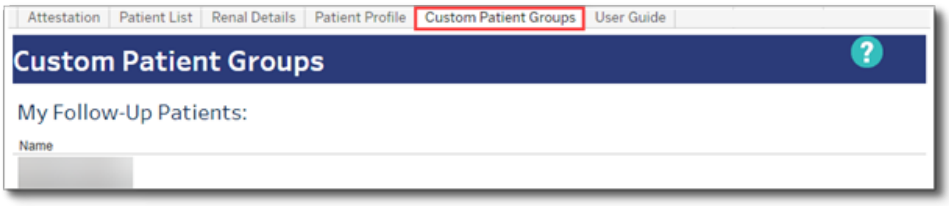
      Note: Any grayed-out icon is not available.



Legacy Custom Patient Groups Tab

The Custom Patient Groups tab allows users to see which patients are Included in their Follow-Up Patient List.

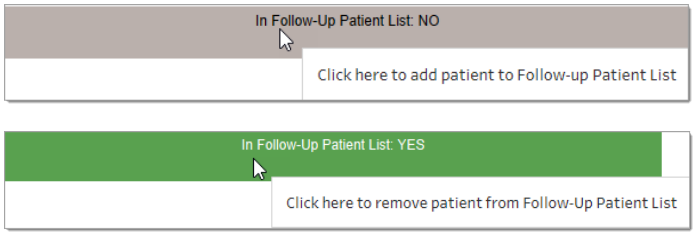
Users can click on a patient name to be redirected to the Patient Profile.



Adding Patients to Custom Patient Groups

The Patient Profile tab allows users to add patients to the Custom Patient Groups: Follow-up Patient List (Default: Empty).

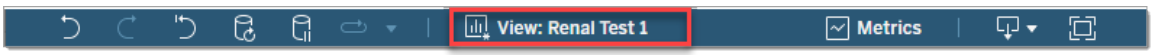
Users may include/exclude patients from these groups by clicking on the In Follow-Up Patient List button (gray indicates exclusion; green indicates inclusion).



*Note**: After adding/removing a patient from a group, users must save their changes using the Custom Views functionality on the toolbar.*

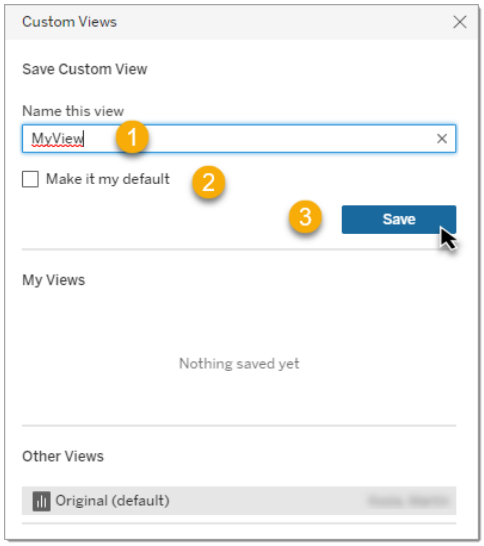
Saving Custom Views

Save custom views by clicking the **View** button on the bottom toolbar. Select the **View: <Viewname>** button, which will either list **Original** when viewing the default dashboard or will reflect the name of the Custom View you have loaded.



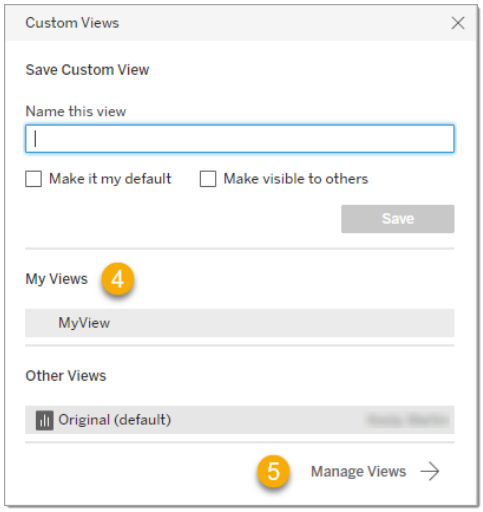
When the **Save Custom View** window opens, do the following.

