

# SAMPLE SELECTED MEASURES (COM) REPORT – CRS 2007 V.7.0

## ALL PERFORMANCE MEASURE TOPICS

Cover Page

\*\*\* IHS 2007 Clinical Performance Report \*\*\*  
CRS 2007, Version 7.0  
Date Report Run: Jan 24, 2007  
Site where Run: DEMO INDIAN HOSPITAL  
Report Generated by: USER,SAMPLE  
Report Period: Jan 01, 2006 to Dec 31, 2006  
Previous Year Period: Jan 01, 2005 to Dec 31, 2005  
Baseline Period: Jan 01, 2000 to Dec 31, 2000

Measures: Selected Measures (User Defined)  
Population: AI/AN Only (Classification 01)

RUN TIME (H.M.S): 0.34.5

Denominator Definitions used in this Report:

#### ACTIVE CLINICAL POPULATION:

1. Must reside in a community specified in the community taxonomy used for this report.
2. Must be alive on the last day of the Report period.
3. User defines population: a) Indian/Alaska Natives Only - based on Classification of 01; b) Non AI/AN (not 01); or c) Both.
4. Must have 2 visits to medical clinics in the 3 years prior to the end of the Report period. At least one visit must include: 01 General, 06 Diabetic, 10 GYN, 12 Immunization, 13 Internal Med, 20 Pediatrics, 24 Well Child, 28 Family Practice, 57 EPSDT, 70 Women's Health, 80 Urgent, 89 Evening. See User Manual for complete description of medical clinics.

#### USER POPULATION:

1. Definitions 1-3 above.
2. Must have been seen at least once in the 3 years prior to the end of the Report period, regardless of the clinic type.

A delimited output file called SU70TCOMALLINDS2003012407DEL has been placed in the public directory for your use in Excel or some other software package.  
See your site manager to access this file.

Community Taxonomy Name: DEMO GPRA COMMUNITIES  
The following communities are included in this report:

COMMUNITY #1	COMMUNITY #2	COMMUNITY #3
COMMUNITY #4	COMMUNITY #5	COMMUNITY #6

**PLEASE NOTE: This is a sample Selected Measures w/Community Specified (COM) report for all measures, which has been compiled from CRS 2007 (BPG version 7.0). Some manual formatting has been done to condense the report for printing purposes. Your report may not appear exactly the way this report does.**

\*\*\* IHS 2007 Clinical Performance Report \*\*\*  
 DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006  
 Previous Year Period: Jan 01, 2005 to Dec 31, 2005  
 Baseline Period: Jan 01, 2000 to Dec 31, 2000

Diabetes Prevalence

Denominator(s):

All User Population users. Breakdown by gender and by age groups: <15, 15-19, 20-24, 25-34, 35-44, 45-54, 55-64, >64.

Numerator(s):

Anyone diagnosed with Diabetes at any time before the end of the Report period.  
 Anyone diagnosed with Diabetes during the Report Period.

Age is calculated at the beginning of the Report Period. Diabetes diagnosis is defined as at least one diagnosis 250.00-250.93 recorded in the V POV file.

During FY 2007, continue tracking (i.e., data collection and analyses) Area age-specific diabetes prevalence rates to identify trends in the age-specific prevalence of diabetes (as a surrogate marker for diabetes incidence) for the AI/AN population.

IHS Performance: FY 2006 - 11.0%, FY 2005 - 11.0%, FY 2004 - 10.0%

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
# User Pop	2,370		2,300			2,332		
# w/ any DM DX	228	9.6	216	9.4	+0.2	196	8.4	+1.2
# w/ DM DX w/in past year	126	5.3	124	5.4	-0.1	99	4.2	+1.1
# Male User Pop	1,094		1,074			1,103		
# w/ any DM DX	94	8.6	88	8.2	+0.4	71	6.4	+2.2
# w/DM DX w/in past year	59	5.4	64	6.0	-0.6	47	4.3	+1.1

\*\*\* IHS 2007 Clinical Performance Report \*\*\*  
 DEMO INDIAN HOSPITAL  
 Report Period: Jan 01, 2006 to Dec 31, 2006  
 Previous Year Period: Jan 01, 2005 to Dec 31, 2005  
 Baseline Period: Jan 01, 2000 to Dec 31, 2000

---

Age Specific Diabetes Prevalence

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
# Female User Pop	1,276		1,226			1,229		
# w/ any DM DX	134	10.5	128	10.4	+0.1	125	10.2	+0.3
# w/ DM DX w/in past year	67	5.3	60	4.9	+0.4	52	4.2	+1.0

\*\*\* IHS 2007 Clinical Performance Report \*\*\*

DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

Age Specific Diabetes Prevalence

	TOTAL USER POPULATION							
	Age Distribution							
	<15	15-19	20-24	25-34	35-44	45-54	55-64	>64 yrs
<b>CURRENT REPORT PERIOD</b>								
Total # User Pop	704	219	243	344	289	272	161	138
# w/ DM DX ever	1	3	5	33	45	59	40	42
% w/ DM DX ever	0.1	1.4	2.1	9.6	15.6	21.7	24.8	30.4
# w/DM DX in past yr	0	2	0	9	26	39	25	25
% w/DM DX in past yr	0.0	0.9	0.0	2.6	9.0	14.3	15.5	18.1
<b>PREVIOUS YEAR PERIOD</b>								
Total # User Pop	703	223	234	334	276	241	154	135
# w/ DM DX ever	3	3	8	32	43	49	39	39
% w/ DM DX ever	0.4	1.3	3.4	9.6	15.6	20.3	25.3	28.9
# w/DM DX in past yr	1	2	2	9	23	30	29	28
% w/DM DX in past yr	0.1	0.9	0.9	2.7	8.3	12.4	18.8	20.7
<b>CHANGE FROM PREV YR %</b>								
w/ DM DX ever	-0.3	+0.0	-1.4	+0.0	-0.0	+1.4	-0.5	+1.5
w/DM DX in past yr	-0.1	+0.0	-0.9	-0.1	+0.7	+1.9	-3.3	-2.6
<b>BASELINE REPORT PERIOD</b>								
Total # User Pop	787	207	216	327	291	225	137	142
# w/ DM DX ever	2	4	12	21	38	46	29	44
% w/ DM DX ever	0.3	1.9	5.6	6.4	13.1	20.4	21.2	31.0
# w/DM DX in past yr	2	1	3	7	18	21	19	28
% w/DM DX in past yr	0.3	0.5	1.4	2.1	6.2	9.3	13.9	19.7
<b>CHANGE FROM BASE YR %</b>								
w/ DM DX ever	-0.1	-0.6	-3.5	+3.2	+2.5	+1.2	+3.7	-0.6
w/DM DX in past yr	-0.3	+0.4	-1.4	+0.5	+2.8	+5.0	+1.7	-1.6

## \*\*\* IHS 2007 Clinical Performance Report \*\*\*

## DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

-----  
Age Specific Diabetes Prevalence

	MALE USER POPULATION							
	Age Distribution							
	<15	15-19	20-24	25-34	35-44	45-54	55-64	>64 yrs
CURRENT REPORT PERIOD								
Total MALE User Pop	371	102	106	132	133	121	76	53
# w/ DM DX ever	0	2	1	7	19	28	22	15
% w/ DM DX ever	0.0	2.0	0.9	5.3	14.3	23.1	28.9	28.3
# w/DM DX in past yr	0	1	0	4	12	18	15	9
% w/DM DX in past yr	0.0	1.0	0.0	3.0	9.0	14.9	19.7	17.0
PREVIOUS YEAR PERIOD								
Total MALE User Pop	371	112	101	126	132	110	69	53
# w/ DM DX ever	1	2	2	7	18	24	21	13
% w/ DM DX ever	0.3	1.8	2.0	5.6	13.6	21.8	30.4	24.5
# w/DM DX in past yr	0	1	1	3	12	15	20	12
% w/DM DX in past yr	0.0	0.9	1.0	2.4	9.1	13.6	29.0	22.6
CHANGE FROM PREV YR %								
w/ DM DX ever	-0.3	+0.2	-1.0	-0.3	+0.6	+1.3	-1.5	+3.8
w/DM DX in past yr	+0.0	+0.1	-1.0	+0.6	-0.1	+1.2	-9.2	-5.7
BASELINE REPORT PERIOD								
Total MALE User Pop	424	103	86	136	132	105	63	54
# w/ DM DX ever	1	1	3	6	14	21	15	10
% w/ DM DX ever	0.2	1.0	3.5	4.4	10.6	20.0	23.8	18.5
# w/DM DX in past yr	1	0	1	4	9	10	12	10
% w/DM DX in past yr	0.2	0.0	1.2	2.9	6.8	9.5	19.0	18.5
CHANGE FROM BASE YR %								
w/ DM DX ever	-0.2	+1.0	-2.5	+0.9	+3.7	+3.1	+5.1	+9.8
w/DM DX in past yr	-0.2	+1.0	-1.2	+0.1	+2.2	+5.4	+0.7	-1.5

\*\*\* IHS 2007 Clinical Performance Report \*\*\*

DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

Age Specific Diabetes Prevalence

	FEMALE USER POPULATION							
	Age Distribution							
	<15	15-19	20-24	25-34	35-44	45-54	55-64	>64 yrs
CURRENT REPORT PERIOD								
Total FEMALE User Pop	333	117	137	212	156	151	85	85
# w/ DM DX ever	1	1	4	26	26	31	18	27
% w/ DM DX ever	0.3	0.9	2.9	12.3	16.7	20.5	21.2	31.8
# w/DM DX in past yr	0	1	0	5	14	21	10	16
% w/DM DX in past yr	0.0	0.9	0.0	2.4	9.0	13.9	11.8	18.8
PREVIOUS YEAR PERIOD								
Total FEMALE User Pop	332	111	133	208	144	131	85	82
# w/ DM DX ever	2	1	6	25	25	25	18	26
% w/ DM DX ever	0.6	0.9	4.5	12.0	17.4	19.1	21.2	31.7
# w/DM DX in past yr	1	1	1	6	11	15	9	16
% w/DM DX in past yr	0.3	0.9	0.8	2.9	7.6	11.5	10.6	19.5
CHANGE FROM PREV YR %								
w/ DM DX ever	-0.3	-0.0	-1.6	+0.2	-0.7	+1.4	+0.0	+0.1
w/DM DX in past yr	-0.3	-0.0	-0.8	-0.5	+1.3	+2.5	+1.2	-0.7
BASELINE REPORT PERIOD								
Total FEMALE User Pop	363	104	130	191	159	120	74	88
# w/ DM DX ever	1	3	9	15	24	25	14	34
% w/ DM DX ever	0.3	2.9	6.9	7.9	15.1	20.8	18.9	38.6
# w/DM DX in past yr	1	1	2	3	9	11	7	18
% w/DM DX in past yr	0.3	1.0	1.5	1.6	5.7	9.2	9.5	20.5
CHANGE FROM BASE YR %								
w/ DM DX ever	+0.0	-2.0	-4.0	+4.4	+1.6	-0.3	+2.3	-6.9
w/DM DX in past yr	-0.3	-0.1	-1.5	+0.8	+3.3	+4.7	+2.3	-1.6

## \*\*\* IHS 2007 Clinical Performance Report \*\*\*

DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

-----  
Diabetes Comprehensive Care

## Denominator(s):

Active Diabetic patients, defined as all Active Clinical patients diagnosed with diabetes prior to the Report Period, AND at least 2 visits during the Report Period, AND 2 DM-related visits ever.

## Numerator(s):

Patients with Hemoglobin A1c documented during the Report Period, regardless of result.

Patients with Blood Pressure documented during the Report Period.

Patients with controlled BP, defined as < 130/80, i.e., the mean systolic value is less than 130 AND the mean diastolic value is less than 80.

Patients with LDL completed during the Report Period, regardless of result.

Patients with nephropathy assessment, defined as an estimated GFR with result AND a quantitative urinary protein assessment during the Report period OR with evidence of diagnosis and/or treatment of ESRD at any time before the end of the Report period.

Patients receiving a qualified retinal evaluation during the Report Period, or a documented refusal of a diabetic retinal exam.

Patients with diabetic foot exam during the Report Period, or a documented refusal of a diabetic foot exam.

Patients with comprehensive diabetes care (documented A1c AND Blood Pressure AND LDL AND Nephropathy Assessment AND Retinal exam AND diabetic foot exam).

First Purpose of Visit 250.00-250.93 recorded in the V POV file prior to the Report period.

A1c definition: Counts most recent A1c test during the Report period, defined as: CPT 83036; LOINC taxonomy; or site-populated taxonomy DM AUDIT HGB A1C TAX.

BP documented definition: Having a minimum of 2 Blood Pressures documented on non-ER visits during the Report period.

Controlled BP definition: CRS uses mean of last 3 Blood Pressures documented on non-ER visits during the Report Period. If 3 BPs are not available, uses mean of last 2 non-ER BPs. If a visit contains more than 1 BP, the lowest BP will be used, defined as having the lowest systolic value. The mean Systolic value is calculated by adding the last 3 (or 2) systolic values and dividing by 3 (or 2). The mean Diastolic value is calculated by adding the diastolic values from the last 3 (or 2) blood pressures and dividing by 3 (or 2). If the systolic and diastolic values do not BOTH meet the criteria for controlled, then the value is considered not controlled.

## \*\*\* IHS 2007 Clinical Performance Report \*\*\*

DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

LDL definition: Finds last test done during the Report period; defined as: CPT 83721; LOINC taxonomy; site-populated taxonomy DM AUDIT LDL CHOLESTEROL TAX.

Nephropathy assessment definition:

(1) Estimated GFR with result during the Report Period, defined as any of the following: (A) Site-populated taxonomy BGP GPRA ESTIMATED GFR TAX or (B) LOINC taxonomy, AND

(2) Quantitative Urinary Protein Assessment during the Report Period, defined as any of the following: (A) CPT 82042, 82043, or 84156; (B) LOINC taxonomy; or (C) site-populated taxonomy BGP QUANT URINE PROTEIN (NOTE: Be sure and check with your laboratory supervisor that the names you add to your taxonomy reflect quantitative test values); OR

(3) End Stage Renal Disease diagnosis/treatment defined as: ANY diagnosis ever of 585.5, 585.6 or V45.1 or ANY CPT in the range of 90918-90925.

Qualified retinal evaluation\* is defined as: (1) diabetic retinal exam or documented refusal or (2) other eye exam.

Diabetic Retinal Exam: Exam Code 03 Diabetic Eye Exam (dilated retinal examination provided by an optometrist or ophthalmologist) or Refusal Exam 03.

Other Eye Exam: (1) Non-DNKA (did not keep appointment) visits to ophthalmology, optometry or validated tele-ophthalmology retinal evaluation clinics (e.g. JVN, Inoveon, EyeTel, etc.) or (2) non-DNKA visits to an optometrist or ophthalmologist. Searches for the following codes in the following order: Clinic Codes A2, 17, 18, 64; Provider Code 24, 79, 08; CPT 92002, 92004, 92012, 92014; POV V72.0.

\*Qualifying retinal evaluation: The following methods are qualifying for this measure:

- Dilated retinal evaluation by an optometrist or ophthalmologist.
- Standard fields stereoscopic photos (ETDRS) evaluated by an optometrist or ophthalmologist.
- Any photographic method formally validated to ETDRS, e.g. JVN, Inoveon, EyeTel, etc.

Diabetic foot exam defined as: 1) Exam Code 28 Diabetic Foot Exam, Complete; 2) non-DNKA visit with a podiatrist (provider codes 33, 84 or 25), 3) non-DNKA visit to Podiatry Clinic (clinic code 65), or 4) documented refusal of foot exam (Exam Code 28).

\*\*\* IHS 2007 Clinical Performance Report \*\*\*  
 DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006  
 Previous Year Period: Jan 01, 2005 to Dec 31, 2005  
 Baseline Period: Jan 01, 2000 to Dec 31, 2000

Increase the proportion of diabetic patients who receive all appropriate assessments.

BP Assessed: IHS 2010 Goal: 95%  
 Foot Exam: HP 2010 Goal: 91%

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
Active Diabetic Pts	106		95			87		
# w/A1c done								
w/ or w/o result	73	68.9	70	73.7	-4.8	52	59.8	+9.1
# w/ BPs documented	93	87.7	78	82.1	+5.6	74	85.1	+2.7
# w/Controlled BP <130/80	23	21.7	20	21.1	+0.6	13	14.9	+6.8
# w/ LDL done	56	52.8	46	48.4	+4.4	23	26.4	+26.4
# w/ est GFR & quant UP assmt or w/ESRD	24	22.6	3	3.2	+19.5	3	3.4	+19.2
# w/Retinal Evaluation or refusal	47	44.3	38	40.0	+4.3	44	50.6	-6.2
# w/Diabetic Foot Exam or refusal	20	18.9	18	18.9	-0.1	16	18.4	+0.5
# w/ All	7	6.6	0	0.0	+6.6	0	0.0	+6.6

## \*\*\* IHS 2007 Clinical Performance Report \*\*\*

DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

---

Diabetes: Glycemic Control

## Denominator(s):

All User Population patients diagnosed with diabetes prior to the Report period.

GPRA Denominator: Active Diabetic patients, defined as all Active Clinical patients diagnosed with diabetes prior to the Report Period, AND at least 2 visits during the Report Period, AND 2 DM-related visits ever. Active Adult Diabetic patients, defined by meeting the following criteria: 1) who are 19 or older at the beginning of the Report Period, 2) whose first ever DM diagnosis occurred prior to the Report Period; 3) who had at least 2 DM related visits ever, 4) at least one encounter with DM POV in a primary clinic with a primary provider during the Report period; and 5) never have had a creatinine value greater than 5.

## Numerator(s):

Number of patients with a Hemoglobin Alc documented during the Report Period, regardless of result.

GPRA Numerator: Poor Control. Patients with Alc greater than (>) 9.5. Very Poor Control. Patients with Alc equal to or greater than (=>) 12. Poor Control. Patients with Alc greater than (>) 9.5 or less than (<) 12.

Fair Control. Patients with Alc equal to or greater than (=>) 8 and less than or equal to (<=) 9.5.

Good Control. Patients with Alc equal to or greater than (=>) 7 and less than (<) 8.

GPRA Numerator: Ideal Control. Patients with Alc less than (<) 7.

Without result. Patients with Alc documented but no value.

First Purpose of Visit 250.00-250.93 recorded in the V POV file prior to the Report Period.

Serum Creatinine: site-populated taxonomy DM AUDIT CREATININE TAX; or LOINC taxonomy (NOTE: CPT codes are not included since they do not store the result, which is used in this topic.)

Counts most recent Alc test during the Report Period. Alc defined as: CPT 83036; LOINC taxonomy; or site-populated taxonomy DM AUDIT HGB A1C TAX. Without result is defined as Alc documented but with no value.

Poor Glycemic Control: During FY 2007, decrease to 15% the proportion of patients with diagnosed diabetes that have poor glycemic control (defined as Alc > 9.5).

Ideal Glycemic Control: During FY 2007, increase to 32% the proportion of patients with diagnosed diabetes with ideal glycemic control (defined as Alc < 7).

\*\*\* IHS 2007 Clinical Performance Report \*\*\*  
 DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006  
 Previous Year Period: Jan 01, 2005 to Dec 31, 2005  
 Baseline Period: Jan 01, 2000 to Dec 31, 2000

A1c documented: IHS Performance: FY 2006 - 79%, FY 2005 - 78.0%, FY 2004 - 77.0%, FY 2003 - 75%; HP 2010 Goal: 50%

Ideal Glycemic Control (<7): IHS Performance: FY 2006 - 31.0%, FY 2005 - 30.0%, FY 2004 - 27%, FY 2003 - 28%; IHS 2010 Goal: 40%

Poor Glycemic Control (>9.5): FY 2006 - 16.0%, FY 2005 - 15.0%, FY 2004 - 17.0%

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
User Pop w/ DM DX prior to report end date	203		192			179		
# w/A1c done w/ or w/o result	76	37.4	72	37.5	-0.1	53	29.6	+7.8
# w/A1c =>12	3	1.5	1	0.5	+1.0	3	1.7	-0.2
# w/A1c >9.5 and <12	14	6.9	3	1.6	+5.3	8	4.5	+2.4
# w/A1c =>8 and =<9.5	13	6.4	19	9.9	-3.5	10	5.6	+0.8
# w/A1c=>7 and <8	11	5.4	17	8.9	-3.4	7	3.9	+1.5
# w/A1c <7	35	17.2	32	16.7	+0.6	23	12.8	+4.4
# w/A1c w/o Result	0	0.0	0	0.0	+0.0	2	1.1	-1.1

## \*\*\* IHS 2007 Clinical Performance Report \*\*\*

## DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

## Diabetes: Glycemic Control (con't)

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
Active Diabetic Pts (GPRA)	106		95			87		
# w/A1c done w/ or w/o result	73	68.9	70	73.7	-4.8	52	59.8	+9.1
# w/A1c > 9.5 (GPRA)	17	16.0	4	4.2	+11.8	11	12.6	+3.4
# w/A1c =>12	3	2.8	1	1.1	+1.8	3	3.4	-0.6
# w/A1c >9.5 and < 12	14	13.2	3	3.2	+10.0	8	9.2	+4.0
# w/A1c =>8 and =<9.5	13	12.3	19	20.0	-7.7	10	11.5	+0.8
# w/A1c=>7 and <8	11	10.4	17	17.9	-7.5	7	8.0	+2.3
# w/A1c <7 (GPRA)	32	30.2	30	31.6	-1.4	22	25.3	+4.9
# w/A1c w/o Result	0	0.0	0	0.0	+0.0	2	2.3	-2.3
Active Adult Diabetic Patients	76		71			63		
# w/A1c done w/ or w/o result	65	85.5	61	85.9	-0.4	46	73.0	+12.5
# w/A1c =>12	3	3.9	1	1.4	+2.5	3	4.8	-0.8
# w/A1c >9.5 and <12	13	17.1	2	2.8	+14.3	7	11.1	+6.0
# w/A1c =>8 and =<9.5	12	15.8	18	25.4	-9.6	8	12.7	+3.1
# w/A1c =>7 and <8	9	11.8	13	18.3	-6.5	6	9.5	+2.3
# w/A1c <7	28	36.8	27	38.0	-1.2	22	34.9	+1.9
# w/A1c w/o Result	0	0.0	0	0.0	+0.0	0	0.0	+0.0

\*\*\* IHS 2007 Clinical Performance Report \*\*\*

DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

---

Diabetes: Blood Pressure Control

Denominator(s):

All User Population patients diagnosed with diabetes prior to the Report period.

GPRA Denominator: Active Diabetic patients, defined as all Active Clinical patients diagnosed with diabetes prior to Current Report Period, AND at least 2 visits during the Report Period, AND 2 DM-related visits ever.

Active Adult Diabetic patients, defined by meeting the following criteria: 1) who are 19 or older at the beginning of the Report Period, 2) whose first ever DM diagnosis occurred prior to the Report Period; 3) who had at least 2 DM related visits ever, 4) at least one encounter with DM POV in a primary clinic with a primary provider during the Report period; and 5) never have had a creatinine value greater than 5.

Numerator(s):

Patients with Blood Pressure documented during the Report Period.

GPRA Numerator: Patients with controlled BP, defined as < 130/80, i.e., the mean systolic value is less than 130 AND the mean diastolic value is less than 80.

Patients with BP that is not controlled.

First DM Purpose of Visit 250.00-250.93 recorded in the V POV file prior to the Report Period.

Serum Creatinine: site-populated taxonomy DM AUDIT CREATININE TAX; or LOINC taxonomy (NOTE: CPT codes are not included since they do not store the result, which is used in this topic.)

CRS uses mean of last 3 Blood Pressures documented on non-ER visits during the Report Period. If 3 BPs are not available, uses mean of last 2 non-ER BPs. If a visit contains more than 1 BP, the lowest BP will be used, defined as having the lowest systolic value. The mean Systolic value is calculated by adding the last 3 (or 2) systolic values and dividing by 3 (or 2). The mean Diastolic value is calculated by adding the diastolic values from the last 3 (or 2) blood pressures and dividing by 3 (or 2). If the systolic and diastolic values do not BOTH meet the criteria for controlled, then the value is considered not controlled.

During FY 2007, maintain the proportion of patients with diagnosed diabetes that have achieved blood pressure control at the FY 2006 rate of 37%.

Controlled BP: IHS Performance: FY 2006 - 37.0%, FY 2005 - 37.0%, FY 2004 - 35.0%, FY 2003 - 37%; IHS 2010 Goal: 50%

## \*\*\* IHS 2007 Clinical Performance Report \*\*\*

## DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

-----  
BP Assessed: IHS Performance: FY 2005 - 89.0%, IHS 2010 Goal: 95%

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
User Pop w/ DM DX prior to report period	203		192			179		
# w/ BPs Documented	100	49.3	87	45.3	+3.9	84	46.9	+2.3
# w/controlled BP < 130/80	25	12.3	24	12.5	-0.2	18	10.1	+2.3
# w/Not controlled BP	75	36.9	63	32.8	+4.1	66	36.9	+0.1
Active Diabetic Pts (GPRA)	106		95			87		
# w/ BPs Documented	93	87.7	78	82.1	+5.6	74	85.1	+2.7
# w/Controlled BP < 130/80 (GPRA)	23	21.7	20	21.1	+0.6	13	14.9	+6.8
# w/Not controlled BP	70	66.0	58	61.1	+5.0	61	70.1	-4.1
Active Adult Diabetic Patients	76		71			63		
# w/ BPs Documented	70	92.1	61	85.9	+6.2	56	88.9	+3.2
# w/Controlled BP < 130/80	18	23.7	14	19.7	+4.0	8	12.7	+11.0
# w/Not controlled BP	52	68.4	47	66.2	+2.2	48	76.2	-7.8

## \*\*\* IHS 2007 Clinical Performance Report \*\*\*

DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

-----  
Diabetes: Lipids Assessment

## Denominator(s):

All User Population patients diagnosed with diabetes prior to the Report period.

GPRA Denominator: Active Diabetic patients, defined as all Active Clinical patients diagnosed with diabetes prior to the Report Period, AND at least 2 visits during the Report Period, AND 2 DM-related visits ever. Active Adult Diabetic patients, defined by meeting the following criteria: 1) who are 19 or older at the beginning of the Report Period, 2) whose first ever DM diagnosis occurred prior to the Report Period; 3) who had at least 2 DM related visits ever, 4) at least one encounter with DM POV in a primary clinic with a primary provider during the Report period; and 5) never have had a creatinine value greater than 5.

## Numerator(s):

Patients who have had either a LIPID PROFILE or an LDL, an HDL and Triglyceride (TG) (all three) during the Report Period.

GPRA Numerator: Patients with LDL completed during the Report Period, regardless of result.

Patients with LDL results less than (<) 130.

A: Patients with LDL results less than or equal to (<=) 100.

B: Patients with LDL results 101-129.

First DM Purpose of Visit 250.00-250.93 recorded in the V POV file prior to the Report Period.

Serum Creatinine: site-populated taxonomy DM AUDIT CREATININE TAX; or LOINC taxonomy (NOTE: CPT codes are not included since they do not store the result, which is used in this topic.)

For Numerators 1 and 2, counts all Y instances reported, regardless of the results of the measurement. For each test, finds the last test done during the Report Period. Test Definitions: 1) Lipid Profile: CPT 80061; LOINC taxonomy; site-populated taxonomy DM AUDIT LIPID PROFILE TAX. 2) LDL: CPT 83721; LOINC taxonomy; site-populated taxonomy DM AUDIT LDL CHOLESTEROL TAX. 3) HDL: CPT 83718; LOINC taxonomy; site-populated taxonomy DM AUDIT HDL TAX. 4) Triglyceride: 84478; LOINC taxonomy; site-populated taxonomy DM AUDIT TRIGLYCERIDE TAX.

During FY 2007, maintain the proportion of patients with diagnosed diabetes assessed for dyslipidemia (LDL cholesterol) at the FY 2006 rate of 60%.

Patients Assessed: IHS Performance: FY 2006 - 60.0%, FY 2005 - 53.0%, FY 2004 - 53.0%, FY 2003 - 47.5%; HP 2010 Goal: 70%

\*\*\* IHS 2007 Clinical Performance Report \*\*\*

DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

Diabetes: Lipids Assessment (con't)

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
User Pop w/ DM DX prior to report period	203		192			179		
# w/Lipid Profile OR TG & HDL & LDL recorded	60	29.6	48	25.0	+4.6	30	16.8	+12.8
# w/ LDL done	60	29.6	48	25.0	+4.6	23	12.8	+16.7
# w/LDL <130	48	23.6	40	20.8	+2.8	16	8.9	+14.7
A. # w/LDL =<100	31	15.3	32	16.7	-1.4	9	5.0	+10.2
B. # w/LDL 101-129	17	8.4	8	4.2	+4.2	7	3.9	+4.5
Active Diabetic Pts (GPRA)	106		95			87		
# w/Lipid Profile OR TG & HDL & LDL recorded	56	52.8	46	48.4	+4.4	30	34.5	+18.3
# w/ LDL done (GPRA)	56	52.8	46	48.4	+4.4	23	26.4	+26.4
# w/LDL <130	45	42.5	38	40.0	+2.5	16	18.4	+24.1
A. # w/LDL =<100	30	28.3	31	32.6	-4.3	9	10.3	+18.0
B. # w/LDL 101-129	15	14.2	7	7.4	+6.8	7	8.0	+6.1
Active Adult Diabetic Patients	76		71			63		
# w/Lipid Profile OR TG & HDL & LDL recorded	49	64.5	43	60.6	+3.9	28	44.4	+20.0
# w/ LDL done	49	64.5	43	60.6	+3.9	21	33.3	+31.1
# w/LDL <130	38	50.0	35	49.3	+0.7	14	22.2	+27.8
A. # w/LDL =<100	25	32.9	27	38.0	-5.1	9	14.3	+18.6
B. # w/LDL 101-129	13	17.1	8	11.3	+5.8	5	7.9	+9.2

## \*\*\* IHS 2007 Clinical Performance Report \*\*\*

DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

-----  
Diabetes: Nephropathy Assessment

## Denominator(s):

All User Population patients diagnosed with diabetes prior to the Report Period.

GPRA Denominator: Active Diabetic patients, defined as all Active Clinical patients diagnosed with diabetes prior to the Report Period, AND at least 2 visits during the Report Period, AND 2 DM-related visits ever. Active Adult Diabetic patients, defined by meeting the following criteria: 1) who are 19 or older at the beginning of the Report Period, 2) whose first ever DM diagnosis occurred prior to the Report Period; 3) who had at least 2 DM related visits ever, 4) at least one encounter with DM POV in a primary clinic with a primary provider during the Report Period; and 5) never have had a creatinine value greater than 5.

## Numerator(s):

GPRA Numerator: Patients with nephropathy assessment, defined as an estimated GFR with result AND a quantitative urinary protein assessment during the Report period OR with evidence of diagnosis and/or treatment of ESRD at any time before the end of the Report period.

First DM Purpose of Visit 250.00-250.93 recorded in the V POV file prior to the Report period.

Serum Creatinine: site-populated taxonomy DM AUDIT CREATININE TAX; or LOINC taxonomy (NOTE: CPT codes are not included since they do not store the result, which is used in this topic.)

## Nephropathy assessment definition:

(1) Estimated GFR with result during the Report Period, defined as any of the following: (A) Site-populated taxonomy BGP GPRA ESTIMATED GFR TAX or (B) LOINC taxonomy, AND

(2) Quantitative Urinary Protein Assessment during the Report Period, defined as any of the following: (A) CPT 82042, 82043, or 84156; (B) LOINC taxonomy; or (C) site-populated taxonomy BGP QUANT URINE PROTEIN (NOTE: Be sure and check with your laboratory supervisor that the names you add to your taxonomy reflect quantitative test values); OR

(3) End Stage Renal Disease diagnosis/treatment defined as: ANY diagnosis ever of 585.5, 585.6 or V45.1 or ANY CPT in the range of 90918-90925.

During FY 2007, establish the proportion of patients with diagnosed diabetes assessed for nephropathy, based on new, more stringent standard of care.

\*\*\* IHS 2007 Clinical Performance Report \*\*\*  
 DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006  
 Previous Year Period: Jan 01, 2005 to Dec 31, 2005  
 Baseline Period: Jan 01, 2000 to Dec 31, 2000

Assessment: IHS FY Performance: FY 2006 - 55.0%, FY 2005 - 47.0%, FY 2004 - 42.0%, FY 2003 - 37.5%; IHS 2010 Goal: 70%

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
User Pop w/ DM DX prior to Report Period	203		192			179		
# w/ est GFR & quant UP assmt or w/ESRD	25	12.3	4	2.1	+10.2	4	2.2	+10.1
Active Diabetic Pts (GPRA)	106		95			87		
# w/ est GFR & quant UP assmt or w/ESRD (GPRA)	24	22.6	3	3.2	+19.5	3	3.4	+19.2
Active Adult Diabetic Patients	76		71			63		
# w/ est GFR & quant UP assmt or w/ESRD	19	25.0	1	1.4	+23.6	1	1.6	+23.4

\*\*\* IHS 2007 Clinical Performance Report \*\*\*

DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

---

Diabetic Retinopathy

Denominator(s):

All User Population patients diagnosed with diabetes prior to the Report period.

GPRA Denominator: Active Diabetic patients, defined as all Active Clinical patients diagnosed with diabetes prior to the Report Period, AND at least 2 visits during the Report Period, AND 2 DM-related visits ever. Active Adult Diabetic patients, defined by meeting the following criteria: 1) who are 19 or older at the beginning of the Report Period, 2) whose first ever DM diagnosis occurred prior to the Report Period; 3) who had at least 2 DM related visits ever, 4) at least one encounter with DM POV in a primary clinic with a primary provider during the Report period; and 5) never have had a creatinine value greater than 5.

Numerator(s):

GPRA Numerator: Patients receiving a qualified retinal evaluation during the Report Period, or a documented refusal of a diabetic retinal exam.

A: Patients receiving diabetic retinal exam (or documented refusal) during the Report Period.

B: Patients receiving other eye exams during the Report Period.

First DM Purpose of Visit 250.00-250.93 recorded in the V POV file prior to the Report period.

Serum Creatinine: site-populated taxonomy DM AUDIT CREATININE TAX; or LOINC taxonomy (NOTE: CPT codes are not included since they do not store the result, which is used in this topic.)

Qualified retinal evaluation\* is defined as: (1) diabetic retinal exam or documented refusal or (2) other eye exam.

Diabetic Retinal Exam: Exam Code 03 Diabetic Eye Exam (dilated retinal examination provided by an optometrist or ophthalmologist) or Refusal Exam 03.

Other Eye Exam: (1) Non-DNKA (did not keep appointment) visits to ophthalmology, optometry or validated tele-ophthalmology retinal evaluation clinics (e.g. JVN, Inoveon, EyeTel, etc.) or (2) non-DNKA visits to an optometrist or ophthalmologist. Searches for the following codes in the following order: Clinic Codes A2, 17, 18, 64; Provider Code 24, 79, 08; CPT 92002, 92004, 92012, 92014; POV V72.0.

\*Qualifying retinal evaluation: The following methods are qualifying for this measure:

- Dilated retinal evaluation by an optometrist or ophthalmologist.
- Standard fields stereoscopic photos (ETDRS) evaluated by an

\*\*\* IHS 2007 Clinical Performance Report \*\*\*  
 DEMO INDIAN HOSPITAL  
 Report Period: Jan 01, 2006 to Dec 31, 2006  
 Previous Year Period: Jan 01, 2005 to Dec 31, 2005  
 Baseline Period: Jan 01, 2000 to Dec 31, 2000

optometrist or ophthalmologist.

- Any photographic method formally validated to ETDRS, e.g. JVN, Inoveon, EyeTel, etc.

During FY 2007, all sites should maintain the proportion of patients with diagnosed diabetes who receive an annual retinal examination at the FY 2006 rate of 49%.

Eye Exam: IHS Performance: FY 2006 National Rate - 49.0%, Designated Site Rate - 52.0%, FY 2005 National Rate - 50.0%, Designated Site Rate - 50.0%, FY 2004 National Rate - 47.0%, Designated Site Rate - 55.0%, FY 2003 - 49%; HP 2010 Goal: 76%

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
User Pop w/ DM DX prior to report period	203		192			179		
# w/Retinal Evaluation or refusal	58	28.6	45	23.4	+5.1	54	30.2	-1.6
A. # w/ DM Retinal exam or refusal	5	2.5	6	3.1	-0.7	6	3.4	-0.9
B. # w/Other Eye Exams	53	26.1	39	20.3	+5.8	48	26.8	-0.7
Active Diabetic Pts (GPRA)	106		95			87		
# w/Retinal Evaluation or refusal (GPRA)	47	44.3	38	40.0	+4.3	44	50.6	-6.2
A. # w/ DM Retinal exam or refusal	5	4.7	6	6.3	-1.6	6	6.9	-2.2
B. # w/Other Eye Exams	42	39.6	32	33.7	+5.9	38	43.7	-4.1

\*\*\* IHS 2007 Clinical Performance Report \*\*\*  
 DEMO INDIAN HOSPITAL  
 Report Period: Jan 01, 2006 to Dec 31, 2006  
 Previous Year Period: Jan 01, 2005 to Dec 31, 2005  
 Baseline Period: Jan 01, 2000 to Dec 31, 2000

---

Diabetic Retinopathy (con't)

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
Active Adult Diabetic Patients	76		71			63		
# w/Retinal Evaluation or refusal	36	47.4	31	43.7	+3.7	39	61.9	-14.5
A. # w/ DM Retinal exam or refusal	5	6.6	4	5.6	+0.9	6	9.5	-2.9
B. # w/Other Eye Exams	31	40.8	27	38.0	+2.8	33	52.4	-11.6

\*\*\* IHS 2007 Clinical Performance Report \*\*\*  
 DEMO INDIAN HOSPITAL  
 Report Period: Jan 01, 2006 to Dec 31, 2006  
 Previous Year Period: Jan 01, 2005 to Dec 31, 2005  
 Baseline Period: Jan 01, 2000 to Dec 31, 2000

Diabetes: Access to Dental Services

Denominator(s):

Active Diabetic patients, defined as all Active Clinical patients diagnosed with diabetes prior to the Report Period, AND at least 2 visits during the Report Period, AND 2 DM-related visits ever

Numerator(s):

Patients with documented dental visit during the Report period, including refusals in past year.

A: Patients with documented refusal.

For non-CHS dental visits, searches for V Dental ADA codes 0000 or 0190 or refusal of ADA code 0000 or 0190; VExam 30 or Refusal Exam 30; or POV V72.2. For CHS dental visits, searches for any visit with an ADA code. CHS visit defined as Type code of C in Visit file.

During FY 2007, maintain the proportion of patients with diagnosed diabetes who obtain access to dental services at the FY 2006 rate.

IHS Performance: FY 2005 - 39.0%, FY 2004 - 37.0%, FY 2003 - 36%; HP 2010 Goal: 71%

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
Active Diabetic Pts	106		95			87		
# w/dental visit or refusal in past yr	17	16.0	19	20.0	-4.0	18	20.7	-4.7
A. # Refusals w/ % of Total Dental Visits	1	5.9	0	0.0	+5.9	0	0.0	+5.9

\*\*\* IHS 2007 Clinical Performance Report \*\*\*  
 DEMO INDIAN HOSPITAL  
 Report Period: Jan 01, 2006 to Dec 31, 2006  
 Previous Year Period: Jan 01, 2005 to Dec 31, 2005  
 Baseline Period: Jan 01, 2000 to Dec 31, 2000

Access to Dental Services

Denominator(s):

GPRA Denominator: All patients in the User Population, broken down by age groups.

Numerator(s):

GPRA Numerator: Patients with documented dental visit during the Report period, including refusals in past year.  
 A: Patients with documented refusal.

For non-CHS dental visits, searches for V Dental ADA codes 0000 or 0190 or refusal of ADA code 0000 or 0190; VExam 30 or Refusal Exam 30; or POV V72.2. For CHS dental visits, searches for any visit with an ADA code. CHS visit defined as Type code of C in Visit file.

During FY 2007, increase to 24% the proportion of patients that obtain access to dental services.

IHS Performance: FY 2006 - 23.0%, FY 2005 - 24.0%, FY 2004 - 24.0%, FY 2003 - 25%; IHS 2010 Goal: 40%

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
# User Pop (GPRA)	2,370		2,300			2,332		
# w/dental visit or refusal in past yr (GPRA)	231	9.7	199	8.7	+1.1	207	8.9	+0.9
A. # Refusals w/ Dental Visits	2	0.1	0	0.0	+0.1	0	0.0	+0.1

\*\*\* IHS 2007 Clinical Performance Report \*\*\*  
 DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

Access to Dental Services (con't)

	TOTAL USER POPULATION							
	Age Distribution							
	0-5	6-11	12-19	20-34	35-44	45-54	55-74	>74 yrs
CURRENT REPORT PERIOD								
Total # User Pop	342	238	343	587	289	272	249	50
# w/dental visit or refusal								
in past yr	21	27	29	67	31	30	25	1
% w/dental visit or refusal								
in past yr	6.1	11.3	8.5	11.4	10.7	11.0	10.0	2.0
# A. # Refusals w/ % of								
Total Visits	0	0	1	0	0	1	0	0
% A. # Refusals w/ % of								
Total Visits	0.0	0.0	0.3	0.0	0.0	0.4	0.0	0.0
PREVIOUS YEAR PERIOD								
Total # User Pop	347	236	343	568	276	241	240	49
# w/dental visit or refusal								
in past yr	19	22	30	52	24	24	24	4
% w/dental visit or refusal								
in past yr	5.5	9.3	8.7	9.2	8.7	10.0	10.0	8.2
# A. # Refusals w/ % of								
Total Visits	0	0	0	0	0	0	0	0
% A. # Refusals w/ % of								
Total Visits	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
CHANGE FROM PREV YR %								
w/dental visit or refusal								
in past yr	+0.7	+2.0	-0.3	+2.3	+2.0	+1.1	+0.0	-6.2
A. # Refusals w/ % of								
Total Visits	+0.0	+0.0	+0.3	+0.0	+0.0	+0.4	+0.0	+0.0

\*\*\* IHS 2007 Clinical Performance Report \*\*\*  
 DEMO INDIAN HOSPITAL  
 Report Period: Jan 01, 2006 to Dec 31, 2006  
 Previous Year Period: Jan 01, 2005 to Dec 31, 2005  
 Baseline Period: Jan 01, 2000 to Dec 31, 2000

Access to Dental Services (con't)

	TOTAL USER POPULATION							
	Age Distribution							
	0-5	6-11	12-19	20-34	35-44	45-54	55-74	>74 yrs
BASELINE REPORT PERIOD								
Total # User Pop	363	285	346	543	291	225	227	52
# w/dental visit or refusal								
in past yr	17	30	29	50	31	27	20	3
% w/dental visit or refusal								
in past yr	4.7	10.5	8.4	9.2	10.7	12.0	8.8	5.8
# A. # Refusals w/ % of								
Total Visits	0	0	0	0	0	0	0	0
% A. # Refusals w/ % of								
Total Visits	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
CHANGE FROM BASE YR %								
w/dental visit or refusal								
in past yr	+1.5	+0.8	+0.1	+2.2	+0.1	-1.0	+1.2	-3.8
A. # Refusals w/ % of								
Total Visits	+0.0	+0.0	+0.3	+0.0	+0.0	+0.4	+0.0	+0.0

\*\*\* IHS 2007 Clinical Performance Report \*\*\*  
 DEMO INDIAN HOSPITAL  
 Report Period: Jan 01, 2006 to Dec 31, 2006  
 Previous Year Period: Jan 01, 2005 to Dec 31, 2005  
 Baseline Period: Jan 01, 2000 to Dec 31, 2000

Dental Sealants

Denominator(s):

No denominator. This measure is a total count only, not a percentage.

Numerator(s):

GPRA Numerator: For patients meeting the User Population definition, the total number of dental sealants and refusals during the Report Period.  
 Number of documented refusals.

Age of the patient is calculated at the beginning of the Report period. Sealants defined as V Dental ADA code 1351 or refusal of ADA code 1351. Refusals are only counted if a patient did not have a sealant during the Report Period. If a patient had both a sealant and a refusal, only the sealant will be counted.

During FY 2007, maintain the number of sealants placed per year in American Indian and Alaska Native patients at the FY 2006 rate of 246,645 sealants.

IHS Performance: FY 2006 - 246,645, FY 2005 - 249,882 (now being reported from CRS), FY 2004 - 230,295 (reported from CRS 2004 report), FY 2004 - 287,158 (reported from NPIRS)

	REPORT PERIOD	PREV YR PERIOD	CHG from PREV YR	BASE PERIOD	CHG from BASE
Total # of Sealants Documented or Refusal (GPRA)	44	61	-17	81	-37
# Dental Sealants documented pts <12 yrs	29	26	+3	40	-11
# Dental Sealants documented pts 12-18 yrs	13	34	-21	40	-27
# Dental Sealants documented pts >18 yrs	1	1	+0	1	+0
# refusals	1	0	+1	0	+1

\*\*\* IHS 2007 Clinical Performance Report \*\*\*  
 DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006  
 Previous Year Period: Jan 01, 2005 to Dec 31, 2005  
 Baseline Period: Jan 01, 2000 to Dec 31, 2000

Topical Fluoride

Denominator(s):

No denominator. This measure is a total count only, not a percentage.

Numerator(s):

GPRA Numerator: For patients meeting the User Population definition, the total number of patients with at least one topical fluoride treatment or refusal during the Report Period.

A: Patients with documented refusal in past year.

For patients meeting the User Population definition, the total number of appropriate topical fluoride applications and refusals based on a maximum of four per patient per year.

A: Number of documented refusals during past year.

Topical fluoride application defined as: 1) V Dental ADA codes 1201, 1203, 1204, 1205; 2) V POV V07.31; or 3) Refusal of ADA code 1201, 1203, 1204, or 1205. A maximum of one application per patient per visit is allowed. A maximum of four topical fluoride applications are allowed per patient per year for the applications measure. Refusals are only counted if a patient did not have a topical fluoride application during the Report Period. If a patient had both an application and a refusal, only the application will be counted.

During FY 2007, maintain the number of American Indian and Alaska Native patients receiving at least one topical fluoride application at the FY 2006 rate of 95,439 patients.

IHS Performance: FY 2006 # Patients - 95,439, FY 2005 - 85,318; FY 2005 # Applications - 113,324

	REPORT PERIOD	PREV YR PERIOD	CHG from PREV YR	BASE PERIOD	CHG from BASE
Total # of Patients w/at least 1 Topical Fluoride App or refusal (GPRA)	35	26	+9	15	+20
A. # Patients w/ Refusals	1	0	+1	0	+1
Total # of Topical Fluoride Applications/ Refusals	39	26	+13	15	+24
A. # Refusals	1	0	+1	0	+1

\*\*\* IHS 2007 Clinical Performance Report \*\*\*  
DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006  
Previous Year Period: Jan 01, 2005 to Dec 31, 2005  
Baseline Period: Jan 01, 2000 to Dec 31, 2000

-----  
Adult Immunizations: Influenza

Denominator(s):

Active Clinical patients ages 50 or older.

A: Active Clinical patients ages 50-64.

B: GPRA Denominator. Active Clinical patients ages 65 and older.

Active Diabetic patients, defined as all Active Clinical patients diagnosed with diabetes at least one year prior to the end of Report period, AND at least 2 visits in the past year, AND 2 DM-related visits ever.

