

SVCHC CQI Indicators for 10/1/2017 to 12/31/2018 Reporting Year (14 Month Reporting Period)

Indicator	Measurement Criteria Defined	2016 UDS Baseline %	2017 / 2018 Goal %	4 <sup>th</sup> Quarter 2017	1 <sup>st</sup> Quarter 2018	2 <sup>nd</sup> Quarter 2018	3 <sup>rd</sup> Quarter 2018	4 <sup>th</sup> Quarter 2018	Notes
Medical Indicators									
Children fully immunized by 2 <sup>nd</sup> birthday in measurement year	Children who have received;4Dtap, 3 IPV, 1MMR, 3 HiB, 3HepB, 1VZV, 4 PCV, 1Hep A, 2or3 RV, 2 Flu immunizations by age 2.	60.8%	95%	67.2%	63.1%	61%			
Cervical Cancer Screening	All Female Patients 23-64 who received one or more Pap tests to screen cervical cancer, concurrent HPV and Pap Test for those 30 and older no longer counts.	60.6%	69%	66.6%	72.1%	61.8%			
Weight Assessment with Nutritional and Activity counseling for Children age 3-17	Children and Adolescents ages 3-17 with a BMI percentile, and counseling on nutrition and physical activity documented in the current year with follow-up appointment documenting progress.	93.6%	88%	77.4%	65.6%	83.1%			

SVCHC CQI Indicators for 10/1/2017 to 12/31/2018 Reporting Year (14 Month Reporting Period)

Indicator	Measurement Criteria Defined	2016 UDS Baseline %	2017 /2018 Goal %	4 <sup>th</sup> Quarter	1 <sup>st</sup> Quarter	2 <sup>nd</sup> Quarter	3 <sup>rd</sup> Quarter	4 <sup>th</sup> Quarter	Notes
<p>Adult Weight Screening and Follow-up</p> <p><b>Normal Parameters:</b></p> <ul style="list-style-type: none"> <li>• Age 18-64years and BMI was greater than or equal to 18.5 and less than 25</li> <li>• Age 65 years and older with BMI was greater than or equal to 23 and less than 30.</li> </ul>	<p>Patients 18 yrs. and older with a visit during the reporting year with a documented BMI during the visits or during the previous 6 months and when the <b>BMI is outside the normal parameters, a follow-up plan is documented during the visit</b> or the prior 6 months of the visit with the BMI outside the normal parameter – Documentation of follow-up appointment with clear documentation of progress</p>	92.3%	85% (HRSA 12/31/18 goal is 54%)	75.6%	87.5%	93.8%			

SVCHC CQI Indicators for 10/1/2017 to 12/31/2018 Reporting Year (14 Month Reporting Period)

Indicator	Measurement Criteria Defined	2016 UDS Baseline %	2017 /2018 Goal %	4 <sup>th</sup> Quarter	1 <sup>st</sup> Quarter	2 <sup>nd</sup> Quarter	3 <sup>rd</sup> Quarter	4 <sup>th</sup> Quarter	Notes
Tobacco Use Assessment and Cessation Counseling	Patients age 12 and older queried about tobacco use one (1) or more times within 24 months and who received cessation counseling intervention if defined	74%	81%	94.8%	93.9%	93.8%			

SVCHC CQI Indicators for 10/1/2017 to 12/31/2018 Reporting Year (14 Month Reporting Period)

Indicator	Measurement Criteria Defined	2016 UDS Baseline %	2017 / 2018 Goal %	4 <sup>th</sup> Quarter	1 <sup>st</sup> Quarter	2 <sup>nd</sup> Quarter	3 <sup>rd</sup> Quarter	4 <sup>th</sup> Quarter	Notes
	as a tobacco user, Patient seen only once counter for this measure								
Asthma Pharmacological I Therapy	Patients ages 5-64 diagnosed with persistent asthma who have an acceptable pharmacological treatment plan – allergies to medications no longer disallowed and no criteria for at least two visits per reporting year. Classification of Asthma Required.	96.1%	85% (HRSA 12/31/18 goal is 81%)	96.1%	88%	85.7%			
CAD Lipid Therapy	Patients 18 years and older with a diagnosis of CAD prescribed lipid lowering therapy	77%	78%	71.4%	88%	77.6%			
IVD Aspirin Therapy	Patients age 18 and older with a diagnosis of IVD, AMI, CABG or PTCA procedure with aspirin or other antithrombotic therapy – medication module.	72%	81%	76.9%	83.1%	78.5%			

SVCHC CQI Indicators for 10/1/2017 to 12/31/2018 Reporting Year (14 Month Reporting Period)