1. Type the name of your Custom View into the **Name this view** field.
2. Check the **Make it my default** box if you wish to make it your default.
3. Click **Save** to save your Custom View.



4. Saved Custom Views will appear in the My Views section.

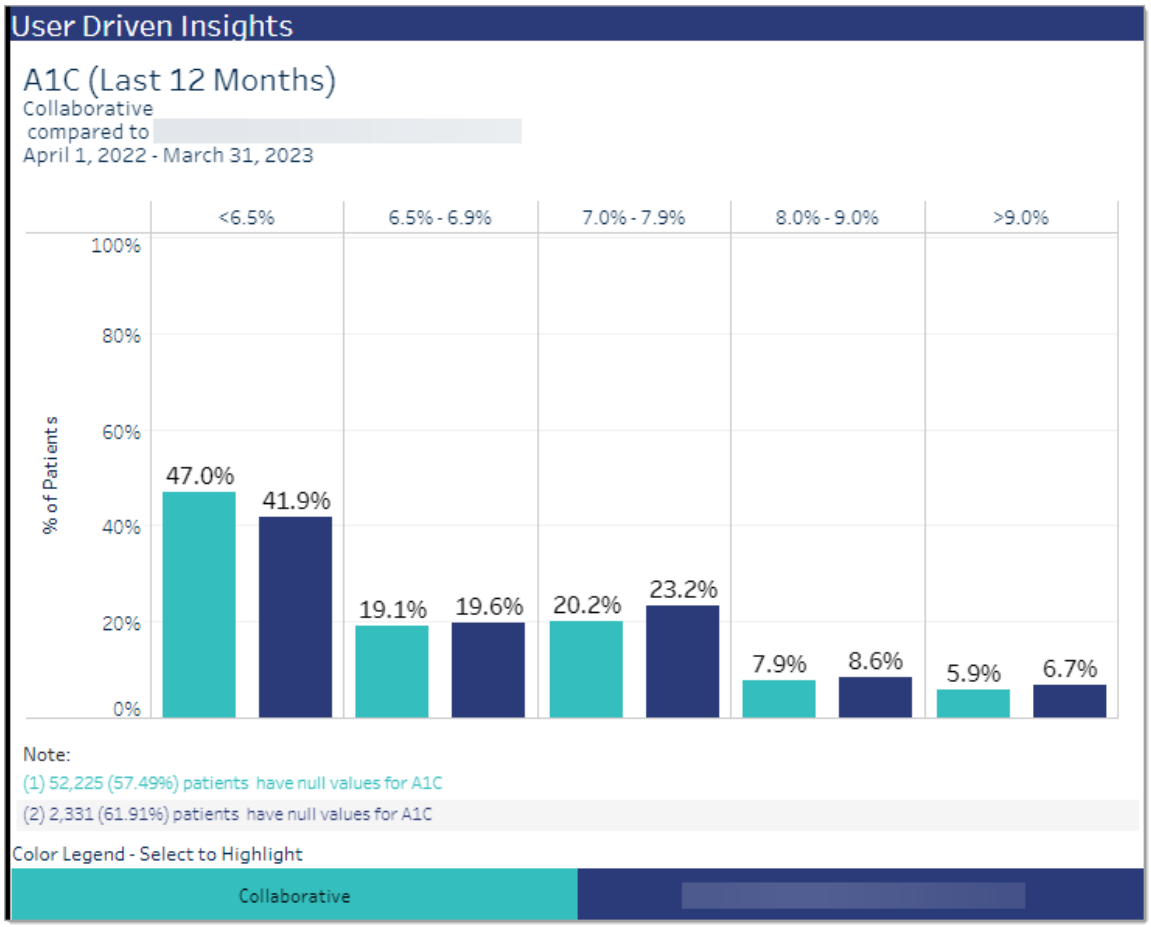
   Your default Custom View will load automatically when accessing the site. Otherwise, you will need to open your Custom Views by selecting them from My Views. You may have more than one Custom View saved at a time.
5. Select **Manage Views** to add new, modify, or delete your Custom Views.