All User Population patients ages 50 or older.

A: All User Population patients ages 50-64.

B: All User Population patients ages 65 and older.

Numerator(s):

GPRA Numerator: Patients with Influenza vaccine documented during the Report Period, including refusals in past year.

Documented patient refusals (REF) or not medically indicated (NMI)

Age of the patient is calculated at the beginning of the Report Period.  
Influenza vaccine defined as: 1) Immunization (CVX) codes: 88-Influenza Virus Vaccine, NOS; 15 Inf Virus Vac SV; 16 Inf Virus Vac WV; 111 Inf Virus Vac Intranasal; 2) POV: V04.8 (old code), V04.81, or V06.6; 3) CPT: 90655-90660, 90724; 4) ICD Procedure code: 99.52; 5) Refusal Immunization 88, 111, 15, 16.

In FY 2007, increase to 59% the influenza vaccination levels among non-institutionalized adults aged 65 years and older.

>65 Vaccine Rate: IHS Performance: FY 2006 - 58.0%, FY 2005 - 59.0%, FY 2004 - 54.0%, FY 2003 - 51%; HP 2010 Goal: 90%

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
Active Clinical Patients ages 50 or older	214		207			177		
Total # w/Flu vaccine documented	65	30.4	66	31.9	-1.5	29	16.4	+14.0
A. # Refusals w/ % of Total IZ	2	3.1	5	7.6	-4.5	0	0.0	+3.1

## \*\*\* IHS 2007 Clinical Performance Report \*\*\*

## DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

## Adult Immunizations: Influenza (con't)

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
A. Active Clinical Patients ages 50-64	153		145			112		
Total # w/Flu vaccine documented	40	26.1	41	28.3	-2.1	14	12.5	+13.6
A. # Refusals w/ % of Total IZ	1	2.5	4	9.8	-7.3	0	0.0	+2.5
B. Active Clinical Patients 65 and older (GPRA)	61		62			65		
Total # w/Flu vaccine documented (GPRA)	25	41.0	25	40.3	+0.7	15	23.1	+17.9
A. # Refusals w/ % of Total IZ	1	4.0	1	4.0	+0.0	0	0.0	+4.0
Active Diabetic Pts	106		95			87		
Total # w/Flu vaccine documented	43	40.6	44	46.3	-5.7	23	26.4	+14.1
A. # Refusals w/ % of Total IZ	1	2.3	1	2.3	+0.1	0	0.0	+2.3
# User Population 50 and older	423		390			375		
Total # w/Flu vaccine documented	66	15.6	66	16.9	-1.3	33	8.8	+6.8
A. # of Refusals w/ % of Total IZ	2	3.0	5	7.6	-4.5	0	0.0	+3.0

\*\*\* IHS 2007 Clinical Performance Report \*\*\*  
 DEMO INDIAN HOSPITAL  
 Report Period: Jan 01, 2006 to Dec 31, 2006  
 Previous Year Period: Jan 01, 2005 to Dec 31, 2005  
 Baseline Period: Jan 01, 2000 to Dec 31, 2000

---

Adult Immunizations: Influenza (con't)

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
A. # User Population ages 50-64	285		255			233		
Total # w/Flu vaccine documented	41	14.4	41	16.1	-1.7	17	7.3	+7.1
A. # Refusals w/ % of Total IZ	1	2.4	4	9.8	-7.3	0	0.0	+2.4
B. # User Population 65 and older	138		135			142		
Total # w/Flu vaccine documented	25	18.1	25	18.5	-0.4	16	11.3	+6.8
A. # of Refusals w/ % of Total IZ	1	4.0	1	4.0	+0.0	0	0.0	+4.0

\*\*\* IHS 2007 Clinical Performance Report \*\*\*  
 DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006  
 Previous Year Period: Jan 01, 2005 to Dec 31, 2005  
 Baseline Period: Jan 01, 2000 to Dec 31, 2000

Adult Immunizations: Pneumovax

Denominator(s):

GPRA Denominator: All Active Clinical patients ages 65 or older.  
 Active Diabetic patients, defined as all Active Clinical patients  
 diagnosed with diabetes prior to the Report Period, AND at least 2 visits  
 during the Report Period, AND 2 DM-related visits ever.  
 All User Population patients ages 65 and older at beginning of Report  
 period.

Numerator(s):

GPRA Numerator: Patients with Pneumococcal vaccine documented at any time  
 before the end of the Report Period, including refusals in past year.  
 Documented patient refusals (REF) or not medically indicated (NMI).  
 Diabetic patients with pneumovax documented in past 5 years, including  
 refusals in past year.

Age of the patient is calculated at the beginning of the Report Period.  
 Pneumovax definitions: 1) Immunization (CVX) codes: 33 Pneumo  
 Polysaccharide; 100 Pneumo Conjugate; 109 Pneumo NOS; 2) POV: V06.6;  
 V03.89, V03.82; 3) V Procedure: 99.55; 4) CPT: 90669, 90732; 5) Refusal  
 Immunization 33, 100, 109.

In FY 2007, increase the rate for pneumococcal vaccination levels among  
 adult patients age 65 years and older to 76%.

>65 Vaccine Rate: IHS Performance: FY 2006 - 74.0%, FY 2005 - 69.0%, FY  
 2004 - 69.0%, FY 2003 - 65%; HP 2010 Goal: 90%

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
Active Clinical Pts ages 65 & older (GPRA)	61		62			65		
Total # w/Pneumovax documented (GPRA)	39	63.9	41	66.1	-2.2	37	56.9	+7.0
A. # Refusals w/ % of Total IZ	0	0.0	0	0.0	+0.0	0	0.0	+0.0

## \*\*\* IHS 2007 Clinical Performance Report \*\*\*

## DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

-----  
Adult Immunizations: Pneumovax (con't)

	REPORT	%	PREV YR	%	CHG from	BASE	%	CHG from
	PERIOD		PERIOD		PREV YR %	PERIOD		BASE %
Active Diabetic Pts	106		95			87		
Total # w/Pneumovax documented	52	49.1	51	53.7	-4.6	51	58.6	-9.6
A. # Refusals w/ % of Total IZ	0	0.0	0	0.0	+0.0	0	0.0	+0.0
Total # w/Pneumovax documented in past 5 yrs	31	29.2	36	37.9	-8.6	30	34.5	-5.2
A. # Refusals w/ % of Total IZ	0	0.0	0	0.0	+0.0	0	0.0	+0.0
# User Population ages 65 & older	138		135			142		
Total # w/Pneumovax documented	41	29.7	41	30.4	-0.7	37	26.1	+3.7
A. # Refusals w/ % of Total IZ	0	0.0	0	0.0	+0.0	0	0.0	+0.0

## \*\*\* IHS 2007 Clinical Performance Report \*\*\*

## DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

-----  
Childhood Immunizations

## Denominator(s):

Active Clinical patients ages 19-35 months at end of Report period.

User Population patients ages 19-35 months at end of Report Period.

GPRA Denominator: User Population patients active in the Immunization Package who are 19-35 months at end of Report period. NOTE: Only values for the Current Period will be reported for this denominator since currently there is not a way to determine if a patient was active in the Immunization Package during the Previous Year or Baseline Periods.

## Numerator(s):

GPRA Numerator: Patients who have received the 4:3:1:3:3 combination (i.e. 4 DTaP, 3 Polio, 1 MMR, 3 HiB, 3 Hepatitis B), including refusals, contraindications, and evidence of disease.

A: Patients with documented REF refusal in PCC or Parent or Patient refusal in the IZ program.

B: Patients with either (1) evidence of the disease, (2) a contraindication, or (3) a documented NMI (not medically indicated) refusal.

Patients who have received 4 doses of DTaP ever, including refusals, contraindications, and evidence of disease.

A: Patients with documented REF refusal in PCC or Parent or Patient refusal in the IZ program.

B: Patients with either (1) evidence of the disease, (2) a contraindication, or (3) a documented NMI (not medically indicated) refusal.

Patients who have received 3 doses of Polio ever, including refusals, contraindications, and evidence of disease.

A: Patients with documented REF refusal in PCC or Parent or Patient refusal in the IZ program.

B: Patients with either (1) evidence of the disease, (2) a contraindication, or (3) a documented NMI (not medically indicated) refusal.

Patients who have received 1 dose of MMR ever, including refusals, contraindications, and evidence of disease.

A: Patients with documented REF refusal in PCC or Parent or Patient refusal in the IZ program.

B: Patients with either (1) evidence of the disease, (2) a contraindication, or (3) a documented NMI (not medically indicated) refusal.

Patients who have received 3 doses of HiB ever, including refusals, contraindications, and evidence of disease.

A: Patients with documented REF refusal in PCC or Parent or Patient refusal in the IZ program.

B: Patients with either (1) evidence of the disease, (2) a contraindication, or (3) a documented NMI (not medically indicated)

## \*\*\* IHS 2007 Clinical Performance Report \*\*\*

DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

---

refusal.

Patients who have received 3 doses of Hepatitis B vaccine ever, including refusals, contraindications, and evidence of disease.

A: Patients with documented REF refusal in PCC or Parent or Patient refusal in the IZ program.

B: Patients with either (1) evidence of the disease, (2) a contraindication, or (3) a documented NMI (not medically indicated) refusal.

Patients who have received 1 dose of Varicella ever, including refusals, contraindications, and evidence of disease.

A: Patients with documented REF refusal in PCC or Parent or Patient refusal in the IZ program.

B: Patients with either (1) evidence of the disease, (2) a contraindication, or (3) a documented NMI (not medically indicated) refusal.

Patients who have received 4 doses of Pneumococcal conjugate vaccine ever, including refusals, contraindications, and evidence of disease.

A: Patients with documented REF refusal in PCC or Parent or Patient refusal in the IZ program.

B: Patients with either (1) evidence of the disease, (2) a contraindication, or (3) a documented NMI (not medically indicated) refusal.

Patients who have received all of their childhood immunizations, defined as 4 DTaP, 3 Polio, 1 MMR, 3 HiB, 3 Hepatitis B, 1 Varicella, and 4 Pneumococcal, including refusals, contraindications, and evidence of disease.

Immunization Program Numerator: Patients who have received all of their childhood immunizations, defined as 4 DTaP, 3 Polio, 1 MMR, 3 HiB, 3 Hepatitis B, 1 Varicella, and 4 Pneumococcal, NOT including refusals, contraindications, and patients with evidence of disease.

Immunization Program Numerator: Patients who have received the 4:3:1:3:3 combination (i.e. 4 DTaP, 3 Polio, 1 MMR, 3 HiB, 3 Hepatitis B), NOT including refusals, contraindications, and patients with evidence of disease.

Age of the patient is calculated at the beginning of the Report period. Therefore the age range will be adjusted to 7-23 months. Because IZ data comes from multiple sources, any IZ codes documented on dates within 10 days of each other will be considered as the same immunization.

Active Immunization Package Patients denominator: Same as User Pop definition EXCEPT includes only patients flagged as active in the Immunization Package. NOTE: Only values for the Current Period will be reported for this denominator since currently there is not a way to determine if a patient was active in the Immunization Package during the Previous Year or Baseline Periods.

## \*\*\* IHS 2007 Clinical Performance Report \*\*\*

## DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

-----  
Dosage and types of immunization definitions:

- 4 doses of DTaP: 1) 4 DTaP/DTP/Tdap; 2) 1 DTaP/DTP/Tdap and 3 DT; 3) 1 DTaP/DTP/Tdap and 3 each of Diphtheria and Tetanus; 4) 4 DT and 4 Pertussis; 5) 4 Td and 4 Pertussis; or 6) 4 each of Diphtheria, Tetanus, and Pertussis.

- 3 doses of Polio: 1) 3 OPV; 2) 3 IPV; or 3) combination of OPV & IPV totaling 3 doses.

- 1 dose of MMR: 1) MMR; 2) 1 M/R and 1 Mumps; 3) 1 R/M and 1 Measles; or 4) 1 each of Measles, Mumps, and Rubella.

- 3 doses of Hep B OR 2 doses IF documented with CPT 90743.

- 3 doses of HIB

- 1 dose of Varicella

- 4 doses of Pneumococcal

Except for the Immunization Program Numerators, refusals, evidence of disease, and contraindications for individual immunizations will also count toward meeting the definition, as defined below.

- Each immunization must be refused and documented separately. For example, if a patient refused Rubella only, then there must be either an immunization, contraindication, or separate refusal for the Measles and Mumps immunizations.

- For immunizations where required number of doses is >1, only one refusal is necessary to be counted in the numerator. For example, if there is a single refusal for Hepatitis B, the patient will be included in the numerator.

- Evidence of disease will be checked for at any time in the child's life (prior to the end of the Report period.)

- To be counted in sub-numerator A, a patient must have a REF refusal in PCC or a Parent or Patient Refusal in the IZ program for any of the immunizations in the numerator. For example, if a patient refused Rubella only but had immunizations for Measles and Mumps, the patient would be included in sub-numerator A.

- To be counted in sub-numerator B, a patient must have evidence of disease, a contraindication, or an NMI refusal for any of the immunizations in the numerator. For example, if a patient was Rubella

## \*\*\* IHS 2007 Clinical Performance Report \*\*\*

## DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

immune but had a Measles and Mumps immunization, the patient would be included in sub-numerator B.

- Refusal Definitions: Parent/Patient Refusal in Immunization package or PCC Refusal type REF or NMI for IZ codes: DTaP: 20, 50, 106, 107, 110, 120; DTP: 1, 22, 102; Tdap: 115; DT: 28; Td: 9, 113; Tetanus: 35, 112; Pertussis: 11; OPV: 2, 89; IPV: 10, 89, 110, 120; MMR: 3, 94; M/R: 4; R/M: 38; Measles: 5; Mumps: 7; Rubella: 6; HiB: 22, 46-49; 50, 51, 102, 120; Hepatitis B: 8, 42-45, 51, 102, 104, 110; Varicella: 21, 94; Pneumococcal: 33, 100, 109.

NOTE: In the definitions for all immunizations shown below, the Immunization Program Numerators will include only CVX and CPT codes.

- DTaP IZ definitions: 1) Immunization (CVX) codes: 20, 50, 106, 107, 110, 120; 2) POV V06.1; 3) CPT: 90698, 90700, 90721, 90723, 90749 (old code).

- DTP IZ definitions: 1) Immunization (CVX) codes: 1, 22, 102; 2) POV: V06.1, V06.2, V06.3; 3) CPT: 90701, 90711 (old code), 90720; 4) Procedure 99.39.

- Tdap IZ definition: 1) Immunization (CVX) code: 115; 2) CPT 90715.

- DT IZ definitions: 1) Immunization (CVX) code 28; 2) POV V06.5; 3) CPT 90702.

- Td IZ definitions: 1) Immunization (CVX) code 9, 113; 2) POV V06.5; 3) CPT 90714, 90718.

- Diphtheria IZ definitions: 1) POV V03.5; 2) CPT 90719; 3) Procedure 99.36. Diphtheria evidence of disease definitions: POV or PCC Problem List (active or inactive) V02.4, 032\*.

- Tetanus definitions: 1) Immunization (CVX) codes: 35, 112; 2) POV V03.7, 3) CPT 90703; 4) Procedure 99.38. Tetanus evidence of disease definition: POV or PCC Problem List (active or inactive) 037\*.

- Pertussis definitions: 1) Immunization (CVX) code 11; 2) POV V03.6; 3) Procedure 99.37. Pertussis evidence of disease definition: POV or PCC Problem List (active or inactive) 033\*.

- OPV definitions: 1) Immunization (CVX) codes: 2, 89; 2) CPT 90712. OPV contraindication definitions: POV: 279, V08, 042, 200-202, 203.0, 203.1, 203.8, 204-208.

- IPV definitions: 1) Immunization (CVX) codes: 10, 89, 110, 120; 2)

## \*\*\* IHS 2007 Clinical Performance Report \*\*\*

## DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

---

POV V04.0, V06.3; 3) CPT: 90698, 90711 (old code), 90713, 90723; 4) Procedure 99.41. IPV evidence of disease definitions: POV or PCC Problem List (active or inactive): V12.02, 045\*, 138, 730.70-730.79.

- MMR definitions: 1) Immunization (CVX) codes: 3, 94; 2) POV V06.4; 3) CPT: 90707, 90710; 4) Procedure 99.48. MMR contraindication definitions: POV: 279, V08, 042, 200-202, 203.0, 203.1, 203.8, 204-208.

- M/R definitions: 1) Immunization (CVX) code 4; 2) CPT 90708.

- R/M definitions: 1) Immunization (CVX) code 38; 2) CPT 90709 (old code).

- Measles definitions: 1) Immunization (CVX) code 5; 2) POV V04.2; 3) CPT 90705; 4) Procedure 99.45. Measles evidence of disease definition: POV or PCC Problem List (active or inactive) 055\*.

- Mumps definitions: 1) Immunization (CVX) code 7; 2) POV V04.6; 3) CPT 90704; 4) Procedure 99.46. Mumps evidence of disease definition: POV or PCC Problem List (active or inactive) 072\*.

- Rubella definitions: 1) Immunization (CVX) code 6; 2) POV V04.3; 3) CPT 90706; 4) Procedure 99.47. Rubella evidence of disease definitions: POV or PCC Problem List (active or inactive) 056\*, 771.0.

- HiB definitions: 1) Immunization (CVX) codes: 22, 46-49, 50, 51, 102, 120; 2) POV V03.81; 3) CPT: 90645-90648, 90698, 90720-90721, 90748. HiB evidence of disease definitions: POV or PCC Problem List (active or inactive) 038.41, 041.5, 320.0, 482.2.

- Hepatitis B definitions: 1) Immunization (CVX) codes: 8, 42-45, 51, 102, 104, 110; 2) CPT: 90636, 90723, 90731 (old code), 90740, 90743-90748. Hepatitis B evidence of disease definitions: POV or PCC Problem List (active or inactive): V02.61, 070.2, 070.3.

- Varicella definitions: 1) Immunization (CVX) codes: 21, 94; 2) POV V05.4; 3) CPT: 90710, 90716. Varicella evidence of disease definitions: POV or PCC Problem List (active or inactive) 052\*, 053\*. Varicella contraindication definitions: POV: 279, V08, 042, 200-202, 203.0, 203.1, 203.8, 204-208.

- Pneumococcal definitions: 1) Immunization (CVX) codes: 33 Pneumo Polysaccharide; 100 Pneumo Conjugate; 109 Pneumo NOS; 2) POV: V06.6; V03.82; 3) CPT: 90669, 90732.

During FY 2007, maintain the FY 2006 rate of 78% for recommended immunizations for American Indian/Alaska Native children 19-35 months.

\*\*\* IHS 2007 Clinical Performance Report \*\*\*  
 DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006  
 Previous Year Period: Jan 01, 2005 to Dec 31, 2005  
 Baseline Period: Jan 01, 2000 to Dec 31, 2000

HP 2010 Goal: for 4:3:1:3:3 80%; for each individual IZ 90%

IHS Performance: FY 2006 - 80.0% (IZ program), 78.0% (CRS-in 2007, CRS will report for GPRA; not IZ program), FY 2005 - 75.0% (reported from IZ program), FY 2004 - 72.0% (reported from IZ program)

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
Active Clinical Pts 19-35 months	51		39			55		
# w/ 4:3:1:3:3 combo or w/ Dx/ Contraind/ Refusal	11	21.6	4	10.3	+11.3	6	10.9	+10.7
A. Refusals w/ % of Total all IZ	0	0.0	0	0.0	+0.0	0	0.0	+0.0
B. # w/ Dx/Contraind/NMI Ref w/ % of Total IZ	0	0.0	0	0.0	+0.0	0	0.0	+0.0
# w/ 4 doses DTaP or w/ Dx/ Contraind/Refusal	14	27.5	4	10.3	+17.2	9	16.4	+11.1
A. # Refusals w/ % of Total DTaP	0	0.0	0	0.0	+0.0	0	0.0	+0.0
B. # w/ Dx/Contraind/NMI Ref w/ % of Total DTaP	1	7.1	0	0.0	+7.1	0	0.0	+7.1
# w/ 3 doses Polio or w/ Dx/ Contraind/Refusal	19	37.3	11	28.2	+9.0	13	23.6	+13.6
A. # Refusals w/ % of Total Polio	0	0.0	0	0.0	+0.0	0	0.0	+0.0
B. # w/ Dx/Contraind/NMI Ref w/ % of Total Polio	0	0.0	0	0.0	+0.0	1	7.7	-7.7

## \*\*\* IHS 2007 Clinical Performance Report \*\*\*

## DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

## Childhood Immunizations (con't)

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
# w/ 1 dose MMR or w/ Dx/Contraind/Refusal	18	35.3	11	28.2	+7.1	19	34.5	+0.7
A. # Refusals w/ % of Total MMR	0	0.0	0	0.0	+0.0	0	0.0	+0.0
B. # w/Dx/Contraind/NMI Ref w/ % of Total MMR	0	0.0	0	0.0	+0.0	1	5.3	-5.3
# w/ 3 doses HIB or w/Dx/Contraind/Refusal	17	33.3	9	23.1	+10.3	14	25.5	+7.9
A. # Refusals w/ % of Total HIB	0	0.0	0	0.0	+0.0	0	0.0	+0.0
B. # w/ Dx/Contraind/NMI Ref w/ % of Total HIB	0	0.0	0	0.0	+0.0	0	0.0	+0.0
# w/ 3 doses Hep B or w/ Dx/Contraind/Refusal	17	33.3	10	25.6	+7.7	14	25.5	+7.9
A. # Refusals w/ % of Total Hep B	0	0.0	0	0.0	+0.0	0	0.0	+0.0
B. # w/ Dx/Contraind/NMI Ref w/ % of Total HEP B	0	0.0	0	0.0	+0.0	0	0.0	+0.0
# w/ 1 dose Varicella or w/ Dx/Contraind/Refusal	18	35.3	10	25.6	+9.7	15	27.3	+8.0
A. # Refusals w/ % of Total Varicella	0	0.0	0	0.0	+0.0	0	0.0	+0.0
B. # w/ Dx/Contraind/NMI Ref w/ % of Total Varicella	0	0.0	1	10.0	-10.0	1	6.7	-6.7
# w/4 doses Pneumococcal or w/Dx/ Contraind/Refusal	0	0.0	0	0.0	+0.0	0	0.0	+0.0
A. # Refusals w/ % of Total Pneumococcal	0	0.0	0	0.0	+0.0	0	0.0	+0.0
B. # w/ Dx/ Contraind/ NMI Ref w/ % of Total Pneumococcal	0	0.0	0	0.0	+0.0	0	0.0	+0.0

## \*\*\* IHS 2007 Clinical Performance Report \*\*\*

## DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

## Childhood Immunizations (con't)

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
# w/ All IZ or w/Dx/Contraind/ Refusal	0	0.0	0	0.0	+0.0	0	0.0	+0.0
# w/ All IZ-Only Patients Actually Immunized	0	0.0	0	0.0	+0.0	0	0.0	+0.0
# w/ 4:3:1:3:3 combo - Only Patients Actually Immunized	11	21.6	4	10.3	+11.3	6	10.9	+10.7
User Pop Pts 19-35 months	74		68			82		
# w/ 4:3:1:3:3 combo or Dx/Contraind/Ref	11	14.9	4	5.9	+9.0	6	7.3	+7.5
A. Refusals w/ % of Total all IZ	0	0.0	0	0.0	+0.0	0	0.0	+0.0
B. # w/ Dx/Contraind/NMI Ref w/ % of Total All IZ	0	0.0	0	0.0	+0.0	0	0.0	+0.0
# w/ 4 doses DTaP or w/ Dx/ Contraind/Refusal	14	18.9	4	5.9	+13.0	9	11.0	+7.9
A. # Refusals w/ % of Total DTaP	0	0.0	0	0.0	+0.0	0	0.0	+0.0
B. # w/ Dx/Contraind/NMI Ref w/ % of Total DTaP	1	7.1	0	0.0	+7.1	0	0.0	+7.1
# w/ 3 doses Polio or w/Dx/Contraind/ Refusal	19	25.7	11	16.2	+9.5	13	15.9	+9.8
A. # Refusals w/ % of Total Polio	0	0.0	0	0.0	+0.0	0	0.0	+0.0
B. # w/ Dx/Contraind/NMI Ref w/ % of Total Polio	0	0.0	0	0.0	+0.0	1	7.7	-7.7

## \*\*\* IHS 2007 Clinical Performance Report \*\*\*

DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

## Childhood Immunizations (con't)

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
# w/ 1 dose MMR or w/ Dx/Contraind/Refusal	18	24.3	11	16.2	+8.1	19	23.2	+1.2
A. # Refusals w/ % of Total MMR	0	0.0	0	0.0	+0.0	0	0.0	+0.0
B. # w/Dx/Contraind/NMI Ref w/ % of Total MMR	0	0.0	0	0.0	+0.0	1	5.3	-5.3
# w/ 3 doses HIB or w/Dx/Contraind/Refusal	17	23.0	9	13.2	+9.7	14	17.1	+5.9
A. # Refusals w/ % of Total HIB	0	0.0	0	0.0	+0.0	0	0.0	+0.0
B. # w/ Dx/Contraind/NMI Ref w/ % of Total HIB	0	0.0	0	0.0	+0.0	0	0.0	+0.0
# w/ 3 doses Hep B or w/ Dx/Contraind/Refusal	17	23.0	10	14.7	+8.3	14	17.1	+5.9
A. # Refusals w/ % of Total Hep B	0	0.0	0	0.0	+0.0	0	0.0	+0.0
B. # w/ Dx/Contraind/NMI Ref w/ % of Total Hep B	0	0.0	0	0.0	+0.0	0	0.0	+0.0
# w/ 1 dose Varicella or w/ Dx/Contraind/Ref	19	25.7	11	16.2	+9.5	15	18.3	+7.4
A. # Refusals w/ % of Total Varicella	0	0.0	0	0.0	+0.0	0	0.0	+0.0
B. # w/ Dx/Contraind/NMI Ref w/ % of Total Varicella	0	0.0	1	9.1	-9.1	1	6.7	-6.7
# w/4 doses Pneumococcal or w/Dx/ Contraind/Refusal	0	0.0	0	0.0	+0.0	0	0.0	+0.0
A. # Refusals w/ % of Total Pneumococcal	0	0.0	0	0.0	+0.0	0	0.0	+0.0
B. # w/ Dx/ Contraind/ NMI Ref w/ % of Total Pneumococcal	0	0.0	0	0.0	+0.0	0	0.0	+0.0

\*\*\* IHS 2007 Clinical Performance Report \*\*\*  
 DEMO INDIAN HOSPITAL  
 Report Period: Jan 01, 2006 to Dec 31, 2006  
 Previous Year Period: Jan 01, 2005 to Dec 31, 2005  
 Baseline Period: Jan 01, 2000 to Dec 31, 2000

Childhood Immunizations (con't)

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
# w/ All IZ or w/Dx/Contraind/ Refusal	0	0.0	0	0.0	+0.0	0	0.0	+0.0
# w/ All IZ- Only Patients Actually Immunized	0	0.0	0	0.0	+0.0	0	0.0	+0.0
# w/ All 4:3:1:3:3 combo Only Patients Actually Immunized	11	14.9	4	5.9	+9.0	6	7.3	+7.5
Active Imm Pkg Pts 19-35 months (GPRA)	27		0			0		
# w/ 4:3:1:3:3 combo or w/ Dx/ Contraind/ Refusal (GPRA)	11	40.7	0	0.0	+40.7	0	0.0	+40.7
A. Refusals w/ % of Total all IZ	0	0.0	0	0.0	+0.0	0	0.0	+0.0
B. # w/ Dx/Contraind/NMI Ref w/ % of Total IZ	0	0.0	0	0.0	+0.0	0	0.0	+0.0
# w/ 4 doses DTaP or w/ Dx/ Contraind/Refusal	13	48.1	0	0.0	+48.1	0	0.0	+48.1
A. # Refusals w/ % of Total DTaP	0	0.0	0	0.0	+0.0	0	0.0	+0.0
B. # w/ Dx/Contraind/NMI Ref w/ % of Total DTaP	0	0.0	0	0.0	+0.0	0	0.0	+0.0
# w/ 3 doses Polio or w/ Dx/ Contraind/Refusal	18	66.7	0	0.0	+66.7	0	0.0	+66.7
A. # Refusals w/ % of Total Polio	0	0.0	0	0.0	+0.0	0	0.0	+0.0
B. # w/ Dx/Contraind/NMI Ref w/ % of Total Polio	0	0.0	0	0.0	+0.0	0	0.0	+0.0

\*\*\* IHS 2007 Clinical Performance Report \*\*\*

DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

Childhood Immunizations (con't)

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
# w/ 1 dose MMR or w/ Dx/Contraind/Refusal	16	59.3	0	0.0	+59.3	0	0.0	+59.3
A. # Refusals w/ % of Total MMR	0	0.0	0	0.0	+0.0	0	0.0	+0.0
B. # w/Dx/Contraind/NMI Ref w/ % of Total MMR	0	0.0	0	0.0	+0.0	0	0.0	+0.0
# w/ 3 doses HIB or w/Dx/Contraind/Refusal	16	59.3	0	0.0	+59.3	0	0.0	+59.3
A. # Refusals w/ % of Total HIB	0	0.0	0	0.0	+0.0	0	0.0	+0.0
B. # w/ Dx/Contraind/NMI Ref w/ % of Total HIB	0	0.0	0	0.0	+0.0	0	0.0	+0.0
# w/ 3 doses Hep B or w/ Dx/Contraind/Refusal	16	59.3	0	0.0	+59.3	0	0.0	+59.3
A. # Refusals w/ % of Total Hep B	0	0.0	0	0.0	+0.0	0	0.0	+0.0
B. # w/ Dx/Contraind/NMI Ref w/ % of Total HEP B	0	0.0	0	0.0	+0.0	0	0.0	+0.0
# w/ 1 dose Varicella or w/ Dx/Contraind/Refusal	16	59.3	0	0.0	+59.3	0	0.0	+59.3
A. # Refusals w/ % of Total Varicella	0	0.0	0	0.0	+0.0	0	0.0	+0.0
B. # w/ Dx/Contraind/NMI Ref w/ % of Total Varicella	0	0.0	0	0.0	+0.0	0	0.0	+0.0
# w/4 doses Pneumococcal or w/Dx/ Contraind/Refusal	0	0.0	0	0.0	+0.0	0	0.0	+0.0
A. # Refusals w/ % of Total Pneumococcal	0	0.0	0	0.0	+0.0	0	0.0	+0.0
B. # w/ Dx/ Contraind/ NMI Ref w/ % of Total Pneumococcal	0	0.0	0	0.0	+0.0	0	0.0	+0.0

\*\*\* IHS 2007 Clinical Performance Report \*\*\*  
 DEMO INDIAN HOSPITAL  
 Report Period: Jan 01, 2006 to Dec 31, 2006  
 Previous Year Period: Jan 01, 2005 to Dec 31, 2005  
 Baseline Period: Jan 01, 2000 to Dec 31, 2000

---

Childhood Immunizations (con't)

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
# w/ All IZ or w/Dx/Contraind/Refusal	0	0.0	0	0.0	+0.0	0	0.0	+0.0
# w/ All IZ-Only Patients Actually Immunized	0	0.0	0	0.0	+0.0	0	0.0	+0.0
# w/ 4:3:1:3:3 combo - Only Patients Actually Immunized	11	40.7	0	0.0	+40.7	0	0.0	+40.7

## \*\*\* IHS 2007 Clinical Performance Report \*\*\*

## DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

-----  
Adolescent Immunizations

## Denominator(s):

Active Clinical patients age 13.

User Population patients age 13.

## Numerator(s):

Patients who have received the 2 MMR, 3 Hepatitis B, and one Varicella combination.

A: Patients with documented REF refusal in PCC or Parent or Patient refusal in the IZ program.

B: Patients with either (1) evidence of the disease, (2) a contraindication, or (3) a documented NMI (not medically indicated) refusal.

Patients who have received 2 doses of MMR ever, including refusals, contraindications, and evidence of disease.

A: Patients with documented REF refusal in PCC or Parent or Patient refusal in the IZ program.

B: Patients with either (1) evidence of the disease, (2) a contraindication, or (3) a documented NMI (not medically indicated) refusal.

Patients who have received 3 doses of Hepatitis B ever, including refusals, contraindications, and evidence of disease.

A: Patients with documented REF refusal in PCC or Parent or Patient refusal in the IZ program.

B: Patients with either (1) evidence of the disease, (2) a contraindication, or (3) a documented NMI (not medically indicated) refusal.

Patients who have received 1 dose of Varicella ever, including refusals, contraindications, and evidence of disease.

A: Patients with documented REF refusal in PCC or Parent or Patient refusal in the IZ program.

B: Patients with either (1) evidence of the disease, (2) a contraindication, or (3) a documented NMI (not medically indicated) refusal.

Age of the patient is calculated at the beginning of the Report period. Because IZ data comes from multiple sources, any IZ codes documented on dates within 10 days of each other will be considered as the same immunization.

## Dosage and types of immunization definitions:

- 2 doses of MMR: 1) 2 MMRs; 2) 2 M/R and 2 Mumps; 3) 2 R/M and 2 Measles; or 4) 2 each of Measles, Mumps, and Rubella.

- 3 doses of Hep B OR 2 doses IF documented with CPT 90743.

## \*\*\* IHS 2007 Clinical Performance Report \*\*\*

## DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

- 
- 1 dose of Varicella

Refusals, evidence of disease, and contraindications for individual immunizations will also count toward meeting the definition, as defined below.

- Each immunization must be refused and documented separately. For example, if a patient refused Rubella only, then there must be either an immunization, contraindication, or separate refusal for the Measles and Mumps immunizations.

- For immunizations where required number of doses is >1, only one refusal is necessary to be counted in the numerator. For example, if there is a single refusal for Hepatitis B, the patient will be included in the numerator.

- Evidence of disease will be checked for at any time in the child's life (prior to the end of the Report period.)

- To be counted in sub-numerator A, a patient must have a REF refusal in PCC or a Parent or Patient Refusal in the IZ program for any of the immunizations in the numerator. For example, if a patient refused Rubella only but had immunizations for Measles and Mumps, the patient would be included in sub-numerator A.

- To be counted in sub-numerator B, a patient must have evidence of disease, a contraindication, or an NMI refusal for any of the immunizations in the numerator. For example, if a patient was Rubella immune but had a Measles and Mumps immunization, the patient would be included in sub-numerator B.

- Refusal Definitions: Parent/Patient Refusal in Immunization package or PCC Refusal type REF or NMI for IZ codes: MMR: 3, 94; M/R: 4; R/M: 38; Measles: 5; Mumps: 7; Rubella: 6; Hepatitis B: 8, 42-45, 51, 102, 104, 110; Varicella: 21, 94.

- MMR definitions: 1) Immunization (CVX) codes: 3, 94; 2) POV V06.4; 3) CPT: 90707, 90710; 4) Procedure 99.48. MMR contraindication definitions: POV: 279, V08, 042, 200-202, 203.0, 203.1, 203.8, 204-208.

- M/R definitions: 1) Immunization (CVX) code 4; 2) CPT 90708.

- R/M definitions: 1) Immunization (CVX) code 38; 2) CPT 90709 (old code).

- Measles definitions: 1) Immunization (CVX) code 5; 2) POV V04.2; 3)

\*\*\* IHS 2007 Clinical Performance Report \*\*\*

DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

CPT 90705; 4) Procedure 99.45. Measles evidence of disease definition: POV or PCC Problem List (active or inactive) 055\*.

- Mumps definitions: 1) Immunization (CVX) code 7; 2) POV V04.6; 3) CPT 90704; 4) Procedure 99.46. Mumps evidence of disease definition: POV or PCC Problem List (active or inactive) 072\*.

- Rubella definitions: 1) Immunization (CVX) code 6; 2) POV V04.3; 3) CPT 90706; 4) Procedure 99.47. Rubella evidence of disease definitions: POV or PCC Problem List (active or inactive) 056\*, 771.0.

- Hepatitis B definitions: 1) Immunization (CVX) codes: 8, 42-45, 51, 102, 104, 110; 2) CPT: 90636, 90723, 90731 (old code), 90740, 90743-90748. Hepatitis B evidence of disease definitions: POV or PCC Problem List (active or inactive): V02.61, 070.2, 070.3.

- Varicella definitions: 1) Immunization (CVX) codes: 21, 94; 2) POV V05.4; 3) CPT: 90710, 90716. Varicella evidence of disease definitions: POV or PCC Problem List (active or inactive) 052\*, 053\*. Varicella contraindication definitions: POV: 279, V08, 042, 200-202, 203.0, 203.1, 203.8, 204-208.

Establish the proportion of American Indian/Alaska Native adolescents who have received the recommended immunizations.

HP 2010 Goal: for each individual IZ 90%

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
Active Clinical patients age 13	18		17			28		
# w/2 MMR, 3 Hep B, 1 varicella combo or w/Dx/Contraind/ Refusal	1	5.6	0	0.0	+5.6	0	0.0	+5.6
A. # Refusals w/ % of Total IZ	0	0.0	0	0.0	+0.0	0	0.0	+0.0
B. # w/ Dx/ Contraind/ NMI Ref w/ % of Total All IZ	0	0.0	0	0.0	+0.0	0	0.0	+0.0

\*\*\* IHS 2007 Clinical Performance Report \*\*\*

DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

Adolescent Immunizations (con't)

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
# w/ 2 doses MMR or w/ DX/ Contraind/ Refusal	4	22.2	0	0.0	+22.2	0	0.0	+22.2
A. # Refusals w/ % of Total MMR	0	0.0	0	0.0	+0.0	0	0.0	+0.0
B. # w/ Dx/ Contraind/ NMI Ref w/ % of Total MMR	0	0.0	0	0.0	+0.0	0	0.0	+0.0
# w/ 3 doses Hep B or w/ Dx/ Contraind/ Refusal	5	27.8	4	23.5	+4.2	9	32.1	-4.4
A. # Refusals w/ % of Total Hep B	0	0.0	0	0.0	+0.0	0	0.0	+0.0
B. # w/Dx/ Contraind/ NMI Ref w/ % of Total Hep B	0	0.0	0	0.0	+0.0	0	0.0	+0.0
# w/ 1 dose Varicella or w/ Dx/ Contraind/ Refusal	2	11.1	1	5.9	+5.2	0	0.0	+11.1
A. # Refusals w/ % of Total Varicella	0	0.0	0	0.0	+0.0	0	0.0	+0.0
B. # w/ Dx/ Contraind/ NMI Ref w/ % of Total Varicella	0	0.0	0	0.0	+0.0	0	0.0	+0.0
User Population patients age 13	47		45			56		
# w/2 MMR, 3 Hep B, 1 varicella combo or w/Dx Contraind/ Refusal	1	2.1	0	0.0	+2.1	0	0.0	+2.1
A. # Refusals w/ % of Total IZ	0	0.0	0	0.0	+0.0	0	0.0	+0.0
B. # w/ Dx/ Contraind/ NMI Ref w/ % of Total All IZ	0	0.0	0	0.0	+0.0	0	0.0	+0.0

\*\*\* IHS 2007 Clinical Performance Report \*\*\*  
 DEMO INDIAN HOSPITAL  
 Report Period: Jan 01, 2006 to Dec 31, 2006  
 Previous Year Period: Jan 01, 2005 to Dec 31, 2005  
 Baseline Period: Jan 01, 2000 to Dec 31, 2000

Adolescent Immunizations (con't)

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
# w/ 2 doses MMR or w/ DX/ Contraind/ Refusal	5	10.6	1	2.2	+8.4	0	0.0	+10.6
A. # Refusals w/ % of Total MMR	0	0.0	0	0.0	+0.0	0	0.0	+0.0
B. # w/ Dx/ Contraind/ NMI Ref w/ % of Total MMR	0	0.0	0	0.0	+0.0	0	0.0	+0.0
# w/ 3 doses Hep B or w/ Dx/ Contraind/ Refusal	6	12.8	4	8.9	+3.9	9	16.1	-3.3
A. # Refusals w/ % of Total Hep B	0	0.0	0	0.0	+0.0	0	0.0	+0.0
B. # w/Dx/ Contraind/ NMI Ref w/ % of Total Hep B	0	0.0	0	0.0	+0.0	0	0.0	+0.0
# w/ 1 dose Varicella or w/ Dx/ Contraind/ Refusal	3	6.4	1	2.2	+4.2	1	1.8	+4.6
A. # Refusals w/ % of Total Varicella	0	0.0	0	0.0	+0.0	0	0.0	+0.0
B. # w/ Dx/ Contraind/ NMI Ref w/ % of Total Varicella	0	0.0	0	0.0	+0.0	1	100.0	-100.0

## \*\*\* IHS 2007 Clinical Performance Report \*\*\*

DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

-----  
Appropriate Treatment for Children with Upper Respiratory Infection

## Denominator(s):

Active Clinical patients who were ages 3 months through 18 years who were diagnosed with an upper respiratory infection during the period six months (180 days) prior to the Report period through the first six months of the Report period.

User Population patients who were ages 3 months through 18 years who were diagnosed with an upper respiratory infection during the period six months (180 days) prior to the Report period through the first six months of the Report period.

## Numerator(s):

Patients who were NOT prescribed an antibiotic on within three days after diagnosis. In this measure, appropriate treatment is not to receive an antibiotic.

Age is calculated as follows: Children 3 months as of six months (180 days) of the year prior to the Report period to 18 years as of the first six months of the Report period.

In order to be included in the denominator, ALL of the following conditions must be met:

1. Patient's diagnosis of an upper respiratory infection (URI) must have occurred at an outpatient visit. Upper Respiratory Infection defined as POV 460 or 465.\*. Outpatient visit defined as Service Category A, S, or O.
2. If outpatient visit was to clinic code 30 (Emergency Medicine), it must not have resulted in a hospitalization, defined as service category H, either on the same day or the next day with URI diagnosis.
3. Patient's visit must ONLY have a diagnosis of URI. If any other diagnosis exists, the visit will be excluded.
4. The patient did not have a new or refill prescription for antibiotics within 30 days prior to the URI visit date.
5. The patient did not have an active prescription for antibiotics as of the URI visit date. "Active" prescription defined as:

Rx Days Supply >= (URI Visit Date - Prescription Date)

If multiple visits exist that meet the above criteria, the first visit will be used.

\*\*\* IHS 2007 Clinical Performance Report \*\*\*  
 DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006  
 Previous Year Period: Jan 01, 2005 to Dec 31, 2005  
 Baseline Period: Jan 01, 2000 to Dec 31, 2000

Antibiotic medications defined with medication taxonomy BGP HEDIS ANTIBIOTIC MEDS or V Procedure 99.21. (Medications are: Amoxicillin, Amox/Clavulanate, Ampicillin, Azithromycin, Cefaclor, Cefadroxil hydrate, Cefdinir, Cefixime, Cefditoren, Ceftibuten, Cefpodoxime proxetil, Cefprozil, Ceftriaxone, Cefuroxime, Cephalexin, Ciprofloxacin, Clindamycin, Dicloxacillin, Dirithromycin, Doxycycline, Erythromycin, Ery E-Succ/Sulfisoxazole, Flomefloxacin, Gatifloxacin, Levofloxacin, Loracarbef, Minocycline, Ofloxacin, Penicillin VK, Penicillin G, Sparfloxacin, Sulfisoxazole, Tetracycline, Trimethoprim, Trimethoprim-Sulfamethoxazol.)

Increase the proportion of children who received appropriate treatment for an upper respiratory infection.

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
Active Clinical 3 months-18 yrs w/Upper Respiratory Infection	31		36			29		
# w/o Antibiotic Rx	30	96.8	35	97.2	-0.4	27	93.1	+3.7
User Pop 3 months-18 yrs w/Upper Respiratory Infection	36		38			35		
# w/o Antibiotic Rx	35	97.2	37	97.4	-0.1	32	91.4	+5.8

## \*\*\* IHS 2007 Clinical Performance Report \*\*\*

DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

-----  
Appropriate Testing for Children with Pharyngitis

## Denominator(s):

Active Clinical patients who were ages 2-18 years who were diagnosed with pharyngitis and prescribed an antibiotic during the period six months (180 days) prior to the Report period through the first six months of the Report period.

User Population patients who were ages 2-18 years who were diagnosed with pharyngitis and prescribed an antibiotic during the period six months (180 days) prior to the Report period through the first six months of the Report period.

## Numerator(s):

Patients who received a Group A strep test.

Age is calculated as follows: Children 2 years as of six months (180 days) of the year prior to the Report period to 18 years as of the first six months of the Report period.

In order to be included in the denominator, ALL of the following conditions must be met:

1. Patient's diagnosis of pharyngitis must have occurred at an outpatient visit. Pharyngitis defined as POV 462, 463, or 034.0. Outpatient visit defined as Service Category A, S, or O.
2. If outpatient visit was to clinic code 30 (Emergency Medicine), it must not have resulted in a hospitalization, defined as service category H, either on the same day or the next day with pharyngitis diagnosis.
3. Patient's visit must ONLY have a diagnosis of pharyngitis. If any other diagnosis exists, the visit will be excluded.
4. The patient did not have a new or refill prescription for antibiotics within 30 days prior to the pharyngitis visit date.
5. The patient did not have an active prescription for antibiotics as of the pharyngitis visit date. "Active" prescription defined as:

Rx Days Supply >= (URI Visit Date - Prescription Date)

6. The patient filled a prescription for antibiotics on or within three days after the pharyngitis visit.

If multiple visits exist that meet the above criteria, the first visit will be used.

\*\*\* IHS 2007 Clinical Performance Report \*\*\*  
 DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006  
 Previous Year Period: Jan 01, 2005 to Dec 31, 2005  
 Baseline Period: Jan 01, 2000 to Dec 31, 2000

Antibiotic medications defined with medication taxonomy BGP HEDIS ANTIBIOTIC MEDS or V Procedure 99.21. (Medications are: Amoxicillin, Amox/Clavulanate, Ampicillin, Azithromycin, Cefaclor, Cefadroxil hydrate, Cefdinir, Cefixime, Cefditoren, Ceftibuten, Cefpodoxime proxetil, Cefprozil, Ceftriaxone, Cefuroxime, Cephalexin, Ciprofloxacin, Clindamycin, Dicloxacillin, Dirithromycin, Doxycycline, Erythromycin, Ery E-Succ/Sulfisoxazole, Flomefloxacin, Gatifloxacin, Levofloxacin, Loracarbef, Minocycline, Ofloxacin, Penicillin VK, Penicillin G, Sparfloxacin, Sulfisoxazole, Tetracycline, Trimethoprim, Trimethoprim-Sulfamethoxazol.)

To be included in the numerator, a patient must have received a Group A Streptococcus test within the 7-day period beginning three days prior through three days after the Pharyngitis visit date.

Group A Streptococcus test defined as: CPT 87430 (by enzyme immunoassay), 87650-87652 (by nucleic acid), 87880 (by direct optical observation), 87081 (by throat culture); site-populated taxonomy BGP GROUP A STREP; and LOINC taxonomy.

Increase the proportion of children with pharyngitis who received a Group A Strep test.

