

**People with Diabetes and Proportion Receiving Recommended Services
British Columbia, 1999/2000 to 2002/2003**

Fiscal year	Number of people with diabetes	Tests			
		HbA1C	Eye Exam	Microalbumin	Lipid
1999/2000	159,222	31%	47%	22%	61%
2000/2001	180,560	33%	47%	25%	65%
2001/2002	196,110	35%	47%	28%	70%
2002/2003	211,304	39%	43%	34%	78%

Notes:

- Beneficiaries insured under the Medical Services Plan (MSP) were assumed to have diabetes if they met the following case definition:
 - Since 1992/1993: one or more hospital admissions where diabetes was given as a diagnosis; or two or more physician services within a year where diabetes was given as a diagnosis; or
 - Since 1996/1997: one or more Pharmanet claims for insulin, oral hypoglycaemics or glucose testing strips. For 2002/2003, the criteria on Pharmanet claims was changed to: two or more Pharmanet claims for insulin, oral hypoglycaemics or glucose testing strips on 2 or more different dates.
- Patients are flagged for a measure of the recommended services, using MSP fee-for-service claims data, by date of service. The claims data includes services provided to BC patients by BC practitioners with medical specialties 00 to 21, 23, 24, 28, 29, 33, 44, 47 and 48, and paramedical specialties 38 and 39. Only services paid by MSP are included; services paid by ICBC, WCB or other arrangements such as reciprocals and midwife referrals, are excluded.
- Patients are flagged for a measure of the recommended services if they have:
 - Two or more HbA1C during the fiscal year (fee item 91745).
 - At least one lipid test in three fiscal years (fee items 91375, 91780, 92350).
 - At least one claim with one of the following fee items associated with that measure in the fiscal year:
 - microalbumin (fee item 92396, 91985);
 - eye exam (2010, 2011, 2015, 2040, 2039, 2898, 2899).