User Driven Insights

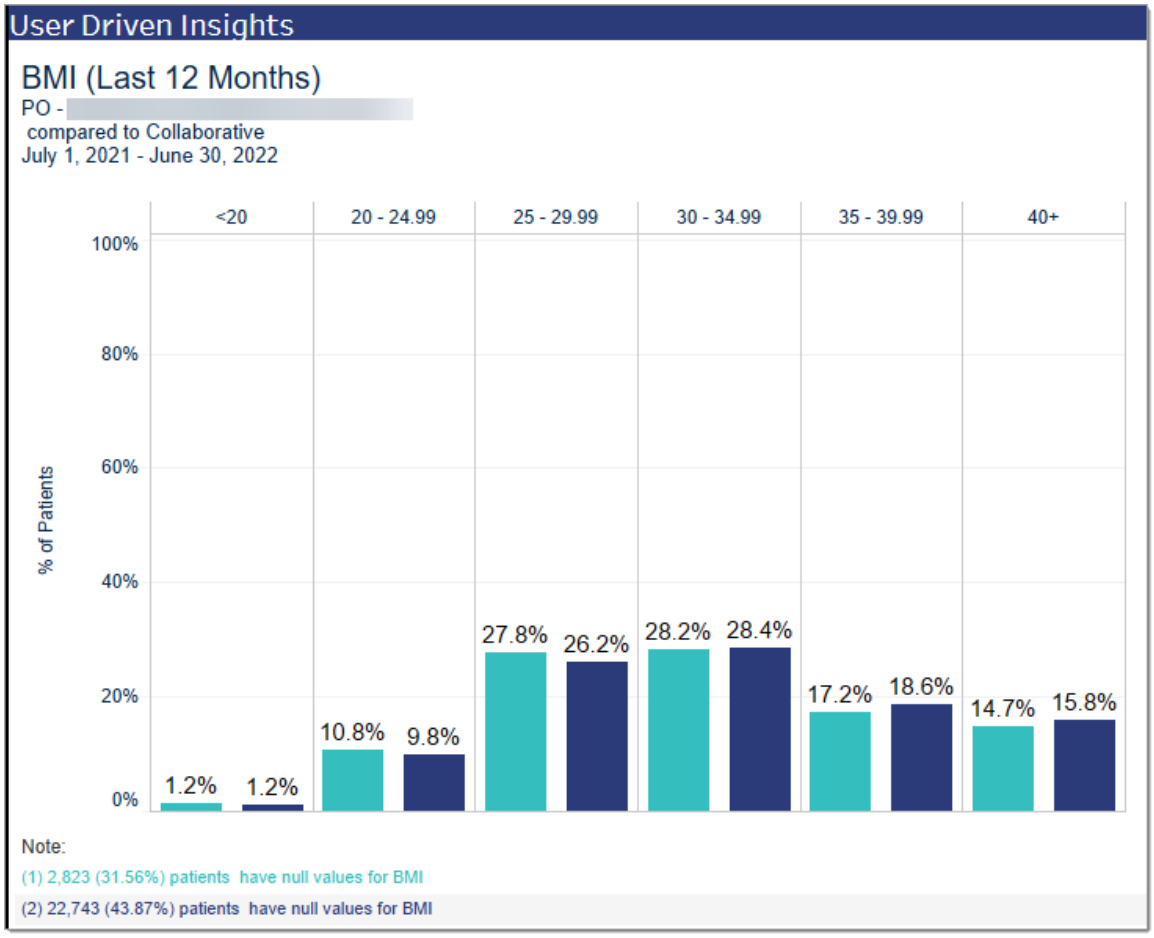
The User Driven Insights section allows users to view bar graphs, line graphs of distributions, comparisons, and trends across a variety of measures. Users can select their primary organization (My Organization) as well their comparison organization for any graph. The Comparison graph option also includes a set of pre-selected comparison organizations. When appropriate, users can drill into subpopulations within a metric. At any time, users can see their list of patients within that measure by clicking on a point within the graph. From there, users can select a specific patient to be taken to that patient's Patient Profile for a more detailed view.