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
Active Clinical 2-18 yrs w/ Pharyngitis and Antibiotic Rx	10		5			8		
# w/Group A Strep Test	9	90.0	3	60.0	+30.0	2	25.0	+65.0
User Pop 2-18 yrs w/ Pharyngitis and Antibiotic Rx	11		7			10		
# w/Group A Strep Test	9	81.8	4	57.1	+24.7	2	20.0	+61.8

\*\*\* IHS 2007 Clinical Performance Report \*\*\*  
DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006  
Previous Year Period: Jan 01, 2005 to Dec 31, 2005  
Baseline Period: Jan 01, 2000 to Dec 31, 2000

-----  
Cancer Screening: Pap Smear Rates

Denominator(s):

GPRA Denominator: Female Active Clinical patients ages 21 through 64 without documented history of Hysterectomy.  
Female User Population patients ages 21 through 64 without a documented history of Hysterectomy.

Numerator(s):

GPRA Numerator: Patients with a Pap Smear documented in the past 3 years, including refusals in past year.  
A: Patients with documented refusal in past year.

Age of the patient is calculated at the beginning of the Report period. Hysterectomy defined as V Procedure: 68.4-68.9 or CPT 51925, 56308 (old code), 58150, 58152, 58200-58294, 58550-54, 58951, 58953-58954, 59135. Pap Smear definitions: 1) V Lab: Pap Smear; 2) POV: V76.2 Screen Mal Neop-Cervix, V72.31 Routine Gynecological Examination, V72.32 Encounter for Pap Cervical Smear to Confirm Findings of Recent Normal Smear Following Initial Abnormal Smear, V72.3 Gynecological Examination, Pap Cervical Smear as Part of General Gynecological Exam, Pelvic Exam (annual) (periodic) (old code, to be counted for visits prior to 10/1/04 only), V76.47 Vaginal Pap Smear for Post-Hysterectomy Patients, or V76.49 Pap Smear for Women w/o a Cervix, or 795.06 Pap smear of cervix with cytologic evidence of malignancy ; 3) V Procedure: 91.46; 4) V CPT: 88141-88167, 88174-88175, Q0091 Screening Pap Smear; 5) Women's Health: procedure called Pap Smear; 6) LOINC taxonomy; 7) site-populated taxonomy BGP GPRA PAP SMEAR; 8) Refusal (in past year) Lab Test Pap Smear.

During FY 2007, increase to 60% the proportion of female patients ages 21 through 64 without a documented history of hysterectomy who have had a Pap screen within the previous three years.

IHS Performance - FY 2006 - 59.0%, FY 2005 - 60.0%, FY 2004 - 58.0%, FY 2003 - 61%; IHS 2010 Goal: 90%

REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
---------------	---	----------------	---	--------------------	-------------	---	-----------------

\*\*\* IHS 2007 Clinical Performance Report \*\*\*  
 DEMO INDIAN HOSPITAL  
 Report Period: Jan 01, 2006 to Dec 31, 2006  
 Previous Year Period: Jan 01, 2005 to Dec 31, 2005  
 Baseline Period: Jan 01, 2000 to Dec 31, 2000

Cancer Screening: Pap Smear Rates (con't)

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
Female Active Clinical 21-64 years (GPRA)	376		345			316		
# w/Pap Smear recorded w/in 3 years (GPRA)	177	47.1	174	50.4	-3.4	147	46.5	+0.6
A. # Refusals w/ % of Total Pap	0	0.0	0	0.0	+0.0	0	0.0	+0.0
# Female User Pop 21-64 years	666		633			605		
# w/Pap Smear recorded w/in 3 years	193	29.0	192	30.3	-1.4	162	26.8	+2.2
A. # Refusals w/ % of Total Pap	0	0.0	0	0.0	+0.0	0	0.0	+0.0

## \*\*\* IHS 2007 Clinical Performance Report \*\*\*

DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

-----  
Cancer Screening: Mammogram Rates

## Denominator(s):

GPRA Denominator: Female Active Clinical patients ages 52 through 64 without a documented history of bilateral mastectomy or two separate unilateral mastectomies.

Female Active Clinical patients ages 40 and older without a documented history of bilateral mastectomy or two separate unilateral mastectomies.

Female User Population patients ages 52 through 64 without a documented history of bilateral mastectomy or two separate unilateral mastectomies.

Female User Population patients ages 40 and older without a documented history of bilateral mastectomy or two separate unilateral mastectomies.

## Numerator(s):

GPRA Numerator: All patients who had a Mammogram documented in the past 2 years, including documented refusals in past year.

A: Patients with documented refusal in the past year.

Age of the patient is calculated at the beginning of the Report period.

Bilateral mastectomy defined as: 1) V CPT: 19180.50 OR 19180 w/modifier 09950 (.50 and 09950 modifiers indicate bilateral); 19200.50 OR 19200 w/modifier 09950; 19220.50 OR 19220 w/modifier 09950; 19240.50 OR 19240 w/modifier 09950; 2) ICD Operation codes: 85.42; 85.44; 85.46; 85.48.

Unilateral mastectomy defined as: Must have 2 separate occurrences for either CPT or procedure codes on 2 different dates of service. 1) V CPT: 19180, 19200, 19220, 19240; 2) ICD Operation codes: 85.41, 85.43, 85.45, 85.47; Screening Mammogram definitions: 1) V Radiology or V CPT: 76090 Mammogram; unilateral; 76091 Mammogram; bilateral; 76092 Mammogram; screening; G0206, Diagnostic Mammography, unilateral; G0204, Diagnostic Mammography, bilateral; G0202 Screening Mammography, bilateral; 2) POV: V76.11 screening mammogram for high risk patient; V76.12 other screening mammogram; 3) V Procedure: 87.36 Xerography of breast, 87.37 Other Mammography; 4) Women's Health: Screening Mammogram, Mammogram Dx Bilat, Mammogram Dx Unilat; 5) Refusal (in past year): V Radiology Mammogram for CPT 76090, 76091, 76092, G0206, G0204, G0202.

During FY 2007, maintain the proportion of female patients ages 50 through 64 who have had mammography screening within the last 2 years at the FY 2006 rate of 41%.

IHS Performance: FY 2006 - 41.0%, FY 2005 - 41.0%, FY 2004 - 40.0%, FY 2003 - 40%; IHS 2010 Goal: 70%

\*\*\* IHS 2007 Clinical Performance Report \*\*\*  
 DEMO INDIAN HOSPITAL  
 Report Period: Jan 01, 2006 to Dec 31, 2006  
 Previous Year Period: Jan 01, 2005 to Dec 31, 2005  
 Baseline Period: Jan 01, 2000 to Dec 31, 2000

Cancer Screening: Mammogram Rates (con't)

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
# Female Active Clinical 52-64 (GPRA)	65		58			47		
# w/Mammogram recorded w/in 2 years (GPRA)	18	27.7	21	36.2	-8.5	24	51.1	-23.4
A. # Refusals w/ % of Total Mammograms	0	0.0	0	0.0	+0.0	0	0.0	+0.0
# Female Active Clinical 40+	210		192			179		
# w/Mammogram recorded w/in 2 years	44	21.0	61	31.8	-10.8	61	34.1	-13.1
A. # Refusals w/ % of Total Mammogram	0	0.0	0	0.0	+0.0	0	0.0	+0.0
# Female User Pop 52-64	126		109			99		
# w/Mammogram recorded w/in 2 years	20	15.9	24	22.0	-6.1	26	26.3	-10.4
A. # Refusals w/ % of total Mammograms	0	0.0	0	0.0	+0.0	0	0.0	+0.0
# Female User Pop 40+	404		375			358		
# w/Mammogram recorded w/in 2 years	47	11.6	67	17.9	-6.2	68	19.0	-7.4
A. # Refusals w/ % of Total Mammogram	0	0.0	0	0.0	+0.0	0	0.0	+0.0

## \*\*\* IHS 2007 Clinical Performance Report \*\*\*

DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

-----  
Colorectal Cancer Screening

## Denominator(s):

GPRA Denominator: All Active Clinical patients ages 51-80 without a documented history of colorectal cancer or total colectomy.

All User Population patients ages 51-80 without any documented diagnosis of colorectal cancer or total colectomy.

## Numerator(s):

GPRA Numerator: Patients who have had ANY CRC screening, defined as any of the following: 1) Fecal Occult Blood test during the Report period; 2) flexible sigmoidoscopy or double contrast barium enema in the past 5 years; or 3) colonoscopy in the past 10 years; or 4) a documented refusal in the past year.

A: Patients with documented refusal in the past year.

B: Patients with Fecal Occult Blood test (FOBT) during the Report period.

Age is calculated at the beginning of the Report period.

Denominator Exclusions: Any diagnosis ever of one of the following:

1. Colorectal Cancer: POV: 153.\*, 154.0, 154.1, 197.5, V10.05.
2. Total Colectomy: CPT 44150-44153, 44155-44156, 44210-44212; V Procedure 45.8.

Screening defined as: 1. Fecal Occult Blood lab test (FOBT): CPT 82270, 82274, G0107, 89205 (old code), LOINC taxonomy, or site-populated taxonomy BGP GPRA FOB TESTS; 2. Flexible Sigmoidoscopy: V Procedure 45.24, 45.42; CPT 45330-45345, G0104; 3. Double contrast barium enema: CPT or VRad: 74280, G0106, G0120; 4. Colonoscopy: V Procedure 45.22, 45.23, 45.25, 45.43; V POV V76.51 Colon screening; CPT 44388-44394, 44397, 45355, 45378-45387, 45391, 45392, 45325 (old), G0105, G0121.

Refusals in past year: 1. FOBT: Refusal of V Lab Fecal Occult Blood test or CPT code 82270, 82274, G0107 or 89205 (old code); 2. Flexible Sigmoidoscopy: Refusal of V Procedure 45.24, 45.42 or CPT 45330-45345, G0104; 3. Double contrast barium enema: Refusal of V Radiology CPT: 74280, G0106, G0120; 4. Colonoscopy: Refusal of V Procedure 45.22, 45.23, 45.25, 45.43 or V CPT 44388-44394, 44397, 45355, 45378-45387, 45391, 45392, 45325 (old), G0105, or G0121.

During FY 2007, maintain the FY 2006 rate of 22% of colorectal screening for clinically appropriate patients ages 50 and older.

IHS Performance: FY 2006 - 22.0%, FY 2005 (non-GPRA in 2005) - 23.0%, HP 2010 Goal for FOBT: 33%, HP 2010 Goal for Sigmoidoscopy: 50%

## \*\*\* IHS 2007 Clinical Performance Report \*\*\*

## DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

## Colorectal Cancer Screening (con't)

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
AC Pts 51-80 w/o colorectal cancer or total colectomy (GPRA)	187		182			149		
# w/ CRC screening (GPRA)	45	24.1	42	23.1	+1.0	24	16.1	+8.0
A. # Refusals w/ % of Total CRC	6	13.3	0	0.0	+13.3	0	0.0	+13.3
B. # w/FOB test during Report period	5	2.7	11	6.0	-3.4	0	0.0	+2.7
Male Active Clinical 51-80	81		83			62		
# w/ CRC screening	24	29.6	18	21.7	+7.9	9	14.5	+15.1
A. # Refusals w/ % of Total CRC	4	16.7	0	0.0	+16.7	0	0.0	+16.7
B. # w/FOB test during Report period	4	4.9	3	3.6	+1.3	0	0.0	+4.9
Female Active Clinical 51-80	106		99			87		
# w/ CRC screening	21	19.8	24	24.2	-4.4	15	17.2	+2.6
A. # Refusals w/ % of Total CRC	2	9.5	0	0.0	+9.5	0	0.0	+9.5
B. # w/FOB test during Report period	1	0.9	8	8.1	-7.1	0	0.0	+0.9
Total User Population 51-80 w/o colorectal cancer or total colectomy	380		341			321		
# w/ CRC screening	51	13.4	47	13.8	-0.4	29	9.0	+4.4
A. # Refusals w/ % of Total CRC	6	1.6	0	0.0	+1.6	0	0.0	+1.6
B. # w/FOB test during Report period	5	1.3	12	3.5	-2.2	0	0.0	+1.3

\*\*\* IHS 2007 Clinical Performance Report \*\*\*  
 DEMO INDIAN HOSPITAL  
 Report Period: Jan 01, 2006 to Dec 31, 2006  
 Previous Year Period: Jan 01, 2005 to Dec 31, 2005  
 Baseline Period: Jan 01, 2000 to Dec 31, 2000

---

Colorectal Cancer Screening (con't)

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
Total Male User Pop 51-80	161		142			131		
# w/ CRC screening	25	15.5	19	13.4	+2.1	10	7.6	+7.9
A. # Refusals w/ % of Total CRC	4	2.5	0	0.0	+2.5	0	0.0	+2.5
B. # w/FOB test during Report period	4	2.5	3	2.1	+0.4	0	0.0	+2.5
Total Female User Pop 51-80	219		199			190		
# w/ CRC screening	26	11.9	28	14.1	-2.2	19	10.0	+1.9
A. # Refusals w/ % of Total CRC	2	0.9	0	0.0	+0.9	0	0.0	+0.9
B. # w/FOB test during Report period	1	0.5	9	4.5	-4.1	0	0.0	+0.5

\*\*\* IHS 2007 Clinical Performance Report \*\*\*

DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

---

Tobacco Use and Exposure Assessment

Denominator(s):

Active Clinical patients ages 5 and older.

All User Population patients ages 5 and older.

All pregnant female User Population patients with no documented miscarriage or abortion.

Female User Population patients ages 5 and older.

Numerator(s):

Patients who have been screened for tobacco use during the Report period. Patients identified as current tobacco users during the Report Period, both smokers and smokeless users.

A: Patients identified as current smokers during the Report Period.

B: Patients identified as current smokeless tobacco users during the Report Period.

Patients identified as exposed to environmental tobacco smoke (ETS) (second hand smoke) during the Report Period.

Ages are calculated at beginning of Report period.

Pregnancy defined as at least two visits with POV or Problem diagnosis (V22.0-V23.9, 640.\*-648.\*, 651.\*-676.\*) during the past 20 months, with one diagnosis occurring during the reporting period and with no documented miscarriage or abortion occurring after the second pregnancy POV and during the past 20 months. An additional 8 months is included for patients who were pregnant during the Report period but who had their tobacco assessment prior to that. Miscarriage definition: (1) POV: 630, 631, 632, 633\*, 634\*, (2) CPT 59812, 59820, 59821, 59830. Abortion definition: (1) POV: 635\*, 636\* 637\*, (2) CPT: 59100, 59120, 59130, 59136, 59150, 59151, 59840, 59841, 59850, 59851, 59852, 59855, 59856, 59857.

Tobacco screening is defined as at least one of the following (time frame for pregnant female patients is the past 20 months): 1. Any health factor for category Tobacco documented during Report period; 2. Tobacco-related diagnoses (POV or current Active Problem List) 305.1, 305.1\* (old codes), 649.00-649.04, or V15.82; 3. Dental code 1320; 4. Any patient education code containing "TO-", "-TO" or "-SHS" .

Tobacco users defined as (time frame for pregnant female patients is the past 20 months): 1. Health Factors: Current Smoker, Current Smokeless, Current Smoker and Smokeless, Cessation-Smoker, Cessation-Smokeless; 2. Diagnosis codes 305.1, 305.10-305.12 (old codes), 649.00-649.04, or V15.82; 3. Dental code 1320.

Smokers defined as (time frame for pregnant female patients is the past

\*\*\* IHS 2007 Clinical Performance Report \*\*\*  
 DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006  
 Previous Year Period: Jan 01, 2005 to Dec 31, 2005  
 Baseline Period: Jan 01, 2000 to Dec 31, 2000

20 months): 1. Health Factors: Current Smoker, Current Smoker and Smokeless, or Cessation-Smoker; 2. Diagnosis codes 305.1, 305.10-305.12 (old codes), 649.00-649.04, or V15.82; 3. Dental code 1320.

Smokeless defined as (time frame for pregnant female patients is the past 20 months): Health Factors: Current Smokeless, Current Smoker and Smokeless, or Cessation-Smokeless.

ETS defined as (time frame for pregnant female patients is the past 20 months): Health Factor Smoker in Home or Exposure to Environmental Tobacco Smoke.

Increase the rate of screening for tobacco use.

Screening: IHS Performance: FY 2005 - 34.0%, FY 2004 - 27.0%

HP 2010 Goals: 27-1a (Cigarette smoking 18 and older): - 12%, 27-1b (Spit tobacco use 18 and older): 0.4%, 27-10 (Exposure to ETS-non smokers 4 and older): 63%

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
# Active Clinical Pts => 5	982		963			909		
# w/Tobacco Screening	472	48.1	406	42.2	+5.9	330	36.3	+11.8
# Tobacco Users w/ % of Total Screened	185	39.2	148	36.5	+2.7	130	39.4	-0.2
A. # Smokers w/ % of Total Tobacco Users	174	94.1	147	99.3	-5.3	130	100.0	-5.9
B. # Smokeless Tobacco Users w/ % of Total Tobacco Users	11	5.9	1	0.7	+5.3	1	0.8	+5.2
# exposed to ETS/ smoker in home w/ % of Total Screened	1	0.2	1	0.2	-0.0	1	0.3	-0.1

## \*\*\* IHS 2007 Clinical Performance Report \*\*\*

DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

## Tobacco Use and Exposure Assessment (con't)

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
# Male Active Clinical ages => 5	392		398			373		
# w/Tobacco Screening	159	40.6	140	35.2	+5.4	128	34.3	+6.2
# Tobacco Users w/ % of Total Screened	86	54.1	60	42.9	+11.2	58	45.3	+8.8
A. # Smokers w/ % of Total Tobacco Users	76	88.4	59	98.3	-10.0	58	100.0	-11.6
B. # Smokeless Tobacco Users w/ % of Total Tobacco Users	10	11.6	1	1.7	+10.0	1	1.7	+9.9
# exposed to ETS/ smoker in home w/ % of Total Screened	0	0.0	0	0.0	+0.0	1	0.8	-0.8
# Female Active Clinical ages => 5	590		565			536		
# w/Tobacco Screening	313	53.1	266	47.1	+6.0	202	37.7	+15.4
# Tobacco Users w/ % of Total Screened	99	31.6	88	33.1	-1.5	72	35.6	-4.0
A. # Smokers w/ % of Total Tobacco Users	98	99.0	88	100.0	-1.0	72	100.0	-1.0
B. # Smokeless Tobacco Users w/ % of Total Tobacco Users	1	1.0	0	0.0	+1.0	0	0.0	+1.0
# exposed to ETS/ smoker in home w/ % of Total Screened	1	0.3	1	0.4	-0.1	0	0.0	+0.3

\*\*\* IHS 2007 Clinical Performance Report \*\*\*  
 DEMO INDIAN HOSPITAL  
 Report Period: Jan 01, 2006 to Dec 31, 2006  
 Previous Year Period: Jan 01, 2005 to Dec 31, 2005  
 Baseline Period: Jan 01, 2000 to Dec 31, 2000

Tobacco Use and Exposure Assessment (con't)

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
Pregnant Female Patients	46		52			48		
# w/Tobacco Screening	46	100.0	48	92.3	+7.7	31	64.6	+35.4
# Tobacco Users w/ % of Total Screened	12	26.1	13	27.1	-1.0	12	38.7	-12.6
A. # Smokers w/ % of Total Tobacco Users	12	100.0	13	100.0	+0.0	12	100.0	+0.0
B. # Smokeless Tobacco Users w/ % of Total Tobacco Users	0	0.0	0	0.0	+0.0	0	0.0	+0.0
# exposed to ETS/ smoker in home w/ % of Total Screened	0	0.0	0	0.0	+0.0	0	0.0	+0.0

## \*\*\* IHS 2007 Clinical Performance Report \*\*\*

## DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

-----  
Tobacco Use and Exposure Assessment (con't)

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
# User Population ages =>5	2,070		1,990			2,011		
# w/Tobacco Screening	576	27.8	467	23.5	+4.4	386	19.2	+8.6
# Tobacco Users w/ % of Total Screened	237	41.1	174	37.3	+3.9	159	41.2	-0.0
A. # Smokers w/ % of Total Tobacco Users	221	93.2	173	99.4	-6.2	158	99.4	-6.1
B. # Smokeless Tobacco Users w/ % of Total Tobacco Users	16	6.8	1	0.6	+6.2	2	1.3	+5.5
# exposed to ETS/ smoker in home w/ % of Total Screened	1	0.2	1	0.2	-0.0	1	0.3	-0.1
# Male User Pop patients => 5	940		912			939		
# w/Tobacco Screening	191	20.3	161	17.7	+2.7	152	16.2	+4.1
# Tobacco Users w/ % of Total Screened	107	56.0	73	45.3	+10.7	73	48.0	+8.0
A. # Smokers w/ % of Total Tobacco Users	94	87.9	72	98.6	-10.8	72	98.6	-10.8
B. # Smokeless Tobacco Users w/ % of Total Tobacco Users	13	12.1	1	1.4	+10.8	2	2.7	+9.4
# exposed to ETS/ smoker in home w/ % of Total Screened	0	0.0	0	0.0	+0.0	1	0.7	-0.7

\*\*\* IHS 2007 Clinical Performance Report \*\*\*  
 DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006  
 Previous Year Period: Jan 01, 2005 to Dec 31, 2005  
 Baseline Period: Jan 01, 2000 to Dec 31, 2000

Tobacco Use and Exposure Assessment (con't)

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
# Female User Pop patients => 5	1,130		1,078			1,072		
# w/Tobacco Screening	385	34.1	306	28.4	+5.7	234	21.8	+12.2
# Tobacco Users w/ % of Total Screened	130	33.8	101	33.0	+0.8	86	36.8	-3.0
A. # Smokers w/ % of Total Tobacco Users	127	97.7	101	100.0	-2.3	86	100.0	-2.3
B. # Smokeless Tobacco Users w/ % of Total Tobacco Users	3	2.3	0	0.0	+2.3	0	0.0	+2.3
# exposed to ETS/ smoker in home w/ % of Total Screened	1	0.3	1	0.3	-0.1	0	0.0	+0.3

## \*\*\* IHS 2007 Clinical Performance Report \*\*\*

## DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

-----  
Tobacco Use and Exposure Assessment (con't)

	TOTAL ACTIVE CLINICAL POPULATION					
	Age Distribution					
	5-13	14-17	18-24	25-44	45-64	65 and older
CURRENT REPORT PERIOD						
# Active Clinical	153	63	150	327	228	61
# Tobacco Screening	6	13	88	192	136	37
% w/Tobacco Screening	3.9	20.6	58.7	58.7	59.6	60.7
# Tobacco Users	1	4	38	79	55	8
% Tobacco Users w/ % of Total Screened	16.7	30.8	43.2	41.1	40.4	21.6
# Smokers	0	4	36	73	53	8
% Smokers w/ % of Total Tobacco Users	0.0	100.0	94.7	92.4	96.4	100.0
# Smokeless	1	0	2	6	2	0
% Smokeless w/ % of Total Tobacco Users	100.0	0.0	5.3	7.6	3.6	0.0
# ETS/Smk Home	0	0	0	1	0	0
% ETS/Smk Home w/ % of Total Screened	0.0	0.0	0.0	0.5	0.0	0.0
PREVIOUS YEAR PERIOD						
# Active Clinical	175	61	156	293	216	62
# Tobacco Screening	11	13	81	140	123	38
% w/Tobacco Screening	6.3	21.3	51.9	47.8	56.9	61.3
# Tobacco Users	0	4	34	56	46	8
% Tobacco Users w/ % of Total Screened	0.0	30.8	42.0	40.0	37.4	21.1
# Smokers	0	4	34	55	46	8
% Smokers w/ % of Total Tobacco Users	0.0	100.0	100.0	98.2	100.0	100.0
# Smokeless	0	0	0	1	0	0
% Smokeless w/ % of Total Tobacco Users	0.0	0.0	0.0	1.8	0.0	0.0
# ETS/Smk Home	0	0	0	1	0	0
% ETS/Smk Home w/ % of Total Screened	0.0	0.0	0.0	0.7	0.0	0.0

## \*\*\* IHS 2007 Clinical Performance Report \*\*\*

## DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

-----  
Tobacco Use and Exposure Assessment (con't)

## TOTAL ACTIVE CLINICAL POPULATION

## Age Distribution

5-13 14-17 18-24 25-44 45-64 65 and older

## CHANGE FROM PREV YR %

Tobacco Screening	-2.4	-0.7	+6.7	+10.9	+2.7	-0.6
Tobacco Users	+16.7	+0.0	+1.2	+1.1	+3.0	+0.6
Smokers	+0.0	+0.0	-5.3	-5.8	-3.6	+0.0
Smokeless	+100.0	+0.0	+5.3	+5.8	+3.6	+0.0
ETS	+0.0	+0.0	+0.0	-0.2	+0.0	+0.0

## BASELINE REPORT PERIOD

# Active Clinical	180	64	138	279	183	65
# Tobacco Screening	17	15	49	115	97	37
% w/Tobacco Screening	9.4	23.4	35.5	41.2	53.0	56.9
# Tobacco Users	0	6	21	54	41	8
% Tobacco Users w/ % of Total Screened	0.0	40.0	42.9	47.0	42.3	21.6
# Smokers	0	6	21	54	41	8
% Smokers w/ % of Total Tobacco Users	0.0	100.0	100.0	100.0	100.0	100.0
# Smokeless	0	0	0	0	0	1
% Smokeless w/ % of Total Tobacco Users	0.0	0.0	0.0	0.0	0.0	12.5
# ETS/Smk Home w/ % of Total Screened	0	0	0	0	1	0
% ETS/Smk Home	0.0	0.0	0.0	0.0	1.0	0.0

## CHANGE FROM BASE YR %

Tobacco Screening	-5.5	-2.8	+23.2	+17.5	+6.6	+3.7
Tobacco Users	+16.7	-9.2	+0.3	-5.8	-1.8	+0.0
Smokers	+0.0	+0.0	-5.3	-7.6	-3.6	+0.0
Smokeless	+100.0	+0.0	+5.3	+7.6	+3.6	-12.5
ETS	+0.0	+0.0	+0.0	+0.5	-1.0	+0.0

## \*\*\* IHS 2007 Clinical Performance Report \*\*\*

## DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

-----  
Tobacco Use and Exposure Assessment (con't)

## MALE ACTIVE CLINICAL POPULATION

## Age Distribution

5-13 14-17 18-24 25-44 45-64 65 and older

## CURRENT REPORT PERIOD

MALE Active Clinical	76	35	51	106	99	25
# Tobacco Screening	4	3	26	51	59	16
% w/Tobacco Screening	5.3	8.6	51.0	48.1	59.6	64.0
# Tobacco Users	1	0	17	34	29	5
% Tobacco Users w/ % of Total Screened	25.0	0.0	65.4	66.7	49.2	31.3
# Smokers	0	0	15	29	27	5
% Smokers w/ % of Total Tobacco Users	0.0	0.0	88.2	85.3	93.1	100.0
# Smokeless	1	0	2	5	2	0
% Smokeless w/ % of Total Tobacco Users	100.0	0.0	11.8	14.7	6.9	0.0
# ETS/Smk Home	0	0	0	0	0	0
% ETS/Smk Home w/ % of Total Screened	0.0	0.0	0.0	0.0	0.0	0.0

## PREVIOUS YEAR PERIOD

MALE Active Clinical	88	32	52	99	99	28
# Tobacco Screening	6	6	19	43	52	14
% w/Tobacco Screening	6.8	18.8	36.5	43.4	52.5	50.0
# Tobacco Users	0	2	12	21	22	3
% Tobacco Users w/ % of Total Screened	0.0	33.3	63.2	48.8	42.3	21.4
# Smokers	0	2	12	20	22	3
% Smokers w/ % of Total Tobacco Users	0.0	100.0	100.0	95.2	100.0	100.0
# Smokeless	0	0	0	1	0	0
% Smokeless w/ % of Total Tobacco Users	0.0	0.0	0.0	4.8	0.0	0.0
# ETS/Smk Home	0	0	0	0	0	0
% ETS/Smk Home w/ % of Total Screened	0.0	0.0	0.0	0.0	0.0	0.0

## \*\*\* IHS 2007 Clinical Performance Report \*\*\*

## DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

-----  
Tobacco Use and Exposure Assessment (con't)

## MALE ACTIVE CLINICAL POPULATION

## Age Distribution

5-13 14-17 18-24 25-44 45-64 65 and older

## CHANGE FROM PREV YR %

Tobacco Screening	-1.6	-10.2	+14.4	+4.7	+7.1	+14.0
Tobacco Users	+25.0	-33.3	+2.2	+17.8	+6.8	+9.8
Smokers	+0.0	-100.0	-11.8	-9.9	-6.9	+0.0
Smokeless	+100.0	+0.0	+11.8	+9.9	+6.9	+0.0
ETS	+0.0	+0.0	+0.0	+0.0	+0.0	+0.0

## BASELINE REPORT PERIOD

MALE Active Clinical	91	33	44	94	84	27
# Tobacco Screening	10	2	14	36	48	18
% w/Tobacco Screening	11.0	6.1	31.8	38.3	57.1	66.7
# Tobacco Users	0	0	11	19	24	4
% Tobacco Users w/ % of Total Screened	0.0	0.0	78.6	52.8	50.0	22.2
# Smokers	0	0	11	19	24	4
% Smokers w/ % of Total Tobacco Users	0.0	0.0	100.0	100.0	100.0	100.0
# Smokeless	0	0	0	0	0	1
% Smokeless w/ % of Total Tobacco Users	0.0	0.0	0.0	0.0	0.0	25.0
# ETS/Smk Home w/ % of Total Screened	0	0	0	0	1	0
% ETS/Smk Home	0.0	0.0	0.0	0.0	2.1	0.0

## CHANGE FROM BASE YR %

Tobacco Screening	-5.7	+2.5	+19.2	+9.8	+2.5	-2.7
Tobacco Users	+25.0	+0.0	-13.2	+13.9	-0.8	+9.0
Smokers	+0.0	+0.0	-11.8	-14.7	-6.9	+0.0
Smokeless	+100.0	+0.0	+11.8	+14.7	+6.9	-25.0
ETS	+0.0	+0.0	+0.0	+0.0	-2.1	+0.0

\*\*\* IHS 2007 Clinical Performance Report \*\*\*  
 DEMO INDIAN HOSPITAL  
 Report Period: Jan 01, 2006 to Dec 31, 2006  
 Previous Year Period: Jan 01, 2005 to Dec 31, 2005  
 Baseline Period: Jan 01, 2000 to Dec 31, 2000

Tobacco Use and Exposure Assessment (con't)

		FEMALE ACTIVE CLINICAL POPULATION					
		Age Distribution					
		5-13	14-17	18-24	25-44	45-64	65 and older
<b>CURRENT REPORT PERIOD</b>							
FEMALE Active Clinical		77	28	99	221	129	36
# Tobacco Screening		2	10	62	141	77	21
% w/Tobacco Screening		2.6	35.7	62.6	63.8	59.7	58.3
# Tobacco Users		0	4	21	45	26	3
% Tobacco Users w/ % of Total Screened		0.0	40.0	33.9	31.9	33.8	14.3
# Smokers		0	4	21	44	26	3
% Smokers w/ % of Total Tobacco Users		0.0	100.0	100.0	97.8	100.0	100.0
# Smokeless		0	0	0	1	0	0
% Smokeless w/ % of Total Tobacco Users		0.0	0.0	0.0	2.2	0.0	0.0
# ETS/Smk Home		0	0	0	1	0	0
% ETS/Smk Home w/ % of Total Screened		0.0	0.0	0.0	0.7	0.0	0.0
<b>PREVIOUS YEAR PERIOD</b>							
FEMALE Active Clinical		87	29	104	194	117	34
# Tobacco Screening		5	7	62	97	71	24
% w/Tobacco Screening		5.7	24.1	59.6	50.0	60.7	70.6
# Tobacco Users		0	2	22	35	24	5
% Tobacco Users w/ % of Total Screened		0.0	28.6	35.5	36.1	33.8	20.8
# Smokers		0	2	22	35	24	5
% Smokers w/ % of Total Tobacco Users		0.0	100.0	100.0	100.0	100.0	100.0
# Smokeless		0	0	0	0	0	0
% Smokeless w/ % of Total Tobacco Users		0.0	0.0	0.0	0.0	0.0	0.0
# ETS/Smk Home		0	0	0	1	0	0
% ETS/Smk Home w/ % of Total Screened		0.0	0.0	0.0	1.0	0.0	0.0

\*\*\* IHS 2007 Clinical Performance Report \*\*\*  
 DEMO INDIAN HOSPITAL  
 Report Period: Jan 01, 2006 to Dec 31, 2006  
 Previous Year Period: Jan 01, 2005 to Dec 31, 2005  
 Baseline Period: Jan 01, 2000 to Dec 31, 2000

Tobacco Use and Exposure Assessment (con't)

	FEMALE ACTIVE CLINICAL POPULATION					
	Age Distribution					
	5-13	14-17	18-24	25-44	45-64	65 and older
CHANGE FROM PREV YR %						
Tobacco Screening	-3.1	+11.6	+3.0	+13.8	-1.0	-12.3
Tobacco Users	+0.0	+11.4	-1.6	-4.2	-0.0	-6.5
Smokers	+0.0	+0.0	+0.0	-2.2	+0.0	+0.0
Smokeless	+0.0	+0.0	+0.0	+2.2	+0.0	+0.0
ETS	+0.0	+0.0	+0.0	-0.3	+0.0	+0.0
BASELINE REPORT PERIOD						
FEMALE Active Clinical	89	31	94	185	99	38
# Tobacco Screening	7	13	35	79	49	19
% w/Tobacco Screening	7.9	41.9	37.2	42.7	49.5	50.0
# Tobacco Users	0	6	10	35	17	4
% Tobacco Users w/ % of Total Screened	0.0	46.2	28.6	44.3	34.7	21.1
# Smokers	0	6	10	35	17	4
% Smokers w/ % of Total Tobacco Users	0.0	100.0	100.0	100.0	100.0	100.0
# Smokeless	0	0	0	0	0	0
% Smokeless w/ % of Total Tobacco Users	0.0	0.0	0.0	0.0	0.0	0.0
# ETS/Smk Home w/ % of Total Screened	0	0	0	0	0	0
% ETS/Smk Home	0.0	0.0	0.0	0.0	0.0	0.0
CHANGE FROM BASE YR %						
Tobacco Screening	-5.3	-6.2	+25.4	+21.1	+10.2	+8.3
Tobacco Users	+0.0	-6.2	+5.3	-12.4	-0.9	-6.8
Smokers	+0.0	+0.0	+0.0	-2.2	+0.0	+0.0
Smokeless	+0.0	+0.0	+0.0	+2.2	+0.0	+0.0
ETS	+0.0	+0.0	+0.0	+0.7	+0.0	+0.0

\*\*\* IHS 2007 Clinical Performance Report \*\*\*  
DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006  
Previous Year Period: Jan 01, 2005 to Dec 31, 2005  
Baseline Period: Jan 01, 2000 to Dec 31, 2000

Tobacco Cessation

Denominator(s):

GPRA Denominator: Active Clinical patients identified as current tobacco users prior to the Report Period.

User Population patients identified as current tobacco users prior to the Report Period.

Numerator(s):

GPRA Numerator: Patients who have received tobacco cessation counseling during the Report Period, including documented refusal in past year. Patients identified during the Report Period as quit tobacco use.

Age is calculated at the beginning of the Report period.

Tobacco users defined as documented prior to the Report Period: 1. Health Factors (looks at the last documented health factor): Current Smoker, Current Smokeless, Current Smoker and Smokeless, Cessation-Smoker, or Cessation-Smokeless; 2. Tobacco-related POV or active Problem List diagnoses 305.1, 305.10-305.12 (old codes), 649.00-649.04, or V15.82; 3. Dental code 1320.

Tobacco cessation counseling defined as any of the following documented during Report Period: 1. Patient education codes containing "TO-", "-TO", or "-SHS"; 2. Clinic code 94 (tobacco cessation clinic); 3. Dental code 1320; 4. CPT code G0375 or G0376. Refusals defined as documented refusal of patient education codes containing "TO-", "-TO", or "-SHS" during Report Period.

Quit tobacco use defined as documented during Report Period: 1. POV or current Active Problem List diagnosis code 305.13 Tobacco use in remission; or 2. Health Factors documented during the Report Period (looks at the last documented health factor): Previous Smoker, Previous Smokeless.

During FY 2007, maintain the FY 2006 rate of 12% of tobacco-using patients who receive tobacco cessation intervention.

IHS Performance: FY 2006 - 12.0%

Smoking Cessation Attempts, HP 2010 Target: 75%

Smoking Cessation Counseling, HP 2010 Target: 72%

REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
---------------	---	----------------	---	--------------------	-------------	---	-----------------

\*\*\* IHS 2007 Clinical Performance Report \*\*\*  
 DEMO INDIAN HOSPITAL  
 Report Period: Jan 01, 2006 to Dec 31, 2006  
 Previous Year Period: Jan 01, 2005 to Dec 31, 2005  
 Baseline Period: Jan 01, 2000 to Dec 31, 2000

Tobacco Cessation (con't)

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
Active Clinical Tobacco Users (GPRA)	269		236			184		
# w/tobacco cessation counseling or refusal (GPRA)	30	11.2	46	19.5	-8.3	48	26.1	-14.9
# who quit	0	0.0	1	0.4	-0.4	1	0.5	-0.5
Male Active Clinical Tobacco Users	125		116			95		
# w/tobacco cessation counseling or refusal	19	15.2	19	16.4	-1.2	25	26.3	-11.1
# who quit	0	0.0	0	0.0	+0.0	1	1.1	-1.1
Female Active Clinical Tobacco Users	144		120			89		
# w/tobacco cessation counseling or refusal	11	7.6	27	22.5	-14.9	23	25.8	-18.2
# who quit	0	0.0	1	0.8	-0.8	0	0.0	+0.0
User Pop Tobacco Users	374		337			247		
# w/tobacco cessation counseling or refusal	36	9.6	47	13.9	-4.3	48	19.4	-9.8
# who quit	0	0.0	1	0.3	-0.3	1	0.4	-0.4

\*\*\* IHS 2007 Clinical Performance Report \*\*\*  
 DEMO INDIAN HOSPITAL  
 Report Period: Jan 01, 2006 to Dec 31, 2006  
 Previous Year Period: Jan 01, 2005 to Dec 31, 2005  
 Baseline Period: Jan 01, 2000 to Dec 31, 2000

Tobacco Cessation (con't)

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
Male User Pop Tobacco Users	189		173			134		
# w/tobacco cessation counseling or refusal	23	12.2	20	11.6	+0.6	25	18.7	-6.5
# who quit	0	0.0	0	0.0	+0.0	1	0.7	-0.7
Female User Pop Tobacco Users	185		164			113		
# w/tobacco cessation counseling or refusal	13	7.0	27	16.5	-9.4	23	20.4	-13.3
# who quit	0	0.0	1	0.6	-0.6	0	0.0	+0.0

\*\*\* IHS 2007 Clinical Performance Report \*\*\*  
 DEMO INDIAN HOSPITAL  
 Report Period: Jan 01, 2006 to Dec 31, 2006  
 Previous Year Period: Jan 01, 2005 to Dec 31, 2005  
 Baseline Period: Jan 01, 2000 to Dec 31, 2000

---

## Tobacco Cessation (con't)

	ACTIVE CLINICAL TOBACCO USERS		
	Age Distribution		
	<12	12-17	=>18
CURRENT REPORT PERIOD			
Active Clin Tobacco Users	0	5	264
# w/tobacco cessation counseling or refusal	0	0	30
% w/ tobacco cessation counseling or refusal	0.0	0.0	11.4
# who quit	0	0	0
% who quit	0.0	0.0	0.0
PREVIOUS YEAR PERIOD			
Active Clin Tobacco Users	1	4	231
# w/tobacco cessation counseling or refusal	0	0	46
% w/tobacco cessation counseling or refusal	0.0	0.0	19.9
# who quit	0	0	1
% who quit	0.0	0.0	0.4
CHANGE FROM PREV YR %			
w/tobacco cessation counseling or refusal	+0.0	+0.0	-8.5
who quit	+0.0	+0.0	-0.4
BASELINE REPORT PERIOD			
Active Clin Tobacco Users	0	1	183
# w/tobacco cessation counseling or refusal	0	0	48
% w/tobacco cessation counseling or refusal	0.0	0.0	26.2
# who quit	0	0	1
% who quit	0.0	0.0	0.5
CHANGE FROM BASE YR %			
w/tobacco cessation counseling or refusal	+0.0	+0.0	-14.9
who quit	+0.0	+0.0	-0.5

\*\*\* IHS 2007 Clinical Performance Report \*\*\*  
 DEMO INDIAN HOSPITAL  
 Report Period: Jan 01, 2006 to Dec 31, 2006  
 Previous Year Period: Jan 01, 2005 to Dec 31, 2005  
 Baseline Period: Jan 01, 2000 to Dec 31, 2000

Tobacco Cessation (con't)

	MALE ACTIVE CLINICAL TOBACCO USERS		
	Age Distribution		
	<12	12-17	=>18
CURRENT REPORT PERIOD			
Male AC Tobacco Users	0	5	120
# w/tobacco cessation counseling or refusal	0	0	19
% w/ tobacco cessation counseling or refusal	0.0	0.0	15.8
# who quit	0	0	0
% who quit	0.0	0.0	0.0
PREVIOUS YEAR PERIOD			
Male AC Tobacco Users	1	4	111
# w/tobacco cessation counseling or refusal	0	0	19
% w/tobacco cessation counseling or refusal	0.0	0.0	17.1
# who quit	0	0	0
% who quit	0.0	0.0	0.0
CHANGE FROM PREV YR %			
w/tobacco cessation counseling or refusal	+0.0	+0.0	-1.3
who quit	+0.0	+0.0	+0.0
BASELINE REPORT PERIOD			
Male AC Tobacco Users	0	0	95
# w/tobacco cessation counseling or refusal	0	0	25
% w/tobacco cessation counseling or refusal	0.0	0.0	26.3
# who quit	0	0	1
% who quit	0.0	0.0	1.1
CHANGE FROM BASE YR %			
w/tobacco cessation counseling or refusal	+0.0	+0.0	-10.5
who quit	+0.0	+0.0	-1.1

\*\*\* IHS 2007 Clinical Performance Report \*\*\*  
 DEMO INDIAN HOSPITAL  
 Report Period: Jan 01, 2006 to Dec 31, 2006  
 Previous Year Period: Jan 01, 2005 to Dec 31, 2005  
 Baseline Period: Jan 01, 2000 to Dec 31, 2000

---

## Tobacco Cessation (con't)

FEMALE ACTIVE CLINICAL TOBACCO USERS			
Age Distribution			
	<12	12-17	=>18
CURRENT REPORT PERIOD			
Female AC Tobacco Users	0	0	144
# w/tobacco cessation counseling or refusal	0	0	11
% w/ tobacco cessation counseling or refusal	0.0	0.0	7.6
# who quit	0	0	0
% who quit	0.0	0.0	0.0
PREVIOUS YEAR PERIOD			
Female AC Tobacco Users	0	0	120
# w/tobacco cessation counseling or refusal	0	0	27
% w/tobacco cessation counseling or refusal	0.0	0.0	22.5
# who quit	0	0	1
% who quit	0.0	0.0	0.8
CHANGE FROM PREV YR %			
w/tobacco cessation counseling or refusal	+0.0	+0.0	-14.9
who quit	+0.0	+0.0	-0.8
BASELINE REPORT PERIOD			
Female AC Tobacco Users	0	1	88
# w/tobacco cessation counseling or refusal	0	0	23
% w/tobacco cessation counseling or refusal	0.0	0.0	26.1
# who quit	0	0	0
% who quit	0.0	0.0	0.0
CHANGE FROM BASE YR %			
w/tobacco cessation counseling or refusal	+0.0	+0.0	-18.5
who quit	+0.0	+0.0	+0.0

\*\*\* IHS 2007 Clinical Performance Report \*\*\*  
DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006  
Previous Year Period: Jan 01, 2005 to Dec 31, 2005  
Baseline Period: Jan 01, 2000 to Dec 31, 2000

-----  
Alcohol Screening (FAS Prevention)

Denominator(s):

GPRA Denominator: Female Active Clinical patients ages 15 to 44.  
Female User Population patients ages 15 to 44.

Numerator(s):

GPRA Numerator: Patients screened for alcohol use during the Report Period, including refusals in the past year.  
A: Patients with exam code, Alcohol health factor or screening diagnosis during the Report Period.  
B: Patients with alcohol-related diagnosis or procedure during the Report Period.  
C: Patients with alcohol-related patient education or counseling during the Report Period.  
D: Patients with documented refusal in past year.

Ages are calculated at beginning of Report period. Screening is defined as at least one of the following: A1) PCC Exam code 35, A2) Any Alcohol Health Factor, A3) Screening diagnosis V11.3 (history of alcoholism), V79.1 or BHS problem code 29.1 (screening for alcoholism); B1) Alcohol-related diagnosis (POV, current PCC or BHS Problem List): 303.\*, 305.0\*, 291.\*, 357.5\*; BHS POV 10, 27, 29; B2) Alcohol-related procedure (V Procedure): 94.46, 94.53, 94.61-94.63, 94.67-94.69; C) Patient education codes containing "AOD-" or "-AOD" or old codes containing "CD-" or "-CD"; or D) Refusal of PCC Exam code 35 in the past year.

During FY 2007, maintain the FY 2006 rate of 28% of screening for alcohol use in female patients ages 15 to 44.

IHS Performance: FY 2006 - 28.0%, FY 2005 - 11.0%, FY 2004 - 7.0%; IHS FY 2010 Target: 25.0%

REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
---------------	---	----------------	---	--------------------	-------------	---	-----------------

\*\*\* IHS 2007 Clinical Performance Report \*\*\*  
 DEMO INDIAN HOSPITAL  
 Report Period: Jan 01, 2006 to Dec 31, 2006  
 Previous Year Period: Jan 01, 2005 to Dec 31, 2005  
 Baseline Period: Jan 01, 2000 to Dec 31, 2000

Alcohol Screening (FAS Prevention) (con't)

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
Female Active Clinical ages 15-44 (GPRA)	343		322			304		
# w/any alcohol screening (GPRA)	2	0.6	1	0.3	+0.3	1	0.3	+0.3
A. # w/exam/alcohol HF/screen DX	0	0.0	0	0.0	+0.0	0	0.0	+0.0
B. # w/alcohol related Dx or procedure	2	0.6	1	0.3	+0.3	1	0.3	+0.3
C. # w/alcohol related patient education	0	0.0	0	0.0	+0.0	0	0.0	+0.0
D. # w/refusal in past year w/% of Total Screened	0	0.0	0	0.0	+0.0	0	0.0	+0.0
Female User Population ages 15-44	622		596			584		
# w/any alcohol screening	3	0.5	1	0.2	+0.3	2	0.3	+0.1
A. # w/exam/alcohol HF/screening	0	0.0	0	0.0	+0.0	0	0.0	+0.0
B. # w/alcohol related Dx or procedure	3	0.5	1	0.2	+0.3	2	0.3	+0.1
C. # w/alcohol related patient education	0	0.0	0	0.0	+0.0	0	0.0	+0.0
D. # w/refusal in past year w/% of Total Screened	0	0.0	0	0.0	+0.0	0	0.0	+0.0

\*\*\* IHS 2007 Clinical Performance Report \*\*\*

DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

-----  
Intimate Partner (Domestic) Violence Screening

Denominator(s):

Female Active Clinical patients ages 13 and older.

GPRA Denominator: Female Active Clinical patients ages 15-40.

Female User Population patients ages 13 and older.

