

eAppendix Table 1. Measures Used to Assess Primary Care Physician Performance

Measure Name	Description	Attribution Period ^a	Average Number of Events per Primary Care Physician ^b
PREVENTION			
Colorectal cancer screening	Percentage of adults aged 50-80 who had appropriate screening for colorectal cancer	1/1/2003-12/31/2004	5.5
Cervical cancer screening	Percentage of women aged 21-64 who received at least 1 Pap test during the previous 3 years	1/1/2003-12/31/2004	12.7
Chlamydia screening in women	Percentage of women ages 16-25 who had at least 1 test for chlamydia during the measurement year	1/1/2004-12/31/2004	2.6
CHRONIC			
Use of appropriate medications for people with asthma	Percentage of persistent asthmatics aged 5-56 who were appropriately prescribed medication (inhaled corticosteroids)	1/1/2004-12/31/2004	0.6
Comprehensive diabetes care—LDL screening	Percentage of members aged 18-75 with diabetes who had LDL screening performed	1/1/2004-12/31/2004	1.2
Comprehensive diabetes care—A1C testing	Percentage of members aged 18-75 with diabetes who had A1C test	7/1/2003-6/30/2004 plus 180 days	1.0
Comprehensive diabetes care—medical attention for nephropathy	Percentage of members aged 18-75 with diabetes with kidney disease monitored	1/1/2004-12/31/2004	1.9
Annual monitoring for patients on persistent medications—ACE inhibitors	Percentage of members aged 18 and older on persistent medications who received annual monitoring for specific drugs—ACE inhibitors	1/1/2004-12/31/2004	2.6
ACUTE			
Appropriate treatment for children with URIs	Percentage of children aged 3 months-18 years who were given a diagnosis of URI and were not dispensed an antibiotic prescription on or 3 days after the episode date	7/1/2003-6/30/2004 plus 3 days	3.0
Inappropriate antibiotic treatment for adults with acute bronchitis ^c	Percentage of otherwise healthy adults aged 18-64 with a diagnosis of acute bronchitis who inappropriately received antibiotics	1/1/2004-12/31/2004	0.8

ACE indicates angiotensin-converting enzyme; A1C, glycosylated hemoglobin; LDL, low-density lipoprotein; URIs, upper respiratory infections.

^aThe attribution period assumes a 2-year period of data available for the field test—1/1/2003 through 12/31/2004.

^bThe average is based on the group of physicians who had at least 1 quality event attributed to them for this measure.

^cLower performance is better for these measures, so they were subtracted from 1 before calculating the composite score.