A1C. This example shows a comparison of the average A1C values of a PO with those of the Collaborative using a Bar Graph display.



Note: *As of June 20, 2023, the cutoff values for the A1c buckets were revised to <6.5%, 6.5%-6.9%, 7.0%-7.9%, 8.0%-9.0%, >9.0%, as shown above, to correspond to Current Procedural Code (CPT) categories.*

BMI. This example shows a comparison of the average BMI values of a PO with those of the Collaborative using a Bar Graph display.



CGM

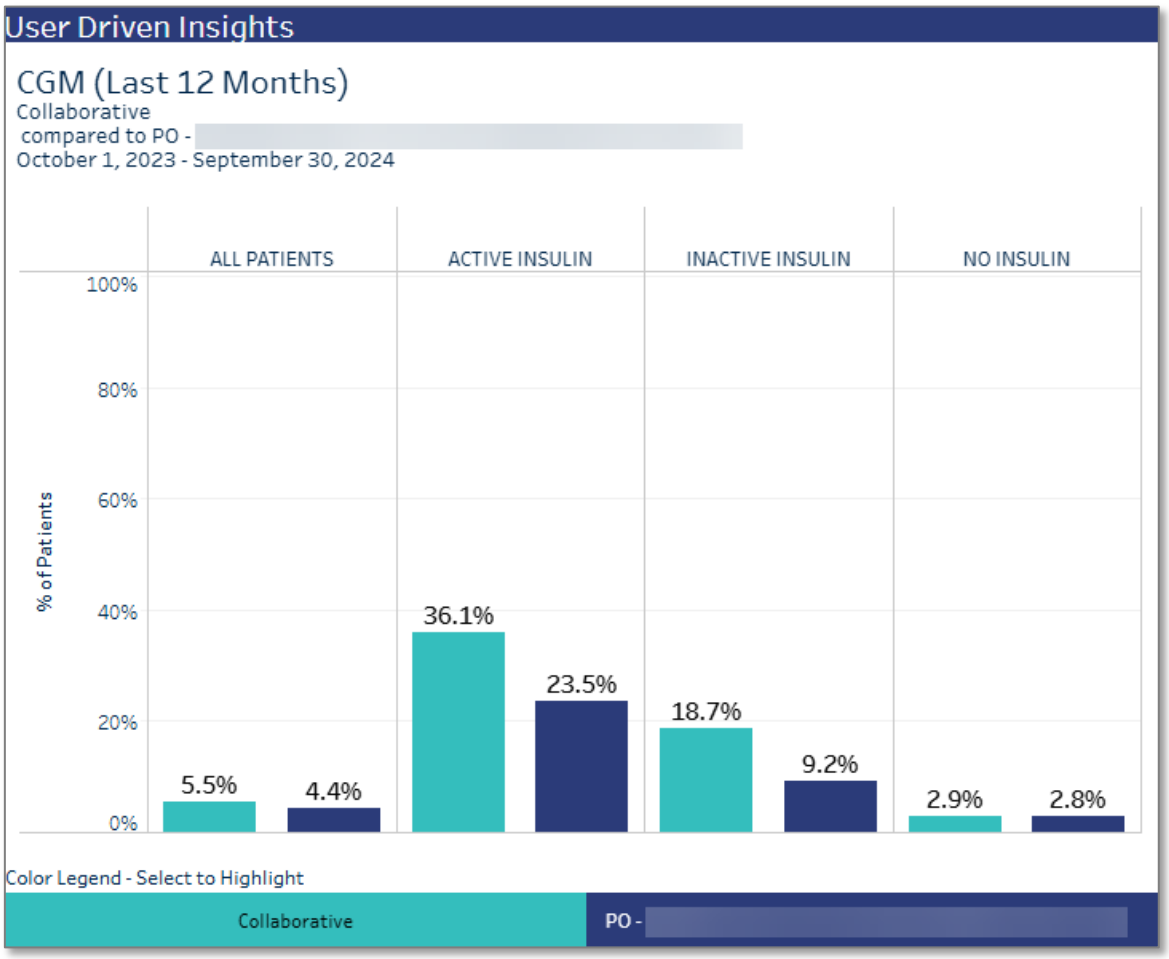
CGM (Continuous Glucose Monitor).