Numerator(s):

GPRA Numerator: Patients screened for intimate partner (domestic) violence at any time during the Report Period, including documented refusals in past year.

A: Patients with documented IPV/DV exam.

B: Patients with IPV/DV related diagnoses.

C: Patients provided with education or counseling about IPV/DV

D: Patients with documented refusal in past year of an IPV/DV exam or IPV/DV-related education.

Age is calculated at beginning of the Report Period. Screening is defined as at least one of the following: A) PCC Exam code 34 or BHS IPV/DV exam; B) Diagnosis (POV or current PCC or BHS Problem List): 995.80-83, 995.85 (adult maltreatment), V15.41, V15.42, V15.49 (history of abuse); BHS POV 43.\*, 44.\* C1) Patient education codes containing "DV-" or "-DV"; C2) IPV/DV counseling: V61.11. Refusals defined as: A) Any PCC refusal in past year with Exam Code 34, BHS refusal in past year of IPV/DV exam; B) Any refusal in past year with Patient Education codes containing "DV-" or "-DV".

During FY 2007, maintain the FY 2006 rate of 28% for screening for domestic violence in female patients ages 15 through 40.

IHS Performance: FY 2006 - 28.0%, FY 2005 - 13.0%, FY 2004 - 4.0%; IHS FY 2010 Target: 40.0%

NOTE: Age range changed from 16-24 to 15-40 in 2005.

REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
---------------	---	----------------	---	--------------------	-------------	---	-----------------

\*\*\* IHS 2007 Clinical Performance Report \*\*\*  
 DEMO INDIAN HOSPITAL  
 Report Period: Jan 01, 2006 to Dec 31, 2006  
 Previous Year Period: Jan 01, 2005 to Dec 31, 2005  
 Baseline Period: Jan 01, 2000 to Dec 31, 2000

Intimate Partner (Domestic) Violence Screening (con't)

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
# Female Active Clinical ages 13 and older	523		483			460		
# w/IPV/DV screening or refusal	0	0.0	0	0.0	+0.0	0	0.0	+0.0
A. # w/documented IPV/DV exam	0	0.0	0	0.0	+0.0	0	0.0	+0.0
B. # w/ IPV/DV related diagnosis	0	0.0	0	0.0	+0.0	0	0.0	+0.0
C. # provided DV education	0	0.0	0	0.0	+0.0	0	0.0	+0.0
D. # w/ documented refusal w/% of total screened	0	0.0	0	0.0	+0.0	0	0.0	+0.0
# Female Active Clinical ages 15-40 (GPRA)	302		292			267		
# w/IPV/DV screening or refusal (GPRA)	0	0.0	0	0.0	+0.0	0	0.0	+0.0
A. # w/ documented IPV/DV exam	0	0.0	0	0.0	+0.0	0	0.0	+0.0
B. # w/ IPV/DV related diagnosis	0	0.0	0	0.0	+0.0	0	0.0	+0.0
C. # provided DV education	0	0.0	0	0.0	+0.0	0	0.0	+0.0
D. # w/ documented refusal w/% of total screened	0	0.0	0	0.0	+0.0	0	0.0	+0.0

## \*\*\* IHS 2007 Clinical Performance Report \*\*\*

## DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

## Intimate Partner (Domestic) Violence Screening (con't)

	REPORT	%	PREV YR	%	CHG from	BASE	%	CHG from
	PERIOD		PERIOD		PREV YR %	PERIOD		BASE %
# Female User Pop 13 and older	977		929			909		
# w/IPV/DV screening or refusal	0	0.0	0	0.0	+0.0	1	0.1	-0.1
A. # w/ documented IPV/DV exam	0	0.0	0	0.0	+0.0	0	0.0	+0.0
B. # w/ IPV/DV related diagnosis	0	0.0	0	0.0	+0.0	1	0.1	-0.1
C. # provided DV education	0	0.0	0	0.0	+0.0	0	0.0	+0.0
D. # w/ documented refusal w/% of total screened	0	0.0	0	0.0	+0.0	0	0.0	+0.0

## \*\*\* IHS 2007 Clinical Performance Report \*\*\*

DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

-----  
Depression Screening

## Denominator(s):

GPRA Denominator: Active Clinical patients ages 18 and older. Broken down by gender.

A. Active Clinical patients ages 65 and older. Broken down by gender.

User Population patients ages 18 and older. Broken down by gender.

A. User Population patients ages 65 and older. Broken down by gender.

Active Diabetic patients, defined as all Active Clinical patients diagnosed with diabetes prior to the Report period, AND at least 2 visits during the Report period, AND 2 DM-related visits ever. Broken down by gender.

Active IHD patients, defined as all Active Clinical patients diagnosed with ischemic heart disease (IHD) prior to the Report Period, AND at least 2 visits during the Report Period, AND 2 IHD-related visits ever.

## Numerator(s):

GPRA Numerator: Patients screened for depression or diagnosed with a mood disorder at any time during the Report period, including documented refusals in past year.

A: Patients screened for depression during the Report period.

B: Patients with a diagnosis of a mood disorder during the Report period.

C: Patients with documented refusal in past year.

Patients with depression-related education or refusal of education in past year.

Age is calculated at beginning of the Report period. Diabetes diagnosis defined as POV 250.00-250.93. Ischemic heart disease diagnosis defined as: POV 410.0-412.\*, 414.0-414.9, 428.\*, 429.2.

Ischemic heart disease (IHD) diagnosis defined as: 410.0-412.\*, 414.0-414.9, 428.\*, or 429.2 recorded in the V POV file.

Screening is defined as: Exam Code 36, POV V79.0, or BHS problem code 14.1 (screening for depression).

Mood disorders are defined as at least two visits in PCC or BHS during the Report period with POV for: Major Depressive Disorder, Dysthymic Disorder, Depressive Disorder NOS, Bipolar I or II Disorder, Cyclothymic Disorder, Bipolar Disorder NOS, Mood Disorder Due to a General Medical Condition, Substance-induced Mood Disorder, or Mood Disorder NOS. These POV codes are: 296.\*, 291.89, 292.84, 293.83, 300.4, 301.13, or 311 or BHS POV 14 or 15.

Screening refusals defined as: A) Any PCC refusal in past year with Exam Code 36.

\*\*\* IHS 2007 Clinical Performance Report \*\*\*

DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

Depression-related patient education defined as: A) Patient education codes containing "DEP-" (depression), "BH-" (behavioral and social health), "SB-" (suicidal behavior), or B) "PDEP-" (postpartum depression) or any refusal in past year with Patient Education codes containing "DEP-", "BH-", "SB-", or "PDEP-".

During FY 2007, maintain the FY 2006 rate of 15% for annual screening for depression in adults ages 18 and over.

IHS Performance: 2006 - 15.0%

HP 2010 Goal: 68%

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
Active Clinical Pts => 18 (GPRA)	766		727			665		
# w/ Depression screening, DX or refusal (GPRA)	41	5.4	41	5.6	-0.3	17	2.6	+2.8
A. # screened for depression	0	0.0	0	0.0	+0.0	0	0.0	+0.0
B. # w/mood disorder DX	41	5.4	41	5.6	-0.3	17	2.6	+2.8
C. # w/refusal in past year w/% of total screened/DX	0	0.0	0	0.0	+0.0	0	0.0	+0.0
# w/depression education or refusal	0	0.0	3	0.4	-0.4	0	0.0	+0.0
Male Active Clinical Pts =>18	281		278			249		
# w/ Depression screening, DX or refusal	11	3.9	6	2.2	+1.8	1	0.4	+3.5
A. # screened for depression	0	0.0	0	0.0	+0.0	0	0.0	+0.0
B. # w/Mood Disorder DX	11	3.9	6	2.2	+1.8	1	0.4	+3.5
C. # w/refusal in past year w/% of total screened/DX	0	0.0	0	0.0	+0.0	0	0.0	+0.0
# w/depression education or refusal	0	0.0	1	0.4	-0.4	0	0.0	+0.0

## \*\*\* IHS 2007 Clinical Performance Report \*\*\*

DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

## Depression Screening (con't)

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
Female Active Clinical Pts =>18	485		449			416		
# w/ Depression screening, DX or refusal	30	6.2	35	7.8	-1.6	16	3.8	+2.3
A. # screened for depression	0	0.0	0	0.0	+0.0	0	0.0	+0.0
B. # w/Mood Disorder DX	30	6.2	35	7.8	-1.6	16	3.8	+2.3
C. # w/refusal in past year w/% total screened/DX	0	0.0	0	0.0	+0.0	0	0.0	+0.0
# w/depression education or refusal	0	0.0	2	0.4	-0.4	0	0.0	+0.0
Active Clinical Pts => 65	61		62			65		
# w/ Depression screening, DX or refusal	6	9.8	6	9.7	+0.2	2	3.1	+6.8
A. # screened for depression	0	0.0	0	0.0	+0.0	0	0.0	+0.0
B. # w/mood disorder DX	6	9.8	6	9.7	+0.2	2	3.1	+6.8
C. # w/refusal in past year w/% of total screened/DX	0	0.0	0	0.0	+0.0	0	0.0	+0.0
# w/depression education or refusal	0	0.0	2	3.2	-3.2	0	0.0	+0.0

\*\*\* IHS 2007 Clinical Performance Report \*\*\*  
 DEMO INDIAN HOSPITAL  
 Report Period: Jan 01, 2006 to Dec 31, 2006  
 Previous Year Period: Jan 01, 2005 to Dec 31, 2005  
 Baseline Period: Jan 01, 2000 to Dec 31, 2000

---

Depression Screening (con't)

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
Male Active Clinical Pts =>65	25		28			27		
# w/ Depression screening, DX or refusal	1	4.0	1	3.6	+0.4	0	0.0	+4.0
A. # screened for depression	0	0.0	0	0.0	+0.0	0	0.0	+0.0
B. # w/Mood Disorder DX	1	4.0	1	3.6	+0.4	0	0.0	+4.0
C. # w/refusal in past year w/% of total screened/DX	0	0.0	0	0.0	+0.0	0	0.0	+0.0
# w/depression educaion or refusal	0	0.0	0	0.0	+0.0	0	0.0	+0.0
Female Active Clinical Pts =>65	36		34			38		
# w/ Depression screening, DX or refusal	5	13.9	5	14.7	-0.8	2	5.3	+8.6
A. # screened for depression	0	0.0	0	0.0	+0.0	0	0.0	+0.0
B. # w/Mood Disorder DX	5	13.9	5	14.7	-0.8	2	5.3	+8.6
C. # w/refusal in past year w/% of total screened/DX	0	0.0	0	0.0	+0.0	0	0.0	+0.0
# w/depression education or refusal	0	0.0	2	5.9	-5.9	0	0.0	+0.0

\*\*\* IHS 2007 Clinical Performance Report \*\*\*  
 DEMO INDIAN HOSPITAL  
 Report Period: Jan 01, 2006 to Dec 31, 2006  
 Previous Year Period: Jan 01, 2005 to Dec 31, 2005  
 Baseline Period: Jan 01, 2000 to Dec 31, 2000

---

## Depression Screening (con't)

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
User Population Pts => 18	1,542		1,464			1,420		
# w/ Depression screening, DX or refusal	48	3.1	45	3.1	+0.0	20	1.4	+1.7
A. # screened for depression	0	0.0	0	0.0	+0.0	0	0.0	+0.0
B. # w/mood disorder DX	48	3.1	45	3.1	+0.0	20	1.4	+1.7
C. # w/refusal in past year w/% of total screened/DX	0	0.0	0	0.0	+0.0	0	0.0	+0.0
# w/depression education or refusal	0	0.0	3	0.2	-0.2	1	0.1	-0.1
Male User Population Pts =>18	660		625			614		
# w/ Depression screening, DX or refusal	13	2.0	7	1.1	+0.8	2	0.3	+1.6
A. # screened for depression	0	0.0	0	0.0	+0.0	0	0.0	+0.0
B. # w/Mood Disorder DX	13	2.0	7	1.1	+0.8	2	0.3	+1.6
C. # w/refusal in past year w/% of total screened/DX	0	0.0	0	0.0	+0.0	0	0.0	+0.0
# w/depression education or refusal	0	0.0	1	0.2	-0.2	1	0.2	-0.2

\*\*\* IHS 2007 Clinical Performance Report \*\*\*  
 DEMO INDIAN HOSPITAL  
 Report Period: Jan 01, 2006 to Dec 31, 2006  
 Previous Year Period: Jan 01, 2005 to Dec 31, 2005  
 Baseline Period: Jan 01, 2000 to Dec 31, 2000

Depression Screening (con't)

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
Female User Population								
Pts =>18	882		839			806		
# w/ Depression screening, DX or refusal	35	4.0	38	4.5	-0.6	18	2.2	+1.7
A. # screened for depression	0	0.0	0	0.0	+0.0	0	0.0	+0.0
B. # w/Mood Disorder DX	35	4.0	38	4.5	-0.6	18	2.2	+1.7
C. # w/refusal in past year w/% of total screened/DX	0	0.0	0	0.0	+0.0	0	0.0	+0.0
# w/depression education or refusal	0	0.0	2	0.2	-0.2	0	0.0	+0.0
User Population Pts => 65	138		135			142		
# w/ Depression screening, DX or refusal	6	4.3	6	4.4	-0.1	2	1.4	+2.9
A. # screened for depression	0	0.0	0	0.0	+0.0	0	0.0	+0.0
B. # w/mood disorder DX	6	4.3	6	4.4	-0.1	2	1.4	+2.9
C. # w/refusal in past year w/% of total screened/DX	0	0.0	0	0.0	+0.0	0	0.0	+0.0
# w/depression education or refusal	0	0.0	2	1.5	-1.5	0	0.0	+0.0

## \*\*\* IHS 2007 Clinical Performance Report \*\*\*

## DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

## Depression Screening (con't)

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
Male User Population								
Pts =>65	53		53			54		
# w/ Depression screening, DX or refusal	1	1.9	1	1.9	+0.0	0	0.0	+1.9
A. # screened for depression	0	0.0	0	0.0	+0.0	0	0.0	+0.0
B. # w/Mood Disorder DX	1	1.9	1	1.9	+0.0	0	0.0	+1.9
C. # w/refusal in past year w/% of total screened/DX	0	0.0	0	0.0	+0.0	0	0.0	+0.0
# w/depression education or refusal	0	0.0	0	0.0	+0.0	0	0.0	+0.0
Female User Population								
Pts =>65	85		82			88		
# w/ Depression screening, DX or refusal	5	5.9	5	6.1	-0.2	2	2.3	+3.6
A. # screened for depression	0	0.0	0	0.0	+0.0	0	0.0	+0.0
B. # w/Mood Disorder DX	5	5.9	5	6.1	-0.2	2	2.3	+3.6
C. # w/refusal in past year w/% of total screened/DX	0	0.0	0	0.0	+0.0	0	0.0	+0.0
# w/depression education or refusal	0	0.0	2	2.4	-2.4	0	0.0	+0.0

## \*\*\* IHS 2007 Clinical Performance Report \*\*\*

## DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

## Depression Screening (con't)

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
Active Diabetic Pts	106		95			87		
# w/ Depression screening, DX or refusal	13	12.3	12	12.6	-0.4	5	5.7	+6.5
A. # screened for depression	0	0.0	0	0.0	+0.0	0	0.0	+0.0
B. # w/mood disorder DX	13	12.3	12	12.6	-0.4	5	5.7	+6.5
C. # w/refusal in past year w/% of total screened/DX	0	0.0	0	0.0	+0.0	0	0.0	+0.0
# w/depression education or refusal	0	0.0	2	2.1	-2.1	0	0.0	+0.0
Male Active Diabetic Pts	50		45			38		
# w/ Depression screening, DX or refusal	4	8.0	2	4.4	+3.6	1	2.6	+5.4
A. # screened for depression	0	0.0	0	0.0	+0.0	0	0.0	+0.0
B. # w/Mood Disorder DX	4	8.0	2	4.4	+3.6	1	2.6	+5.4
C. # w/refusal in past year w/% of total screened/DX	0	0.0	0	0.0	+0.0	0	0.0	+0.0
# w/depression education or refusal	0	0.0	0	0.0	+0.0	0	0.0	+0.0
Female Active Diabetic Pts	56		50			49		
# w/ Depression screening, DX or refusal	9	16.1	10	20.0	-3.9	4	8.2	+7.9
A. # screened for depression	0	0.0	0	0.0	+0.0	0	0.0	+0.0
B. # w/Mood Disorder DX	9	16.1	10	20.0	-3.9	4	8.2	+7.9
C. # w/refusal in past year w/% of total screened/DX	0	0.0	0	0.0	+0.0	0	0.0	+0.0
# w/depression education or refusal	0	0.0	2	4.0	-4.0	0	0.0	+0.0

## \*\*\* IHS 2007 Clinical Performance Report \*\*\*

DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

-----  
Depression Screening (con't)

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
Active IHD Pts	54		45			36		
# w/ Depression screening, DX or refusal	4	7.4	4	8.9	-1.5	2	5.6	+1.9
A. # screened for depression	0	0.0	0	0.0	+0.0	0	0.0	+0.0
B. # w/mood disorder DX	4	7.4	4	8.9	-1.5	2	5.6	+1.9
C. # w/refusal in past year w/% of total screened/DX	0	0.0	0	0.0	+0.0	0	0.0	+0.0
# w/depression education or refusal	0	0.0	1	2.2	-2.2	0	0.0	+0.0
Male Active IHD Pts	35		27			22		
# w/ Depression screening, DX or refusal	1	2.9	0	0.0	+2.9	0	0.0	+2.9
A. # screened for depression	0	0.0	0	0.0	+0.0	0	0.0	+0.0
B. # w/Mood Disorder DX	1	2.9	0	0.0	+2.9	0	0.0	+2.9
C. # w/refusal in past year w/% of total screened/DX	0	0.0	0	0.0	+0.0	0	0.0	+0.0
# w/depression education or refusal	0	0.0	0	0.0	+0.0	0	0.0	+0.0
Female Active IHD Pts	19		18			14		
# w/ Depression screening, DX or refusal	3	15.8	4	22.2	-6.4	2	14.3	+1.5
A. # screened for depression	0	0.0	0	0.0	+0.0	0	0.0	+0.0
B. # w/Mood Disorder DX	3	15.8	4	22.2	-6.4	2	14.3	+1.5
C. # w/refusal in past year w/% of total screened/DX	0	0.0	0	0.0	+0.0	0	0.0	+0.0
# w/depression education or refusal	0	0.0	1	5.6	-5.6	0	0.0	+0.0

\*\*\* IHS 2007 Clinical Performance Report \*\*\*

DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

---

Antidepressant Medication Management

Denominator(s):

As of the 120th day of the Report period, Active Clinical patients 18 years and older who were diagnosed with a new episode of depression and treated with antidepressant medication in the past year.

As of the 120th day of the Report period, User Population patients 18 years and older who were diagnosed with a new episode of depression and treated with antidepressant medication in the past year.

Numerator(s):

Optimal Practitioner Contacts: Patients with at least three mental health visits with a non-mental health or mental health provider within 12 weeks (84 days) after diagnosis, two of which must be face-to-face visits and one of which must be with a prescribing provider.

Effective Acute Phase Treatment: Patients who filled a sufficient number of separate prescriptions/refills of antidepressant medication for continuous treatment of at least 84 days (12 weeks).

Effective Continuation Phase Treatment: Patients who filled a sufficient number of separate prescriptions/refills of antidepressant medication treatment to provide continuous treatment for at least 180 days (6 months).

To be included in the denominator, patient must meet both of the following conditions:

1. One of the following from the 121st day of the year prior to the Report period to the 120th day of the Report period: 1) one visit in any setting with major depression DX (see list of codes below) as primary POV, 2) two outpatient visits occurring on different dates of service with secondary POV of major depression, or 3) an inpatient visit with secondary POV of major depression.

For example, if Report period is July 1, 2005 - June 30, 2006, patient must have one of the three scenarios above during 11/1/2004 - 10/29/2005.

Major depression defined as POV 296.2\*, 296.3\*, 298.0, 300.4, 309.1, 311. The Index Episode Start Date is date of the patient's earliest visit during this period. For inpatient visits, the discharge date will be used.

2. Filled a prescription for an antidepressant medication (see list of medications below) within 30 days before the Index Episode Start Date or 14 days on or after that date. In V Medication, Date Discontinued must not be equal to the prescription (i.e. visit) date. The Index Prescription Date is the date of the earliest prescription for antidepressant medication filled during that time period.

## \*\*\* IHS 2007 Clinical Performance Report \*\*\*

## DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

-----  
Denominator Exclusions:

1. Patients who have had any diagnosis of depression within the previous 120 days (4 months) of the Index Episode Start Date. The POVs to be checked for prior depressive episodes is more comprehensive and include the following: POV 296.2\*-296.9\*, 298.0, 300.4, 309.0, 309.1, 309.28, 311, or

2. Patients who had a new or refill prescription for antidepressant medication (see list of medications below) within 90 days (3 months) prior to the Index Prescription Date are excluded as they do not represent new treatment episodes, or

3. Patients who had an acute mental health or substance abuse inpatient stay during the 245 days after the Index Episode Start Date treatment period. Acute mental health stays are defined as Service Category of H and primary POV 290\*, 293\*-302\*, 306\*-316\*. Substance abuse inpatient stays are defined as Service Category of H and primary POV 291\*-292\*, 303\*-305\* or primary POV 960\*-979\* AND secondary POV of 291\*-292\*, 303\*-305\*.

Optimal Practitioner Contacts numerator: Patient must have: 1) Three face-to-face follow-up outpatient, non-ER visits (clinic code not equal to 30) or intermediate treatment with either a non-mental health or mental health provider within 84 days after the Index Episode Start Date, or 2) two face-to-face outpatient, non-ER visits (clinic code not equal to 30) and one telephone visit (Service Category T) with either a non-mental health or mental health provider within 84 days after the Index Episode Start Date. For either option, one of the visits must be to a prescribing provider, defined as provider codes 00, 08, 11, 16-18, 21, 24-25, 30, 33, 41, 44-45, 47, 49, 64, 67-68, 70-83, 85-86, A1, A9, or B1-B6. NOTE: If patient was diagnosed with two secondary diagnoses of depression, the second visit may be counted toward the numerator.

Outpatient mental health provider visits are defined as BHS or PCC visit with primary provider code of 06, 12, 19, 48, 49, 50, 62, 63, 81, or 92-96, AND

1. A) Service category A, S, or O, and B1) CPT 90801, 90802, 90804-90819, 90821-90824, 90826-90829, 90845, 90847, 90849, 90853, 90857, 90862, 90870, 90871, 90875, 90876, 99384-99387, 99394-99397, 99401-99404 or B2) POV 290\*, 293\*-302\*, 306\*-316\*, OR

2. A) Service category of A, S, or O and B1) Location of Encounter = Home (as designated in Site Parameters) or B2) clinic code = 11, OR

## \*\*\* IHS 2007 Clinical Performance Report \*\*\*

## DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

## 3. Service category of T.

Outpatient non-mental health provider visits are defined as BHS or PCC visits with:

1. A) Service category A, S, or O, and B) CPT 90801, 90802, 90804-90819, 90821-90824, 90826-90829, 90845, 90847, 90849, 90853, 90857, 90862, 90870, 90871, 90875, 90876, OR

2. A1) Service category A, S, O, or T or A2) Location of Encounter = Home (as designated in Site Parameters) or A3) clinic code 11 and B) POV 290\*, 293\*-302\*, 306\*-316\*, OR

3. A) Service category A, S, or O, and B) CPT 99384-99387, 99394-99397, 99401-99404 and C) POV 290\*, 293\*-302\*, 306\*-316\*.

Effective Acute Phase Treatment numerator: For all antidepressant medication prescriptions filled (see list of medications below) within 114 days of the Index Prescription Date, from V Medication CRS counts the days prescribed (i.e. treatment days) from the Index Prescription Date until a total of 84 treatment days has been established. If the patient had a total gap exceeding 30 days or if the patient does not have 84 treatment days within the 114 day timeframe, the patient is not included in the numerator.

NOTE: If the medication was started and then discontinued, CRS will recalculate the # Days Prescribed by subtracting the prescription date (i.e. visit date) from the V Medication Discontinued Date. Example: Rx Date=11/15/2004, Discontinued Date=11/19/2004, Recalculated # Days Prescribed=4.

## Example of Patient Included in Numerator:

- 1st RX is Index Rx Date: 11/1/2004, # Days Prescribed=30  
Rx covers patient through 12/1/2004
- 2nd RX: 12/15/2004, # Days Prescribed=30  
Gap #1 = (12/15/2004-12/1/2004) = 14 days  
Rx covers patient through 1/14/2005
- 3rd RX: 1/10/2005, # Days Prescribed=30  
No gap days.  
Rx covers patient through 2/13/2005
- Index Rx Date 11/1/2004 + 114 days = 2/23/2005
- Patient's 84th treatment day occurs on 2/7/2005, which is  
≤ 2/23/2005 AND # gap days of 14 is less than 30.

## Example of Patient Not Included in Numerator:

- 1st Rx is Index Rx Date: 11/1/2004, # Days Prescribed=30

\*\*\* IHS 2007 Clinical Performance Report \*\*\*  
DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006  
Previous Year Period: Jan 01, 2005 to Dec 31, 2005  
Baseline Period: Jan 01, 2000 to Dec 31, 2000

- 
- Rx covers patient through 12/1/2004
  - 2nd Rx: 12/15/2004, # Days Prescribed=30
  - Gap #1 = (12/15/2004-12/1/2004) = 14 days
  - Rx covers patient through 1/14/2005
  - 3rd Rx: 2/01/2005, # Days Prescribed=30
  - Gap #2 = (2/01/2005-1/14/2005) = 18, total # gap days = 32,  
so patient is not included in the numerator

Effective Continuation Phase Treatment numerator: For all antidepressant medication prescriptions (see list of medications below) filled within 231 days of the Index Prescription Date, CRS counts the days prescribed (i.e. treatment days) (from V Medication) from the Index Prescription Date until a total of 180 treatment days has been established. If the patient had a total gap exceeding 51 days or if the patient does not have 180 treatment days within the 231 day timeframe, the patient is not included in the numerator.

NOTE: If the medication was started and then discontinued, CRS will recalculate the # Days Prescribed by subtracting the prescription date (i.e. visit date) from the V Medication Discontinued Date. Example: Rx Date=11/15/2004, Discontinued Date=11/19/2004, Recalculated # Days Prescribed=4.

Antidepressant medications defined with medication taxonomy BGP HEDIS ANTIDEPRESSANT MEDS. (Medications are: Tricyclic antidepressants (TCA) and other cyclic antidepressants, Selective serotonin reuptake inhibitors (SSRI), Monoamine oxidase inhibitors (MAOI), Serotonin-norepinephrine reuptake inhibitors (SNRI), and other antidepressants.)

Increase the rate for patients with new depression diagnosis who are receiving appropriate treatment medication.

HP 2010 Goal: 50%

REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
---------------	---	----------------	---	--------------------	-------------	---	-----------------

\*\*\* IHS 2007 Clinical Performance Report \*\*\*  
 DEMO INDIAN HOSPITAL  
 Report Period: Jan 01, 2006 to Dec 31, 2006  
 Previous Year Period: Jan 01, 2005 to Dec 31, 2005  
 Baseline Period: Jan 01, 2000 to Dec 31, 2000

Antidepressant Medication Management (con't)

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
Active Clinical Pts =>18 w/new depression DX and antidepressant meds	16		6			2		
# w/3 outpt mental health visits within 12 weeks	3	18.8	1	16.7	+2.1	0	0.0	+18.8
# w/12 week treatment meds	8	50.0	4	66.7	-16.7	0	0.0	+50.0
# w/180 day treatment meds	4	25.0	3	50.0	-25.0	0	0.0	+25.0
User Pop Pts =>18 w/new depression DX and antidepressant meds	17		7			3		
# w/3 outpt mental health visits within 12 weeks	3	17.6	1	14.3	+3.4	0	0.0	+17.6
# w/12 week treatment meds	8	47.1	4	57.1	-10.1	0	0.0	+47.1
# w/180 day treatment meds	4	23.5	3	42.9	-19.3	0	0.0	+23.5

\*\*\* IHS 2007 Clinical Performance Report \*\*\*  
DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006  
Previous Year Period: Jan 01, 2005 to Dec 31, 2005  
Baseline Period: Jan 01, 2000 to Dec 31, 2000

-----  
Obesity Assessment

Denominator(s):

Active Clinical patients ages 2 through 74.  
All User Population patients ages 2 through 74.

Numerator(s):

Patients for whom a BMI could be calculated, including refusals in the past year.  
For those with a BMI calculated, patients considered overweight but not obese using BMI and standard tables.  
For those with a BMI calculated, patients considered obese using BMI and standard tables.  
Total of overweight and obese.  
Patients with documented refusal in past year.

Age is calculated at beginning of the Report Period. CRS calculates BMI at the time the report is run, using NHANES II. For 18 and under, a height and weight must be taken on the same day any time during the Report Period. For 19 through 50, height and weight must be recorded within last 5 years, not required to be on the same day. For over 50, height and weight within last 2 years, not required to be recorded on same day. Overweight but not obese is defined as BMI of 25 through 29 for adults 19 and older. Obese is defined as BMI of 30 or more for adults 19 and older. For ages 2-18, definitions based on standard tables. Refusals include REF (refused), NMI (not medically indicated) and UAS (unable to screen) and must be documented during the past year. For ages 18 and under, both the height and weight must be refused on the same visit at any time during the past year. For ages 19 and older, the height and the weight must be refused during the past year and are not required to be on the same visit.

Increase the number of patients for whom BMI data can be measured by 5%.

BMI Available: IHS Performance: FY 2005 - 64.0%, FY 2004 - 60.0%

HP 2010 Goals: 19-2 (Obesity in Adults 20+): 15%, 19-3a (Overweight or Obesity in Children 6-11): 5%, 19-3b (Overweight or Obesity in Adolescents 12-19): 5%, 19-3c (Overweight or Obesity in Children 6-19): 5%

REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
---------------	---	----------------	---	--------------------	-------------	---	-----------------

## \*\*\* IHS 2007 Clinical Performance Report \*\*\*

## DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

## Obesity Assessment (con't)

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
Active Clinical Pts ages 2-74	1,049		1,029			980		
# w/BMI calculated	849	80.9	819	79.6	+1.3	713	72.8	+8.2
A. # Overweight w/ % of Total BMI	238	28.0	236	28.8	-0.8	192	26.9	+1.1
B. # Obese w/ % of Total BMI	353	41.6	336	41.0	+0.6	267	37.4	+4.1
C. # Overweight/Obese w/ % of Total BMI	591	69.6	572	69.8	-0.2	459	64.4	+5.2
D. # w/refusal in past year w/ % of Total BMI	0	0.0	0	0.0	+0.0	0	0.0	+0.0
Male Active Clinical Pts 2-74	423		433			409		
# w/BMI calculated	328	77.5	328	75.8	+1.8	284	69.4	+8.1
A. # Overweight w/ % of Total BMI	102	31.1	97	29.6	+1.5	74	26.1	+5.0
B. # Obese w/ % of Total BMI	145	44.2	140	42.7	+1.5	117	41.2	+3.0
C. #Overweight/Obese w/ % of Total BMI	247	75.3	237	72.3	+3.0	191	67.3	+8.1
D. # w/refusal in past year w/ % of Total BMI	0	0.0	0	0.0	+0.0	0	0.0	+0.0
Female Active Clinical Pts 2-74	626		596			571		
# w/BMI calculated	521	83.2	491	82.4	+0.8	429	75.1	+8.1
A. # Overweight w/ % of Total BMI	136	26.1	139	28.3	-2.2	118	27.5	-1.4
B. # Obese w/ % of Total BMI	208	39.9	196	39.9	+0.0	150	35.0	+5.0
C. #Overweight/Obese w/ % of Total BMI	344	66.0	335	68.2	-2.2	268	62.5	+3.6
D. # w/refusal in past year w/ % of Total BMI	0	0.0	0	0.0	+0.0	0	0.0	+0.0

## \*\*\* IHS 2007 Clinical Performance Report \*\*\*

## DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

## Obesity Assessment (con't)

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
User Population								
Pts 2-74	2,166		2,100			2,119		
# w/BMI calculated	1,150	53.1	1,085	51.7	+1.4	913	43.1	+10.0
A. # Overweight w/ % of Total BMI	323	28.1	311	28.7	-0.6	246	26.9	+1.1
B. # Obese w/ % of Total BMI	473	41.1	449	41.4	-0.3	330	36.1	+5.0
C. #Overweight/Obese w/ % of Total BMI	796	69.2	760	70.0	-0.8	576	63.1	+6.1
D. # w/refusal in past year w/ % of Total BMI	0	0.0	0	0.0	+0.0	0	0.0	+0.0
Male User Pop								
2-74 years	994		975			1,000		
# w/BMI calculated	477	48.0	465	47.7	+0.3	378	37.8	+10.2
A. # Overweight w/ % of Total BMI	142	29.8	139	29.9	-0.1	106	28.0	+1.7
B. # Obese w/ % of Total BMI	212	44.4	198	42.6	+1.9	142	37.6	+6.9
C. #Overweight/Obese w/ % of Total BMI	354	74.2	337	72.5	+1.7	248	65.6	+8.6
D. # w/refusal in past year w/ % of Total BMI	0	0.0	0	0.0	+0.0	0	0.0	+0.0
Female User Pop								
2-74 years	1,172		1,125			1,119		
# w/BMI calculated	673	57.4	620	55.1	+2.3	535	47.8	+9.6
A. # Overweight w/ % of Total BMI	181	26.9	172	27.7	-0.8	140	26.2	+0.7
B. Obese w/ % of Total BMI	261	38.8	251	40.5	-1.7	188	35.1	+3.6
C. #Overweight/Obese w/ % of Total BMI	442	65.7	423	68.2	-2.5	328	61.3	+4.4
D. # w/refusal in past year w/ % of Total BMI	0	0.0	0	0.0	+0.0	0	0.0	+0.0

## \*\*\* IHS 2007 Clinical Performance Report \*\*\*

## DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

-----  
Obesity Assessment (con't)

	TOTAL ACTIVE CLINICAL POPULATION							
	Age Distribution							
	2-5	6-11	12-19	20-24	25-34	35-44	45-54	55-74
CURRENT REPORT PERIOD								
Total # Active Clin	108	97	133	117	186	141	136	131
# w/ BMI calculated	52	44	88	114	176	137	121	117
% w/BMI calculated	48.1	45.4	66.2	97.4	94.6	97.2	89.0	89.3
# Overweight	9	10	21	32	44	37	38	47
% Overweight w/ % Total BMI	17.3	22.7	23.9	28.1	25.0	27.0	31.4	40.2
# Obese	7	13	28	38	82	81	55	49
% Obese w/ % of Total BMI	13.5	29.5	31.8	33.3	46.6	59.1	45.5	41.9
# Overweight or Obese	16	23	49	70	126	118	93	96
% Overweight or Obese w/ % Total BMI	30.8	52.3	55.7	61.4	71.6	86.1	76.9	82.1
# w/refusal in past yr	0	0	0	0	0	0	0	0
% w/refusal in past yr w/ % Total BMI	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0

## \*\*\* IHS 2007 Clinical Performance Report \*\*\*

## DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

-----  
Obesity Assessment (con't)

	TOTAL ACTIVE CLINICAL POPULATION							
	Age Distribution							
	2-5	6-11	12-19	20-24	25-34	35-44	45-54	55-74
PREVIOUS YEAR PERIOD								
Total # Active Clin	111	119	133	119	160	133	125	129
# w/ BMI calculated	49	56	88	114	152	128	112	120
% w/BMI calculated	44.1	47.1	66.2	95.8	95.0	96.2	89.6	93.0
# Overweight	7	11	20	38	47	33	35	45
% Overweight w/ % Total BMI	14.3	19.6	22.7	33.3	30.9	25.8	31.3	37.5
# Obese	14	14	26	35	63	76	56	52
% Obese w/ % of Total BMI	28.6	25.0	29.5	30.7	41.4	59.4	50.0	43.3
# Overweight or Obese	21	25	46	73	110	109	91	97
% Overweight or Obese w/ % Total BMI	42.9	44.6	52.3	64.0	72.4	85.2	81.3	80.8
# w/refusal in past yr	0	0	0	0	0	0	0	0
% w/refusal in past yr w/ % Total BMI	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
CHANGE FROM PREV YR %								
w/ BMI calculated	+4.0	-1.7	+0.0	+1.6	-0.4	+0.9	-0.6	-3.7
Overweight	+3.0	+3.1	+1.1	-5.3	-5.9	+1.2	+0.2	+2.7
Obese	-15.1	+4.5	+2.3	+2.6	+5.1	-0.3	-4.5	-1.5
Overweight or Obese	-12.1	+7.6	+3.4	-2.6	-0.8	+1.0	-4.4	+1.2
w/refusal in past yr	+0.0	+0.0	+0.0	+0.0	+0.0	+0.0	+0.0	+0.0

## \*\*\* IHS 2007 Clinical Performance Report \*\*\*

## DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

-----  
Obesity Assessment (con't)

	TOTAL ACTIVE CLINICAL POPULATION							
	Age Distribution							
	2-5	6-11	12-19	20-24	25-34	35-44	45-54	55-74
BASELINE REPORT PERIOD								
Total # Active Clin	116	115	135	112	153	126	123	100
# w/ BMI calculated	45	58	77	99	129	109	103	93
% w/BMI calculated	38.8	50.4	57.0	88.4	84.3	86.5	83.7	93.0
# Overweight	9	7	18	23	39	29	35	32
% Overweight w/ % Total BMI	20.0	12.1	23.4	23.2	30.2	26.6	34.0	34.4
# Obese	7	13	19	32	58	55	44	39
% Obese w/ % of Total BMI	15.6	22.4	24.7	32.3	45.0	50.5	42.7	41.9
# Overweight or Obese	16	20	37	55	97	84	79	71
% Overweight or Obese w/ % Total BMI	35.6	34.5	48.1	55.6	75.2	77.1	76.7	76.3
# w/refusal in past yr	0	0	0	0	0	0	0	0
% w/refusal in past yr w/ % Total BMI	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
CHANGE FROM BASE YR %								
w/ BMI calculated	+9.4	-5.1	+9.1	+9.0	+10.3	+10.7	+5.2	-3.7
Overweight	-2.7	+10.7	+0.5	+4.8	-5.2	+0.4	-2.6	+5.8
Obese	-2.1	+7.1	+7.1	+1.0	+1.6	+8.7	+2.7	-0.1
Overweight or Obese	-4.8	+17.8	+7.6	+5.8	-3.6	+9.1	+0.2	+5.7
w/refusal in past yr	+0.0	+0.0	+0.0	+0.0	+0.0	+0.0	+0.0	+0.0

## \*\*\* IHS 2007 Clinical Performance Report \*\*\*

## DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

-----  
Obesity Assessment (con't)

CURRENT REPORT PERIOD	MALE ACTIVE CLINICAL POPULATION							
	Age Distribution							
	2-5	6-11	12-19	20-24	25-34	35-44	45-54	55-74
Total MALE AC	52	44	67	40	52	54	55	59
# w/ BMI calculated	22	21	44	39	48	54	46	54
% w/BMI calculated	42.3	47.7	65.7	97.5	92.3	100.0	83.6	91.5
# Overweight	3	4	13	10	13	17	19	23
% Overweight w/ % Total BMI	13.6	19.0	29.5	25.6	27.1	31.5	41.3	42.6
# Obese	4	8	14	14	27	33	20	25
% Obese w/ % of Total BMI	18.2	38.1	31.8	35.9	56.3	61.1	43.5	46.3
# Overweight or Obese	7	12	27	24	40	50	39	48
% Overweight or Obese w/ % Total BMI	31.8	57.1	61.4	61.5	83.3	92.6	84.8	88.9
# w/refusal in past yr	0	0	0	0	0	0	0	0
% w/refusal in past yr w/ % Total BMI	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0

## \*\*\* IHS 2007 Clinical Performance Report \*\*\*

## DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

-----  
Obesity Assessment (con't)

	MALE ACTIVE CLINICAL POPULATION							
	Age Distribution							
	2-5	6-11	12-19	20-24	25-34	35-44	45-54	55-74
PREVIOUS YEAR PERIOD								
Total MALE AC	55	59	65	39	43	56	56	60
# w/ BMI calculated	21	31	41	36	40	55	50	54
% w/BMI calculated	38.2	52.5	63.1	92.3	93.0	98.2	89.3	90.0
# Overweight	4	5	8	14	14	15	16	21
% Overweight w/ % Total BMI	19.0	16.1	19.5	38.9	35.0	27.3	32.0	38.9
# Obese	5	7	10	11	20	34	30	23
% Obese w/ % of Total BMI	23.8	22.6	24.4	30.6	50.0	61.8	60.0	42.6
# Overweight or Obese	9	12	18	25	34	49	46	44
% Overweight or Obese w/ % Total BMI	42.9	38.7	43.9	69.4	85.0	89.1	92.0	81.5
# w/refusal in past yr	0	0	0	0	0	0	0	0
% w/refusal in past yr w/ % Total BMI	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
CHANGE FROM PREV YR %								
w/ BMI calculated	+4.1	-4.8	+2.6	+5.2	-0.7	+1.8	-5.6	+1.5
Overweight	-5.4	+2.9	+10.0	-13.2	-7.9	+4.2	+9.3	+3.7
Obese	-5.6	+15.5	+7.4	+5.3	+6.3	-0.7	-16.5	+3.7
Overweight or Obese	-11.0	+18.4	+17.5	-7.9	-1.7	+3.5	-7.2	+7.4
w/refusal in past yr	+0.0	+0.0	+0.0	+0.0	+0.0	+0.0	+0.0	+0.0

\*\*\* IHS 2007 Clinical Performance Report \*\*\*  
 DEMO INDIAN HOSPITAL  
 Report Period: Jan 01, 2006 to Dec 31, 2006  
 Previous Year Period: Jan 01, 2005 to Dec 31, 2005  
 Baseline Period: Jan 01, 2000 to Dec 31, 2000

Obesity Assessment (con't)

	MALE ACTIVE CLINICAL POPULATION							
	Age Distribution							
	2-5	6-11	12-19	20-24	25-34	35-44	45-54	55-74
BASELINE REPORT PERIOD								
Total MALE AC	58	61	63	35	48	46	53	45
# w/ BMI calculated	23	33	32	29	37	39	46	45
% w/BMI calculated	39.7	54.1	50.8	82.9	77.1	84.8	86.8	100.0
# Overweight	4	4	6	9	10	12	16	13
% Overweight w/ % Total BMI	17.4	12.1	18.8	31.0	27.0	30.8	34.8	28.9
# Obese	4	10	9	11	20	18	20	25
% Obese w/ % of Total BMI	17.4	30.3	28.1	37.9	54.1	46.2	43.5	55.6
# Overweight or Obese	8	14	15	20	30	30	36	38
% Overweight or Obese w/ % Total BMI	34.8	42.4	46.9	69.0	81.1	76.9	78.3	84.4
# w/refusal in past yr	0	0	0	0	0	0	0	0
% w/refusal in past yr w/ % Total BMI	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
CHANGE FROM BASE YR %								
w/ BMI calculated	+2.7	-6.4	+14.9	+14.6	+15.2	+15.2	-3.2	-8.5
Overweight	-3.8	+6.9	+10.8	-5.4	+0.1	+0.7	+6.5	+13.7
Obese	+0.8	+7.8	+3.7	-2.0	+2.2	+15.0	+0.0	-9.3
Overweight or Obese	-3.0	+14.7	+14.5	-7.4	+2.3	+15.7	+6.5	+4.4
w/refusal in past yr	+0.0	+0.0	+0.0	+0.0	+0.0	+0.0	+0.0	+0.0

## \*\*\* IHS 2007 Clinical Performance Report \*\*\*

## DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

-----  
Obesity Assessment (con't)

	FEMALE ACTIVE CLINICAL POPULATION							
	Age Distribution							
	2-5	6-11	12-19	20-24	25-34	35-44	45-54	55-74
CURRENT REPORT PERIOD								
Total FEMALE AC	56	53	66	77	134	87	81	72
# w/ BMI calculated	30	23	44	75	128	83	75	63
% w/BMI calculated	53.6	43.4	66.7	97.4	95.5	95.4	92.6	87.5
# Overweight	6	6	8	22	31	20	19	24
% Overweight w/ % Total BMI	20.0	26.1	18.2	29.3	24.2	24.1	25.3	38.1
# Obese	3	5	14	24	55	48	35	24
% Obese w/ % of Total BMI	10.0	21.7	31.8	32.0	43.0	57.8	46.7	38.1
# Overweight or Obese	9	11	22	46	86	68	54	48
% Overweight or Obese w/ % Total BMI	30.0	47.8	50.0	61.3	67.2	81.9	72.0	76.2
# w/refusal in past yr	0	0	0	0	0	0	0	0
% w/refusal in past yr w/ % Total BMI	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0

## \*\*\* IHS 2007 Clinical Performance Report \*\*\*

## DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

-----  
Obesity Assessment (con't)

	FEMALE ACTIVE CLINICAL POPULATION							
	Age Distribution							
	2-5	6-11	12-19	20-24	25-34	35-44	45-54	55-74
PREVIOUS YEAR PERIOD								
Total FEMALE AC	56	60	68	80	117	77	69	69
# w/ BMI calculated	28	25	47	78	112	73	62	66
% w/BMI calculated	50.0	41.7	69.1	97.5	95.7	94.8	89.9	95.7
# Overweight	3	6	12	24	33	18	19	24
% Overweight w/ % Total BMI	10.7	24.0	25.5	30.8	29.5	24.7	30.6	36.4
# Obese	9	7	16	24	43	42	26	29
% Obese w/ % of Total BMI	32.1	28.0	34.0	30.8	38.4	57.5	41.9	43.9
# Overweight or Obese	12	13	28	48	76	60	45	53
% Overweight or Obese w/ % Total BMI	42.9	52.0	59.6	61.5	67.9	82.2	72.6	80.3
# w/refusal in past yr	0	0	0	0	0	0	0	0
% w/refusal in past yr w/ % Total BMI	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
CHANGE FROM PREV YR %								
w/ BMI calculated	+3.6	+1.7	-2.5	-0.1	-0.2	+0.6	+2.7	-8.2
Overweight	+9.3	+2.1	-7.4	-1.4	-5.2	-0.6	-5.3	+1.7
Obese	-22.1	-6.3	-2.2	+1.2	+4.6	+0.3	+4.7	-5.8
Overweight or Obese	-12.9	-4.2	-9.6	-0.2	-0.7	-0.3	-0.6	-4.1
w/refusal in past yr	+0.0	+0.0	+0.0	+0.0	+0.0	+0.0	+0.0	+0.0

## \*\*\* IHS 2007 Clinical Performance Report \*\*\*

## DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

-----  
Obesity Assessment (con't)

	FEMALE ACTIVE CLINICAL POPULATION							
	Age Distribution							
	2-5	6-11	12-19	20-24	25-34	35-44	45-54	55-74
BASELINE REPORT PERIOD								
Total FEMALE AC	58	54	72	77	105	80	70	55
# w/ BMI calculated	22	25	45	70	92	70	57	48
% w/BMI calculated	37.9	46.3	62.5	90.9	87.6	87.5	81.4	87.3
# Overweight	5	3	12	14	29	17	19	19
% Overweight w/ % Total BMI	22.7	12.0	26.7	20.0	31.5	24.3	33.3	39.6
# Obese	3	3	10	21	38	37	24	14
% Obese w/ % of Total BMI	13.6	12.0	22.2	30.0	41.3	52.9	42.1	29.2
# Overweight or Obese	8	6	22	35	67	54	43	33
% Overweight or Obese w/ % Total BMI	36.4	24.0	48.9	50.0	72.8	77.1	75.4	68.8
# w/refusal in past yr	0	0	0	0	0	0	0	0
% w/refusal in past yr w/ % Total BMI	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
CHANGE FROM BASE YR %								
w/ BMI calculated	+15.6	-2.9	+4.2	+6.5	+7.9	+7.9	+11.2	+0.2
Overweight	-2.7	+14.1	-8.5	+9.3	-7.3	-0.2	-8.0	-1.5
Obese	-3.6	+9.7	+9.6	+2.0	+1.7	+5.0	+4.6	+8.9
Overweight or Obese	-6.4	+23.8	+1.1	+11.3	-5.6	+4.8	-3.4	+7.4
w/refusal in past yr	+0.0	+0.0	+0.0	+0.0	+0.0	+0.0	+0.0	+0.0

\*\*\* IHS 2007 Clinical Performance Report \*\*\*  
 DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006  
 Previous Year Period: Jan 01, 2005 to Dec 31, 2005  
 Baseline Period: Jan 01, 2000 to Dec 31, 2000

Childhood Weight Control

Denominator(s):

GPRA Denominator: Active Clinical Patients 2-5 for whom a BMI could be calculated, broken out by age groups and gender.

