

# Diabetic Supplies Access Group

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## Health Status Outcomes Summary

No changes in beneficiary health outcomes resulting from the Medicare Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS) Competitive Bidding Program have been observed to date.

These materials contain the mortality and morbidity rates for one group of beneficiaries being monitored: the diabetic supplies access group. Utilizer Groups are composed of Medicare beneficiaries who have a claim for the product in the month of observation or any of the previous three months. Access Groups include beneficiaries who are likely to use the product and are determined by whether a beneficiary has a condition related to product use. Note that the diabetic supplies access group comprises beneficiaries who are likely to need diabetic supplies.

The health outcomes being measured are deaths, hospitalizations, emergency room visits, physician visits, admissions to skilled nursing facilities, average number of days spent hospitalized in a month, and average number of days in a skilled nursing facility in a month.

To control for historical trends, each competitive bidding area (CBA's) historical baseline for each rate is provided, beginning in January 2011. Historical rates for both Round 2 CBAs and non-CBAs are provided for each of the four DME MAC regions to provide context for the Round 1 Recompete CBA rates. The rates in Round 1 Recompete CBAs continue in line with historical rates and they also track closely with rates in non-competitive bid regions.

Note that mortality and morbidity rates generally display seasonal trends. The first quarter of each year typically has elevated rates of mortality and morbidity; however, the trends generally mirror past seasons and are closely matched by the non-competitive bid regions.

Additionally, rates that appear more variable tend to be based on a smaller number of beneficiaries. For example, the Utilizer Groups have fewer beneficiaries than the Access Groups, so rates for the Utilizer groups tend to be more variable.

### **\*IMPORTANT\***

This update incorporates changes to our monitoring approach that commenced at the end of the Round 1 Rebid program on December 31, 2013, and due to the availability of complete data for the first full year of the Round 1 Recompete program that was implemented January 1, 2014. These changes include:

- Monitoring usage and health outcomes related to six additional product categories (Transcutaneous Electric Nerve Stimulation (TENS), Nebulizers, Infusion Pumps, Commode Chairs, Seat Lifts, and Patient Lifts) that were introduced under Round 1 Recompete. We monitor usage and health outcome rates in six corresponding utilizer groups, and seven access groups. For the infusion pump product category, we monitor rates in two separate access groups.

- Monitoring both Round 1 Recompete and Round 2 using the list of Healthcare Common Procedure Coding System (HCPCS) codes that are covered by Round 1 Recompete.
- Comparing trends between the three groups of beneficiaries (mentioned above) in Round 2 and Round 1 Recompete CBAs, instead of Round 1 Rebid CBAs.

## Introduction

Folder Name: Diabetes\_Access\_Group\_Thru\_Jun\_2015

Upload Date: 10/1/2015

Observation Period: 7/1/2011 to 6/30/2015

Claims Processed Through: 10/9/2015

Beneficiary Enrollment Through: September 2015

Data Types: Original Medicare (Part A and Part B) Claims; Medicare Enrollment Data

Purpose: To summarize mortality and morbidity outcomes in the diabetic supplies access group in Round 1 RC and Round 2 CBAs and non-competitive bid regions aggregated at the DME region level.

Each CSV file in this folder refers to a specific outcome of interest. Each of the outcomes is defined in the Specifications section.

## Specifications

### Study Population and Definitions

- Access Group: Beneficiaries with a claim that indicates eligibility and who were living in a ZIP code in a Round 1 RC or Round 2 CBA or non-competitive bid region in the given month or any of the prior three months.<sup>1</sup> Eligibility is determined by a beneficiary's health conditions, as defined by any of the following ICD-9 diagnosis codes:
  - 24900 Secondary diabetes mellitus without mention of complication, not stated as uncontrolled, or unspecified
  - 24901 Secondary diabetes mellitus without mention of complication, uncontrolled
  - 24910 Secondary diabetes mellitus with ketoacidosis, not stated as uncontrolled, or unspecified
  - 24911 Secondary diabetes mellitus with ketoacidosis, uncontrolled
  - 24920 Secondary diabetes mellitus with hyperosmolarity, not stated as uncontrolled, or unspecified
  - 24921 Secondary diabetes mellitus with hyperosmolarity, uncontrolled
  - 24930 Secondary diabetes mellitus with other coma, not stated as uncontrolled, or unspecified
  - 24931 Secondary diabetes mellitus with other coma, uncontrolled

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<sup>1</sup> Source:

- [Round 1 RC CBAs](#)
- [Round 2 CBAs](#)