Numerator: Patients with CGM during the 12-month reporting period
Denominator: Four different denominators are used:

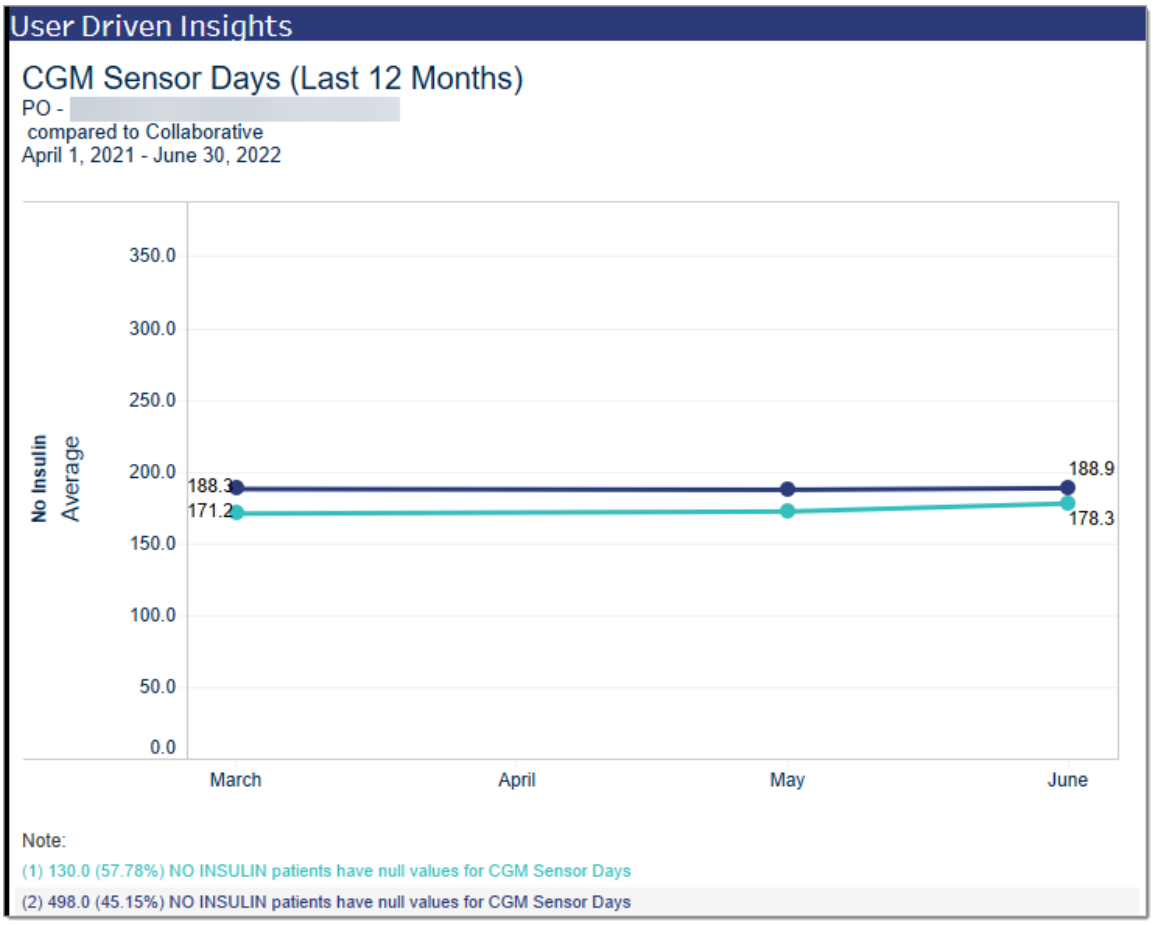
1. All Patients
2. Patients with Active Insulin (Insulin fill in last 6 months)
3. Patients with Inactive Insulin (History of Insulin, but no fills in last 6 months)
4. No Insulin

Available Graphs: Bar Graph; Bar Graph of Comparisons; Trend Line

This example compares a PO organization's percentage of patients with a CGM with the Collaborative's percentage.