Numerator(s):

Patients with BMI 85-94%.  
 GPRA Numerator: Patients with a BMI 95% and up.  
 Patients with a BMI =>85%.

All patients for whom a BMI could be calculated and who are between the ages of 2 and 5 at the beginning of the Report Period and who do not turn age 6 during the Report Period are included in this measure. Age in the age groups is calculated based on the date of the most current BMI found. For example, a patient may be 2 at the beginning of the time period but is 3 at the time of the most current BMI found. That patient will fall into the age 3 group. CRS looks for the most recent BMI in the report period. CRS calculates BMI at the time the report is run, using NHANES II. A height and weight must be taken on the same day any time during the Report Period. The BMI values for this measure reported differently than in Obesity Assessment since this age group is children ages 2-5, whose BMI values are age-dependent. The BMI values are categorized as At-risk for Overweight for patients with a BMI between 85-94% and Overweight for patients with a BMI of 95%.

Patients whose BMI either is greater or less than the Data Check Limit range shown below will not be included in the report counts for At-risk for Overweight or Overweight.

Low-High Ages	SEX	BMI	BMI	DATA CHECK LIMITS	
		>= (Risk-Overwt)	>= (Overwt)	BMI >	BMI <
2-2	MALE	17.7	18.7	36.8	7.2
	FEMALE	17.5	18.6	37.0	7.1
3-3	MALE	17.1	18.0	35.6	7.1
	FEMALE	17.0	18.1	35.4	6.8
4-4	MALE	16.8	17.8	36.2	7.0
	FEMALE	16.7	18.1	36.0	6.9
5-5	MALE	16.9	18.1	36.0	6.9
	FEMALE	16.9	18.5	39.2	6.8

During FY 2007, maintain the FY 2006 rate of 24% of children with a BMI of

\*\*\* IHS 2007 Clinical Performance Report \*\*\*  
 DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006  
 Previous Year Period: Jan 01, 2005 to Dec 31, 2005  
 Baseline Period: Jan 01, 2000 to Dec 31, 2000

95% or higher.

IHS Performance: FY 2006 - 24.0%

IHS 2010 Goal: Reduce by 10%

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
Active Clinical Pts								
2-5 w/BMI (GPRA)	44		39			40		
# w/BMI 85-94%	7	15.9	5	12.8	+3.1	10	25.0	-9.1
# w/BMI =>95% (GPRA)	5	11.4	9	23.1	-11.7	5	12.5	-1.1
# w/BMI =>85%	12	27.3	14	35.9	-8.6	15	37.5	-10.2
Active Clinical Pts								
Age 2	2		8			5		
# w/BMI 85-94%	1	50.0	0	0.0	+50.0	1	20.0	+30.0
# w/BMI =>95%	0	0.0	2	25.0	-25.0	0	0.0	+0.0
# w/BMI =>85%	1	50.0	2	25.0	+25.0	1	20.0	+30.0
Active Clinical Pts								
Age 3	23		15			8		
# w/BMI 85-94%	2	8.7	2	13.3	-4.6	3	37.5	-28.8
# w/BMI =>95%	3	13.0	3	20.0	-7.0	2	25.0	-12.0
# w/BMI =>85%	5	21.7	5	33.3	-11.6	5	62.5	-40.8
Active Clinical Pts								
Age 4	12		10			17		
# w/BMI 85-94%	1	8.3	2	20.0	-11.7	3	17.6	-9.3
# w/BMI =>95%	1	8.3	2	20.0	-11.7	2	11.8	-3.4
# w/BMI =>85%	2	16.7	4	40.0	-23.3	5	29.4	-12.7

\*\*\* IHS 2007 Clinical Performance Report \*\*\*

DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

Childhood Weight Control (con't)

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
Active Clinical Pts								
Age 5	7		6			10		
# w/BMI 85-94%	3	42.9	1	16.7	+26.2	3	30.0	+12.9
# w/BMI =>95%	1	14.3	2	33.3	-19.0	1	10.0	+4.3
# w/BMI =>85%	4	57.1	3	50.0	+7.1	4	40.0	+17.1
Male Active Clinical Pts								
Age 2	1		3			2		
# w/BMI 85-94%	0	0.0	0	0.0	+0.0	0	0.0	+0.0
# w/BMI =>95%	0	0.0	1	33.3	-33.3	0	0.0	+0.0
# w/BMI =>85%	0	0.0	1	33.3	-33.3	0	0.0	+0.0
Male Active Clinical Pts								
Age 3	9		7			4		
# w/BMI 85-94%	1	11.1	0	0.0	+11.1	1	25.0	-13.9
# w/BMI =>95%	1	11.1	2	28.6	-17.5	2	50.0	-38.9
# w/BMI =>85%	2	22.2	2	28.6	-6.3	3	75.0	-52.8
Male Active Clinical Pts								
Age 4	4		4			9		
# w/BMI 85-94%	0	0.0	1	25.0	-25.0	2	22.2	-22.2
# w/BMI =>95%	0	0.0	0	0.0	+0.0	1	11.1	-11.1
# w/BMI =>85%	0	0.0	1	25.0	-25.0	3	33.3	-33.3
Male Active Clinical Pts								
Age 5	4		4			5		
# w/BMI 85-94%	2	50.0	1	25.0	+25.0	1	20.0	+30.0
# w/BMI =>95%	1	25.0	1	25.0	+0.0	0	0.0	+25.0
# w/BMI =>85%	3	75.0	2	50.0	+25.0	1	20.0	+55.0

\*\*\* IHS 2007 Clinical Performance Report \*\*\*  
 DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006  
 Previous Year Period: Jan 01, 2005 to Dec 31, 2005  
 Baseline Period: Jan 01, 2000 to Dec 31, 2000

Childhood Weight Control (con't)

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
Female Active Clinical								
Pts Age 2	1		5			3		
# w/BMI 85-94%	1	100.0	0	0.0	+100.0	1	33.3	+66.7
# w/BMI =>95%	0	0.0	1	20.0	-20.0	0	0.0	+0.0
# w/BMI =>85%	1	100.0	1	20.0	+80.0	1	33.3	+66.7
Female Active Clinical								
Pts Age 3	14		8			4		
# w/BMI 85-94%	1	7.1	2	25.0	-17.9	2	50.0	-42.9
# w/BMI =>95%	2	14.3	1	12.5	+1.8	0	0.0	+14.3
# w/BMI =>85%	3	21.4	3	37.5	-16.1	2	50.0	-28.6
Female Active Clinical								
Pts Age 4	8		6			8		
# w/BMI 85-94%	1	12.5	1	16.7	-4.2	1	12.5	+0.0
# w/BMI =>95%	1	12.5	2	33.3	-20.8	1	12.5	+0.0
# w/BMI =>85%	2	25.0	3	50.0	-25.0	2	25.0	+0.0
Female Active Clinical								
Pts Age 5	3		2			5		
# w/BMI 85-94%	1	33.3	0	0.0	+33.3	2	40.0	-6.7
# w/BMI =>95%	0	0.0	1	50.0	-50.0	1	20.0	-20.0
# w/BMI =>85%	1	33.3	1	50.0	-16.7	3	60.0	-26.7

\*\*\* IHS 2007 Clinical Performance Report \*\*\*

DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

---

#### Nutrition and Exercise Education for At Risk Patients

##### Denominator(s):

Active Clinical patients ages 6 and older considered overweight (including obese). Broken down by gender.

A: Active Clinical patients ages 6 and older considered obese. Broken down by age and gender.

Active Diabetic patients, defined as all Active Clinical patients diagnosed with diabetes at least one year prior to the end of Report period, AND at least 2 visits in the past year, AND 2 DM-related visits ever.

##### Numerator(s):

Patients provided with medical nutrition counseling in the year prior to end of Report period.

Patients provided specific nutrition education in the year prior to the end of the Report period.

Patients provided specific exercise education in year prior to end of Report period.

Patients provided with other related exercise and nutrition education.

Age of the patient is calculated at beginning of Report period. Overweight is defined as including both obese and overweight categories calculated by BMI. Overweight: Ages 19 and older, BMI equal to or greater than (=>) 25. Obese: Ages 19 and older, BMI equal to or greater than (=>) 30. For ages 18 and under, definition based on standard tables. GPRA+ calculates BMI at the time the report is run, using NHANES II. For 18 and under, a height and weight must be taken on the same day any time in the year prior to the end of the Report period. For 19 through 50, height and weight must be recorded within last 5 years, not required to be on the same day. For over 50, height and weight within last 2 years, not required to be recorded on same day. Medical nutrition counseling defined as: CPT 97802-97804, G0270, G0271; Provider codes 07, 29, 97, 99; Clinic codes 67 (dietary) or 36 (WIC). Nutrition education defined as: POV V65.3 dietary surveillance and counseling; patient education codes ending "-N" (Nutrition), or "-MNT" (or old code "-DT" (Diet)). Exercise education defined as: POV V65.41 exercise counseling; patient education codes ending "-EX" (Exercise). Related exercise and nutrition counseling defined as: patient education codes ending "-LA" (lifestyle adaptation) or containing "OBS-" (obesity).

Increase the proportion of at risk patients who are provided patient education on nutrition and exercise.

\*\*\* IHS 2007 Clinical Performance Report \*\*\*

DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

Nutrition and Exercise Education for At Risk Patient (con't)

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
# Overweight Active Clinical patients =>6	575		551			443		
# w/medical nutrition counseling	29	5.0	16	2.9	+2.1	23	5.2	-0.1
# specific nutrition education provided	76	13.2	79	14.3	-1.1	78	17.6	-4.4
# w/exercise educ	23	4.0	28	5.1	-1.1	35	7.9	-3.9
# w/ other exec or nutrition educ	69	12.0	59	10.7	+1.3	24	5.4	+6.6
# Male Overweight Active Clinical pts =>6	240		228			183		
# w/medical nutrition counseling	15	6.3	7	3.1	+3.2	6	3.3	+3.0
# specific nutrition education provided	35	14.6	32	14.0	+0.5	28	15.3	-0.7
# w/exercise educ	10	4.2	12	5.3	-1.1	16	8.7	-4.6
# w/ other exec or nutrition educ	38	15.8	22	9.6	+6.2	11	6.0	+9.8
# Female Overweight Active Clinical pts =>6	335		323			260		
# w/medical nutrition counseling	14	4.2	9	2.8	+1.4	17	6.5	-2.4
# specific nutrition education provided	41	12.2	47	14.6	-2.3	50	19.2	-7.0
# w/exercise educ	13	3.9	16	5.0	-1.1	19	7.3	-3.4
# w/ other exec or nutrition educ	31	9.3	37	11.5	-2.2	13	5.0	+4.3

\*\*\* IHS 2007 Clinical Performance Report \*\*\*  
 DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006  
 Previous Year Period: Jan 01, 2005 to Dec 31, 2005  
 Baseline Period: Jan 01, 2000 to Dec 31, 2000

A. # Obese Active Clinical patients =>6

	346		322			260		
# w/medical nutrition counseling	20	5.8	11	3.4	+2.4	15	5.8	+0.0
# specific nutrition education provided	54	15.6	50	15.5	+0.1	46	17.7	-2.1
# w/exercise educ	17	4.9	22	6.8	-1.9	21	8.1	-3.2
# w/ other exec or nutrition educ	39	11.3	41	12.7	-1.5	14	5.4	+5.9
# Male Obese Active Clinical pts =>6	141		135			113		
# w/medical nutrition counseling	8	5.7	5	3.7	+2.0	5	4.4	+1.2
# specific nutrition education provided	23	16.3	20	14.8	+1.5	18	15.9	+0.4
# w/exercise educ	8	5.7	8	5.9	-0.3	7	6.2	-0.5
# w/ other exec or nutrition educ	22	15.6	14	10.4	+5.2	6	5.3	+10.3
# Female Obese Active Clinical pts =>6	205		187			147		
# w/medical nutrition counseling	12	5.9	6	3.2	+2.6	10	6.8	-0.9
# specific nutrition education provided	31	15.1	30	16.0	-0.9	28	19.0	-3.9
# w/exercise educ	9	4.4	14	7.5	-3.1	14	9.5	-5.1
# w/ other exec or nutrition educ	17	8.3	27	14.4	-6.1	8	5.4	+2.9

## \*\*\* IHS 2007 Clinical Performance Report \*\*\*

## DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

---

# Active Diabetics	106		95			87		
# w/medical nutrition counseling	14	13.2	4	4.2	+9.0	9	10.3	+2.9
# specific nutrition education provided	34	32.1	40	42.1	-10.0	43	49.4	-17.3
# w/exercise educ	8	7.5	24	25.3	-17.7	25	28.7	-21.2
# w/ other exec or nutrition educ	24	22.6	28	29.5	-6.8	17	19.5	+3.1
# Male Active Diabetics	50		45			38		
# w/medical nutrition counseling	7	14.0	2	4.4	+9.6	2	5.3	+8.7
# specific nutrition education provided	17	34.0	20	44.4	-10.4	20	52.6	-18.6
# w/exercise educ	4	8.0	10	22.2	-14.2	14	36.8	-28.8
# w/ other exec or nutrition educ	14	28.0	16	35.6	-7.6	12	31.6	-3.6
# Female Active Diabetics	56		50			49		
# w/medical nutrition counseling	7	12.5	2	4.0	+8.5	7	14.3	-1.8
# specific nutrition education provided	17	30.4	20	40.0	-9.6	23	46.9	-16.6
# w/exercise educ	4	7.1	14	28.0	-20.9	11	22.4	-15.3
# w/ other exec or nutrition educ	10	17.9	12	24.0	-6.1	5	10.2	+7.7

\*\*\* IHS 2007 Clinical Performance Report \*\*\*  
 DEMO INDIAN HOSPITAL  
 Report Period: Jan 01, 2006 to Dec 31, 2006  
 Previous Year Period: Jan 01, 2005 to Dec 31, 2005  
 Baseline Period: Jan 01, 2000 to Dec 31, 2000

Nutrition and Exercise Education for At Risk Patient (con't)

TOTAL OBESE ACTIVE CLINICAL POPULATION					
Age Distribution					
# Obese Active Clinical	6-11	12-19	20-39	40-59	=>60
CURRENT REPORT PERIOD					
# Obese Active Clinical	13	28	160	114	31
# Med Nutr Educ	0	1	8	8	3
% w/Med Nutr Educ	0.0	3.6	5.0	7.0	9.7
# w/spec nutr educ	0	3	19	25	7
% w/spec nutr ed	0.0	10.7	11.9	21.9	22.6
# w/exercise educ	0	0	6	9	2
% w/exercise ed	0.0	0.0	3.8	7.9	6.5
# w/other educ	0	2	17	15	5
% w/other educ	0.0	7.1	10.6	13.2	16.1
PREVIOUS YEAR PERIOD					
# Obese Active Clinical	14	26	135	115	32
# Med Nutr Educ	0	2	5	2	2
% w/Med Nutr Educ	0.0	7.7	3.7	1.7	6.3
# w/spec nutr educ	0	2	19	22	7
% w/spec nutr ed	0.0	7.7	14.1	19.1	21.9
# w/exercise educ	0	0	4	14	4
% w/exercise ed	0.0	0.0	3.0	12.2	12.5
# w/other educ	0	2	13	23	3
% w/other educ	0.0	7.7	9.6	20.0	9.4
CHANGE FROM PREV YR %					
Med Nutr Educ	+0.0	-4.1	+1.3	+5.3	+3.4
Spec nutr ed	+0.0	+3.0	-2.2	+2.8	+0.7
w/exercise ed	+0.0	+0.0	+0.8	-4.3	-6.0
w/other educ	+0.0	-0.5	+1.0	-6.8	+6.8

\*\*\* IHS 2007 Clinical Performance Report \*\*\*  
 DEMO INDIAN HOSPITAL  
 Report Period: Jan 01, 2006 to Dec 31, 2006  
 Previous Year Period: Jan 01, 2005 to Dec 31, 2005  
 Baseline Period: Jan 01, 2000 to Dec 31, 2000

Nutrition and Exercise Education for At Risk Patient (con't)

# Obese Active Clinical	TOTAL OBESE ACTIVE CLINICAL POPULATION Age Distribution				
	6-11	12-19	20-39	40-59	=>60
BASELINE REPORT PERIOD					
# Obese Active Clinical	13	19	116	90	22
# Med Nutr Educ	1	1	7	4	2
% w/Med Nutr Educ	7.7	5.3	6.0	4.4	9.1
# w/spec nutr educ	1	1	14	21	9
% w/spec nutr ed	7.7	5.3	12.1	23.3	40.9
# w/exercise educ	0	1	4	13	3
% w/exercise ed	0.0	5.3	3.4	14.4	13.6
# w/other educ	0	0	3	9	2
% w/other educ	0.0	0.0	2.6	10.0	9.1
CHANGE FROM BASE YR %					
Med Nutr Educ	-7.7	-1.7	-1.0	+2.6	+0.6
Spec nutr ed	-7.7	+5.5	-0.2	-1.4	-18.3
w/exercise ed	+0.0	-5.3	+0.3	-6.5	-7.2
w/other educ	+0.0	+7.1	+8.0	+3.2	+7.0

## \*\*\* IHS 2007 Clinical Performance Report \*\*\*

## DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

-----  
Nutrition and Exercise Education for At Risk Patient (con't)

MALE OBESE ACTIVE CLINICAL POPULATION					
Age Distribution					
MALE Obese Active Clinical	6-11	12-19	20-39	40-59	=>60
CURRENT REPORT PERIOD					
MALE Obese Active Clinical	8	14	57	45	17
# Med Nutr Educ	0	1	3	3	1
% w/Med Nutr Educ	0.0	7.1	5.3	6.7	5.9
# w/spec nutr educ	0	2	8	9	4
% w/spec nutr ed	0.0	14.3	14.0	20.0	23.5
# w/exercise educ	0	0	3	3	2
% w/exercise ed	0.0	0.0	5.3	6.7	11.8
# w/other educ	0	1	11	7	3
% w/other educ	0.0	7.1	19.3	15.6	17.6
PREVIOUS YEAR PERIOD					
MALE Obese Active Clinical	7	10	48	57	13
# Med Nutr Educ	0	1	2	1	1
% w/Med Nutr Educ	0.0	10.0	4.2	1.8	7.7
# w/spec nutr educ	0	1	7	9	3
% w/spec nutr ed	0.0	10.0	14.6	15.8	23.1
# w/exercise educ	0	0	2	5	1
% w/exercise ed	0.0	0.0	4.2	8.8	7.7
# w/other educ	0	0	3	9	2
% w/other educ	0.0	0.0	6.3	15.8	15.4
CHANGE FROM PREV YR %					
Med Nutr Educ	+0.0	-2.9	+1.1	+4.9	-1.8
Spec nutr ed	+0.0	+4.3	-0.5	+4.2	+0.5
w/exercise ed	+0.0	+0.0	+1.1	-2.1	+4.1
w/other educ	+0.0	+7.1	+13.0	-0.2	+2.3

\*\*\* IHS 2007 Clinical Performance Report \*\*\*  
 DEMO INDIAN HOSPITAL  
 Report Period: Jan 01, 2006 to Dec 31, 2006  
 Previous Year Period: Jan 01, 2005 to Dec 31, 2005  
 Baseline Period: Jan 01, 2000 to Dec 31, 2000

Nutrition and Exercise Education for At Risk Patient (con't)

MALE OBESE ACTIVE CLINICAL POPULATION					
Age Distribution					
MALE Obese Active Clinical	6-11	12-19	20-39	40-59	=>60
BASELINE REPORT PERIOD					
MALE Obese Active Clinical	10	9	40	40	14
# Med Nutr Educ	1	1	0	2	1
% w/Med Nutr Educ	10.0	11.1	0.0	5.0	7.1
# w/spec nutr educ	1	1	3	8	5
% w/spec nutr ed	10.0	11.1	7.5	20.0	35.7
# w/exercise educ	0	0	0	5	2
% w/exercise ed	0.0	0.0	0.0	12.5	14.3
# w/other educ	0	0	1	4	1
% w/other educ	0.0	0.0	2.5	10.0	7.1
CHANGE FROM BASE YR %					
Med Nutr Educ	-10.0	-4.0	+5.3	+1.7	-1.3
Spec nutr ed	-10.0	+3.2	+6.5	+0.0	-12.2
w/exercise ed	+0.0	+0.0	+5.3	-5.8	-2.5
w/other educ	+0.0	+7.1	+16.8	+5.6	+10.5

\*\*\* IHS 2007 Clinical Performance Report \*\*\*  
 DEMO INDIAN HOSPITAL  
 Report Period: Jan 01, 2006 to Dec 31, 2006  
 Previous Year Period: Jan 01, 2005 to Dec 31, 2005  
 Baseline Period: Jan 01, 2000 to Dec 31, 2000

Nutrition and Exercise Education for At Risk Patient (con't)

FEMALE OBESE ACTIVE CLINICAL POPULATION					
Age Distribution					
FEMALE Obese Active Clinical	6-11	12-19	20-39	40-59	=>60
<b>CURRENT REPORT PERIOD</b>					
FEMALE Obese Active Clinical	5	14	103	69	14
# Med Nutr Educ	0	0	5	5	2
% w/Med Nutr Educ	0.0	0.0	4.9	7.2	14.3
# w/spec nutr educ	0	1	11	16	3
% w/spec nutr ed	0.0	7.1	10.7	23.2	21.4
# w/exercise educ	0	0	3	6	0
% w/exercise ed	0.0	0.0	2.9	8.7	0.0
# w/other educ	0	1	6	8	2
% w/other educ	0.0	7.1	5.8	11.6	14.3
<b>PREVIOUS YEAR PERIOD</b>					
FEMALE Obese Active Clinical	7	16	87	58	19
# Med Nutr Educ	0	1	3	1	1
% w/Med Nutr Educ	0.0	6.3	3.4	1.7	5.3
# w/spec nutr educ	0	1	12	13	4
% w/spec nutr ed	0.0	6.3	13.8	22.4	21.1
# w/exercise educ	0	0	2	9	3
% w/exercise ed	0.0	0.0	2.3	15.5	15.8
# w/other educ	0	2	10	14	1
% w/other educ	0.0	12.5	11.5	24.1	5.3
<b>CHANGE FROM PREV YR %</b>					
Med Nutr Educ	+0.0	-6.3	+1.4	+5.5	+9.0
Spec nutr ed	+0.0	+0.9	-3.1	+0.8	+0.4
w/exercise ed	+0.0	+0.0	+0.6	-6.8	-15.8
w/other educ	+0.0	-5.4	-5.7	-12.5	+9.0

## \*\*\* IHS 2007 Clinical Performance Report \*\*\*

## DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

-----  
Nutrition and Exercise Education for At Risk Patient (con't)

## FEMALE OBESE ACTIVE CLINICAL POPULATION

## Age Distribution

FEMALE Obese Active Clinical	6-11	12-19	20-39	40-59	=>60
BASELINE REPORT PERIOD					
FEMALE Obese Active Clinical	3	10	76	50	8
# Med Nutr Educ	0	0	7	2	1
% w/Med Nutr Educ	0.0	0.0	9.2	4.0	12.5
# w/spec nutr educ	0	0	11	13	4
% w/spec nutr ed	0.0	0.0	14.5	26.0	50.0
# w/exercise educ	0	1	4	8	1
% w/exercise ed	0.0	10.0	5.3	16.0	12.5
# w/other educ	0	0	2	5	1
% w/other educ	0.0	0.0	2.6	10.0	12.5
CHANGE FROM BASE YR %					
Med Nutr Educ	+0.0	+0.0	-4.4	+3.2	+1.8
Spec nutr ed	+0.0	+7.1	-3.8	-2.8	-28.6
w/exercise ed	+0.0	-10.0	-2.4	-7.3	-12.5
w/other educ	+0.0	+7.1	+3.2	+1.6	+1.8

\*\*\* IHS 2007 Clinical Performance Report \*\*\*

DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

---

Cardiovascular Disease and Cholesterol Screening

Denominator(s):

Active Clinical patients ages 23 and older, broken down by gender.

User Population patients ages 23 and older, broken down by gender.

Active IHD patients, defined as all Active Clinical patients diagnosed with ischemic heart disease (IHD) prior to the Report Period, AND at least 2 visits during the Report Period, AND 2 IHD-related visits ever. Broken down by gender.

Numerator(s):

Patients with documented blood total cholesterol screening any time in the past 5 years.

A. Patients with high total cholesterol levels, defined as equal to or greater than ( $\geq$ ) 240.

Patients with LDL completed in the past 5 years, regardless of result.

A. Patients with LDL  $\leq$  100

B. Patients with LDL 101-130

C. Patients with LDL 131-160

D. Patients with LDL  $>$  160

Age is calculated at the beginning of the Report period.

Ischemic Heart Disease (IHD) diagnosis defined as: 410.0-412.\*, 414.0-414.9, 428.\* or 429.2 recorded in the V POV file.

Counts all Y instances reported, regardless of the results of the measurement. Total Cholesterol definition: CPT 82465; LOINC taxonomy ; site-populated taxonomy DM AUDIT CHOLESTEROL TAX. LDL Definition: CPT 83721; LOINC taxonomy; site-populated taxonomy DM AUDIT LDL CHOLESTEROL TAX.

Maintain the proportion of patients ages 23 and older who have received blood cholesterol screening.

IHS Performance: FY 2006 - 48.0%, FY 2005 - 43.0%

Chol Screen: HP 1998 baseline: 67%; HP 2010 target: 80%; High

Cholesterol: HP2010 target: 17%

## \*\*\* IHS 2007 Clinical Performance Report \*\*\*

DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

## Cardiovascular Disease and Cholesterol Screening (con't)

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
Active Clinical Pts => 23	663		618			568		
# w/ Total Cholesterol screen w/in 5 yrs	244	36.8	219	35.4	+1.4	201	35.4	+1.4
A. # w/ High Chol =>240 w/ % of Total Chol Screen	20	8.2	23	10.5	-2.3	28	13.9	-5.7
# w/LDL done in past 5 yrs	217	32.7	183	29.6	+3.1	114	20.1	+12.7
A. # w/LDL =<100 w/ % of Total LDL Screen	103	47.5	97	53.0	-5.5	48	42.1	+5.4
B. # w/LDL 101-130 w/ % of Total LDL Screen	71	32.7	44	24.0	+8.7	35	30.7	+2.0
C. # w/LDL 131-160 w/ % of Total LDL Screen	26	12.0	25	13.7	-1.7	14	12.3	-0.3
D. # w/LDL >160 w/ % of Total LDL Screen	11	5.1	10	5.5	-0.4	10	8.8	-3.7

## \*\*\* IHS 2007 Clinical Performance Report \*\*\*

## DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

## Cardiovascular Disease and Cholesterol Screening (con't)

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
Male Active Clinical Pts =>23	247		245			219		
# w/ Total Cholesterol screen w/in 5 yrs	104	42.1	98	40.0	+2.1	85	38.8	+3.3
A. # w/ High Chol =>240 w/ % of Total Chol Screen	11	10.6	14	14.3	-3.7	8	9.4	+1.2
# w/LDL done in past 5 yrs	101	40.9	91	37.1	+3.7	59	26.9	+14.0
A. # w/LDL =<100 w/ % of Total LDL Screen	55	54.5	48	52.7	+1.7	25	42.4	+12.1
B. # w/LDL 101-130 w/ % of Total LDL Screen	25	24.8	17	18.7	+6.1	18	30.5	-5.8
C. # w/LDL 131-160 w/ % of Total LDL Screen	8	7.9	12	13.2	-5.3	5	8.5	-0.6
D. # w/LDL >160 w/ % of Total LDL Screen	8	7.9	8	8.8	-0.9	4	6.8	+1.1

## \*\*\* IHS 2007 Clinical Performance Report \*\*\*

DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

## Cardiovascular Disease and Cholesterol Screening (con't)

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
Female Active Clinical Pts =>23	416		373			349		
# w/ Total Cholesterol screen w/in 5 yrs	140	33.7	121	32.4	+1.2	116	33.2	+0.4
A. # w/ High Chol =>240 w/ % of Total Chol Screen	9	6.4	9	7.4	-1.0	20	17.2	-10.8
# w/LDL done in past 5 yrs	116	27.9	92	24.7	+3.2	55	15.8	+12.1
A. # w/LDL =<100 w/ % of Total LDL Screen	48	41.4	49	53.3	-11.9	23	41.8	-0.4
B. # w/LDL 101-130 w/ % of Total LDL Screen	46	39.7	27	29.3	+10.3	17	30.9	+8.7
C. # w/LDL 131-160 w/ % of Total LDL Screen	18	15.5	13	14.1	+1.4	9	16.4	-0.8
D. # w/LDL >160 w/ % of Total LDL Screen	3	2.6	2	2.2	+0.4	6	10.9	-8.3

## \*\*\* IHS 2007 Clinical Performance Report \*\*\*

## DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

-----  
Cardiovascular Disease and Cholesterol Screening (con't)

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
User Population => 23	1,291		1,225			1,201		
# w/ Total Cholesterol screen w/in 5 yrs	267	20.7	243	19.8	+0.8	217	18.1	+2.6
A. # w/ High Chol =>240 w/ % of Total Chol Screen	22	8.2	26	10.7	-2.5	33	15.2	-7.0
# w/LDL done in past 5 yrs	234	18.1	193	15.8	+2.4	116	9.7	+8.5
A. # w/LDL =<100 w/ % of Total LDL Screen	108	46.2	101	52.3	-6.2	49	42.2	+3.9
B. # w/LDL 101-130 w/ % of Total LDL Screen	78	33.3	48	24.9	+8.5	35	30.2	+3.2
C. # w/LDL 131-160 w/ % of Total LDL Screen	30	12.8	27	14.0	-1.2	15	12.9	-0.1
D. # w/LDL >160 w/ % of Total LDL Screen	12	5.1	10	5.2	-0.1	10	8.6	-3.5

## \*\*\* IHS 2007 Clinical Performance Report \*\*\*

DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

## Cardiovascular Disease and Cholesterol Screening (con't)

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
Male User Pop								
Pts =>23	553		525			521		
# w/ Total Cholesterol screen w/in 5 yrs	114	20.6	110	21.0	-0.3	89	17.1	+3.5
A. # w/ High Chol =>240 w/ % of Total Chol Screen	12	10.5	15	13.6	-3.1	10	11.2	-0.7
# w/LDL done in past 5 yrs	109	19.7	97	18.5	+1.2	60	11.5	+8.2
A. # w/LDL =<100 w/ % of Total LDL Screen	57	52.3	50	51.5	+0.7	25	41.7	+10.6
B. # w/LDL 101-130 w/ % of Total LDL Screen	27	24.8	19	19.6	+5.2	18	30.0	-5.2
C. # w/LDL 131-160 w/ % of Total LDL Screen	11	10.1	14	14.4	-4.3	6	10.0	+0.1
D. # w/LDL >160 w/ % of Total LDL Screen	9	8.3	8	8.2	+0.0	4	6.7	+1.6

\*\*\* IHS 2007 Clinical Performance Report \*\*\*  
 DEMO INDIAN HOSPITAL  
 Report Period: Jan 01, 2006 to Dec 31, 2006  
 Previous Year Period: Jan 01, 2005 to Dec 31, 2005  
 Baseline Period: Jan 01, 2000 to Dec 31, 2000

Cardiovascular Disease and Cholesterol Screening (con't)

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
Female User Pop								
Pts =>23	738		700			680		
# w/ Total Cholesterol screen w/in 5 yrs	153	20.7	133	19.0	+1.7	128	18.8	+1.9
A. # w/ High Chol =>240 w/ % of Total Chol Screen	10	6.5	11	8.3	-1.7	23	18.0	-11.4
# w/LDL done in past 5 yrs	125	16.9	96	13.7	+3.2	56	8.2	+8.7
A. # w/LDL =<100 w/ % of Total LDL Screen	51	40.8	51	53.1	-12.3	24	42.9	-2.1
B. # w/LDL 101-130 w/ % of Total LDL Screen	51	40.8	29	30.2	+10.6	17	30.4	+10.4
C. # w/LDL 131-160 w/ % of Total LDL Screen	19	15.2	13	13.5	+1.7	9	16.1	-0.9
D. # w/LDL >160 w/ % of Total LDL Screen	3	2.4	2	2.1	+0.3	6	10.7	-8.3

\*\*\* IHS 2007 Clinical Performance Report \*\*\*  
 DEMO INDIAN HOSPITAL  
 Report Period: Jan 01, 2006 to Dec 31, 2006  
 Previous Year Period: Jan 01, 2005 to Dec 31, 2005  
 Baseline Period: Jan 01, 2000 to Dec 31, 2000

Cardiovascular Disease and Cholesterol Screening (con't)

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
Active IHD Pts	52		44			36		
# w/ Total Cholesterol screen w/in 5 yrs	46	88.5	40	90.9	-2.4	35	97.2	-8.8
A. # w/ High Chol =>240 w/ % of Total Chol Screen	3	6.5	3	7.5	-1.0	5	14.3	-7.8
# w/LDL done in past 5 yrs	44	84.6	38	86.4	-1.7	30	83.3	+1.3
A. # w/LDL =<100 w/ % of Total LDL Screen	25	56.8	23	60.5	-3.7	15	50.0	+6.8
B. # w/LDL 101-130 w/ % of Total LDL Screen	13	29.5	7	18.4	+11.1	7	23.3	+6.2
C. # w/LDL 131-160 w/ % of Total LDL Screen	5	11.4	5	13.2	-1.8	3	10.0	+1.4
D. # w/LDL >160 w/ % of Total LDL Screen	0	0.0	2	5.3	-5.3	3	10.0	-10.0

## \*\*\* IHS 2007 Clinical Performance Report \*\*\*

## DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

## Cardiovascular Disease and Cholesterol Screening (con't)

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
Male Active IHD Pts	34		26			22		
# w/ Total Cholesterol screen w/in 5 yrs	31	91.2	24	92.3	-1.1	21	95.5	-4.3
A. # w/ High Chol =>240 w/ % of Total Chol Screen	2	6.5	1	4.2	+2.3	1	4.8	+1.7
# w/LDL done in past 5 yrs	29	85.3	23	88.5	-3.2	18	81.8	+3.5
A. # w/LDL =<100 w/ % of Total LDL Screen	17	58.6	14	60.9	-2.2	10	55.6	+3.1
B. # w/LDL 101-130 w/ % of Total LDL Screen	7	24.1	4	17.4	+6.7	3	16.7	+7.5
C. # w/LDL 131-160 w/ % of Total LDL Screen	4	13.8	4	17.4	-3.6	2	11.1	+2.7
D. # w/LDL >160 w/ % of Total LDL Screen	0	0.0	0	0.0	+0.0	1	5.6	-5.6

## \*\*\* IHS 2007 Clinical Performance Report \*\*\*

DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

## Cardiovascular Disease and Cholesterol Screening (con't)

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
Female Active IHD Pts	18		18			14		
# w/ Total Cholesterol screen w/in 5 yrs	15	83.3	16	88.9	-5.6	14	100.0	-16.7
A. # w/ High Chol =>240 w/ % of Total Chol Screen	1	6.7	2	12.5	-5.8	4	28.6	-21.9
# w/LDL done in past 5 yrs	15	83.3	15	83.3	+0.0	12	85.7	-2.4
A. # w/LDL =<100 w/ % of Total LDL Screen	8	53.3	9	60.0	-6.7	5	41.7	+11.7
B. # w/LDL 101-130 w/ % of Total LDL Screen	6	40.0	3	20.0	+20.0	4	33.3	+6.7
C. # w/LDL 131-160 w/ % of Total LDL Screen	1	6.7	1	6.7	+0.0	1	8.3	-1.7
D. # w/LDL >160 w/ % of Total LDL Screen	0	0.0	2	13.3	-13.3	2	16.7	-16.7

## \*\*\* IHS 2007 Clinical Performance Report \*\*\*

DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

-----  
Cardiovascular Disease and Blood Pressure Control

## Denominator(s):

All Active Clinical patients 20 and over, broken down by gender.

All User Population patients ages 20 and older, broken down by gender.

Active IHD patients, defined as all Active Clinical patients diagnosed with ischemic heart disease (IHD) prior to the Report Period, AND at least 2 visits during the Report Period, AND 2 IHD-related visits ever. Broken down by gender.

## Numerator(s):

Patients with Blood Pressure value documented at least twice in prior two years.

A. Patients with normal Blood Pressure (BP), defined as &lt; 120/80, i.e., the mean systolic value is less than (&lt;) 120 AND the mean diastolic value is less than (&lt;) 80.

B. Patients with Pre Hypertension I BP, defined as =&gt; 120/80 and &lt; 130/80, i.e., the mean systolic value is equal to or greater than (=&gt;) 120 and less than (&lt;) 130 AND the mean diastolic value is equal to 80.

C. Patients with Pre Hypertension II BP, defined as =&gt; 130/80 and &lt;140/90, i.e., the mean systolic value is equal to or greater than (=&gt;) 130 and less than (&lt;) 140 AND the mean diastolic value is equal to or greater than (=&gt;) 80 and less than (&lt;) 90.

D. Patients with Stage 1 Hypertension Blood Pressure (BP), defined as =&gt; 140/90 and &lt;160/100, i.e., the mean systolic value is equal to or greater than (=&gt;) 140 and less than (&lt;) 160 AND the mean diastolic value is equal to or greater than (=&gt;) 90 and less than (&lt;) 100.

E. Patients with Stage 2 Hypertension BP, defined as =&gt; 160/100, i.e., the mean systolic value is equal to or greater than (=&gt;) 160 AND the mean diastolic value is equal to or greater than (=&gt;) 100.

Age of the patient is calculated at beginning of the Report period.

Ischemic Heart Disease (IHD) diagnosis defined as: 410.0-412.\*, 414.0-414.9, 428.\* or 429.2 recorded in the V POV file.

CRS uses mean of last 3 Blood Pressures documented on non-ER visits in the past two years. If 3 BPs are not available, uses mean of last 2 non-ER BPs. If a visit contains more than 1 BP, the lowest BP will be used, defined as having the lowest systolic value. The mean Systolic value is calculated by adding the last 3 (or 2) systolic values and dividing by 3 (or 2). The mean Diastolic value is calculated by adding the diastolic values from the last 3 (or 2) blood pressures and dividing by 3 (or 2). If the systolic and diastolic values do not BOTH meet the current category, then the value that is least controlled determines the category.

\*\*\* IHS 2007 Clinical Performance Report \*\*\*  
 DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

Increase the proportion of patients ages 20 and older whose blood pressure has been assessed in past two years and increase the proportion of individuals with known ischemic heart disease and appropriate BP assessment.

High Blood Pressure (140/90) Performance: HP 2010 Goal: 16%

BP Assessed: IHS 2010 Goal: 95%

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
Active Clinical Patients								
ages 20 and older	733		690			639		
# w/ BPs documented	584	79.7	551	79.9	-0.2	478	74.8	+4.9
A. # w/Normal BP w/ % of Total Screened	129	22.1	133	24.1	-2.0	121	25.3	-3.2
B. # w/Pre HTN I BP w/ % of Total Screened	101	17.3	112	20.3	-3.0	83	17.4	-0.1
C. # w/Pre HTN II BP w/ % of Total Screened	146	25.0	117	21.2	+3.8	105	22.0	+3.0
D. # w/Stage 1 HTN BP w/ % of Total Screened	169	28.9	150	27.2	+1.7	130	27.2	+1.7
E. # w/Stage 2 HTN BP w/ % of Total Screened	39	6.7	39	7.1	-0.4	39	8.2	-1.5
Male Active Clinical Patients								
ages 20 and older	270		265			240		
# w/ BPs documented	200	74.1	201	75.8	-1.8	177	73.8	+0.3
A. # w/Normal BP w/ % of Total Screened	9	4.5	22	10.9	-6.4	22	12.4	-7.9
B. # w/Pre HTN I BP w/ % of Total Screened	22	11.0	36	17.9	-6.9	22	12.4	-1.4
C. # w/Pre HTN II BP w/ % of Total Screened	67	33.5	47	23.4	+10.1	45	25.4	+8.1
D. # w/Stage 1 HTN BP w/ % of Total Screened	85	42.5	79	39.3	+3.2	63	35.6	+6.9
E. # w/Stage 2 HTN BP w/ % of Total Screened	17	8.5	17	8.5	+0.0	25	14.1	-5.6

\*\*\* IHS 2007 Clinical Performance Report \*\*\*  
 DEMO INDIAN HOSPITAL  
 Report Period: Jan 01, 2006 to Dec 31, 2006  
 Previous Year Period: Jan 01, 2005 to Dec 31, 2005  
 Baseline Period: Jan 01, 2000 to Dec 31, 2000

Cardiovascular Disease and Blood Pressure Control (con't)

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
Female Active Clinical Patients ages 20 and older	463		425			399		
# w/ BPs documented	384	82.9	350	82.4	+0.6	301	75.4	+7.5
A. # w/Normal BP w/ % of Total Screened	120	31.3	111	31.7	-0.5	99	32.9	-1.6
B. # w/Pre HTN I BP w/ % of Total Screened	79	20.6	76	21.7	-1.1	61	20.3	+0.3
C. # w/Pre HTN II BP w/ % of Total Screened	79	20.6	70	20.0	+0.6	60	19.9	+0.6
D. # w/Stage 1 HTN BP w/ % of Total Screened	84	21.9	71	20.3	+1.6	67	22.3	-0.4
E. # w/Stage 2 HTN BP w/ % of Total Screened	22	5.7	22	6.3	-0.6	14	4.7	+1.1
User Pop Patients ages 20 and older	1,447		1,374			1,338		
# w/ BPs documented	635	43.9	596	43.4	+0.5	513	38.3	+5.5
A. # w/Normal BP w/ % of Total Screened	141	22.2	148	24.8	-2.6	136	26.5	-4.3
B. # w/Pre HTN I BP w/ % of Total Screened	112	17.6	117	19.6	-2.0	89	17.3	+0.3
C. # w/Pre HTN II BP w/ % of Total Screened	161	25.4	131	22.0	+3.4	109	21.2	+4.1
D. # w/Stage 1 HTN BP w/ % of Total Screened	179	28.2	159	26.7	+1.5	138	26.9	+1.3
E. # w/Stage 2 HTN BP w/ % of Total Screened	42	6.6	41	6.9	-0.3	41	8.0	-1.4

## \*\*\* IHS 2007 Clinical Performance Report \*\*\*

## DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

## Cardiovascular Disease and Blood Pressure Control (con't)

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
Male User Pop Patients ages 20 and older	621		591			576		
# w/ BPs documented	215	34.6	213	36.0	-1.4	180	31.3	+3.4
A. # w/Normal BP w/ % of Total Screened	10	4.7	24	11.3	-6.6	23	12.8	-8.1
B. # w/Pre HTN I BP w/ % of Total Screened	25	11.6	36	16.9	-5.3	22	12.2	-0.6
C. # w/Pre HTN II BP w/ % of Total Screened	69	32.1	51	23.9	+8.1	45	25.0	+7.1
D. # w/Stage 1 HTN BP w/ % of Total Screened	93	43.3	84	39.4	+3.8	65	36.1	+7.1
E. # w/Stage 2 HTN BP w/ % of Total Screened	18	8.4	18	8.5	-0.1	25	13.9	-5.5
Female User Pop Patients ages 20 and older	826		783			762		
# w/ BPs documented	420	50.8	383	48.9	+1.9	333	43.7	+7.1
A. # w/Normal BP w/ % of Total Screened	131	31.2	124	32.4	-1.2	113	33.9	-2.7
B. # w/Pre HTN I BP w/ % of Total Screened	87	20.7	81	21.1	-0.4	67	20.1	+0.6
C. # w/Pre HTN II BP w/ % of Total Screened	92	21.9	80	20.9	+1.0	64	19.2	+2.7
D. # w/Stage 1 HTN BP w/ % of Total Screened	86	20.5	75	19.6	+0.9	73	21.9	-1.4
E. # w/Stage 2 HTN BP w/ % of Total Screened	24	5.7	23	6.0	-0.3	16	4.8	+0.9

\*\*\* IHS 2007 Clinical Performance Report \*\*\*  
 DEMO INDIAN HOSPITAL  
 Report Period: Jan 01, 2006 to Dec 31, 2006  
 Previous Year Period: Jan 01, 2005 to Dec 31, 2005  
 Baseline Period: Jan 01, 2000 to Dec 31, 2000

Cardiovascular Disease and Blood Pressure Control (con't)

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
Active IHD Pts	53		44			36		
# w/ BPs documented	50	94.3	44	100.0	-5.7	36	100.0	-5.7
A. # w/Normal BP w/ % of Total Screened	8	16.0	5	11.4	+4.6	5	13.9	+2.1
B. # w/Pre HTN I BP w/ % of Total Screened	3	6.0	12	27.3	-21.3	7	19.4	-13.4
C. # w/Pre HTN II BP w/ % of Total Screened	23	46.0	10	22.7	+23.3	11	30.6	+15.4
D. # w/Stage 1 HTN BP w/ % of Total Screened	14	28.0	13	29.5	-1.5	6	16.7	+11.3
E. # w/Stage 2 HTN BP w/ % of Total Screened	2	4.0	4	9.1	-5.1	7	19.4	-15.4
Male Active IHD Pts	34		26			22		
# w/ BPs documented	31	91.2	26	100.0	-8.8	22	100.0	-8.8
A. # w/Normal BP w/ % of Total Screened	4	12.9	2	7.7	+5.2	3	13.6	-0.7
B. # w/Pre HTN I BP w/ % of Total Screened	2	6.5	7	26.9	-20.5	3	13.6	-7.2
C. # w/Pre HTN II BP w/ % of Total Screened	13	41.9	9	34.6	+7.3	10	45.5	-3.5
D. # w/Stage 1 HTN BP w/ % of Total Screened	10	32.3	8	30.8	+1.5	3	13.6	+18.6
E. # w/Stage 2 HTN BP w/ % of Total Screened	2	6.5	0	0.0	+6.5	3	13.6	-7.2

\*\*\* IHS 2007 Clinical Performance Report \*\*\*  
 DEMO INDIAN HOSPITAL  
 Report Period: Jan 01, 2006 to Dec 31, 2006  
 Previous Year Period: Jan 01, 2005 to Dec 31, 2005  
 Baseline Period: Jan 01, 2000 to Dec 31, 2000

Cardiovascular Disease and Blood Pressure Control (con't)

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
Female Active IHD Pts	19		18			14		
# w/ BPs documented	19	100.0	18	100.0	+0.0	14	100.0	+0.0
A. # w/Normal BP w/ % of Total Screened	4	21.1	3	16.7	+4.4	2	14.3	+6.8
B. # w/Pre HTN I BP w/ % of Total Screened	1	5.3	5	27.8	-22.5	4	28.6	-23.3
C. # w/Pre HTN II BP w/ % of Total Screened	10	52.6	1	5.6	+47.1	1	7.1	+45.5
D. # w/Stage 1 HTN BP w/ % of Total Screened	4	21.1	5	27.8	-6.7	3	21.4	-0.4
E. # w/Stage 2 HTN BP w/ % of Total Screened	0	0.0	4	22.2	-22.2	4	28.6	-28.6

\*\*\* IHS 2007 Clinical Performance Report \*\*\*

DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

---

Controlling High Blood Pressure

Denominator(s):

Active Clinical patients ages 46 through 85 diagnosed with hypertension and no documented history of ESRD, broken down by gender.