Indicator	Measurement Criteria Defined	2016 UDS Baseline %	2017 / 2018 Goal %	4 <sup>th</sup> Quarter	1 <sup>st</sup> Quarter	2 <sup>nd</sup> Quarter	3 <sup>rd</sup> Quarter	4 <sup>th</sup> Quarter	Notes
Colorectal Cancer Screening	Patients age 50-75 years of age during the measurement year	51%	75% (HRSA 12/31/18 goal is 71%)	75.2%	81%	80.4%			

SVCHC CQI Indicators for 10/1/2017 to 12/31/2018 Reporting Year (14 Month Reporting Period)

Indicator	Measurement Criteria Defined	2016 UDS Baseline %	2017 / 2018 Goal %	4 <sup>th</sup> Quarter	1 <sup>st</sup> Quarter	2 <sup>nd</sup> Quarter	3 <sup>rd</sup> Quarter	4 <sup>th</sup> Quarter	Notes
	with appropriate screening for colorectal cancer								
HIV with Timely Follow-up	Patients who were diagnosed with timely follow-up documented in the measurement year	100%	100%	100%	100%	100%			
Depression Screening with follow-up	Patients age 12 and older who were screened for depression and if positive have a follow-up documented plan – Refusal is no longer an acceptable exclusion.	85.1%	90%  (HRSA 12/31/18 goal is 82%)	93.3%	92.1%	93.1%			
Controlled Hypertension	Patients <b>18 to 85 year old</b> with diagnosis of Hypertension and last BP reading <140/90 <b>(with one encounter in the reporting year)</b> Patients excluded but must be documented on <b>Chronic Problem List</b> – Dialysis, Renal Transplant, Kidney Disease Stage 5,	69.7%	72%	63.7%	62.3%	68%			

SVCHC CQI Indicators for 10/1/2017 to 12/31/2018 Reporting Year (14 Month Reporting Period)

Indicator	Measurement Criteria Defined	2016 UDS Baseline %	2017 / 2018 Goal %	4 <sup>th</sup> Quarter	1 <sup>st</sup> Quarter	2 <sup>nd</sup> Quarter	3 <sup>rd</sup> Quarter	4 <sup>th</sup> Quarter	Notes
	ESRD, and pregnant patients in the measurement year.								
<b>Diabetes HbA1c Poor Control</b>	Percentage of patients 18-75 years of age with diabetes who had hemoglobin A1c (HbA1c) greater than 9.0 percent during the measurement period.	22.6%	15%	28.2%	37.8%	27.5%			
Entry into prenatal care	Number of patients beginning prenatal care in the first trimester at the health center	83.1%	85% (HRSA 12/31/18 goal is 77%)	80%	85.9%	89%			
Low Birth Weight Rate	Number of children born in the measurement year with a birth weight under 2500 grams	5%	3%	5.1%	5.5%	4%			
<b>Behavioral Health Indicators</b>	Measurement Criteria Defined	2016 UDS Baseline %	2017 / 2018 Goal %	4 <sup>th</sup> Quarter	1 <sup>st</sup> Quarter	2 <sup>nd</sup> Quarter	3 <sup>rd</sup> Quarter	4 <sup>th</sup> Quarter	Notes
Depression Screening with follow-up	Patients age 12 and older who were screened for depression and if positive have a follow- up plan documented.	85.1%	90% (HRSA 12/31/18 goal is 82%)	93.3%	92.1%	93.%			

SVCHC CQI Indicators for 10/1/2017 to 12/31/2018 Reporting Year (14 Month Reporting Period)

Dental Indicators	Measurement Criteria Defined	2016 UDS Baseline %	2017 / 2018 Goal %	4 <sup>th</sup> Quarter	1 <sup>st</sup> Quarter	2 <sup>nd</sup> Quarter	3 <sup>rd</sup> Quarter	4 <sup>th</sup> Quarter	Notes
Oral Health Sealants	Children aged 6 through 9 years at moderate to high risk of caries who received a sealant on a permanent first molar tooth	26.7%	50%	57.3%	32.7%	34%			

Notes:

UDS has fully aligned measures with CMS for the 2018-2019 reporting year.

1. UDS Health Disparity and Outcome Measure – Required
2. Healthy People 2020 Outcome Measure – Used for Goal
3. Partnership Health Plan Measure Adopted to ensure proper management of Controlled Substances
4. Billing Measure added because of Medi-Cal Claims Audit findings
5. Financial Indicator added at HRSA request for all Health Centers for this reporting year.
6. RNA= Report Not Available.