CGM Sensor Days. This example compares the average CGM Sensor Days of patients who are not taking insulin (Population Drill-Down, No Insulin) of a PO with those of the Collaborative using a Trend graph.

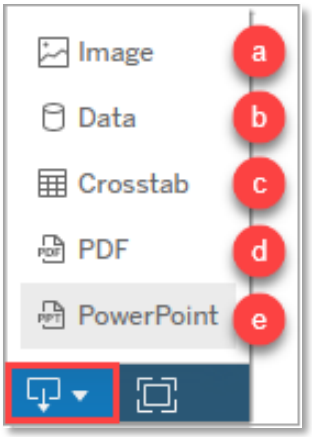


Exporting Data and Visualizations

1. To download data and visualizations, click the **Download** icon on the right side of the bottom toolbar. Choose a format from the Download popup window: Image, Data, Crosstab, PDF, or PowerPoint.
   - If a download format is grayed out, it is not available.
   - Downloads will ONLY contain data if the graph is currently visible.
   - Only sheets that are currently visible will contain content when downloading Crosstabs, PDFs, or PowerPoints. We recommend using the default Image, Data, PDF, and PowerPoint options for downloads.

   a. **Image**. When you select **Image**, a PNG file format will be generated.

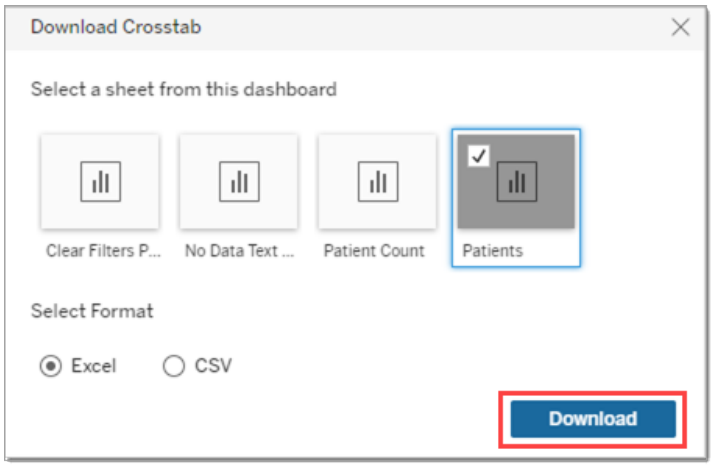
   b. **Data.** If the data download option is grayed out, the user should click on the area of the dashboard that they want to download the data from. Different sections of the dashboard generate different data feeds.



      - **Patient List** tab. The Data and Crosstab download options include two data sheets: Patient List and Patient Count. Select either of these, then select **Download**.
        Note: For the Patient List tab, only the Patient Count and Patient List sheets are relevant.
      - **Patient Profile** tab. Click the **Download** icon on the bottom right side of the window and choose a format to download.

        Note: Users are only able to download the summary level data used to generate the views. The fields available in the Data Download are determined by Tableau. They typically only include the information Tableau needs to create the visualization. This may not include key identifiers like Patient Name and may not include user-friendly field names.
      - **Summary Measures** tab. Includes multiple feeds and graphs. We recommend using the default Image, Data, PDF, and PowerPoint options when downloading.

   c. **Crosstab.** When you select Crosstab, a popup window will display listing the underlying sheets that make up the current page. Select the sheet of interest and then click **Download**.



   d. **PDF**. When you select PDF, a popup window will display options for which View to download (This View, Specific Sheets from this dashboard, Specific Sheets from this workbook, Scaling, Page Size, and Orientation).