Numerator(s):

Number of patients with Blood Pressure value documented during the Report period.

A. Patients with normal Blood Pressure (BP), defined as < 120/80, i.e., the mean systolic value is less than (<) 120 AND the mean diastolic value is less than (<) 80.

B. Patients with Pre Hypertension I BP, defined as => 120/80 and < 130/80, i.e., the mean systolic value is equal to or greater than (=>) 120 and less than (<) 130 AND the mean diastolic value is equal to 80.

C. Patients with Pre Hypertension II BP, defined as => 130/80 and <140/90, i.e., the mean systolic value is equal to or greater than (=>) 130 and less than (<) 140 AND the mean diastolic value is equal to or greater than (=>) 80 and less than (<) 90.

D. Patients with Stage 1 Hypertension Blood Pressure (BP), defined as => 140/90 and <160/100, i.e., the mean systolic value is equal to or greater than (=>) 140 and less than (<) 160 AND the mean diastolic value is equal to or greater than (=>) 90 and less than (<) 100.

E. Patients with Stage 2 Hypertension BP, defined as => 160/100, i.e., the mean systolic value is equal to or greater than (=>) 160 AND the mean diastolic value is equal to or greater than (=>) 100.

Age of the patient is calculated at beginning of the Report period. End Stage Renal Disease diagnosis/treatment defined as: ANY diagnosis ever of 585.5, 585.6 or V45.1 or ANY CPT in the range of 90918-90925. For Denominator, hypertension is defined as diagnosis (POV or problem list) 401.\* prior to the Report period, and at least one hypertension POV during the Report period.

CRS uses mean of last 3 Blood Pressures documented on non-ER visits during the Report Period. If 3 BPs are not available, uses mean of last 2 non-ER BPs. If a visit contains more than 1 BP, the lowest BP will be used, defined as having the lowest systolic value. The mean Systolic value is calculated by adding the last 3 (or 2) systolic values and dividing by 3 (or 2). The mean Diastolic value is calculated by adding the diastolic values from the last 3 (or 2) blood pressures and dividing by 3 (or 2). If the systolic and diastolic values do not BOTH meet the current category, then the value that is least controlled determines the category.

Increase the percentage of enrolled members 46-85 years of age who had a diagnosis of hypertension (HTN) and whose blood pressure (BP) was

\*\*\* IHS 2007 Clinical Performance Report \*\*\*  
 DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

adequately controlled (less than 140/90) during the measurement year.

HP 2010 Goal to Reduce Rate of Adults w/High BP: 14%, HP 2010 Goal for  
 Adults w/High BP w/Controlled BP: 68%

BP Assessed: IHS 2010 Goal: 95%

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
Active Clinical Pts								
46-85 w/HTN dx	91		83			78		
# w/ BPs documented	89	97.8	83	100.0	-2.2	77	98.7	-0.9
A. # w/Normal BP w/ % of Total Screened	6	6.7	4	4.8	+1.9	3	3.9	+2.8
B. # w/Pre HTN I BP w/ % of Total Screened	8	9.0	15	18.1	-9.1	7	9.1	-0.1
C. # w/Pre HTN II BP w/ % of Total Screened	29	32.6	18	21.7	+10.9	18	23.4	+9.2
D. # w/Stage 1 HTN BP w/ % of Total Screened	36	40.4	36	43.4	-2.9	35	45.5	-5.0
E. # w/Stage 2 HTN BP w/ % of Total Screened	10	11.2	10	12.0	-0.8	14	18.2	-6.9
Male Active Clinical Pts								
46-85 w/HTN	45		43			39		
# w/ BPs documented	43	95.6	43	100.0	-4.4	38	97.4	-1.9
A. # w/Normal BP w/ % of Total Screened	1	2.3	3	7.0	-4.7	2	5.3	-2.9
B. # w/Pre HTN I BP w/ % of Total Screened	1	2.3	7	16.3	-14.0	3	7.9	-5.6
C. # w/Pre HTN II BP w/ % of Total Screened	14	32.6	11	25.6	+7.0	12	31.6	+1.0
D. # w/Stage 1 HTN BP w/ % of Total Screened	21	48.8	17	39.5	+9.3	15	39.5	+9.4
E. # w/Stage 2 HTN BP w/ % of Total Screened	6	14.0	5	11.6	+2.3	6	15.8	-1.8

\*\*\* IHS 2007 Clinical Performance Report \*\*\*  
 DEMO INDIAN HOSPITAL  
 Report Period: Jan 01, 2006 to Dec 31, 2006  
 Previous Year Period: Jan 01, 2005 to Dec 31, 2005  
 Baseline Period: Jan 01, 2000 to Dec 31, 2000

Controlling High Blood Pressure (con't)

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
Female Active Clinical Pts								
46-85 w/HTN	46		40			39		
# w/ BPs documented	46	100.0	40	100.0	+0.0	39	100.0	+0.0
A. # w/Normal BP w/ % of Total Screened	5	10.9	1	2.5	+8.4	1	2.6	+8.3
B. # w/Pre HTN I BP w/ % of Total Screened	7	15.2	8	20.0	-4.8	4	10.3	+5.0
C. # w/Pre HTN II BP w/ % of Total Screened	15	32.6	7	17.5	+15.1	6	15.4	+17.2
D. # w/Stage 1 HTN BP w/ % of Total Screened	15	32.6	19	47.5	-14.9	20	51.3	-18.7
E. # w/Stage 2 HTN BP w/ % of Total Screened	4	8.7	5	12.5	-3.8	8	20.5	-11.8

## \*\*\* IHS 2007 Clinical Performance Report \*\*\*

DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

-----  
Comprehensive CVD-Related Assessment

## Denominator(s):

GPRA Denominator: Active IHD patients ages 22 and older, defined as all Active Clinical patients diagnosed with ischemic heart disease (IHD) prior to the Report Period, AND at least 2 visits during the Report Period, AND 2 IHD-related visits ever.

A: Active IHD patients ages 22 and older who are not Active Diabetic.

B: Active IHD patients ages 22 and older who are Active Diabetic.

## Numerator(s):

BP Assessed: Patients with Blood Pressure value documented at least twice in prior two years.

LDL Assessed: Patients with LDL completed in past five years, regardless of result.

Tobacco Use Assessed: Patients who have been screened for tobacco use during the Current Report period.

BMI Available: Patients for whom a BMI could be calculated, including refusals in the past year.

Lifestyle Counseling: Patients who have received any lifestyle adaptation counseling, including medical nutrition counseling, or nutrition, exercise or other lifestyle education during the Current Report period.

GPRA Numerator: Patients with comprehensive CVD assessment, defined as having BP, LDL, and tobacco use assessed, BMI calculated, and lifestyle counseling.

Depression Screening: Patients screened for depression or diagnosed with a mood disorder at any time during the Report period, including documented refusals in past year.

Age of the patient is calculated at beginning of the Report period.

Diabetes defined as: Diagnosed with diabetes (first POV in V POV with 250.00-250.93) prior to the Current Report period, AND at least 2 visits during the Current Report period, AND 2 DM-related visits ever. Patients not meeting these criteria are considered non-diabetics.

Ischemic Heart Disease (IHD) diagnosis defined as: 410.0-412.\*, 414.0-414.9, 428.\* or 429.2 recorded in the V POV file.

For BP: Having a minimum of 2 Blood Pressures documented on non-ER visits during the Report period.

For LDL, finds the most recent test done in the last 5 years, regardless of the results of the measurement. LDL Definition: CPT 83721; LOINC taxonomy; site-populated taxonomy DM AUDIT LDL CHOLESTEROL TAX.

Tobacco screening is defined as at least one of the following: 1. Any health factor for category Tobacco documented during Current Report

## \*\*\* IHS 2007 Clinical Performance Report \*\*\*

DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

-----

period; 2. Tobacco-related diagnoses (POV or current Active Problem List) 305.1, 305.1\* (old codes), 649.00-649.04, or V15.82; 3. Dental code 1320; 4. Any patient education code containing "TO-", "-TO" or "-SHS.

For BMI, CRS calculates BMI at the time the report is run, using NHANES II. For 19 through 50, height and weight must be recorded within last 5 years, not required to be on the same day. For over 50, height and weight within last 2 years, not required to be recorded on same day. Refusals include REF (refused), NMI (not medically indicated) and UAS (unable to screen) and must be documented during the past year. For ages 19 and older, the height and the weight must be refused during the past year and are not required to be on the same visit.

Medical nutrition counseling defined as: CPT 97802-97804, G0270, G0271; Provider codes 07, 29, 97, 99; Clinic codes 67 (dietary) or 36 (WIC). Nutrition education defined as: POV V65.3 dietary surveillance and counseling; patient education codes ending "-N" (Nutrition) or "-MNT" (or old code "-DT" (Diet)). Exercise education defined as: POV V65.41 exercise counseling; patient education codes ending "-EX" (Exercise). Related exercise and nutrition counseling defined as: patient education codes ending "-LA" (lifestyle adaptation) or containing "OBS-" (obesity).

Depression Screening/Mood Disorder DX: Any of the following during the Report Period: A) Depression Screening: Exam Code 36, POV V79.0, or BHS problem code 14.1 (screening for depression) or refusal, defined as any PCC refusal in past year with Exam Code 36; or B) Mood Disorder DX: At least two visits in PCC or BHS during the Report period with POV for: Major Depressive Disorder, Dysthymic Disorder, Depressive Disorder NOS, Bipolar I or II Disorder, Cyclothymic Disorder, Bipolar Disorder NOS, Mood Disorder Due to a General Medical Condition, Substance-induced Mood Disorder, or Mood Disorder NOS. These POV codes are: 296.\*, 291.89, 292.84, 293.83, 300.4, 301.13, or 311 or BHS POV 14 or 15.

During FY 2007, establish the baseline rate of at-risk patients who have a comprehensive assessment.

## IHS 2010 Goals:

BP Assessed: 95%

LDL Assessed: 85%

Tobacco Assessed: 50%

BMI Measured: 45%

Lifestyle Counseling: 75%

Depression Screen: 20%

All Assessments: 15%

\*\*\* IHS 2007 Clinical Performance Report \*\*\*

DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

Comprehensive CVD-Related Assessment (con't)

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
Active IHD Pts 22+ (GPRA)	53		44			36		
# w/ BPs documented w/in 2 yrs	50	94.3	44	100.0	-5.7	36	100.0	-5.7
# w/LDL done w/in 5 yrs	44	83.0	38	86.4	-3.3	30	83.3	-0.3
# w/Tobacco Screening w/in 1 yr	38	71.7	37	84.1	-12.4	27	75.0	-3.3
# w/BMI calculated or refusal	51	96.2	43	97.7	-1.5	35	97.2	-1.0
# w/ lifestyle educ w/in 1 yr	24	45.3	22	50.0	-4.7	22	61.1	-15.8
# w/ BP, LDL, tobacco, BMI and life counseling (GPRA)	20	37.7	19	43.2	-5.4	14	38.9	-1.2
# w/ Depression screening, DX, or refusal	4	7.5	4	9.1	-1.5	2	5.6	+2.0
A. Active IHD Pts 22+ and are NOT Active Diabetic	24		19			17		
# w/ BPs documented w/in 2 yrs	23	95.8	19	100.0	-4.2	17	100.0	-4.2
# w/LDL done w/in 5 yrs	19	79.2	17	89.5	-10.3	13	76.5	+2.7
# w/Tobacco Screening w/in 1 yr	16	66.7	15	78.9	-12.3	13	76.5	-9.8
# w/BMI calculated or refusal	24	100.0	19	100.0	+0.0	16	94.1	+5.9
# w/ lifestyle educ w/in 1 yr	11	45.8	7	36.8	+9.0	7	41.2	+4.7
# w/ BP, LDL, tobacco, BMI and life counseling	8	33.3	6	31.6	+1.8	4	23.5	+9.8
# w/ Depression screening, DX, or refusal	2	8.3	1	5.3	+3.1	1	5.9	+2.5

\*\*\* IHS 2007 Clinical Performance Report \*\*\*  
 DEMO INDIAN HOSPITAL  
 Report Period: Jan 01, 2006 to Dec 31, 2006  
 Previous Year Period: Jan 01, 2005 to Dec 31, 2005  
 Baseline Period: Jan 01, 2000 to Dec 31, 2000

---

Comprehensive CVD-Related Assessment (con't)

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
B. Active IHD Pts 22+ who ARE Active Diabetic	29		25			19		
# w/ BPs documented w/in 2 yrs	27	93.1	25	100.0	-6.9	19	100.0	-6.9
# w/LDL done w/in 5 yrs	25	86.2	21	84.0	+2.2	17	89.5	-3.3
# w/Tobacco Screening w/in 1 yr	22	75.9	22	88.0	-12.1	14	73.7	+2.2
# w/BMI calculated or refusal	27	93.1	24	96.0	-2.9	19	100.0	-6.9
# w/ lifestyle educ w/in 1 yr	13	44.8	15	60.0	-15.2	15	78.9	-34.1
# w/ BP, LDL, tobacco, BMI, and life counseling	12	41.4	13	52.0	-10.6	10	52.6	-11.3
# w/ Depression screening, DX or refusal	2	6.9	3	12.0	-5.1	1	5.3	+1.6

\*\*\* IHS 2007 Clinical Performance Report \*\*\*

DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

---

Appropriate Medication Therapy after a Heart Attack

Denominator(s):

Active Clinical patients 35 and older discharged for an AMI during the first 51 weeks of the Report period and were not readmitted for any diagnosis within seven days of discharge. Broken down by gender.

Numerator(s):

Patients with active prescription for, refusal of, or who have a contraindication/previous adverse reaction to beta-blockers.

A: Patients with active prescription for beta-blockers.

B: Patients with documented refusal of beta-blockers.

C: Patients with contraindication/previous adverse reaction to beta-blocker therapy.

Patients with active prescription for, refusal of, or who have a contraindication/ previous adverse reaction to ASA (aspirin) or other anti-platelet agent.

A: Patients with active prescription for ASA/anti-platelet.

B: Patients with documented refusal of ASA/anti-platelet.

C: Patients with contraindication/previous adverse reaction to ASA/anti-platelet therapy.

Patients with active prescription for, refusal of, or who have a contraindication/ previous adverse reaction to ACEIs/ARBs.

A: Patients with active prescription for ACEI/ARB.

B: Patients with documented refusal of ACEI/ARB.

C: Patients with contraindication/previous adverse reaction to ACEI/ARB therapy.

Patients with active prescription for, refusal of, or who have a contraindication/ previous adverse reaction to statins.

A: Patients with active prescription for statins.

B: Patients with documented refusal of statins.

C: Patients with contraindication/previous adverse reaction to statin therapy.

Patients with active prescriptions for all post-AMI medications (i.e. beta-blocker, ASA/anti-platelet, ACEI/ARB, AND statin), with refusal, and/or who have a contraindication/previous adverse reaction.

Age is calculated at the beginning of the Report period. Acute Myocardial Infarction (AMI) defined as POV 410.\*1 (i.e. first eligible episode of an AMI) with Service Category H. If patient has more than one episode of AMI during the first 51 weeks of the Report period, CRS will include only the first discharge.

Denominator Exclusions: Patients meeting any of the following conditions will be excluded from the denominator.

1. Patients with Discharge Type of Irregular (AMA), Transferred, or

## \*\*\* IHS 2007 Clinical Performance Report \*\*\*

DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

contains "Death."

2. Patients readmitted for any diagnosis within seven days of discharge.

3. Patients with a Diagnosis Modifier of C (Consider), D (Doubtful), M (Maybe, Possible, Perhaps), O (Rule Out), P (Probable), R (Resolved), S (Suspect, Suspicious), or T (Status Post).

4. Patients with a Provider Narrative beginning with "Consider"; "Doubtful"; "Maybe"; "Possible"; "Perhaps"; "Rule Out"; "R/O"; "Probable"; "Resolved"; "Suspect"; "Suspicious"; or "Status Post."

To be included in the numerators, a patient must meet one of the 3 conditions below:

1. An active prescription (not discontinued as of [discharge date + 7 days]) that was prescribed prior to admission, during the inpatient stay, or within seven days after discharge. "Active" prescription defined as: Days Prescribed > ((Discharge Date + 7 days) - Order Date); OR
2. A refusal of the medication at least once during hospital stay through 7 days after discharge date; OR
3. Have a contraindication/previous adverse reaction to the indicated medication.

Refusals and contraindications/previous adverse drug reactions (ADR)/allergies are only counted if a patient did not have a prescription for the indicated medication. Patients without a prescription who have a refusal and/or contraindication/ADR/allergy will be counted in sub-numerators B-C. Because a patient may have both a refusal and a contraindication/ADR/allergy, the sub-numerator totals of A-C may not add up the to the numerator total.

NOTE: If the medication was started and then discontinued, CRS will recalculate the # Days Prescribed by subtracting the prescription date (i.e. visit date) from the V Medication Discontinued Date. Example: Rx Date=11/15/2003, Discontinued Date=11/19/2003, Recalculated # Days Prescribed=4.

Numerator Logic: In the logic below, "ever" is defined as anytime through the end of the Report Period.

Beta-Blocker Numerator Logic:

Beta-blocker medication codes defined with medication taxonomy BGP HEDIS BETA BLOCKER MEDS. (Medications are: Acebutolol HCL, Atenolol, Betaxolol HCL, Bisoprolol fumarate, Carteolol HCL, Carvedilol, Labetalol HCL, Metoprolol succinate, Metoprolol tartrate, Nadolol, Penbutolol sulfate, Pindolol, Propranolol HCL, Sotalol HCL, Timolol maleate.)

Refusal of beta-blocker: REF refusal of any beta-blocker medication in

## \*\*\* IHS 2007 Clinical Performance Report \*\*\*

## DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

-----

site-populated medication taxonomy BGP HEDIS BETA BLOCKER MEDS at least once during hospital stay through 7 days after discharge date.

Contraindications to beta-blockers defined as any of the following occurring ever unless otherwise noted: A) Asthma - 2 diagnoses (POV) of 493\* on different visit dates; B) Hypotension - 1 diagnosis of 458\*; C) Heart block >1 degree - 1 diagnosis of 426.0, 426.12, 426.13, 426.2, 426.3, 426.4, 426.51, 426.52, 426.53, 426.54, or 426.7; D) Sinus bradycardia - 1 diagnosis of 427.81; E) COPD - 2 diagnoses on different visit dates of 491.2\*, 496, or 506.4, or a combination of any of these codes, such as 1 visit with 491.20 and 1 with 496; F) NMI (not medically indicated) refusal for any beta-blocker at least once during hospital stay through 7 days after discharge date; or G) CPT G8011 (Clinician documented that AMI patient was not an eligible candidate for beta-blocker at arrival) at least once during hospital stay through 7 days after discharge date.

Adverse drug reaction/documentated beta blocker allergy defined as any of the following occurring ever: A) POV 995.0-995.3 AND E942.0; B) beta block\* entry in ART (Patient Allergies File); or C) beta block\*, bblock\* or b block\* contained within Problem List or in Provider Narrative field for any POV 995.0-995.3 or V14.8.

ASA (aspirin)/Other Anti-Platelet Numerator Logic:

ASA medication codes defined with medication taxonomy DM AUDIT ASPIRIN DRUGS.

Other anti-platelet medication codes defined with medication taxonomy site-populated BGP ANTI-PLATELET DRUGS taxonomy.

Refusal of ASA/other anti-platelet: REF refusal of any ASA or anti-platelet medication in site-populated medication taxonomies DM AUDIT ASPIRIN DRUGS or BGP ANTI-PLATELET DRUGS at least once during hospital stay through 7 days after discharge date.

Contraindications to ASA/other anti-platelet defined as any of the following occurring ever unless otherwise noted: A) Patients with active prescription for Warfarin/Coumadin at time of arrival or prescribed at discharge, using site-populated BGP CMS WARFARIN MEDS taxonomy; B) Hemorrhage diagnosis (POV 459.0); C) NMI (not medically indicated) refusal for any aspirin at least once during hospital stay through 7 days after discharge date; or D) CPT G8008 (Clinician documented that AMI patient was not an eligible candidate to receive aspirin at arrival) at least once during hospital stay through 7 days after discharge date.

Adverse drug reaction/documentated ASA/other anti-platelet allergy defined

\*\*\* IHS 2007 Clinical Performance Report \*\*\*

DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

-----  
as any of the following occurring ever: A) POV 995.0-995.3 AND E935.3;  
B) "aspirin" entry in ART (Patient Allergies File); or C) "ASA" or  
"aspirin" contained within Problem List or in Provider Narrative field  
for any POV 995.0-995.3 or V14.8.

ACEI/ARB Numerator Logic:

Ace Inhibitor (ACEI) medication codes defined with medication taxonomy  
BGP HEDIS ACEI MEDS. ACEI medications: Benazepril (Lotensin), Captopril  
(Capoten), Enalapril (Vasotec), Fosinopril (Monopril), Lisinopril  
(Prinivil Zestril), Moexipril (Univasc), Perindopril (Aceon), Quinapril  
(Accupril), Ramipril (Altace), Trandolopril (Mavik).

ACEI-Combination Products: Benazepril + HCTZ (Lotensin HCT), Captopril +  
HCTZ (Capozide, Hydrochlorothiazide + Capropril), Enalapril + HCTZ  
(Vaseretic), Fosinopril + HCTZ (Monopril HCT), Lisinopril + HCTZ  
(Prinzide, Zestoreti, Hydrochlorothiazide + Lisinopril), Moexipril + HCTZ  
(Uniretic), Quinapril + HCTZ (Accuretic).

Refusal of ACEI: REF refusal of any ACE Inhibitor medication in  
site-populated medication taxonomy BGP HEDIS ACEI MEDS at least once  
during hospital stay through 7 days after discharge date.

Contraindications to ACEI defined as any of the following: 1) Diagnosis  
ever for moderate or severe aortic stenosis (POV 395.0, 395.2, 396.0,  
396.2, 396.8, 424.1, 425.1, or 747.22) or 2) NMI (not medically  
indicated) refusal for any ACEI at least once during hospital stay  
through 7 days after discharge date.

Adverse drug reaction/documentated ACEI allergy defined as any of the  
following occurring ever: 1) POV 995.0-995.3 AND E942.6; 2) "ace  
inhibitor" or "ACEI" entry in ART (Patient Allergies File); or 3) "ace  
i\*" or "ACEI" contained within Problem List or in Provider Narrative  
field for any POV 995.0-995.3 or V14.8.

ARB (Angiotensin Receptor Blocker) medication codes defined with  
medication taxonomy BGP HEDIS ARB MEDS. ARB medications: Candesartan  
(Atacand), Eprosartan (Teveten), Irbesartan (Avapro), Losartan (Cozaar),  
Olmesartan (Benicar), Telmisartan (Micardis), Valsartan (Diovan)

ARB Combination Products: Candesartan (Atacand HCT), Irbesartan  
(Avalide), Losartan (Hyzaar), Telmisartan (Micardis HCT), Valsartan  
(Diovan HCT).

Refusal of ARB: REF refusal of any ARB medication in site-populated  
medication taxonomy BGP HEDIS ARB MEDS at least once during hospital stay  
through 7 days after discharge date.

## \*\*\* IHS 2007 Clinical Performance Report \*\*\*

DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

Contraindications to ARB defined as any of the following: 1) Diagnosis ever for moderate or severe aortic stenosis (POV 395.0, 395.2, 396.0, 396.2, 396.8, 424.1, 425.1, 747.22) or 2) NMI (not medically indicated) refusal for any ARB at least once during hospital stay through 7 days after discharge date.

Adverse drug reaction/documentated ARB allergy defined as any of the following occurring ever: 1) POV 995.0-995.3 AND E942.6; 2) "Angiotensin Receptor Blocker" or "ARB" entry in ART (Patient Allergies File); or 3) "Angiotensin Receptor Blocker" or "ARB" contained within Problem List or in Provider Narrative field for any POV 995.0-995.3 or V14.8.

## Statins Numerator Logic:

Statin medication codes defined with medication taxonomy BGP HEDIS STATIN MEDS. Statin medications: Atorvastatin (Lipitor), Fluvastatin (Lescol), Lovastatin (Altacor), Mevacor, Pravastatin (Pravachol), Simvastatin (Zocor), Rosuvastatin (Crestor).

Statin Combination Products: Caduet, PraviGard Pac, Vytorin.

Refusal of Statin: REF refusal of any statin medication in site-populated medication taxonomy BGP HEDIS STATIN MEDS at least once during hospital stay through 7 days after discharge date.

Contraindications to Statins defined as any of the following: 1) Pregnancy, defined as at least two visits during the Report Period with POV or Problem diagnosis (V22.0-V23.9, 640.\*-648.\*, 651.\*-676.\*) and with no documented miscarriage or abortion occurring after the second pregnancy POV. Miscarriage definition: (1) POV: 630, 631, 632, 633\*, 634\*, (2) CPT 59812, 59820, 59821, 59830. Abortion definition: (1) POV: 635\*, 636\* 637\*, (2) CPT: 59100, 59120, 59130, 59136, 59150, 59151, 59840, 59841, 59850, 59851, 59852, 59855, 59856, 59857; 2) Breastfeeding, defined as POV V24.1 or breastfeeding patient education codes BF-BC, BF-BP, BF-CS, BF-EQ, BF-FU, BF-HC, BF-ON, BF-M, BF-MK, BF-N during the Report Period; 3) Acute Alcoholic Hepatitis, defined as POV 571.1 during the Report Period, or 4) NMI (not medically indicated) refusal for any statin at least once during hospital stay through 7 days after discharge date.

Adverse drug reaction/documentated statin allergy defined as any of the following: 1) ALT and/or AST > 3x the Upper Limit of Normal (ULN) (i.e. Reference High) on 2 or more consecutive visits during the Report Period; 2) Creatine Kinase (CK) levels > 10x ULN or CK > 10,000 IU/L during the Report Period; 3) Myopathy/Myalgia, defined as any of the following during the Report Period: POV 359.0-359.9, 729.1, 710.5, or 074.1; 4)

\*\*\* IHS 2007 Clinical Performance Report \*\*\*  
 DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006  
 Previous Year Period: Jan 01, 2005 to Dec 31, 2005  
 Baseline Period: Jan 01, 2000 to Dec 31, 2000

any of the following occurring anytime ever: A) POV 995.0-995.3 AND E942.9; B) "Statin" or "Statins entry in ART (Patient Allergies File); or C) "Statin" or "Statins" contained within Problem List or in Provider Narrative field for any POV 995.0-995.3 or V14.8.

All Medications Numerator Logic:

To be included in this numerator, a patient must have a prescription, refusal, or a contraindication for ALL of the four medication classes (i.e. beta-blocker, ASA/other anti-platelet, ACEI/ARB, AND statin).

Test Definitions:

ALT: Site-populated taxonomy DM AUDIT ALT TAX or LOINC taxonomy.

AST: Site-populated taxonomy DM AUDIT AST TAX or LOINC taxonomy.

Creatine Kinase: Site-populated taxonomy BGP CREATINE KINASE TAX or LOINC taxonomy.

Establish the rate of patients receiving appropriate medication therapy after an AMI.

2010 Goal: TBD

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
Active Clinical Pts 35+ hospitalized for AMI	12		0			0		
# w/beta-blocker Rx/refusal/Contra/ADR	7	58.3	0	0.0	+58.3	0	0.0	+58.3
A. # w/beta-blocker Rx w/ % of Total	3	42.9	0	0.0	+42.9	0	0.0	+42.9
B. # w/refusal w/ % of Total	2	28.6	0	0.0	+28.6	0	0.0	+28.6
C. # w/contra/ADR w/ % of Total	2	28.6	0	0.0	+28.6	0	0.0	+28.6

\*\*\* IHS 2007 Clinical Performance Report \*\*\*  
 DEMO INDIAN HOSPITAL  
 Report Period: Jan 01, 2006 to Dec 31, 2006  
 Previous Year Period: Jan 01, 2005 to Dec 31, 2005  
 Baseline Period: Jan 01, 2000 to Dec 31, 2000

Appropriate Medication Therapy after a Heart Attack (con't)

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
# w/ASA Rx/refusal/Contra/ADR	8	66.7	0	0.0	+66.7	0	0.0	+66.7
A. # w/ASA Rx w/% of Total	3	37.5	0	0.0	+37.5	0	0.0	+37.5
B. # w/refusal w/% of Total	3	37.5	0	0.0	+37.5	0	0.0	+37.5
C. # w/contra/ADR w/ % of Total	2	25.0	0	0.0	+25.0	0	0.0	+25.0
# w/ACEI/ARB Rx/refusal/Contra/ADR	7	58.3	0	0.0	+58.3	0	0.0	+58.3
A. # w/ACEI/ARB Rx w/% of Total	2	28.6	0	0.0	+28.6	0	0.0	+28.6
B. # w/refusal w/% of Total	2	28.6	0	0.0	+28.6	0	0.0	+28.6
C. # w/contra/ADR w/ % of Total	3	42.9	0	0.0	+42.9	0	0.0	+42.9
# w/statin Rx/refusal/Contra/ADR	12	100.0	0	0.0	+100.0	0	0.0	+100.0
A. # w/statin Rx w/% of Total	4	33.3	0	0.0	+33.3	0	0.0	+33.3
B. # w/refusal w/% of Total	2	16.7	0	0.0	+16.7	0	0.0	+16.7
C. # w/contra/ADR w/ % of Total	6	50.0	0	0.0	+50.0	0	0.0	+50.0
# w/Rx/refusal/contra/ADR of ALL meds	6	50.0	0	0.0	+50.0	0	0.0	+50.0

## \*\*\* IHS 2007 Clinical Performance Report \*\*\*

DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

-----  
Appropriate Medication Therapy after a Heart Attack (con't)

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
Male AC Pts 35+ hospitalized for AMI	7		0			0		
# w/beta-blocker Rx/refusal/Contra/ADR	5	71.4	0	0.0	+71.4	0	0.0	+71.4
A. # w/beta-blocker Rx w/% of Total	1	20.0	0	0.0	+20.0	0	0.0	+20.0
B. # w/refusal w/% of Total	2	40.0	0	0.0	+40.0	0	0.0	+40.0
C. # w/contra/ADR w/% of Total	2	40.0	0	0.0	+40.0	0	0.0	+40.0
# w/ASA Rx/refusal/Contra/ADR	6	85.7	0	0.0	+85.7	0	0.0	+85.7
A. # w/ASA Rx w/% of Total	1	16.7	0	0.0	+16.7	0	0.0	+16.7
B. # w/refusal w/% of Total	3	50.0	0	0.0	+50.0	0	0.0	+50.0
C. # w/contra/ADR w/% of Total	2	33.3	0	0.0	+33.3	0	0.0	+33.3
# w/ACEI/ARB Rx/refusal/Contra/ADR	6	85.7	0	0.0	+85.7	0	0.0	+85.7
A. # w/ACEI/ARB Rx w/% of Total	1	16.7	0	0.0	+16.7	0	0.0	+16.7
B. # w/refusal w/% of Total	2	33.3	0	0.0	+33.3	0	0.0	+33.3
C. # w/contra/ADR w/% of Total	3	50.0	0	0.0	+50.0	0	0.0	+50.0
# w/statin Rx/refusal/Contra/ADR	7	100.0	0	0.0	+100.0	0	0.0	+100.0
A. # w/statin Rx w/% of Total	3	42.9	0	0.0	+42.9	0	0.0	+42.9
B. # w/refusal w/% of Total	2	28.6	0	0.0	+28.6	0	0.0	+28.6
C. # w/contra/ADR w/% of Total	2	28.6	0	0.0	+28.6	0	0.0	+28.6

\*\*\* IHS 2007 Clinical Performance Report \*\*\*  
 DEMO INDIAN HOSPITAL  
 Report Period: Jan 01, 2006 to Dec 31, 2006  
 Previous Year Period: Jan 01, 2005 to Dec 31, 2005  
 Baseline Period: Jan 01, 2000 to Dec 31, 2000

---

Appropriate Medication Therapy after a Heart Attack (con't)

	REPORT	%	PREV YR	%	CHG from	BASE	%	CHG from
	PERIOD		PERIOD		PREV YR	% PERIOD		BASE %
# w/Rx/refusal/contra/ ADR of ALL meds	5	71.4	0	0.0	+71.4	0	0.0	+71.4

\*\*\* IHS 2007 Clinical Performance Report \*\*\*  
 DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006  
 Previous Year Period: Jan 01, 2005 to Dec 31, 2005  
 Baseline Period: Jan 01, 2000 to Dec 31, 2000

Appropriate Medication Therapy after a Heart Attack (con't)

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
Female AC Pts 35+ hospitalized for AMI	5		0			0		
# w/beta-blocker Rx/refusal/Contra/ADR	2	40.0	0	0.0	+40.0	0	0.0	+40.0
A. # w/beta-blocker Rx w/% of Total	2	100.0	0	0.0	+100.0	0	0.0	+100.0
B. # w/refusal w/% of Total	0	0.0	0	0.0	+0.0	0	0.0	+0.0
C. # w/contra/ADR w/% of Total	0	0.0	0	0.0	+0.0	0	0.0	+0.0
# w/ASA Rx/refusal/Contra/ADR	2	40.0	0	0.0	+40.0	0	0.0	+40.0
A. # w/ASA Rx w/% of Total	2	100.0	0	0.0	+100.0	0	0.0	+100.0
B. # w/refusal w/% of Total	0	0.0	0	0.0	+0.0	0	0.0	+0.0
C. # w/contra/ADR w/% of Total	0	0.0	0	0.0	+0.0	0	0.0	+0.0
# w/ACEI/ARB Rx/refusal/Contra/ADR	1	20.0	0	0.0	+20.0	0	0.0	+20.0
A. # w/ACEI/ARB Rx w/% of Total	1	100.0	0	0.0	+100.0	0	0.0	+100.0
B. # w/refusal w/% of Total	0	0.0	0	0.0	+0.0	0	0.0	+0.0
C. # w/contra/ADR w/% of Total	0	0.0	0	0.0	+0.0	0	0.0	+0.0
# w/statin Rx/refusal/Contra/ADR	5	100.0	0	0.0	+100.0	0	0.0	+100.0
A. # w/statin Rx w/% of Total	1	20.0	0	0.0	+20.0	0	0.0	+20.0
B. # w/refusal w/% of Total	0	0.0	0	0.0	+0.0	0	0.0	+0.0
C. # w/contra/ADR w/% of Total	4	80.0	0	0.0	+80.0	0	0.0	+80.0

\*\*\* IHS 2007 Clinical Performance Report \*\*\*  
DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

-----  
Appropriate Medication Therapy after a Heart Attack (con't)

	REPORT	%	PREV YR	%	CHG from	BASE	%	CHG from
	PERIOD		PERIOD		PREV YR %	PERIOD		BASE %
# w/Rx/refusal/contra/ ADR of ALL meds	1	20.0	0	0.0	+20.0	0	0.0	+20.0

\*\*\* IHS 2007 Clinical Performance Report \*\*\*

DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

---

Persistence of Appropriate Medication Therapy after a Heart Attack

Denominator(s):

Active Clinical patients 35 and older diagnosed with an AMI six months prior to the Report period through the first six months of the Report period. Broken down by gender.

Numerator(s):

Patients with a 135-day course of treatment with beta-blockers, who refused beta-blockers in the 180 days after AMI, or who have a contraindication/previous adverse reaction to beta-blocker therapy.

A: Patients with 135-day beta-blocker treatment.

B: Patients with documented refusal of beta-blockers.

C: Patients with contraindication/previous adverse reaction to beta-blocker therapy.

Patients with a 135-day course of treatment with ASA (aspirin) or other anti-platelet agent, who refused ASA/anti-platelet in the 180 days after AMI, or who have a contraindication/previous adverse reaction to ASA/anti-platelet therapy.

A: Patients with 135-day ASA/anti-platelet treatment.

B: Patients with documented refusal of ASA/anti-platelet.

C: Patients with contraindication/previous adverse reaction to ASA/anti-platelet therapy.

Patients with a 135-day course of treatment with ACEIs/ARBs, who refused ACEIs/ARBs in the 180 days after AMI, or who have a contraindication/previous adverse reaction to ACEI/ARB therapy.

A: Patients with 135-day ACEI/ARB treatment.

B: Patients with documented refusal of ACEIs/ARBs.

C: Patients with contraindication/previous adverse reaction to ACEI/ARB therapy.

Patients with a 135-day course of treatment with statins, who refused statins in the 180 days after AMI, or who have a contraindication/previous adverse reaction to statin therapy.

A: Patients with 135-day statin treatment.

B: Patients with documented refusal of statins.

C: Patients with contraindication/previous adverse reaction to statin therapy.

Patients with a 135-day course of treatment for all post-AMI medications (i.e. beta-blocker, ASA/anti-platelet, ACEI/ARB, AND statin) following first discharge date or visit date, including previous active prescriptions; with refusal, and/or who have a contraindication/previous adverse reaction.

Age is calculated at the beginning of the Report period. Acute Myocardial Infarction (AMI) defined as POV 410.0\*-410.9\* or 412. AMI diagnosis may be made at an inpatient or outpatient visit but must occur between six months prior to beginning of Report period through first six

## \*\*\* IHS 2007 Clinical Performance Report \*\*\*

## DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

months of the Report period. Inpatient visit defined as Service Category of H (Hospitalization). If patient has more than one episode of AMI during the timeframe, CRS will include only the first hospital discharge or ambulatory visit.

Denominator Exclusions: Patients meeting any of the following conditions will be excluded from the denominator.

1. If inpatient visit, patients with Discharge Type of Irregular (AMA), Transferred, or contains "Death."
2. Patients with a Diagnosis Modifier of C (Consider), D (Doubtful), M (Maybe, Possible, Perhaps), O (Rule Out), P (Probable), R (Resolved), S (Suspect, Suspicious), or T (Status Post).
3. Patients with a Provider Narrative beginning with "Consider"; "Doubtful"; "Maybe"; "Possible"; "Perhaps"; "Rule Out"; "R/O"; "Probable"; "Resolved"; "Suspect"; "Suspicious"; or "Status Post."

To be included in the numerators, a patient must meet one of the 3 conditions below:

1. A total days supply  $\geq$  135 days in the 180 days following discharge date for inpatient visits or visit date for ambulatory visits. Prior active prescriptions can be included if the treatment days fall within the 180 days following discharge/visit date. Prior active prescription defined as most recent prescription (see codes below) prior to admission/visit date with the number of days supply equal to or greater than the discharge/visit date minus the prescription date; OR
2. A refusal of the medication at least once at time of diagnosis through the 180 days after AMI; OR
3. Have a contraindication/previous adverse reaction to the indicated medication.

Refusals and contraindications/previous adverse drug reactions (ADR)/allergies are only counted if a patient did not have a prescription for the indicated medication. Patients without a prescription who have a refusal and/or contraindication/ADR/allergy will be counted in sub-numerators B-C. Because a patient may have both a refusal and a contraindication/ADR/allergy, the sub-numerator totals of A-C may not add up to the numerator total.

NOTE: If the medication was started and then discontinued, CRS will recalculate the # Days Prescribed by subtracting the prescription date (i.e. visit date) from the V Medication Discontinued Date. Example: Rx Date=11/15/2003, Discontinued Date=11/19/2003, Recalculated # Days Prescribed=4.

Example of patient included in the beta-blocker numerator who has prior active prescription:

## \*\*\* IHS 2007 Clinical Performance Report \*\*\*

## DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

- 
- Admission Date: 2/1/2004, Discharge Date: 2/15/2004
  - Must have 135 days prescribed by 8/13/2004 (Discharge Date+180)
  - Prior Beta-Blocker Rx Date: 1/15/2004
  - # Days Prescribed: 60 (treats patient through 3/15/2004)
  - Discharge Date minus Rx Date: 2/15/2004-1/15/2004 = 31, 60 is >= 31, prescription is considered Prior Active Rx
  - 3/15/2004 is between 2/15 and 8/13/2004, thus remainder of Prior Active Rx can be counted toward 180-day treatment period
  - # Remaining Days Prescribed from Prior Active Rx:  
(60-(Discharge Date-Prior Rx Date) = 60-(2/15/2004-1/15/2004) = 60-31 = 29
  - Rx #2: 4/1/2004, # Days Prescribed: 90
  - Rx #3: 7/10/2004, #Days Prescribed: 90
  - Total Days Supply Prescribed between 2/15 and 8/13/2004: 29+90+90=209

Numerator Logic: In the logic below, "ever" is defined as anytime through the end of the Report Period.

## Beta-Blocker Numerator Logic:

Beta-blocker medication codes defined with medication taxonomy BGP HEDIS BETA BLOCKER MEDS. (Medications are: Acebutolol HCL, Atenolol, Betaxolol HCL, Bisoprolol fumarate, Carteolol HCL, Carvedilol, Labetalol HCL, Metoprolol succinate, Metoprolol tartrate, Nadolol, Penbutolol sulfate, Pindolol, Propranolol HCL, Sotalol HCL, Timolol maleate.)

Refusal of beta-blocker: REF refusal of any beta-blocker medication in site-populated medication taxonomy BGP HEDIS BETA BLOCKER MEDS at least once during the period admission/visit date through the 180 days after discharge/visit date.

Contraindications to beta-blockers defined as any of the following occurring ever unless otherwise noted: A) Asthma - 2 diagnoses (POV) of 493\* on different visit dates; B) Hypotension - 1 diagnosis of 458\*; C) Heart block >1 degree - 1 diagnosis of 426.0, 426.12, 426.13, 426.2, 426.3, 426.4, 426.51, 426.52, 426.53, 426.54, or 426.7; D) Sinus bradycardia - 1 diagnosis of 427.81; E) COPD - 2 diagnoses on different visit dates of 491.2\*, 496, or 506.4, or a combination of any of these codes, such as 1 visit with 491.20 and 1 with 496; F) NMI (not medically indicated) refusal for any beta-blocker at least once during the period admission/visit date through the 180 days after discharge/visit date; or G) CPT G8011 (Clinician documented that AMI patient was not an eligible candidate for beta-blocker at arrival) at least once during the period admission/visit date through the 180 days after discharge/visit date.

Adverse drug reaction/documentated beta blocker allergy defined as any of the following occurring anytime up to the 180 days after discharge/visit

## \*\*\* IHS 2007 Clinical Performance Report \*\*\*

## DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

-----

date: A) POV 995.0-995.3 AND E942.0; B) beta block\* entry in ART (Patient Allergies File); or C) beta block\*, bblock\* or b block\* contained within Problem List or in Provider Narrative field for any POV 995.0-995.3 or V14.8.

## ASA (aspirin) Numerator Logic:

ASA medication codes defined with medication taxonomy DM AUDIT ASPIRIN DRUGS.

Other anti-platelet medication codes defined with medication taxonomy site-populated BGP ANTI-PLATELET DRUGS taxonomy.

Refusal of ASA/other anti-platelet: REF refusal of any ASA or anti-platelet medication in site-populated medication taxonomies DM AUDIT ASPIRIN DRUGS or BGP ANTI-PLATELET DRUGS at least once during the period admission/visit date through the 180 days after discharge/visit date.

Contraindications to ASA/other anti-platelet defined as any of the following occurring ever unless otherwise noted: A) Patients with prescription for Warfarin/Coumadin using site-populated BGP CMS WARFARIN MEDS taxonomy during the period admission/visit date through the 180 days after discharge/visit date; B) Hemorrhage diagnosis (POV 459.0); C) NMI (not medically indicated) refusal for any aspirin at least once during the period admission/visit date through the 180 days after discharge/visit date; or D) CPT G8008 (Clinician documented that AMI patient was not an eligible candidate to receive aspirin at arrival) at least once during the period admission/visit date through the 180 days after discharge/visit date.

Adverse drug reaction/documentated ASA/other anti-platelet allergy defined as any of the following occurring anytime up to the 180 days after discharge/visit date: A) POV 995.0-995.3 AND E935.3; B) "aspirin" entry in ART (Patient Allergies File); or C) "ASA" or "aspirin" contained within Problem List or in Provider Narrative field for any POV 995.0-995.3 or V14.8.

## ACEI/ARB Numerator Logic:

Ace Inhibitor (ACEI) medication codes defined with medication taxonomy BGP HEDIS ACEI MEDS. ACEI medications: Benazepril (Lotensin), Captopril (Capoten), Enalapril (Vasotec), Fosinopril (Monopril), Lisinopril (Prinivil Zestril), Moexipril (Univasc), Perindopril (Aceon), Quinapril (Accupril), Ramipril (Altace), Trandolopril (Mavik).

ACEI-Combination Products: Benazepril + HCTZ (Lotensin HCT), Captopril + HCTZ (Capozide, Hydrochlorothiazide + Capropril), Enalapril + HCTZ

## \*\*\* IHS 2007 Clinical Performance Report \*\*\*

## DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

---

(Vaseretic), Fosinopril + HCTZ (Monopril HCT), Lisinopril + HCTZ (Prinzide, Zestoreti, Hydrochlorothiazide + Lisinopril), Moexipril + HCTZ (Uniretic), Quinapril + HCTZ (Accuretic).

Refusal of ACEI: REF refusal of any ACE Inhibitor medication in site-populated medication taxonomy BGP HEDIS ACEI MEDS at least once during the period admission/visit date through the 180 days after discharge/visit date.

Contraindications to ACEI defined as any of the following: 1) Diagnosis ever for moderate or severe aortic stenosis (POV 395.0, 395.2, 396.0, 396.2, 396.8, 424.1, 425.1, or 747.22) or 2) NMI (not medically indicated) refusal for any ACEI at least once during the period admission/visit date through the 180 days after discharge/visit date.

Adverse drug reaction/documentated ACEI allergy defined as any of the following occurring anytime up to the 180 days after discharge/visit date: 1) POV 995.0-995.3 AND E942.6; 2) "ace inhibitor" or "ACEI" entry in ART (Patient Allergies File); or 3) "ace i\*" or "ACEI" contained within Problem List or in Provider Narrative field for any POV 995.0-995.3 or V14.8.

