

Provider cost and quality information: **Diabetes, insulin dependent**

The table below contains cost and quality information on providers who treat diabetes, insulin dependent. Quality information is provided by [MN Community Measurement](#) (MNCM), a nonprofit health care initiative dedicated to improving patient care in Minnesota. Cost information was calculated based on Medica claims data (see the footnote at the end of this document for details).

Please note, only those clinics that had quality ratings and sufficient patient volume are included in the chart. Additional cost information is available in Main Street Medica's [Clinic section](#). To look for providers in your plan's network, visit Medica's [Find A Doctor](#).

Key:
 (–) = Information not available
MNCM quality rating for diabetes:
Above = Above average
Average = Average
Below = Below average
Cost information:
Lower Cost Medium Cost Higher Cost

Diabetes, insulin dependent			
Clinic name	MNCM quality rating	Median (middle) value	Most cases cost between this range
Fairview Health System	Above	\$4,878	\$1,837 - \$7,072
HealthEast Clinics	Above	\$5,991	\$2,943 - \$10,549
Allina Medical Clinics	Above	\$6,725	\$2,697 - \$10,571
Park Nicollet Health Services	Average	\$6,004	\$2,056 - \$7,963
CentraCare Clinics	Average	\$7,344	\$2,204 - \$9,344
Aspen Medical Clinics	Below	\$5,570	\$1,953 - \$6,745
Endocrinology Clinic of Minneapolis, PA	Below	\$5,611	\$2,345 - \$8,688
MeritCare Clinics	Below	\$5,720	\$1,402 - \$9,383
University of Minnesota Clinics	Below	\$6,665	\$3,244 - \$8,627
St. Mary's Duluth Clinics	Below	\$6,743	\$2,443 - \$8,666

How costs were calculated

This information shows a clinic's total cost for treating diabetes, insulin dependent. The average cost range and median listed reflect the fees associated with the facility, the physician, office visits, ancillary services and medications for one year. The conditions are categorized by Episode Treatment Groups (ETGs). Medica's commercial claims data was used, excluding the Minnesota Comprehensive Health Association (MCHA), as the basis of this analysis. The analysis included episodes that started, ended or "spanned" January 2007 through December 2008. To help ensure comparability of the findings, only complete, non-outlier, episodes were included in the analysis.

The episodes were assigned to a provider at a tax identification number (TIN) level using an attribution methodology. The methodology assigned the entire episode to any and all providers that accounted for at least 30 percent of the professional fees associated with that episode. The analysis included primary care clinics and practices with endocrinologists.

In order for a clinic to be listed for a given condition, they must have 30 or more episodes for that condition. A clinic's average cost is the case-mix adjusted mean.

The clinics were then ordered by median cost and segmented by cost category. Cost categories were defined as follows: Low Cost - at or below the 25th percentile; Medium cost - above the 25th percentile to at or below the 75th percentile; and High cost - above the 75th percentile.

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