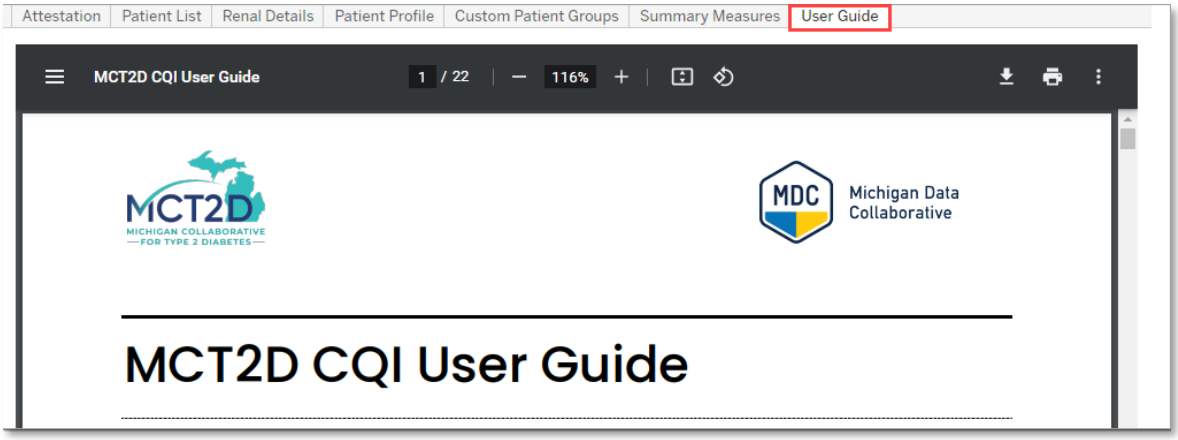
   e. **PowerPoint**. When you select PowerPoint, a popup window will display options for which View to download (This View, Specific sheets from this dashboard, Specific sheets from this workbook).

Note: Some sheets and Views will appear in the Crosstab and PDF download windows that are integral to dashboard functionality, however, they do not contain relevant information. For example, on the Patient List tab the download options 'Clear Filters Patient List' and 'No Data Text Patient List' appear, however, their use will be minimal.

2. Using Windows Explorer, navigate to the location where you would like to save the downloaded file on your PC.
3. To log out, click Close  in the upper right corner of the tab.

User Guide Tab

The MCT2D CQI User Guide Includes descriptions of the dashboard components, instructions for using the features, and detailed information about the data. The Guide can be found on the User Guide tab of the MCT2D Data Dashboard.



Additional Documentation

MCT2D Patient Population Denominator & Numerator Descriptions

The *MCT2D Patient Population Denominator & Numerator Descriptions* document describes the denominator and the numerator for each of the MCT2D Summary Measures and the MCT2D Patient Profile (Patient Characteristics, Labs, and Medications).

PO, Practice, and Region Crosswalk

See the *PO, Practice, and Region Crosswalk* to see which region your PO or practice corresponds to. The seven Regions are: Badger, Black Bear, Blue Jay, Bluegill, Gray Wolf, Riverwalk Pier, Sleeping Bear Dunes.

Release Notes

For updates on new releases of MCT2D data, see *MCT2D CQI Release Notes*.

Appendix A: Summary Measures Comparison Chart

The following table lists the comparison organizations each type of user can select.

User Type	My Organization (Selection 1):	Comparison Organization (Selection 2):
Practice User	My Practice	Collaborative
		PO of my Practice
		Providers in my Practice
		Region of my Practice
		Cohort of my Practice
		Collaborative
	Provider in my Practice	PO of my Practice
		My Practice
		Other Providers in my Practice
		Region of my Practice
		Cohort of my Practice
		Collaborative
PO User	My PO	Practices in my PO
		Providers in my PO
		Regions in my PO
		All Cohorts
		Collaborative
	Practice in my PO	My PO
		Other Practices in my PO
		Providers in selected Practice
		Region of selected Practice
		Cohort of selected Practice
		Collaborative
	Provider in my PO	PO of selected Provider
		Practice of selected Provider
		Other Providers in selected Provider’s Practice
		Region of selected Provider’s Practice
		Cohort of selected Provider's Practice
		Collaborative
	Cohort (user can select any cohort)	My PO
		Practices in my PO
		Providers in my PO
		Regions in my PO
		Other Cohorts