ARB (Angiotensin Receptor Blocker) medication codes defined with medication taxonomy BGP HEDIS ARB MEDS. ARB medications: Candesartan (Atacand), Eprosartan (Teveten), Irbesartan (Avapro), Losartan (Cozaar), Olmesartan (Benicar), Telmisartan (Micardis), Valsartan (Diovan)

ARB Combination Products: Candesartan (Atacand HCT), Irbesartan (Avalide), Losartan (Hyzaar), Telmisartan (Micardis HCT), Valsartan (Diovan HCT).

Refusal of ARB: REF refusal of any ARB medication in site-populated medication taxonomy BGP HEDIS ARB MEDS at least once during the period admission/visit date through the 180 days after discharge/visit date.

Contraindications to ARB defined as any of the following: 1) Diagnosis ever for moderate or severe aortic stenosis (POV 395.0, 395.2, 396.0, 396.2, 396.8, 424.1, 425.1, 747.22) or 2) NMI (not medically indicated) refusal for any ARB at least once during the period admission/visit date through the 180 days after discharge/visit date.

Adverse drug reaction/documentated ARB allergy defined as any of the following occurring anytime up to the 180 days after discharge/visit date: 1) POV 995.0-995.3 AND E942.6; 2) "Angiotensin Receptor Blocker" or "ARB" entry in ART (Patient Allergies File); or 3) "Angiotensin Receptor Blocker" or "ARB" contained within Problem List or in Provider Narrative field for any POV 995.0-995.3 or V14.8.

## \*\*\* IHS 2007 Clinical Performance Report \*\*\*

DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

-----  
Statins Numerator Logic:

Statin medication codes defined with medication taxonomy BGP HEDIS STATIN MEDS. Statin medications: Atorvastatin (Lipitor), Fluvastatin (Lescol), Lovastatin (Altacor), Mevacor, Pravastatin (Pravachol), Simvastatin (Zocor), Rosuvastatin (Crestor).

Statin Combination Products: Caduet, PraviGard Pac, Vytorin.

Refusal of Statin: REF refusal of any statin medication in site-populated medication taxonomy BGP HEDIS STATIN MEDS at least once during admission/visit date through the 180 days after discharge/visit date.

Contraindications to Statins defined as any of the following: 1) Pregnancy, defined as at least two visits during the period admission/visit date through the 180 days after discharge/visit date with POV or Problem diagnosis (V22.0-V23.9, 640.\*-648.\*, 651.\*-676.\*) and with no documented miscarriage or abortion occurring after the second pregnancy POV. Miscarriage definition: (1) POV: 630, 631, 632, 633\*, 634\*, (2) CPT 59812, 59820, 59821, 59830. Abortion definition: (1) POV: 635\*, 636\* 637\*, (2) CPT: 59100, 59120, 59130, 59136, 59150, 59151, 59840, 59841, 59850, 59851, 59852, 59855, 59856, 59857; 2) Breastfeeding, defined as POV V24.1 or breastfeeding patient education codes BF-BC, BF-BP, BF-CS, BF-EQ, BF-FU, BF-HC, BF-ON, BF-M, BF-MK, BF-N during the period admission/visit date through the 180 days after discharge/visit date; 3) Acute Alcoholic Hepatitis, defined as POV 571.1 during the period admission/visit date through the 180 days after discharge/visit date; or 4) NMI (not medically indicated) refusal for any statin at least once during the period admission/visit date through the 180 days after discharge/visit date.

Adverse drug reaction/documentated statin allergy defined as any of the following: 1) ALT and/or AST > 3x the Upper Limit of Normal (ULN) (i.e. Reference High) on 2 or more consecutive visits during the period admission/visit date through the 180 days after discharge/visit date; 2) Creatine Kinase (CK) levels > 10x ULN or CK > 10,000 IU/L during the period admission/visit date through the 180 days after discharge/visit date; 3) Myopathy/Myalgia, defined as any of the following during the period admission/visit date through the 180 days after discharge/visit date: POV 359.0-359.9, 729.1, 710.5, or 074.1; 4) any of the following occurring anytime up to the 180 days after discharge/visit date: A) POV 995.0-995.3 AND E942.9; B) "Statin" or "Statins entry in ART (Patient Allergies File); or C) "Statin" or "Statins" contained within Problem List or in Provider Narrative field for any POV 995.0-995.3 or V14.8.

\*\*\* IHS 2007 Clinical Performance Report \*\*\*  
 DEMO INDIAN HOSPITAL  
 Report Period: Jan 01, 2006 to Dec 31, 2006  
 Previous Year Period: Jan 01, 2005 to Dec 31, 2005  
 Baseline Period: Jan 01, 2000 to Dec 31, 2000

All Medications Numerator Logic:

To be included in this numerator, a patient must have a prescription, refusal, or a contraindication for ALL of the four medication classes (i.e. beta-blocker, ASA/other anti-platelet, ACEI/ARB, AND statin).

Test Definitions:

ALT: Site-populated taxonomy DM AUDIT ALT TAX or LOINC taxonomy.

AST: Site-populated taxonomy DM AUDIT AST TAX or LOINC taxonomy.

Creatine Kinase: Site-populated taxonomy BGP CREATINE KINASE TAX or LOINC taxonomy.

Establish the rate of patients receiving persistent medication therapy after an AMI.

2010 Goal: TBD

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
Active Clinical Pts 35+ w/ AMI DX	9		2			4		
# w/135-day beta-blocker Rx/refusal/Contra/ADR	7	77.8	2	100.0	-22.2	3	75.0	+2.8
A. # w/135-day beta blocker Rx w/ % of Total	2	28.6	2	100.0	-71.4	2	66.7	-38.1
B. # w/refusal w/ % of Total	1	14.3	0	0.0	+14.3	0	0.0	+14.3
C. # w/contra/ADR w/ % of Total	4	57.1	0	0.0	+57.1	1	33.3	+23.8

## \*\*\* IHS 2007 Clinical Performance Report \*\*\*

DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

## Persistence of Appropriate Medication Therapy after a Heart Attack (con't)

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
# w/135-day ASA								
Rx/refusal/Contra/ADR	5	55.6	0	0.0	+55.6	3	75.0	-19.4
A. # w/135-day ASA								
Rx w/% of Total	1	20.0	0	0.0	+20.0	3	100.0	-80.0
B. # w/refusal w/% of Total	2	40.0	0	0.0	+40.0	0	0.0	+40.0
C. # w/contra/ADR w/% of Total	2	40.0	0	0.0	+40.0	0	0.0	+40.0
# w/135-day ACEI/ARB								
Rx/refusal/Contra/ADR	5	55.6	1	50.0	+5.6	1	25.0	+30.6
A. # w/135-day ACEI/ARB								
Rx w/% of Total	1	20.0	1	100.0	-80.0	1	100.0	-80.0
B. # w/refusal w/% of Total	1	20.0	0	0.0	+20.0	0	0.0	+20.0
C. # w/contra/ADR w/% of Total	3	60.0	0	0.0	+60.0	0	0.0	+60.0
# w/135-day statin								
Rx/refusal/Contra/ADR	7	77.8	2	100.0	-22.2	2	50.0	+27.8
A. # w/135-day statin								
Rx w/% of Total	2	28.6	2	100.0	-71.4	2	100.0	-71.4
B. # w/refusal w/% of Total	1	14.3	0	0.0	+14.3	0	0.0	+14.3
C. # w/contra/ADR w/% of Total	4	57.1	0	0.0	+57.1	0	0.0	+57.1
# w/Rx/refusal/contra/ADR of ALL meds	4	44.4	0	0.0	+44.4	1	25.0	+19.4

\*\*\* IHS 2007 Clinical Performance Report \*\*\*  
 DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006  
 Previous Year Period: Jan 01, 2005 to Dec 31, 2005  
 Baseline Period: Jan 01, 2000 to Dec 31, 2000

Persistence of Appropriate Medication Therapy after a Heart Attack (con't)

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
Male AC Pts 35+ w/ AMI DX	5		1			1		
# w/135-day beta-blocker Rx/refusal/Contra/ADR	5	100.0	1	100.0	+0.0	1	100.0	+0.0
A. # w/135-day beta-blocker Rx w/% of Total	2	40.0	1	100.0	-60.0	0	0.0	+40.0
B. # w/refusal w/% of Total	1	20.0	0	0.0	+20.0	0	0.0	+20.0
C. # w/contra/ADR w/ % of Total	2	40.0	0	0.0	+40.0	1	100.0	-60.0
# w/135-day ASA Rx/refusal/Contra/ADR	4	80.0	0	0.0	+80.0	1	100.0	-20.0
A. # w/135-day ASA Rx w/% of Total	1	25.0	0	0.0	+25.0	1	100.0	-75.0
B. # w/refusal w/% of Total	2	50.0	0	0.0	+50.0	0	0.0	+50.0
C. # w/contra/ADR w/ % of Total	1	25.0	0	0.0	+25.0	0	0.0	+25.0
# w/135-day ACEI/ARB Rx/refusal/Contra/ADR	4	80.0	0	0.0	+80.0	0	0.0	+80.0
A. # w/135-day ACEI/ARB Rx w/% of Total	1	25.0	0	0.0	+25.0	0	0.0	+25.0
B. # w/refusal w/% of Total	1	25.0	0	0.0	+25.0	0	0.0	+25.0
C. # w/contra/ADR w/ % of Total	2	50.0	0	0.0	+50.0	0	0.0	+50.0

\*\*\* IHS 2007 Clinical Performance Report \*\*\*  
 DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006  
 Previous Year Period: Jan 01, 2005 to Dec 31, 2005  
 Baseline Period: Jan 01, 2000 to Dec 31, 2000

Persistence of Appropriate Medication Therapy after a Heart Attack (con't)

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
# w/135-day statin Rx/refusal/Contra/ADR	4	80.0	1	100.0	-20.0	0	0.0	+80.0
A. # w/135-day statin Rx w/% of Total	2	50.0	1	100.0	-50.0	0	0.0	+50.0
B. # w/refusal w/% of Total	1	25.0	0	0.0	+25.0	0	0.0	+25.0
C. # w/contra/ADR w/ % of Total	1	25.0	0	0.0	+25.0	0	0.0	+25.0
# w/Rx/refusal/contra/ADR of ALL meds	3	60.0	0	0.0	+60.0	0	0.0	+60.0

\*\*\* IHS 2007 Clinical Performance Report \*\*\*  
 DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006  
 Previous Year Period: Jan 01, 2005 to Dec 31, 2005  
 Baseline Period: Jan 01, 2000 to Dec 31, 2000

Persistence of Appropriate Medication Therapy after a Heart Attack (con't)

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
Female AC Pts 35+ w/ AMI DX	4		1			3		
# w/135-day beta-blocker Rx/refusal/Contra/ADR	2	50.0	1	100.0	-50.0	2	66.7	-16.7
A. # w/135-day beta-blocker Rx w/% of Total	0	0.0	1	100.0	-100.0	2	100.0	-100.0
B. # w/refusal w/% of Total	0	0.0	0	0.0	+0.0	0	0.0	+0.0
C. # w/contra/ADR w/% of Total	2	100.0	0	0.0	+100.0	0	0.0	+100.0
# w/135-day ASA Rx/refusal/Contra/ADR	1	25.0	0	0.0	+25.0	2	66.7	-41.7
A. # w/135-day ASA Rx w/% of Total	0	0.0	0	0.0	+0.0	2	100.0	-100.0
B. # w/refusal w/% of Total	0	0.0	0	0.0	+0.0	0	0.0	+0.0
C. # w/contra/ADR w/% of Total	1	100.0	0	0.0	+100.0	0	0.0	+100.0
# w/135-day ACEI/ARB Rx/refusal/Contra/ADR	1	25.0	1	100.0	-75.0	1	33.3	-8.3
A. # w/135-day ACEI/ARB Rx w/% of Total	0	0.0	1	100.0	-100.0	1	100.0	-100.0
B. # w/refusal w/% of Total	0	0.0	0	0.0	+0.0	0	0.0	+0.0
C. # w/contra/ADR w/% of Total	1	100.0	0	0.0	+100.0	0	0.0	+100.0

\*\*\* IHS 2007 Clinical Performance Report \*\*\*  
 DEMO INDIAN HOSPITAL  
 Report Period: Jan 01, 2006 to Dec 31, 2006  
 Previous Year Period: Jan 01, 2005 to Dec 31, 2005  
 Baseline Period: Jan 01, 2000 to Dec 31, 2000

Persistence of Appropriate Medication Therapy after a Heart Attack (con't)

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
# w/135-day statin Rx/refusal/Contra/ADR	3	75.0	1	100.0	-25.0	2	66.7	+8.3
A. # w/135-day statin Rx w/% of Total	0	0.0	1	100.0	-100.0	2	100.0	-100.0
B. # w/refusal w/% of Total	0	0.0	0	0.0	+0.0	0	0.0	+0.0
C. # w/contra/ADR w/ % of Total	3	100.0	0	0.0	+100.0	0	0.0	+100.0
# w/Rx/refusal/contra/ADR of ALL meds	1	25.0	0	0.0	+25.0	1	33.3	-8.3

## \*\*\* IHS 2007 Clinical Performance Report \*\*\*

DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

-----  
Appropriate Medication Therapy in High Risk Patients

## Denominator(s):

Active IHD patients ages 22 and older, defined as all Active Clinical patients diagnosed with ischemic heart disease (IHD) prior to the Report Period, AND at least 2 visits during the Report Period, AND 2 IHD-related visits ever.

A: Active IHD patients ages 22 and older who are not Active Diabetic.

B: Active IHD patients ages 22 and older who are Active Diabetic.

## Numerator(s):

Patients with a 180-day course of treatment with or refusal of beta-blockers during the Report Period, or who have a contraindication/previous adverse reaction to beta-blocker therapy.

A: Patients with 180-day beta-blocker treatment.

B: Patients with documented refusal of beta-blockers.

C: Patients with contraindication/previous adverse reaction to beta-blocker therapy.

Patients with a 180-day course of treatment with or refusal of ASA (aspirin) or other anti-platelet agent during the Report Period, or who have a contraindication/previous adverse reaction to ASA/anti-platelet therapy.

A: Patients with 180-day ASA/anti-platelet treatment.

B: Patients with documented refusal of ASA/anti-platelet.

C: Patients with contraindication/previous adverse reaction to ASA/anti-platelet therapy.

Patients with a 180-day course of treatment with or refusal of ACEIs/ARBs during the Report Period, or who have a contraindication/previous adverse reaction to ACEI/ARB therapy.

A: Patients with 180-day ACEI/ARB treatment.

B: Patients with documented refusal of ACEIs/ARBs.

C: Patients with contraindication/previous adverse reaction to ACEI/ARB therapy.

Patients with a 180-day course of treatment with or refusal of statins during the Report Period, or who have a contraindication/previous adverse reaction to statin therapy.

A: Patients with 180-day statin treatment.

B: Patients with documented refusal of statins.

C: Patients with contraindication/previous adverse reaction to statin therapy.

Patients with a 180-day course of treatment for all medications (i.e. beta-blocker, aspirin/anti-platelet, ACEI/ARB, AND statin) during the Report Period, with refusal, and/or who have a contraindication/previous adverse reaction.

Age of the patient is calculated at the beginning of the Report period.

## \*\*\* IHS 2007 Clinical Performance Report \*\*\*

DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

-----

Ischemic Heart Disease (IHD) diagnosis defined as: 410.0-412.\*, 414.0-414.9, 428.\* or 429.2 recorded in the V POV file.

Diabetes defined as: Diagnosed with diabetes (first POV in V POV with 250.00-250.93) prior to the Current Report period, AND at least 2 visits during the Current Report period, AND 2 DM-related visits ever. Patients not meeting these criteria are considered non-diabetics.

To be included in the numerators, a patient must meet one of the 3 conditions below:

1. Prescription(s) for the indicated medication with a total days supply of 180 days or more during the Report Period; OR
2. A refusal of the medication during the Report Period; OR
3. Have a contraindication/previous adverse reaction to the indicated medication.

Refusals and contraindications/previous adverse drug reactions (ADR)/allergies are only counted if a patient did not have a prescription for the indicated medication. Patients without a prescription who have a refusal and/or contraindication/ADR/allergy will be counted in sub-numerators B-C. Because a patient may have both a refusal and a contraindication/ADR/allergy, the sub-numerator totals of A-C may not add up to the numerator total.

For prescriptions, the days supply requirement may be met with a single prescription or from a combination of prescriptions for the indicated medication that were filled during the Report Period and prescriptions filled prior to the Report Period but which are still active (i.e. prior active prescription). Prior active prescriptions can be included if the treatment days fall within the Report Period. Prior active prescription defined as most recent prescription for the indicated medication (see codes below) prior to Report Period Start Date with the number of days supply equal to or greater than the Report Period Start Date minus the prescription date.

NOTE: If a prescription for a medication was started and then discontinued, CRS will recalculate the # Days Prescribed by subtracting the prescription date (i.e. visit date) from the V Medication Discontinued Date. Example: Rx Date=11/15/2006, Discontinued Date=11/19/2006, Recalculated # Days Prescribed=4.

Example of patient included in the beta-blocker numerator with prior active prescription:

- Report Period: 07/01/2005 06/30/2006
- Must have 180 days supply of indicated medication 6/30/2006 (end of

## \*\*\* IHS 2007 Clinical Performance Report \*\*\*

DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

-----  
Report Period)

- Prior Beta-Blocker Rx Date: 06/01/2005  
 - # Days Prescribed: 60 (treats patient through 07/31/2005)  
 - Report Period Start Date minus Rx Date: 07/01/2005-06/01/2005 = 30;  
 60 (#Days Prescribed) is >= 30, prescription is considered Prior Active Rx  
 - 07/31/2005 is between the Report Period of 07/01/2005 and 06/30/2006,  
 thus remainder of Prior Active Rx can be counted toward 180-days supply  
 - # Remaining Days Prescribed from Prior Active Rx:  
 (# Days Prescribed-(Report Period Start Date-Prior Rx Date) =  
 60-(07/01/2005-06/01/2005) = 60-30 = 30  
 - Rx #2: 08/05/2005, # Days Prescribed: 90  
 - Rx #3: 11/10/2005, #Days Prescribed: 90  
 - Total Days Supply Prescribed between 07/01/2005 and 06/30/2006,  
 including prior active prescription: 30+90+90=210

Numerator Logic: In the logic below, "ever" is defined as anytime through the end of the Report Period.

## Beta-Blocker Numerator Logic:

Beta-blocker medication codes defined with medication taxonomy BGP HEDIS BETA BLOCKER MEDS. (Medications are: Acebutolol HCL, Atenolol, Betaxolol HCL, Bisoprolol fumarate, Carteolol HCL, Carvedilol, Labetalol HCL, Metoprolol succinate, Metoprolol tartrate, Nadolol, Penbutolol sulfate, Pindolol, Propranolol HCL, Sotalol HCL, Timolol maleate.)

Refusal of beta-blocker: REF refusal of any beta-blocker medication in site-populated medication taxonomy BGP HEDIS BETA BLOCKER MEDS at least once during the Report Period.

Contraindications to beta-blockers defined as any of the following occurring ever unless otherwise noted: A) Asthma - 2 diagnoses (POV) of 493\* on different visit dates; B) Hypotension - 1 diagnosis of 458\*; C) Heart block >1 degree - 1 diagnosis of 426.0, 426.12, 426.13, 426.2, 426.3, 426.4, 426.51, 426.52, 426.53, 426.54, or 426.7; D) Sinus bradycardia - 1 diagnosis of 427.81; E) COPD - 2 diagnoses on different visit dates of 491.2\*, 496, or 506.4, or a combination of any of these codes, such as 1 visit with 491.20 and 1 with 496; F) NMI (not medically indicated) refusal for any beta-blocker at least once during the Report Period; or G) CPT G8011 (Clinician documented that AMI patient was not an eligible candidate for beta-blocker at arrival) at least once during the Report Period.

Adverse drug reaction/documentated beta blocker allergy defined as any of the following occurring ever: A) POV 995.0-995.3 AND E942.0; B) beta block\* entry in ART (Patient Allergies File); or C) beta block\*, bblock\* or b block\* contained within Problem List or in Provider Narrative field

\*\*\* IHS 2007 Clinical Performance Report \*\*\*

DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

---

for any POV 995.0-995.3 or V14.8.

ASA (aspirin)/Other Anti-Platelet Numerator Logic:

ASA medication codes defined with medication taxonomy DM AUDIT ASPIRIN DRUGS.

Other anti-platelet medication codes defined with medication taxonomy site-populated BGP ANTI-PLATELET DRUGS taxonomy.

Refusal of ASA/other anti-platelet: REF refusal of any ASA or anti-platelet medication in site-populated medication taxonomies DM AUDIT ASPIRIN DRUGS or BGP ANTI-PLATELET DRUGS at least once during the Report Period.

Contraindications to ASA/other anti-platelet defined as any of the following occurring ever unless otherwise noted: A) Patients with a 180-day course of treatment for Warfarin/Coumadin during the Report Period, using site-populated BGP CMS WARFARIN MEDS taxonomy; B) Hemorrhage diagnosis (POV 459.0); C) NMI (not medically indicated) refusal for any aspirin at least once during the Report Period; or D) CPT G8008 (Clinician documented that AMI patient was not an eligible candidate to receive aspirin at arrival) at least once during the Report Period.

Adverse drug reaction/documentated ASA/other anti-platelet allergy defined as any of the following occurring anytime ever: A) POV 995.0-995.3 AND E935.3; B) "aspirin" entry in ART (Patient Allergies File); or C) "ASA" or "aspirin" contained within Problem List or in Provider Narrative field for any POV 995.0-995.3 or V14.8.

ACEI/ARB Numerator Logic:

Ace Inhibitor (ACEI) medication codes defined with medication taxonomy BGP HEDIS ACEI MEDS. ACEI medications: Benazepril (Lotensin), Captopril (Capoten), Enalapril (Vasotec), Fosinopril (Monopril), Lisinopril (Prinivil Zestril), Moexipril (Univasc), Perindopril (Aceon), Quinapril (Accupril), Ramipril (Altace), Trandolopril (Mavik).

ACEI-Combination Products: Benazepril + HCTZ (Lotensin HCT), Captopril + HCTZ (Capozide, Hydrochlorothiazide + Capropril), Enalapril + HCTZ (Vaseretic), Fosinopril + HCTZ (Monopril HCT), Lisinopril + HCTZ (Prinzide, Zestoreti, Hydrochlorothiazide + Lisinopril), Moexipril + HCTZ (Uniretic), Quinapril + HCTZ (Accuretic).

Refusal of ACEI: REF refusal of any ACE Inhibitor medication in site-populated medication taxonomy BGP HEDIS ACEI MEDS at least during

\*\*\* IHS 2007 Clinical Performance Report \*\*\*

DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

---

the Report Period.

Contraindications to ACEI defined as any of the following: 1) Diagnosis ever for moderate or severe aortic stenosis (POV 395.0, 395.2, 396.0, 396.2, 396.8, 424.1, 425.1, or 747.22) or 2) NMI (not medically indicated) refusal for any ACEI at least once during the Report Period.

Adverse drug reaction/documentated ACEI allergy defined as any of the following occurring anytime through the end of the Report Period: 1) POV 995.0-995.3 AND E942.6; 2) "ace inhibitor" or "ACEI" entry in ART (Patient Allergies File); or 3) "ace i\*" or "ACEI" contained within Problem List or in Provider Narrative field for any POV 995.0-995.3 or V14.8.

ARB (Angiotensin Receptor Blocker) medication codes defined with medication taxonomy BGP HEDIS ARB MEDS. ARB medications: Candesartan (Atacand), Eprosartan (Teveten), Irbesartan (Avapro), Losartan (Cozaar), Olmesartan (Benicar), Telmisartan (Micardis), Valsartan (Diovan).

ARB Combination Products: Candesartan (Atacand HCT), Irbesartan (Avalide), Losartan (Hyzaar), Telmisartan (Micardis HCT), Valsartan (Diovan HCT).

Refusal of ARB: REF refusal of any ARB medication in site-populated medication taxonomy BGP HEDIS ARB MEDS at least once during the Report Period.

Contraindications to ARB defined as any of the following: Diagnosis ever for moderate or severe aortic stenosis (POV 395.0, 395.2, 396.0, 396.2, 396.8, 424.1, 425.1, 747.22) or 2) NMI (not medically indicated) refusal for any ARB at least once during the Report Period.

Adverse drug reaction/documentated ARB allergy defined as any of the following occurring anytime through the end of the Report Period: 1) POV 995.0-995.3 AND E942.6; 2) "Angiotensin Receptor Blocker" or "ARB" entry in ART (Patient Allergies File); or 3) "Angiotensin Receptor Blocker" or "ARB" contained within Problem List or in Provider Narrative field for any POV 995.0-995.3 or V14.8.

Statins Numerator Logic:

Statin medication codes defined with medication taxonomy BGP HEDIS STATIN MEDS. Statin medications: Atorvastatin (Lipitor), Fluvastatin (Lescol), Lovastatin (Altacor), Mevacor, Pravastatin (Pravachol), Simvastatin (Zocor), Rosuvastatin (Crestor).

Statin Combination Products: Caduet, PraviGard Pac, Vytorin.

## \*\*\* IHS 2007 Clinical Performance Report \*\*\*

DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

Refusal of Statin: REF refusal of any statin medication in site-populated medication taxonomy BGP HEDIS STATIN MEDS at least once during the Report Period.

Contraindications to Statins defined as any of the following: 1) Pregnancy, defined as at least two visits during the Report Period with POV or Problem diagnosis (V22.0-V23.9, 640.\*-648.\*, 651.\*-676.\*) and with no documented miscarriage or abortion occurring after the second pregnancy POV. Miscarriage definition: (1) POV: 630, 631, 632, 633\*, 634\*, (2) CPT 59812, 59820, 59821, 59830. Abortion definition: (1) POV: 635\*, 636\* 637\*, (2) CPT: 59100, 59120, 59130, 59136, 59150, 59151, 59840, 59841, 59850, 59851, 59852, 59855, 59856, 59857; 2) Breastfeeding, defined as POV V24.1 or breastfeeding patient education codes BF-BC, BF-BP, BF-CS, BF-EQ, BF-FU, BF-HC, BF-ON, BF-M, BF-MK, BF-N during the Report Period; 3) Acute Alcoholic Hepatitis, defined as POV 571.1 during the Report Period; or 4) NMI (not medically indicated) refusal for any statin at least once during the Report Period.

Adverse drug reaction/documentated statin allergy defined as any of the following: 1) ALT and/or AST > 3x the Upper Limit of Normal (ULN) (i.e. Reference High) on 2 or more consecutive visits during the Report Period; 2) Creatine Kinase (CK) levels > 10x ULN or CK > 10,000 IU/L during the Report Period; 3) Myopathy/Myalgia, defined as any of the following during the Report Period: POV 359.0-359.9, 729.1, 710.5, or 074.1; 4) any of the following occurring anytime through the end of the Report Period: A) POV 995.0-995.3 AND E942.9; B) "Statin" or "Statins entry in ART (Patient Allergies File); or C) "Statin" or "Statins" contained within Problem List or in Provider Narrative field for any POV 995.0-995.3 or V14.8.

All Medications Numerator Logic:

To be included in this numerator, a patient must have a prescription, refusal, or a contraindication for ALL of the four medication classes (i.e. beta-blocker, ASA/other anti-platelet, ACEI/ARB, AND statin).

Test Definitions:

ALT: Site-populated taxonomy DM AUDIT ALT TAX or LOINC taxonomy.

AST: Site-populated taxonomy DM AUDIT AST TAX or LOINC taxonomy.

Creatine Kinase: Site-populated taxonomy BGP CREATINE KINASE TAX or LOINC taxonomy.

Establish the proportion of patients with IHD who are prescribed

\*\*\* IHS 2007 Clinical Performance Report \*\*\*  
 DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

appropriate medication therapy during the Report Period.

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
Active IHD pts 22+	53		44			36		
# w/180 day beta-blocker Rx/refusal/Contra/ADR	37	69.8	27	61.4	+8.4	18	50.0	+19.8
A. # w/180 day beta-blocker Rx w/% of Total	21	56.8	17	63.0	-6.2	14	77.8	-21.0
B. # w/refusal w/% of Total	1	2.7	0	0.0	+2.7	0	0.0	+2.7
C. # w/contra/ADR w/% of Total	15	40.5	10	37.0	+3.5	4	22.2	+18.3
# w/180 day ASA Rx/refusal/Contra/ADR	33	62.3	26	59.1	+3.2	27	75.0	-12.7
A. # w/180 day ASA Rx w/% of Total	26	78.8	23	88.5	-9.7	22	81.5	-2.7
B. # w/refusal w/% of Total	1	3.0	0	0.0	+3.0	0	0.0	+3.0
C. # w/contra/ADR w/% of Total	6	18.2	3	11.5	+6.6	5	18.5	-0.3

\*\*\* IHS 2007 Clinical Performance Report \*\*\*  
 DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

Appropriate Medication Therapy in High Risk Patients (con't)

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
# w/180 day ACEI/ARB Rx/refusal/Contra/ ADR	34	64.2	22	50.0	+14.2	20	55.6	+8.6
A. # w/180 day ACEI/ARB Rx w/% of Total	31	91.2	19	86.4	+4.8	19	95.0	-3.8
B. # w/refusal w/ % of Total	1	2.9	0	0.0	+2.9	0	0.0	+2.9
C. # w/contra/ADR w/ % of Total	2	5.9	3	13.6	-7.8	1	5.0	+0.9
# w/180 day statin Rx/refusal/Contra/ ADR	33	62.3	23	52.3	+10.0	16	44.4	+17.8
A. # w/180 day statin Rx w/% of Total	28	84.8	21	91.3	-6.5	15	93.8	-8.9
B. # w/refusal w/ % of Total	2	6.1	0	0.0	+6.1	0	0.0	+6.1
C. # w/contra/ADR w/ % of Total	3	9.1	2	8.7	+0.4	1	6.3	+2.8
# w/180 day Rx/refusal/ contra/ADR of ALL meds	20	37.7	12	27.3	+10.5	6	16.7	+21.1

\*\*\* IHS 2007 Clinical Performance Report \*\*\*  
 DEMO INDIAN HOSPITAL  
 Report Period: Jan 01, 2006 to Dec 31, 2006  
 Previous Year Period: Jan 01, 2005 to Dec 31, 2005  
 Baseline Period: Jan 01, 2000 to Dec 31, 2000

---

Appropriate Medication Therapy in High Risk Patients (con't)

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
A. Active IHD Pts 22+ who are NOT active diabetic	24		19			17		
# w/180 day beta-blocker Rx/refusal/Contra/ADR	18	75.0	9	47.4	+27.6	11	64.7	+10.3
A. # w/180 day beta-blocker Rx w/% of Total	10	55.6	6	66.7	-11.1	9	81.8	-26.3
B. # w/refusal w/% of Total	1	5.6	0	0.0	+5.6	0	0.0	+5.6
C. # w/contra/ADR w/% of Total	7	38.9	3	33.3	+5.6	2	18.2	+20.7
# w/180 day ASA Rx/refusal/Contra/ADR	14	58.3	13	68.4	-10.1	11	64.7	-6.4
A. # w/180 day ASA Rx w/% of Total	8	57.1	11	84.6	-27.5	9	81.8	-24.7
B. # w/refusal w/% of Total	1	7.1	0	0.0	+7.1	0	0.0	+7.1
C. # w/contra/ADR w/% of Total	5	35.7	2	15.4	+20.3	2	18.2	+17.5
# w/180 day ACEI/ARB Rx/refusal/Contra/ADR	12	50.0	7	36.8	+13.2	7	41.2	+8.8
A. # w/180 day ACEI/ARB Rx w/% of Total	10	83.3	7	100.0	-16.7	6	85.7	-2.4
B. # w/refusal w/% of Total	1	8.3	0	0.0	+8.3	0	0.0	+8.3
C. # w/contra/ADR w/% of Total	1	8.3	0	0.0	+8.3	1	14.3	-6.0

\*\*\* IHS 2007 Clinical Performance Report \*\*\*  
 DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

Appropriate Medication Therapy in High Risk Patients (con't)

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
# w/180 day statin Rx/refusal/Contra/ ADR	13	54.2	11	57.9	-3.7	7	41.2	+13.0
A. # w/180 day statin Rx w/% of Total	10	76.9	10	90.9	-14.0	7	100.0	-23.1
B. # w/refusal w/ % of Total	1	7.7	0	0.0	+7.7	0	0.0	+7.7
C. # w/contra/ADR w/ % of Total	2	15.4	1	9.1	+6.3	0	0.0	+15.4
# w/180 day Rx/refusal/ contra/ADR of ALL meds	8	33.3	4	21.1	+12.3	3	17.6	+15.7

\*\*\* IHS 2007 Clinical Performance Report \*\*\*  
 DEMO INDIAN HOSPITAL  
 Report Period: Jan 01, 2006 to Dec 31, 2006  
 Previous Year Period: Jan 01, 2005 to Dec 31, 2005  
 Baseline Period: Jan 01, 2000 to Dec 31, 2000

Appropriate Medication Therapy in High Risk Patients (con't)

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
B. Active IHD patients ages 22 and older who are active diabetic	29		25			19		
# w/180 day beta-blocker Rx/refusal/Contra/ADR	19	65.5	18	72.0	-6.5	7	36.8	+28.7
A. # w/180 day beta-blocker Rx w/% of Total	11	57.9	11	61.1	-3.2	5	71.4	-13.5
B. # w/refusal w/% of Total	0	0.0	0	0.0	+0.0	0	0.0	+0.0
C. # w/contra/ADR w/% of Total	8	42.1	7	38.9	+3.2	2	28.6	+13.5
# w/180 day ASA Rx/refusal/Contra/ADR	19	65.5	13	52.0	+13.5	16	84.2	-18.7
A. # w/180 day ASA Rx w/% of Total	18	94.7	12	92.3	+2.4	13	81.3	+13.5
B. # w/refusal w/% of Total	0	0.0	0	0.0	+0.0	0	0.0	+0.0
C. # w/contra/ADR w/% of Total	1	5.3	1	7.7	-2.4	3	18.8	-13.5
# w/180 day ACEI/ARB Rx/refusal/Contra/ADR	22	75.9	15	60.0	+15.9	13	68.4	+7.4
A. # w/180 day ACEI/ARB Rx w/% of Total	21	95.5	12	80.0	+15.5	13	100.0	-4.5
B. # w/refusal w/% of Total	0	0.0	0	0.0	+0.0	0	0.0	+0.0
C. # w/contra/ADR w/% of Total	1	4.5	3	20.0	-15.5	0	0.0	+4.5

\*\*\* IHS 2007 Clinical Performance Report \*\*\*  
 DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

Appropriate Medication Therapy in High Risk Patients (con't)

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
# w/180 day statin Rx/refusal/Contra/ADR	20	69.0	12	48.0	+21.0	9	47.4	+21.6
A. # w/180 day statin Rx w/% of Total	18	90.0	11	91.7	-1.7	8	88.9	+1.1
B. # w/refusal w/% of Total	1	5.0	0	0.0	+5.0	0	0.0	+5.0
C. # w/contra/ADR w/ % of Total	1	5.0	1	8.3	-3.3	1	11.1	-6.1
# w/180 day Rx/refusal/ contra/ADR of ALL meds	12	41.4	8	32.0	+9.4	3	15.8	+25.6

## \*\*\* IHS 2007 Clinical Performance Report \*\*\*

DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

## Cholesterol Management for Patients with Cardiovascular Conditions

## Denominator(s):

Active Clinical patients ages 18 to 75 who, during the first 10 months of the year prior to the beginning of the Report period, were diagnosed with acute myocardial infarction (AMI), coronary artery bypass graft (CABG), percutaneous transluminal coronary angioplasty (PTCA), or ischemic vascular disease (IVD). Broken down by gender.

User Population patients ages 18 to 75 who, during the first 10 months of the year prior to the beginning of the Report period, were diagnosed with acute myocardial infarction (AMI), coronary artery bypass graft (CABG), percutaneous transluminal coronary angioplasty (PTCA), or ischemic vascular disease (IVD). Broken down by gender.

## Numerator(s):

Patients with LDL completed during the Report Period, regardless of result.

A. Patients with LDL <=100, completed during the report period.

B. Patients with LDL 101-130, completed during the report period.

C. Patients with LDL >130, completed during the report period.

Age of the patient is calculated at the beginning of the Report period.

AMI defined as POV 410.\*0 or 410.\*1.

PTCA defined as 1) V Procedure 36.01, 36.02, 36.05, 36.09 or 2) CPT 33140, 92980-92982, 92984, 92995, 92996.

CABG defined as: 1) V Procedure 36.1\*, 36.2 or 2) CPT 33510-33514, 33516-33519, 33521-33523, 33533-33536, 35600, 33572. If diagnosis occurred at an inpatient visit, discharge date will be used instead of visit date.

IVD defined as any of the following: 1) Coronary Artery Disease: POV 414.0\*, 429.2; 2) Stable Angina: POV 411.\*, 413.\*; 3) Lower Extremity Arterial Disease/Peripheral Artery Disease: POV 443.9, 440.20-440.24, 440.29; 4) Ischemia: 435.\*; 5) Stroke: 433.\*, 434.\*, 437.0, 437.1, 438.0-438.42, 438.5\*, 438.6-438.9; 6) Artheroembolism: POV 444.\*, 445.\*; 7) Abdominal Aortic Aneurysm: 441.\*; 8) Renal Artery Atherosclerosis: 440.1.

For each of the numerators, finds the most recent LDL test from the Report period end date. LDL defined as: CPT 83721; LOINC taxonomy; site-populated taxonomy DM AUDIT LDL CHOLESTEROL TAX.

Increase the proportion of patients with cardiovascular conditions who have an LDL test.

\*\*\* IHS 2007 Clinical Performance Report \*\*\*  
 DEMO INDIAN HOSPITAL  
 Report Period: Jan 01, 2006 to Dec 31, 2006  
 Previous Year Period: Jan 01, 2005 to Dec 31, 2005  
 Baseline Period: Jan 01, 2000 to Dec 31, 2000

---

Cholesterol Management for Patients with Cardiovascular Conditions (con't)

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
Active Clinical pts 18-75 with dx of AMI, CABG, PTCA, or IVD	34		37			27		
# w/LDL done	24	70.6	23	62.2	+8.4	11	40.7	+29.8
A. # w/LDL <=100 w/% of Total Screened	12	50.0	12	52.2	-2.2	5	45.5	+4.5
B. # w/LDL 101-130 w/% of Total Screened	6	25.0	4	17.4	+7.6	2	18.2	+6.8
C. # w/LDL >130 w/% of Total Screened	4	16.7	5	21.7	-5.1	4	36.4	-19.7
Male Active Clinical pts 18-75 with DX AMI, CABG PTCA, or IVD	21		24			11		
# w/LDL done	12	57.1	13	54.2	+3.0	5	45.5	+11.7
A. # w/LDL <=100 w/% of Total Screened	4	33.3	5	38.5	-5.1	2	40.0	-6.7
B. # w/LDL 101-130 w/% of Total Screened	3	25.0	3	23.1	+1.9	1	20.0	+5.0
C. # w/LDL >130 w/% of Total Screened	3	25.0	3	23.1	+1.9	2	40.0	-15.0

\*\*\* IHS 2007 Clinical Performance Report \*\*\*  
 DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006  
 Previous Year Period: Jan 01, 2005 to Dec 31, 2005  
 Baseline Period: Jan 01, 2000 to Dec 31, 2000

Cholesterol Management for Patients with Cardiovascular Conditions (con't)

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
Female Active Clinical pts								
18-75 with DX AMI, CABG PTCA, or IVD	13		13			16		
# w/LDL done	12	92.3	10	76.9	+15.4	6	37.5	+54.8
A. # w/LDL <=100 w/% of Total Screened	8	66.7	7	70.0	-3.3	3	50.0	+16.7
B. # w/LDL 101-130 w/% of Total Screened	3	25.0	1	10.0	+15.0	1	16.7	+8.3
C. # w/LDL >130 w/% of Total Screened	1	8.3	2	20.0	-11.7	2	33.3	-25.0
User Pop pts 18-75 with dx of AMI, CABG, PTCA, or IVD								
	39		37			27		
# w/LDL done	24	61.5	23	62.2	-0.6	11	40.7	+20.8
A. # w/LDL <=100 w/% of Total Screened	12	50.0	12	52.2	-2.2	5	45.5	+4.5
B. # w/LDL 101-130 w/% of Total Screened	6	25.0	4	17.4	+7.6	2	18.2	+6.8
C. # w/LDL >130 w/% of Total Screened	4	16.7	5	21.7	-5.1	4	36.4	-19.7

\*\*\* IHS 2007 Clinical Performance Report \*\*\*  
 DEMO INDIAN HOSPITAL  
 Report Period: Jan 01, 2006 to Dec 31, 2006  
 Previous Year Period: Jan 01, 2005 to Dec 31, 2005  
 Baseline Period: Jan 01, 2000 to Dec 31, 2000

Cholesterol Management for Patients with Cardiovascular Conditions (con't)

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
Male User Pop pts								
18-75 with DX AMI, CABG PTCA, or IVD	24		24			11		
# w/LDL done	12	50.0	13	54.2	-4.2	5	45.5	+4.5
A. # w/LDL <=100 w/% of Total								
Screened	4	33.3	5	38.5	-5.1	2	40.0	-6.7
B. # w/LDL 101-130 w/% of Total								
Screened	3	25.0	3	23.1	+1.9	1	20.0	+5.0
C. # w/LDL >130 w/% of Total								
Screened	3	25.0	3	23.1	+1.9	2	40.0	-15.0
Female User Pop pts								
18-75 with DX AMI, CABG PTCA, or IVD	15		13			16		
# w/LDL done	12	80.0	10	76.9	+3.1	6	37.5	+42.5
A. # w/LDL <=100 w/% of Total								
Screened	8	66.7	7	70.0	-3.3	3	50.0	+16.7
B. # w/LDL 101-130 w/% of Total								
Screened	3	25.0	1	10.0	+15.0	1	16.7	+8.3
C. # w/LDL >130 w/% of Total								
Screened	1	8.3	2	20.0	-11.7	2	33.3	-25.0

\*\*\* IHS 2007 Clinical Performance Report \*\*\*

DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

Prenatal HIV Testing

Denominator(s):

GPRA Denominator: All pregnant female User Population patients with no documented miscarriage or abortion and with no recorded HIV diagnosis ever.

Numerator(s):

Patients who received counseling and/or patient education about HIV in the past 20 months.

GPRA Numerator: Patients who received HIV test during the past 20 months, including refusals in past 20 months.

A: Number of documented refusals in past 20 months.

Pregnancy is defined as at least two visits with POV V22.0-V23.9, 640.\*-648.\*, 651.\*-676.\* during the past 20 months, with one diagnosis occurring during the reporting period and with no documented miscarriage or abortion occurring after the second pregnancy POV. The time period is extended to include patients who were pregnant during the Report period but whose initial diagnosis (and HIV test) were documented prior to Report period. Miscarriage definition: (1) POV: 630, 631, 632, 633\*, 634\*, (2) CPT 59812, 59820, 59821, 59830. Abortion definition: (1) POV: 635\*, 636\* 637\*, (2) CPT: 59100, 59120, 59130, 59136, 59150, 59151, 59840, 59841, 59850, 59851, 59852, 59855, 59856, 59857. Pregnant patients with any HIV diagnosis ever are excluded, defined as: POV or Problem List codes 042, 042.0-044.9 (old codes), V08, or 795.71. HIV counseling: V65.44; or patient education codes containing "HIV-" or "-HIV" or patient education codes containing HIV diagnosis 042.0-044.9, V08, 795.71. HIV test: CPTs 86689, 86701-86703, 87390, 87391, 87534-87539; LOINC taxonomy; site-populated taxonomy BGP HIV TEST TAX; or Refusal Lab Test HIV in the past 20 months.

In FY 2007, maintain the FY 2006 rate of 65% for pregnant female patients who are screened for HIV.

IHS Performance: FY 2006 - 65.0%, FY 2005 - 54.0%, IHS 2010 Goal: 95%

REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
---------------	---	----------------	---	--------------------	-------------	---	-----------------

\*\*\* IHS 2007 Clinical Performance Report \*\*\*  
 DEMO INDIAN HOSPITAL  
 Report Period: Jan 01, 2006 to Dec 31, 2006  
 Previous Year Period: Jan 01, 2005 to Dec 31, 2005  
 Baseline Period: Jan 01, 2000 to Dec 31, 2000

---

Prenatal HIV Testing (con't)

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
Pregnant Female User Pop Pts w/ no HIV (GPRA)	32		38			34		
# w/HIV education	0	0.0	0	0.0	+0.0	0	0.0	+0.0
# w/HIV test (GPRA)	19	59.4	7	18.4	+41.0	0	0.0	+59.4
A. # refusals w/ % of total tests	0	0.0	0	0.0	+0.0	0	0.0	+0.0

\*\*\* IHS 2007 Clinical Performance Report \*\*\*  
 DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006  
 Previous Year Period: Jan 01, 2005 to Dec 31, 2005  
 Baseline Period: Jan 01, 2000 to Dec 31, 2000

HIV Quality of Care

Denominator(s):

All User Population patients ages 13 and older with at least 2 direct care visits (i.e. not Contract/CHS) with HIV diagnosis during the Report Period, including 1 HIV diagnosis in last 6 months.

Numerator(s):

Patients who received CD4 test only (without HIV viral load) during the Report Period.  
 Patients who received HIV viral load only (without CD4) during the Report Period.  
 Patients who received both CD4 and HIV viral load during the Report Period.  
 Total Numerators 1, 2 and 3.

Age is calculated at beginning of the Report Period. HIV diagnosis defined as: POV or Problem List 042, 042.0-044.9 (old codes), V08, or 795.71. Lab test CD4 count defined as: CPT 86359, 86360, 86361, LOINC taxonomy and site-populated taxonomy BGP GPRA CD4 Tests. HIV viral load, as measured by PCR or a comparable test: CPT 87536, 87539; LOINC taxonomy; and site-populated taxonomy BGP GPRA HIV Viral Load Tests.

Increase the proportion of HIV-infected adolescents and adults who received testing consistent with current Public Health Service treatment guidelines.

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
User Pop Pts >13 w/ HIV Dx	0		1			2		
# w/CD4 only	0	0.0	0	0.0	+0.0	0	0.0	+0.0
# w/viral load only	0	0.0	0	0.0	+0.0	0	0.0	+0.0
# w/both	0	0.0	1	100.0	-100.0	2	100.0	-100.0
TOTAL # w/ any tests	0	0.0	1	100.0	-100.0	2	100.0	-100.0

\*\*\* IHS 2007 Clinical Performance Report \*\*\*  
 DEMO INDIAN HOSPITAL  
 Report Period: Jan 01, 2006 to Dec 31, 2006  
 Previous Year Period: Jan 01, 2005 to Dec 31, 2005  
 Baseline Period: Jan 01, 2000 to Dec 31, 2000

Chlamydia Testing

Denominator(s):

- Female Active Clinical patients ages 16 through 25.
- A. Female Active Clinical 16-20.
- B. Female Active Clinical 21-25.
- Female User Population patients ages 16 through 25.
- A. Female User Population 16-20.
- B. Female User Population 21-25.

Numerator(s):

Patients tested for Chlamydia during the Report Period.

Age is calculated at beginning of the Report Period. Chlamydia test defined as: V73.88, V73.98; CPT 86631, 86632, 87110, 87270, 87320, 87490-92, 87810; site-populated taxonomy BGP GPRA CHLAMYDIA TESTS; LOINC taxonomy

Increase the proportion of female patients ages 16 through 25 who have annual Chlamydia screening.

