# **Healthy People 2010 Operational Definition**

4-8. Increase the proportion of persons with type 1 or type 2 diabetes and chronic kidney disease who receive recommended medical evaluation and treatment to reduce progression to chronic renal insufficiency.

4-8a. Medical evaluation.

National Data Sources Centers for Medicare and Medicaid Services

Standard Analytic Files (SAF), CMS; U.S. Renal

Data System (USRDS), NIH, NIDDK.

State Data Sources Centers for Medicare and Medicaid Services

Standard Analytic Files (SAF), CMS; U.S. Renal

Data System (USRDS), NIH, NIDDK.

Healthy People 2000

Objective

Not applicable.

Changes since the

2000 Publication

New subobjective (see Comments). Revised baseline (see Comments).

Measure Percent.

**Baseline (Year)** 21 (2000)

Target 25

**Target-Setting Method** Better than the best racial/ethnic subgroup.

For a discussion of target-setting methods, see Part

A, section 4.

**Numerator** Persons with type 1 or type 2 diabetes and chronic

kidney disease who receive diabetic preventive health tests: eye examinations, lipid testing, and

glycosylated hemoglobin (HbA1c) testing.

**Denominator** Persons with type 1 or type 2 diabetes and chronic

kidney disease.

**Population Targeted** U.S. resident population.

Questions Used To Obtain the National

**Baseline Data** 

Not applicable.

### **Expected Periodicity**

## Annual.

#### Comments

The USRDS data, data collection procedures, calculation methods, and other technical information are included in its Annual Data Report.<sup>1</sup>

USRDS uses data collected by the Centers for Medicare and Medicaid Services. Since 1996, health care providers are required to provide patient information on all persons with ESRD, regardless of health insurance. Therefore, incident rates reflect the universe of ESRD cases in the United States.

Objective 4-8 moved from developmental to measurable at the Healthy People 2010 Midcourse Review. The original objective focused on medical therapy. The objective was revised to include medical evaluation. Two subobjectives were created, one addressing medical evaluation and the other addressing treatment.

The original baseline of 29 percent was revised to 21 percent after the Healthy People 2010 Midcourse Review. The target was proportionally adjusted from 36 percent to 25 percent to reflect the revised baseline using the original target-setting methodology.

For some measures, data do not meet the criteria for statistical reliability, data quality, or confidentiality and have been suppressed. Information on suppression of data for the major Healthy People 2010 data systems has been published in a *Healthy People Statistical Note.*<sup>2</sup>

See Part C for a description of USRDS and Appendix A for focus area contact information.

#### References

- 1. United States Renal Data System, USRDS. 2010 Annual Data Report: Atlas of Chronic Kidney Disease and End-Stage Renal Disease in the United State. National Institutes of Health, National Institute of Diabetes and Digestive and Kidney Diseases, Bethesda, MD, 2010.
- 2. Klein, R.J.; Proctor, S.E.; Boudreault, M.A.; Turczyn, K.M. Healthy People 2010 Criteria for Data Suppression. *Statistical Notes* No. 24. Hyattsville, MD: National Center for Health Statistics. 2002.

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