- 24940 Secondary diabetes mellitus with renal manifestations, not stated as uncontrolled, or unspecified
- 24941 Secondary diabetes mellitus with renal manifestations, uncontrolled
- 24950 Secondary diabetes mellitus with ophthalmic manifestations, not stated as uncontrolled, or unspecified
- 24951 Secondary diabetes mellitus with ophthalmic manifestations, uncontrolled
- 24960 Secondary diabetes mellitus with neurological manifestations, not stated as uncontrolled, or unspecified
- 24961 Secondary diabetes mellitus with neurological manifestations, uncontrolled
- 24970 Secondary diabetes mellitus with peripheral circulatory disorders, not stated as uncontrolled, or unspecified
- 24971 Secondary diabetes mellitus with peripheral circulatory disorders, uncontrolled
- 24980 Secondary diabetes mellitus with other specified manifestations, not stated as uncontrolled, or unspecified
- 24981 Secondary diabetes mellitus with other specified manifestations, uncontrolled
- 24990 Secondary diabetes mellitus with unspecified complication, not stated as uncontrolled, or unspecified
- 24991 Secondary diabetes mellitus with unspecified complication, uncontrolled
- 25000 Diabetes mellitus without mention of complication, type II or unspecified type, not stated as uncontrolled
- 25001 Diabetes mellitus without mention of complication, type I [juvenile type], not stated as uncontrolled
- 25002 Diabetes mellitus without mention of complication, type II or unspecified type, uncontrolled
- 25003 Diabetes mellitus without mention of complication, type I [juvenile type], uncontrolled
- 25010 Diabetes with ketoacidosis, type II or unspecified type, not stated as uncontrolled
- 25011 Diabetes with ketoacidosis, type I [juvenile type], not stated as uncontrolled
- 25012 Diabetes with ketoacidosis, type II or unspecified type, uncontrolled
- 25013 Diabetes with ketoacidosis, type I [juvenile type], uncontrolled
- 25020 Diabetes with hyperosmolarity, type II or unspecified type, not stated as uncontrolled
- 25021 Diabetes with hyperosmolarity, type I [juvenile type], not stated as uncontrolled
- 25022 Diabetes with hyperosmolarity, type II or unspecified type, uncontrolled
- 25023 Diabetes with hyperosmolarity, type I [juvenile type], uncontrolled
- 25030 Diabetes with other coma, type II or unspecified type, not stated as uncontrolled
- 25031 Diabetes with other coma, type I [juvenile type], not stated as uncontrolled
- 25032 Diabetes with other coma, type II or unspecified type, uncontrolled
- 25033 Diabetes with other coma, type I [juvenile type], uncontrolled

- 25040 Diabetes with renal manifestations, type II or unspecified type, not stated as uncontrolled
- 25041 Diabetes with renal manifestations, type I [juvenile type], not stated as uncontrolled
- 25042 Diabetes with renal manifestations, type II or unspecified type, uncontrolled
- 25043 Diabetes with renal manifestations, type I [juvenile type], uncontrolled
- 25050 Diabetes with ophthalmic manifestations, type II or unspecified type, not stated as uncontrolled
- 25051 Diabetes with ophthalmic manifestations, type I [juvenile type], not stated as uncontrolled
- 25052 Diabetes with ophthalmic manifestations, type II or unspecified type, uncontrolled
- 25053 Diabetes with ophthalmic manifestations, type I [juvenile type], uncontrolled
- 25060 Diabetes with neurological manifestations, type II or unspecified type, not stated as uncontrolled
- 25061 Diabetes with neurological manifestations, type I [juvenile type], not stated as uncontrolled
- 25062 Diabetes with neurological manifestations, type II or unspecified type, uncontrolled
- 25063 Diabetes with neurological manifestations, type I [juvenile type], uncontrolled
- 25070 Diabetes with peripheral circulatory disorders, type II or unspecified type, not stated as uncontrolled
- 25071 Diabetes with peripheral circulatory disorders, type I [juvenile type], not stated as uncontrolled
- 25072 Diabetes with peripheral circulatory disorders, type II or unspecified type, uncontrolled
- 25073 Diabetes with peripheral circulatory disorders, type I [juvenile type], uncontrolled
- 25080 Diabetes with other specified manifestations, type II or unspecified type, not stated as uncontrolled
- 25081 Diabetes with other specified manifestations, type I [juvenile type], not stated as uncontrolled
- 25082 Diabetes with other specified manifestations, type II or unspecified type, uncontrolled
- 25083 Diabetes with other specified manifestations, type I [juvenile type], uncontrolled
- 25090 Diabetes with unspecified complication, type II or unspecified type, not stated as uncontrolled
- 25091 Diabetes with unspecified complication, type I [juvenile type], not stated as uncontrolled
- 25092 Diabetes with unspecified complication, type II or unspecified type, uncontrolled
- 25093 Diabetes with unspecified complication, type I [juvenile type], uncontrolled
- V5867 Long-term (current) use of insulin

- Round 1 RC CBAs: Includes all areas in which the competitive bidding policy was implemented for Round 1 RC
- Round 2 CBAs: Includes all areas in which the competitive bidding policy was implemented for Round 2
- Non-Competitive Bid Regions: Includes all regions nationally that are not part of Round 1 RC or Round 2 of competitive bidding

### **Outcome Definitions:**

- Death: As observed in the Medicare Enrollment Database
- Hospitalization: As indicated by the service date of Inpatient (IP) claim
- ER: As indicated by the service date of Outpatient (OP) claim with emergency room flag
- Physician Visit: As indicated by the service date of Carrier (PB) claim
- SNF Admission: As indicated by the date of admission to a skilled nursing facility (SNF)
- IP Days: As indicated by the dates on a beneficiary's IP claims
- SNF Days: As indicated by dates on a beneficiary's SNF claims