HP 2010 Goal: 62%

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
Female Active Clinical 16-25	139		134			128		
# w/Chlamydia Screen	49	35.3	49	36.6	-1.3	43	33.6	+1.7
A. Female Active Clinical 16-20	56		52			57		
# w/Chlamydia Screen	21	37.5	16	30.8	+6.7	23	40.4	-2.9

\*\*\* IHS 2007 Clinical Performance Report \*\*\*  
 DEMO INDIAN HOSPITAL  
 Report Period: Jan 01, 2006 to Dec 31, 2006  
 Previous Year Period: Jan 01, 2005 to Dec 31, 2005  
 Baseline Period: Jan 01, 2000 to Dec 31, 2000

---

Chlamydia Testing (con't)

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
B. Female Active Clinical								
21-25	83		82			71		
# w/Chlamydia Screen	28	33.7	33	40.2	-6.5	20	28.2	+5.6
Female User Population								
16-25	262		247			237		
# w/Chlamydia Screen	65	24.8	58	23.5	+1.3	51	21.5	+3.3
A. Female User Population								
16-20	128		115			118		
# w/Chlamydia Screen	29	22.7	19	16.5	+6.1	25	21.2	+1.5
B. Female User Population								
21-25	134		132			119		
# w/Chlamydia Screen	36	26.9	39	29.5	-2.7	26	21.8	+5.0

\*\*\* IHS 2007 Clinical Performance Report \*\*\*

DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

---

#### Osteoporosis Management

##### Denominator(s):

Female Active Clinical patients ages 67 and older who had a new fracture occurring six months (180 days) prior to the Report period through the first six months of the Report period with no osteoporosis screening or treatment in year prior to the fracture.

Female User Population patients ages 67 and older who had a new fracture occurring six months (180 days) prior to the Report period through the first six months of the Report period with no osteoporosis screening or treatment in year prior to the fracture.

##### Numerator(s):

Patients treated or tested for osteoporosis after the fracture.

Age is calculated at the beginning of the Report period. Fractures do not include fractures of finger, toe, face, or skull. CRS will search for the first (i.e. earliest) fracture during the period six months (180) days prior to the beginning of the Report period and the first six months of the Report period. If multiple fractures are present, only the first fracture will be used.

The Index Episode Start Date is the date the fracture was diagnosed. If the fracture was diagnosed at an outpatient visit (Service Category A, S, or O), the Index Episode Start Date is equal to the Visit Date. If diagnosed at an inpatient visit (Service Category H), the Index Episode Start Date is equal to the Discharge Date.

##### Denominator Exclusions

1. Patients receiving osteoporosis screening or treatment in the year (365 days) prior to the Index Episode Start Date. Osteoporosis screening or treatment is defined as a Bone Mineral Density (BMD) test (see below for codes) or receiving any osteoporosis therapy medication (see below for codes).
2. Patients with a fracture diagnosed at an outpatient visit who ALSO had a fracture within 60 days prior to the Index Episode Start Date.
3. Patients with a fracture diagnosed at an inpatient visit who ALSO had a fracture within 60 days prior to the ADMISSION DATE.

Osteoporosis treatment and testing is defined as: 1) For fractures diagnosed at an outpatient visit: A) A non-discontinued prescription within six months (180 days) of the Index Episode Start Date (i.e. visit date) or B) a BMD test within six months of the Index Episode Start Date. 2) For fractures diagnosed at an inpatient visit, a BMD test

\*\*\* IHS 2007 Clinical Performance Report \*\*\*  
DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

-----  
performed during the inpatient stay.

Fracture codes: 1) CPTs: 21800, 21805, 21810, 21820, 21825, 22305, 22310, 22315, 22318, 22319, 22325, 22326, 22327, 22328, 23500, 23505, 23515, 23570, 23575, 23585, 23600, 23605, 23615, 23616, 23620, 23625, 23630, 23665, 23670, 23675, 23680, 24500, 24505, 24515, 24516, 24530, 24535, 24538, 24545, 24546, 24560, 24565, 24566, 24575, 24576, 24577, 24579, 24582, 24586, 24587, 24620, 24635, 24650, 24655, 24665, 24666, 24670, 24675, 24685, 25500, 25505, 25515, 25520, 25525, 25526, 25530, 25535, 25545, 25560, 25565, 25574, 25575, 25600, 25605, 25611, 25620, 25622, 25624, 25628, 25630, 25635, 25645, 25650, 25651, 25652, 25680, 25685, 27193, 27194, 27200, 27202, 27215, 27216, 27217, 27218, 27220, 27222, 27226, 27227, 27228, 27230, 27232, 27235, 27236, 27238, 27240, 27244, 27245, 27246, 27248, 27254, 27500, 27501, 27502, 27503, 27506, 27507, 27508, 27509, 27510, 27511, 27513, 27514, 27520, 27524, 27530, 27532, 27535, 27536, 27538, 27540, 27750, 27752, 27756, 27758, 27759, 27760, 27762, 27766, 27780, 27781, 27784, 27786, 27788, 27792, 27808, 27810, 27814, 27816, 27818, 27822, 27823, 27824, 27825, 27826, 27827, 27828; 2) POVs: 733.1\*, 805\*-806\*, 807.0\*-807.4, 808\*-815\*, 818\*-825\*, 827\*, 828\*; 3) V Procedure: 79.00-79.03, 79.05-79.07, 79.09, 79.10-79.13, 79.15-79.17, 79.19, 79.20-79.23, 79.25-79.27, 79.29, 79.30-79.33, 79.35-79.37, 79.39, 79.60-79.63, 79.65-79.67, 79.69.

BMD Test codes: 1) CPT: 76070, 76071, 76075, 76076, 76078, 76977, 78350, 78351; 2) V Procedure 88.98; 3) POV V82.81.

Treatment medication codes defined with medication taxonomy BGP HEDIS OSTEOPOROSIS MEDS. (Medications are Alendronate, Alendronate-Cholecalciferol (Fosomax Plus D), Ibandronate (Boniva), Risedronate, Calcitonin, Raloxifene, Estrogen, Injectable Estrogens, Teriparatide, Fluoride, Vitamin D, and Calcium Products.)

Increase the rate of testing and/or treatment for osteoporosis after fracture.

REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
---------------	---	----------------	---	--------------------	-------------	---	-----------------

\*\*\* IHS 2007 Clinical Performance Report \*\*\*  
 DEMO INDIAN HOSPITAL  
 Report Period: Jan 01, 2006 to Dec 31, 2006  
 Previous Year Period: Jan 01, 2005 to Dec 31, 2005  
 Baseline Period: Jan 01, 2000 to Dec 31, 2000

---

Osteoporosis Management (con't)

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
Female Active Clinical Pts								
67 and older								
w/fracture	0		0			0		
# w/osteoporosis treatment or testing	0	0.0	0	0.0	+0.0	0	0.0	+0.0
Female User Pop Pts								
67 and older								
w/fracture	0		0			0		
# w/osteoporosis treatment or testing	0	0.0	0	0.0	+0.0	0	0.0	+0.0

\*\*\* IHS 2007 Clinical Performance Report \*\*\*  
 DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006  
 Previous Year Period: Jan 01, 2005 to Dec 31, 2005  
 Baseline Period: Jan 01, 2000 to Dec 31, 2000

Osteoporosis Screening in Women

Denominator(s):

Female Active Clinical patients ages 65 and older without a documented history of osteoporosis.

Female User Population patients ages 65 and older without a documented history of osteoporosis.

Numerator(s):

Patients who had osteoporosis screening documented in the past 2 years, including documented refusals in past year.

A: Patients with documented refusal in past year.

Age is calculated at the beginning of the Report period.

Definition for patients without osteoporosis: No osteoporosis diagnosis ever (POV 733.\*).

Osteoporosis screening defined as any one of the following in the past two years or documented refusal in the past year: 1) Central DEXA: CPT 76075; 2) Peripheral DEXA: CPT 76076; 3) Central CT: CPT 76070; 4) Peripheral CT: CPT 76071; 5) US Bone Density: CPT 76977; or 6) Quantitative CT: V Procedure 88.98; or 7) POV V82.81 Special screening for other conditions, Osteoporosis.

Increase the rate of screening women ages 65 and older for osteoporosis.

IHS 2010 Goal: 20%

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
Female Active Clinical Pts =>65	30		27			29		
# w/osteoporosis screening in past 2 years	0	0.0	0	0.0	+0.0	0	0.0	+0.0
A. # Refusals w/ % of Total Screening	0	0.0	0	0.0	+0.0	0	0.0	+0.0

\*\*\* IHS 2007 Clinical Performance Report \*\*\*  
 DEMO INDIAN HOSPITAL  
 Report Period: Jan 01, 2006 to Dec 31, 2006  
 Previous Year Period: Jan 01, 2005 to Dec 31, 2005  
 Baseline Period: Jan 01, 2000 to Dec 31, 2000

---

Osteoporosis Screening in Women (con't)

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
Female User Pop Pts =>65	74		71			79		
# w/osteoporosis screening in past 2 years	0	0.0	0	0.0	+0.0	0	0.0	+0.0
A. # Refusals w/ % of Total Screening	0	0.0	0	0.0	+0.0	0	0.0	+0.0

\*\*\* IHS 2007 Clinical Performance Report \*\*\*

DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

Rheumatoid Arthritis Medication Monitoring

Denominator(s):

Active Clinical patients ages 16 and older diagnosed with rheumatoid arthritis (RA) prior to the Report Period and with at least two RA-related visits any time during the Report Period who were prescribed maintenance therapy medication chronically during the Report Period.

Numerator(s):

Patients who received appropriate monitoring of chronic medication during the Report Period.

Age is calculated at the beginning of the Report period.

Rheumatoid arthritis (RA) defined as diagnosis (POV or Problem List) 714.\* prior to the Report period, and at least two RA POVs during the Report period.

For all maintenance therapy medications EXCEPT intramuscular gold, each medication must be prescribed within the past 465 days of the end of the Report Period (i.e. the Medication Period) and the sum of the days supply =>348. This means the patient must have been on the medication at least 75% of the Medication Period. Two examples are shown below to illustrate this logic.

Example of Patient Not on Chronic Medication (not included in Denominator):

Report Period: Jan 1 Dec 31, 2005
Medication Period: 465 days from end of Report Period (Dec 31, 2005): Sep 22, 2004 - Dec 31, 2005
Medication Prescribed:
Diclofenac: 1st Rx: Oct 15, 2004, Days Supply=90; 2nd Rx: Jan 1, 2005: Days Supply=90; 3rd Rx: Mar 15, 2005: Days Supply=90.
Total Days Supply=270. 270 is not >348. Patient is not considered on chronic medication and is not included in the denominator.

Example of Patient on Chronic Medication (included in Denominator):

Report Period: Jan 1 Dec 31, 2005
Medication Period: 465 days from end of Report Period (Dec 31, 2005): Sep 22, 2004 - Dec 31, 2005
Medications Prescribed:
Sulfasalazine: 1st Rx: Sep 30, 2004, Days Supply=90; 2nd Rx: Dec 30, 2004, Days Supply=90; 3rd Rx: Mar 15, 2005: Days Supply=180.
Total Days Supply=360. 360 is >348. Patient is considered on

\*\*\* IHS 2007 Clinical Performance Report \*\*\*  
DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006  
Previous Year Period: Jan 01, 2005 to Dec 31, 2005  
Baseline Period: Jan 01, 2000 to Dec 31, 2000

-----  
chronic medication and is included in denominator.

The days supply requirement may be met with a single prescription or from a combination of prescriptions for the same medication that were filled during the Medication Period. However, for all medications, there must be at least one prescription filled during the Report period.

NOTE: If the medication was started and then discontinued, CRS will recalculate the # Days Prescribed by subtracting the prescription date (i.e. visit date) from the V Medication Discontinued Date. Example: Rx Date=11/15/2003, Discontinued Date=11/19/2003, Recalculated # Days Prescribed=4.

For intramuscular gold, the patient must have 12 or more prescriptions during the Report Period.

Appropriate monitoring of rheumatoid arthritis medications is defined with lab tests and varies by medication, as shown in the table below. If patient is prescribed two or more types of medications, patient must meet criteria for all of the medications.

Maintenance Therapy Medications defined as:

1) Medications shown in table below. EXCEPT for Gold, Intramuscular, all medications requiring more than one of each type of test during the Report Period, there must be a minimum of 10 days between tests. For example, if a Sulfasalazine test was performed on March 1, March 7, and March 21, 2005, the March 7 test will not be counted since it was performed only 6 days after the March 1 test.

MEDICATION	REQUIRED MONITORING TEST(S)
Gold, Intramuscular	CBC and Urine Protein on same day as each injection during Report Period.
Azathioprine or Sulfasalazine	4 CBCs during the Report Period.
Leflunomide or Methotrexate	6 each of CBC, Serum Creatinine, and Liver Function Tests during the Report Period.
Cyclosporin	CBC, Liver Function Tests, and Potassium within past 180 days from Report Period end date.  12 Serum Creatinine tests during the Report Period.

## \*\*\* IHS 2007 Clinical Performance Report \*\*\*

## DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

Gold, Oral or Penicillamine	4 each of CBC and Urine Protein during the Report Period.
Mycophenolate	CBC within past 180 days from Report Period end date.

The medications in the above table are defined with medication taxonomies: BGP RA IM GOLD MEDS, BGP RA AZATHIOPRINE MEDS, BGP RA LEFLUNOMIDE MEDS, BGP RA METHOTREXATE MEDS, BGP RA CYCLOSPORINE MEDS, BGP RA ORAL GOLD MEDS, BGP RA MYCOPHENOLATE MEDS, BGP RA PENICILLAMINE MEDS, BGP RA SULFASALAZINE MEDS.

2) NSAID medications: Diclofenac, Etodolac, Indomethacin, Ketorolac, Sulindac, Tolmetin, Meclofenamate, Mefanamic Acid, Nabumetone, Meloxicam, Piroxicam, Fenoprofen, Flurbiprofen, Ibuprofen, Ketoprofen, Naproxen, Oxaprozin, Aspirin, Choline Magnesium Trisalicylate, Diflunisil, Magnesium Salicylate, Celocoxib. All of these medications EXCEPT aspirin are defined with medication taxonomy BGP RA OA NSAID MEDS. Aspirin defined with medication taxonomy DM AUDIT ASPIRIN DRUGS. All of the NSAID medications must have Creatinine, Liver Function Tests, and CBC during the Report Period.

3) Glucocorticoid medications: Dexamethasone, Methylprednisolone, Prednisone, Hydrocortisone, Betamethasone, Prednisonolone, Triamcinolone. These medications defined with medication taxonomy BGP RA GLUCOCORTICOIDS MEDS. Glucocorticoids must have a glucose test, which must be performed during the Report Period.

## Example of Patient Not Included in Numerator:

## Medications Prescribed and Required Monitoring:

Gold, Oral, last Rx Jun 15, 2005. Requires CBC and Urine Protein within past 90 days of Report Period end date.

CBC performed on Dec 1, 2005, which is within past 90 days of Report Period end date of Dec 31, 2005. No Urine Protein performed during that period. Patient is not in numerator.

## Example of Patient Included in Numerator:

## Medications Prescribed and Required Monitoring:

Diclofenac, last Rx Sep 1, 2005. Requires LFT and CBC during Report Period.

Mycophenolate, last Rx Mar 10, 2005. Requires CBC within past 180 days from Report Period end date.

LFT and CBC performed during Report Period. CBC performed Nov 1, 2005, which is within past 180 days of Report Period end date of Dec 31, 2005. Patient is in numerator.

\*\*\* IHS 2007 Clinical Performance Report \*\*\*  
 DEMO INDIAN HOSPITAL  
 Report Period: Jan 01, 2006 to Dec 31, 2006  
 Previous Year Period: Jan 01, 2005 to Dec 31, 2005  
 Baseline Period: Jan 01, 2000 to Dec 31, 2000

Monitoring Test Definitions:

CBC (Complete Blood Count): CPT 85025, 85027; site-populated taxonomy BGP CBC TESTS; or LOINC taxonomy.

Urine Protein: Site-populated taxonomy DM AUDIT URINE PROTEIN TAX or LOINC taxonomy.

Serum Creatinine: CPT 82540, 82565-75; site-populated taxonomy DM AUDIT CREATININE TAX; or LOINC taxonomy.

Liver Function Tests: Any one of the following: (1) ALT: CPT 84460, site-populated taxonomy DM AUDIT ALT TAX, or LOINC taxonomy; (2) AST: CPT 84450, site-populated taxonomy DM AUDIT AST TAX, or LOINC taxonomy; OR (3) Liver Function: CPT 80076, site-populated taxonomy BGP LIVER FUNCTION TESTS, or LOINC taxonomy.

Glucose: CPT 82947, 82948, 82950, 82951, 82952, 82962; site-populated taxonomy DM AUDIT GLUCOSE TESTS TAX; or LOINC taxonomy.

Potassium: CPT 84132; site-populated taxonomy BGP POTASSIUM TESTS; or LOINC taxonomy.

Increase the rate of patients with rheumatoid arthritis (RA) who are on RA medication and are being monitored.

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
Active Clinical Pts =>16 w/RA DX and maintenance therapy RX	4		0			0		
# w/RA chronic med monitoring	2	50.0	0	0.0	+50.0	0	0.0	+50.0

\*\*\* IHS 2007 Clinical Performance Report \*\*\*

DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

Osteoarthritis Medication Monitoring

Denominator(s):

Active Clinical patients ages 40 and older diagnosed with osteoarthritis (OA) prior to the Report Period and with at least two OA-related visits any time during the Report Period and prescribed maintenance therapy medication chronically during the Report Period.

Numerator(s):

Patients who received appropriate monitoring of chronic medication during the Report Period.

Age is calculated at the beginning of the Report period.

Osteoarthritis (OA) defined as diagnosis (POV or Problem List) 715.\* prior to the Report period, and at least two OA POVs during the Report period.

For all maintenance therapy medications, each medication must be prescribed within the past 465 days of the end of the Report Period (i.e. the Medication Period) and the sum of the days supply =>348. This means the patient must have been on the medication at least 75% of the Medication Period. Two examples are shown below to illustrate this logic.

Example of Patient Not on Chronic Medication (not included in Denominator):

Report Period: Jan 1 Dec 31, 2005

Medication Period: 465 days from end of Report Period (Dec 31, 2005): Sep 22, 2004 - Dec 31, 2005

Medication Prescribed:

Diclofenac: 1st Rx: Oct 15, 2004, Days Supply=90; 2nd Rx: Jan 1, 2005: Days Supply=90; 3rd Rx: Mar 15, 2005: Days Supply=90.

Total Days Supply=270. 270 is not >348. Patient is not considered on chronic medication and is not included in the denominator

Example of Patient on Chronic Medication (included in Denominator):

Report Period: Jan 1 Dec 31, 2005

Medication Period: 465 days from end of Report Period (Dec 31, 2005): Sep 22, 2004 - Dec 31, 2005

Medication Prescribed:

Etodolac: 1st Rx: Sep 30, 2004, Days Supply=90; 2nd Rx: Dec 30, 2004, Days Supply=90; 3rd Rx: Mar 15, 2005: Days Supply=180.

Total Days Supply=360. 360 is >348. Patient is considered on chronic medication and is included in denominator.

## \*\*\* IHS 2007 Clinical Performance Report \*\*\*

DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

-----

The days supply requirement may be met with a single prescription or from a combination of prescriptions for the same medication that were filled during the Medication Period. However, for all medications, there must be at least one prescription filled during the Report period.

NOTE: If the medication was started and then discontinued, CRS will recalculate the # Days Prescribed by subtracting the prescription date (i.e. visit date) from the V Medication Discontinued Date. Example: Rx Date=11/15/2003, Discontinued Date=11/19/2003, Recalculated # Days Prescribed=4.

Appropriate monitoring of osteoarthritis medications is defined with lab tests and varies by medication, as shown below.

Maintenance Therapy Medications defined with the following NSAID medications: Diclofenac, Etodolac, Indomethacin, Ketorolac, Sulindac, Tolmetin, Meclofenamate, Mefanamic Acid, Nabumetone, Meloxicam, Piroxicam, Fenoprofen, Flurbiprofen, Ibuprofen, Ketoprofen, Naproxen, Oxaprozin, Aspirin, Choline Magnesium Trisalicylate, Diflunisil, Magnesium Salicylate, Celcoxib. All of these medications EXCEPT aspirin are defined with medication taxonomy BGP RA OA NSAID MEDS. Aspirin defined with medication taxonomy DM AUDIT ASPIRIN DRUGS.

All NSAID medications must have Creatinine, Liver Function Tests and CBC during the Report Period.

Example of Patient Not Included in Numerator:

Medication Prescribed and Required Monitoring:

Diclofenac, last Rx Jun 15, 2005. Requires Creatinine, LFT, and CBC during Report Period.

Only the LFT was performed during Report Period. Patient is not in numerator.

Example of Patient Included in Numerator:

Medication Prescribed and Required Monitoring:

Diclofenac, last Rx Sep 1, 2005. Requires Creatinine, LFT, and CBC during Report Period.

Creatinine, LFT, and CBC performed during Report Period.

Patient is in the numerator.

Monitoring Test Definitions:

Serum Creatinine definition: CPT 82540, 82565-75; LOINC taxonomy; site-populated taxonomy DM AUDIT CREATININE TAX.

CBC (Complete Blood Count): CPT 85025, 85027; site-populated taxonomy

\*\*\* IHS 2007 Clinical Performance Report \*\*\*  
 DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006  
 Previous Year Period: Jan 01, 2005 to Dec 31, 2005  
 Baseline Period: Jan 01, 2000 to Dec 31, 2000

BGP CBC TESTS; or LOINC taxonomy.

Liver Function Tests: Any one of the following: (1) ALT: CPT 84460, site-populated taxonomy DM AUDIT ALT TAX, or LOINC taxonomy; (2) AST: CPT 84450, site-populated taxonomy DM AUDIT AST TAX, or LOINC taxonomy; OR (3) Liver Function: CPT 80076, site-populated taxonomy BGP LIVER FUNCTION TESTS, or LOINC taxonomy.

Increase the rate of patients with osteoarthritis (OA) who are on OA medication and are being monitored.

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
Active Clinical Pts =>40 w/OA DX and maintenance therapy RX	4		6			4		
# w/OA chronic med monitoring	2	50.0	3	50.0	+0.0	2	50.0	+0.0

\*\*\* IHS 2007 Clinical Performance Report \*\*\*

DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

Asthma

Denominator(s):

Active Clinical patients.

A: Active Clinical users under age 5.

B: Active Clinical users ages 5 to 64.

C: All Active Clinical users ages 65 and older.

Numerator 1 (Patients who have had two asthma-related visits during the Report Period or categorized in ARS as persistent.)

Numerator 1, under age 5

Numerator 1, ages 5-64

Numerator 1, ages 65 and older

Numerator(s):

Patients who have had two asthma-related visits during the Report Period or categorized in ARS as persistent.

A. Patients from Numerator 1 who have been hospitalized at any hospital for asthma during the Report Period.

Age is calculated at beginning of the Report Period. Asthma visits are defined as diagnosis (PV) 493.\*. Persistent asthma is defined in ARS for Active patients as Severity 2, 3 or 4. Hospitalizations defined as service category H with primary POV 493.\*.

Reduce percentage of asthmatic patients who are hospitalized for asthma.

Hospitalizations: HP 2010 Goal Under 5: 25 per 10,000; 5-64: 7.7 per 10,000; 65 and older: 11 per 10,000

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
Total Active Clinical Patients	1,173		1,138			1,099		
# w/asthma	33	2.8	32	2.8	+0.0	25	2.3	+0.5
under 5	9	27.3	13	40.6	-13.4	12	48.0	-20.7
5-64	22	66.7	19	59.4	+7.3	11	44.0	+22.7
65 and older	2	6.1	0	0.0	+6.1	2	8.0	-1.9
A. # w/asthma hospitalization w/ % of total asthma	0	0.0	1	3.1	-3.1	2	8.0	-8.0
under 5	0	0.0	0	0.0	+0.0	1	50.0	-50.0
5-64	0	0.0	1	100.0	-100.0	1	50.0	-50.0
65 and older	0	0.0	0	0.0	+0.0	0	0.0	+0.0

## \*\*\* IHS 2007 Clinical Performance Report \*\*\*

DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

-----  
Asthma Quality of Care

## Denominator(s):

Active Clinical patients ages 5-56 with persistent asthma within the year prior to the beginning of the Report period and during the Report period, without a documented history of emphysema or chronic obstructive pulmonary disease (COPD).

A: Active Clinical patients ages 5-9.

B: Active Clinical patients ages 10-17.

C: Active Clinical patients ages 18-56.

User Population patients ages 5-56 with persistent asthma within the year prior to the beginning of the Report period and during the Report period, without a documented history of emphysema and chronic obstructive pulmonary disease (COPD).

A: User Population patients ages 5-9.

B: User Population patients ages 10-17.

C: User Population patients ages 18-56.

## Numerator(s):

Patients who had at least one dispensed prescription for primary asthma therapy medication during the Report period.

Age of the patient is calculated at the beginning of the Report period. Patients diagnosed with emphysema or COPD at any time on or before the end of the Report period are excluded from the denominator. Emphysema defined as any visit with POV codes: 492.\*, 506.4, 518.1, 518.2. Chronic obstructive pulmonary disease (COPD) defined as any visit with POV codes: 491.20, 491.21, 491.22, 496, 506.\*.

Persistent asthma defined as meeting any of the following five criteria below within the year prior to the beginning of the Report period AND during the Report period:

1. At least one visit to Clinic Code 30 (Emergency Medicine) with primary diagnosis 493\* (asthma),
2. At least one acute inpatient discharge with primary diagnosis 493.\*. Acute inpatient discharge defined as Service Category of H,
3. At least four outpatient visits, defined as Service Categories A, S, or O, with primary or secondary diagnosis of 493.\* AND at least two asthma medication dispensing events (see definition below),
4. At least 4 asthma medication dispensing events (see definition below). If the sole medication was leukotriene modifiers, then MUST also meet criteria in 1-3 above or have at least one visit with POV 493.\* in the same year as the leukotriene modifier (i.e. during the Report period or within the year prior to the beginning of the Report period.), OR
5. Categorized in the Asthma Register System (ARS) at ANY time before the end of the Report period as Active patient with Severity 2, 3 or 4.

\*\*\* IHS 2007 Clinical Performance Report \*\*\*

DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

A dispensing event is one prescription of an amount lasting 30 days or less. For RXs longer than 30 days, divide the days' supply by 30 and round down to convert. For example, a 100-day RX is equal to three dispensing events (100/30 = 3.33, rounded down to 3). Also, two different RXs dispensed on the same day are counted as two different dispensing events. Inhalers should also be counted as one dispensing event.

NOTE: If the medication was started and then discontinued, CRS will recalculate the # Days Prescribed by subtracting the prescription date (i.e. visit date) from the V Medication Discontinued Date. Example: Rx Date=11/15/2003, Discontinued Date=11/19/2003, Recalculated # Days Prescribed=4.

Asthma medication codes for denominator defined with medication taxonomies: BGP HEDIS ASTHMA MEDS, BGP HEDIS ASTHMA LEUK MEDS, BGP HEDIS ASTHMA INHALED MEDS. (Medications are: Inhaled Corticosteroids, Nedocromil, Cromolyn Sodium, Leukotriene Modifiers, Methylxanthines, or Long-acting, inhaled beta-2 agonists.)

To be included in the numerator, patient must have a non-discontinued prescription for primary asthma therapy (see list of medications below) during the Report period.

Primary asthma therapy medication codes for numerator defined with medication taxonomy: BGP HEDIS PRIMARY ASTHMA MEDS (Medications are: Inhaled Corticosteroids, Nedocromil, Cromolyn Sodium, Leukotriene Modifiers or Methylxanthines.)

Increase the rate for patients with persistent asthma who have received primary asthma therapy medications.

REPORT	%	PREV YR	%	CHG from	BASE	%	CHG from
PERIOD		PERIOD		PREV YR	% PERIOD		BASE %

\*\*\* IHS 2007 Clinical Performance Report \*\*\*  
 DEMO INDIAN HOSPITAL  
 Report Period: Jan 01, 2006 to Dec 31, 2006  
 Previous Year Period: Jan 01, 2005 to Dec 31, 2005  
 Baseline Period: Jan 01, 2000 to Dec 31, 2000

Asthma Quality of Care (con't)

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
Active Clinical Pts 5-56 w/persistent asthma	9		6			4		
# w/asthma control medication	9	100.0	5	83.3	+16.7	3	75.0	+25.0
A. Active Clinical ages 5-9	4		2			1		
# w/asthma control medication	4	100.0	1	50.0	+50.0	1	100.0	+0.0
B. Active Clinical ages 10-17	2		2			1		
# w/asthma control medication	2	100.0	2	100.0	+0.0	0	0.0	+100.0
C. Active Clinical ages 18-56	3		2			2		
# w/asthma control medication	3	100.0	2	100.0	+0.0	2	100.0	+0.0
User Pop Pts 5-56 w/persistent asthma	9		6			4		
# w/asthma control medication	9	100.0	5	83.3	+16.7	3	75.0	+25.0

\*\*\* IHS 2007 Clinical Performance Report \*\*\*  
 DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006  
 Previous Year Period: Jan 01, 2005 to Dec 31, 2005  
 Baseline Period: Jan 01, 2000 to Dec 31, 2000

Asthma Quality of Care (con't)

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
A. User Pop ages 5-9	4		2			1		
# w/asthma control medication	4	100.0	1	50.0	+50.0	1	100.0	+0.0
B. User Pop ages 10-17	2		2			1		
# w/asthma control medication	2	100.0	2	100.0	+0.0	0	0.0	+100.0
C. User Pop ages 18-56	3		2			2		
# w/asthma control medication	3	100.0	2	100.0	+0.0	2	100.0	+0.0

\*\*\* IHS 2007 Clinical Performance Report \*\*\*  
 DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006  
 Previous Year Period: Jan 01, 2005 to Dec 31, 2005  
 Baseline Period: Jan 01, 2000 to Dec 31, 2000

Asthma and Inhaled Steroid Use

Denominator(s):

Active Clinical patients ages 1 or older who have had two asthma-related visits during the Report Period or categorized in ARS as persistent.

Broken down into age groups: 1-4, 5-19, 20-44, 45-64, and 65+

User Population patients ages 1 or older who have had two asthma-related visits during the Report Period or categorized in ARS as persistent.

Broken down into age groups: 1-4, 5-19, 20-44, 45-64, and 65+

Numerator(s):

Patients prescribed an inhaled corticosteroid during the Report Period.

Age of the patient is calculated at the beginning of the Report period. Asthma visits are defined as diagnosis (POV) 493.\*. Persistent asthma is defined in ARS for Active patients as Severity 2, 3 or 4. To be included in the numerator, patient must have a non-discontinued prescription for an inhaled corticosteroid during the Report period. Inhaled corticosteroid medications defined with medication taxonomy BGP ASTHMA INHALED STEROIDS. (Medications are: Beclovent, Qvar, Vancenase, Vanceril, Vanceril DS, Bitolerol (Tornalate), Pulmicort, Pulmicort Respules, Pulmicort Turbohaler, Salmeterol/fluticasone (Advair), Triamcinolone (Azmacort), fluticasone (Flovent).)

Increase the rate of patients with asthma who were prescribed an inhaled corticosteroid during the Report Period.

IHS 2010 Goal: 60.0%

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
Active Clinical Ages 1 and older with asthma	33		28			20		
# w/ Inhaled Steroid Rx	15	45.5	7	25.0	+20.5	2	10.0	+35.5

## \*\*\* IHS 2007 Clinical Performance Report \*\*\*

DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

## Asthma and Inhaled Steroid Use (con't)

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
Active Clinical ages 1-4 with asthma	9		9			7		
# w/ Inhaled Steroid Rx	2	22.2	1	11.1	+11.1	1	14.3	+7.9
Active Clinical ages 5-19 with asthma	13		9			7		
# w/Inhaled Steroid Rx	7	53.8	3	33.3	+20.5	0	0.0	+53.8
Active Clinical ages 20-44 with asthma	4		7			4		
# w/ Inhaled Steroid Rx	3	75.0	2	28.6	+46.4	0	0.0	+75.0
Active Clinical ages 45-64 with asthma	5		3			0		
# w/ Inhaled Steroid Rx	3	60.0	1	33.3	+26.7	0	0.0	+60.0
Active Clinical ages 65 and older with asthma	2		0			2		
# w/ Inhaled Steroid Rx	0	0.0	0	0.0	+0.0	1	50.0	-50.0

## \*\*\* IHS 2007 Clinical Performance Report \*\*\*

DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

## Asthma and Inhaled Steroid Use (con't)

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
User Pop Ages 1 and older with asthma	33		29			22		
# w/ Inhaled Steroid Rx	15	45.5	7	24.1	+21.3	2	9.1	+36.4
User pop ages 1-4 with asthma	9		10			7		
# w/ Inhaled Steroid Rx	2	22.2	1	10.0	+12.2	1	14.3	+7.9
User Pop ages 5-19 with asthma	13		9			7		
# w/ Inhaled Steroid Rx	7	53.8	3	33.3	+20.5	0	0.0	+53.8
User Pop ages 20-44 with asthma	4		7			6		
# w/ Inhaled Steroid Rx	3	75.0	2	28.6	+46.4	0	0.0	+75.0
User Pop ages 45-64 with asthma	5		3			0		
# w/ Inhaled Steroid Rx	3	60.0	1	33.3	+26.7	0	0.0	+60.0

\*\*\* IHS 2007 Clinical Performance Report \*\*\*  
 DEMO INDIAN HOSPITAL  
 Report Period: Jan 01, 2006 to Dec 31, 2006  
 Previous Year Period: Jan 01, 2005 to Dec 31, 2005  
 Baseline Period: Jan 01, 2000 to Dec 31, 2000

---

Asthma and Inhaled Steroid Use (con't)

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
User Pop ages 65 and older with asthma	2		0			2		
# w/ Inhaled Steroid Rx	0	0.0	0	0.0	+0.0	1	50.0	-50.0

\*\*\* IHS 2007 Clinical Performance Report \*\*\*  
 DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006  
 Previous Year Period: Jan 01, 2005 to Dec 31, 2005  
 Baseline Period: Jan 01, 2000 to Dec 31, 2000

Chronic Kidney Disease Assessment

Denominator(s):

Active Clinical patients ages 18 and older with serum creatinine test during the Report Period.

User Population patients ages 18 and older with serum creatinine test during the Report Period.

Numerator(s):

Patients with Estimated GFR.

A: Patients with GFR less than (<) 60

Age is calculated at beginning of the Report Period.

Creatinine definition: CPT 82540, 82565-75; LOINC taxonomy; site-populated taxonomy DM AUDIT CREATININE TAX. Estimated GFR definition: site-populated taxonomy BGP GPRA ESTIMATED GFR TAX; LOINC code 33914-3.

Increase the rate of patients who are assessed for chronic kidney disease.

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
Active Clinical Pts								
=> 18 with Serum Creatinine test	269		257			221		
# w/Est GFR	180	66.9	0	0.0	+66.9	0	0.0	+66.9
# w/GFR <60	33	12.3	0	0.0	+12.3	0	0.0	+12.3
User Pop Pts								
=>18 with Serum Creatinine	332		311			261		
# w/ Est GFR	215	64.8	0	0.0	+64.8	0	0.0	+64.8
# w/GFR <60	36	10.8	0	0.0	+10.8	0	0.0	+10.8

## \*\*\* IHS 2007 Clinical Performance Report \*\*\*

DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

-----  
Prediabetes/Metabolic Syndrome

## Denominator(s):

Active Clinical patients ages 18 and older diagnosed with prediabetes/metabolic syndrome without a documented history of diabetes.  
User Population patients ages 18 and older diagnosed with prediabetes/metabolic syndrome without a documented history of diabetes.

## Numerator(s):

Patients with Blood Pressure documented at least twice during the Report Period.

Patients with LDL completed, regardless of result, during the Report Period.

Patients with fasting glucose test, regardless of result, during the Report Period.

Patients with nephropathy assessment, defined as an estimated GFR AND a quantitative urinary protein assessment during the Report period OR with evidence of diagnosis and/or treatment of ESRD at any time before the end of the Report period.

Patients who have been screened for tobacco use during the Report Period.

Patients for whom a BMI could be calculated, including refusals in the past year.

Patients who have received any lifestyle adaptation counseling, including medical nutrition counseling, or nutrition, exercise or other lifestyle education during the Report Period.

Patients screened for depression or diagnosed with a mood disorder at any time during the Report period, including documented refusals in past year.

Patients with all screenings (BP, LDL, fasting glucose, nephropathy assessment, tobacco screening, BMI, lifestyle counseling, and depression screening).

Age is calculated at beginning of the Report Period.

## Prediabetes/Metabolic Syndrome defined as:

1. Diagnosis of prediabetes/metabolic syndrome, defined as: Two visits during the Report Period with POV 277.7, OR

2. Any three or more of the following occurring during the Report Period except as otherwise noted:

A. BMI => 30 OR Waist Circumference >40 inches for men or >35 inches for women,

B. Triglyceride value >=150,

C. HDL value <40 for men or <50 for women,

D. Patient diagnosed with hypertension OR mean Blood Pressure value => 130/85 where systolic is =>130 OR diastolic is =>85,

## \*\*\* IHS 2007 Clinical Performance Report \*\*\*

DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

---

E. Fasting Glucose value =>100 AND <126. NOTE: Waist circumference and fasting glucose values will be checked last.

Definition for patients without diabetes: No diabetes diagnosis ever (POV 250.00-250.93).

## Tests/Other Definitions:

1. BMI: CRS calculates BMI at the time the report is run, using NHANES II. For 18 and under, a height and weight must be taken on the same day any time during the Report Period. For 19 through 50, height and weight must be recorded within last 5 years, not required to be on the same day. For over 50, height and weight within last 2 years, not required to be recorded on same day. Refusals include REF (refused), NMI (not medically indicated) and UAS (unable to screen) and must be documented during the past year. For ages 18 and under, both the height and weight must be refused on the same visit at any time during the past year. For ages 19 and older, the height and the weight must be refused during the past year and are not required to be on the same visit;

2. Triglyceride: CPT 84478; LOINC taxonomy; or site-populated taxonomy DM AUDIT TRIGLYCERIDE TAX;

3. HDL: CPT 83718; LOINC taxonomy; or site-populated taxonomy DM AUDIT HDL TAX;

4. Fasting Glucose: POV 790.21; LOINC taxonomy; or site-populated taxonomy DM AUDIT FASTING GLUCOSE TESTS;

5. LDL: Finds last test done during the Report period; defined as: CPT 83721; LOINC taxonomy; or site-populated taxonomy DM AUDIT LDL CHOLESTEROL TAX;

6. Blood Pressure: CRS uses mean of last 3 Blood Pressures documented on non-ER visits during the Report Period. If 3 BPs are not available, uses mean of last 2 non-ER BPs. If a visit contains more than 1 BP, the lowest BP will be used, defined as having the lowest systolic value. The mean Systolic value is calculated by adding the last 3 (or 2) systolic values and dividing by 3 (or 2). The mean Diastolic value is calculated by adding the diastolic values from the last 3 (or 2) blood pressures and dividing by 3 (or 2).

7. Hypertension: Diagnosis of (POV or problem list) 401.\* occurring prior to the Report period, and at least one hypertension POV during the Report period.

8. Nephropathy assessment definition:

## \*\*\* IHS 2007 Clinical Performance Report \*\*\*

## DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

-----

A. Estimated GFR during the Report Period, defined as any of the following: Site-populated taxonomy BGP GPRA ESTIMATED GFR TAX or LOINC taxonomy, AND

B. Quantitative Urinary Protein Assessment during the Report Period, defined as any of the following: CPT 82042, 82043, or 84156; LOINC taxonomy; or site-populated taxonomy BGP QUANT URINE PROTEIN (NOTE: Be sure and check with your laboratory supervisor that the names you add to your taxonomy reflect quantitative test values); OR

C. End Stage Renal Disease diagnosis/treatment defined as: ANY diagnosis ever of 585.5, 585.6 or V45.1 or ANY CPT in the range of 90918-90925.

9. Tobacco Screening: At least one of the following during the Report Period: 1. Any health factor for category Tobacco documented during Current Report period; 2. Tobacco-related diagnoses (POV or current Active Problem List) 305.1, 305.1\* (old codes), 649.00-649.04 or V15.82; 3. Dental code 1320; 4. Any patient education code containing "TO-", "-TO" or "-SHS.

10. Lifestyle Counseling: Any of the following during the Report Period:

A. Medical nutrition counseling defined as: CPT 97802-97804, G0270, G0271; Provider codes 07, 29, 97, 99; Clinic codes 67 (dietary) or 36 (WIC),

B. Nutrition education defined as: POV V65.3 dietary surveillance and counseling; patient education codes ending "-N" (Nutrition) or "-MNT" (or old code "-DT" (Diet)),

C. Exercise education defined as: POV V65.41 exercise counseling; patient education codes ending "-EX" (Exercise),

D. Related exercise and nutrition counseling defined as: patient education codes ending "-LA" (lifestyle adaptation) or containing "OBS-" (obesity).

11. Depression Screening/Mood Disorder DX: Any of the following during the Report Period: A) Depression Screening: Exam Code 36, POV V79.0, or BHS problem code 14.1 (screening for depression) or refusal, defined as any PCC refusal in past year with Exam Code 36; or B) Mood Disorder DX: At least two visits in PCC or BHS during the Report period with POV for: Major Depressive Disorder, Dysthymic Disorder, Depressive Disorder NOS, Bipolar I or II Disorder, Cyclothymic Disorder, Bipolar Disorder NOS, Mood Disorder Due to a General Medical Condition, Substance-induced Mood Disorder, or Mood Disorder NOS. These POV codes are: 296.\*, 291.89, 292.84, 293.83, 300.4, 301.13, or 311 or BHS POV 14 or 15.

Increase the proportion of patients with metabolic syndrome who receive all appropriate assessments.

\*\*\* IHS 2007 Clinical Performance Report \*\*\*  
 DEMO INDIAN HOSPITAL  
 Report Period: Jan 01, 2006 to Dec 31, 2006  
 Previous Year Period: Jan 01, 2005 to Dec 31, 2005  
 Baseline Period: Jan 01, 2000 to Dec 31, 2000

BP Assessed: IHS 2010 Goal: 95%

Others: TBD

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
Active Clinical Pts =>18 w/PreDiabetes/Met Syn	56		53			36		
# w/BP documented	52	92.9	47	88.7	+4.2	34	94.4	-1.6
# w/LDL done	39	69.6	38	71.7	-2.1	24	66.7	+3.0
# w/ fasting glucose	0	0.0	1	1.9	-1.9	0	0.0	+0.0
# w/ est GFR & quant UP assmt or w/ ESRD	2	3.4	0	0.0	+3.4	0	0.0	+3.4
# w/Tobacco Screening w/in 1 yr	46	82.1	44	83.0	-0.9	26	72.2	+9.9
# w/BMI calculated or refusal	56	100.0	53	100.0	+0.0	36	100.0	+0.0
# w/lifestyle adaptation counseling	20	35.7	19	35.8	-0.1	12	33.3	+2.4
# w/Depression screening, DX, or refusal	7	12.5	2	3.8	+8.7	1	2.8	+9.7
# w/ All screenings	0	0.0	0	0.0	+0.0	0	0.0	+0.0

\*\*\* IHS 2007 Clinical Performance Report \*\*\*

DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

Prediabetes/Metabolic Syndrome (con't)

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
User Pop Pts =>18 w/PreDiabetes/Met Syn	58		55			36		
# w/BP documented	53	91.4	47	85.5	+5.9	34	94.4	-3.1
# w/LDL done	39	67.2	40	72.7	-5.5	24	66.7	+0.6
# w/ fasting glucose	0	0.0	1	1.8	-1.8	0	0.0	+0.0
# w/ est GFR & quant UP assmnt or w/ESRD	2	3.4	0	0.0	+3.4	0	0.0	+3.4
# w/Tobacco Screening w/in 1 yr	48	82.8	44	80.0	+2.8	26	72.2	+10.5
# w/BMI calculated or refusal	58	100.0	55	100.0	+0.0	36	100.0	+0.0
# w/lifestyle adaptation counseling	20	34.5	19	34.5	-0.1	12	33.3	+1.1
# w/Depression screening, DX, or refusal	8	13.8	2	3.6	+10.2	1	2.8	+11.0
# w/ All screenings	0	0.0	0	0.0	+0.0	0	0.0	+0.0

\*\*\* IHS 2007 Clinical Performance Report \*\*\*  
 DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006  
 Previous Year Period: Jan 01, 2005 to Dec 31, 2005  
 Baseline Period: Jan 01, 2000 to Dec 31, 2000

Medications Education

Denominator(s):

Active Clinical patients with Medications dispensed at their facility during the Report Period.  
 All User Population patients with Medications dispensed at their facility during the Report Period.

Numerator(s):

Patients who were provided patient education about their medications in any location.

Patients receiving medications are identified by any entry in the VMed file for your facility. Med education defined as: any PFE code containing "M-" or "-M", or PFE codes DMC-IN (Diabetes Medicine - Insulin), FP-DPO, FP-OC, ASM-NEB, ASM-MDI, PL-NEB, PL-MDI, or FP-TD.

Increase the proportion of patients taking medications who are receiving patient education about their medications.

HP 2010 Goal: 95%

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
Active Clinical Pts receiving medications	663		622			592		
# receiving medication educ	486	73.3	268	43.1	+30.2	81	13.7	+59.6
User Pop Pts receiving medications	868		793			753		
# receiving medication educ	601	69.2	307	38.7	+30.5	87	11.6	+57.7

\*\*\* IHS 2007 Clinical Performance Report \*\*\*

DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

Public Health Nursing

Denominator(s):

All User Population patients.

Number of visits to User Population patients by PHNs in any setting, including Home.

A. Number of visits to patients ages 0-28 days (Neonate) in any setting.

B. Number of visits to patients ages 29 days - 12 months (infants) in any setting.

C. Number of visits to patients ages 1-64 years in any setting.

D. Number of visits to patients ages 65 and older (Elders) in any setting.

E. Number of PHN driver/interpreter (provider code 91) visits.

Number of visits to User Population patients by PHNs in Home setting.

A. Number of Home visits to patients age 0-28 days (Neonate)

B. Number of Home visits to patients age 29 days to 12 months (Infants)

C. Number of Home visits to patients ages 1-64 years

D. Number of Home visits to patients aged 65 and over (Elders).

E. Number of PHN driver/interpreter (provider code 91) visits in a HOME setting.

Numerator(s):

For User Population only, the number of patients in the denominator served by PHNs in any setting, including Home.

For User Population only, the number of patients in the denominator served by a PHN driver/interpreter in any setting.

For User Population only, the number of patients in the denominator served by PHNs in a HOME setting.

For User Population only, the number of patients in the denominator served by a PHN driver/interpreter in a HOME Setting.

PHN visit is defined as any visit with primary or secondary provider code 13 or 91. Home visit defined as: (1) clinic 11 and a primary or secondary provider code 13 or 91 or (2) Location Home (as defined in Site Parameters) and a primary or secondary provider code 13 or 91.

Maintain the total number of public health nursing services (primary and secondary treatment and preventive services) provided to individuals in all settings.

IHS Performance - FY 2005 - 438,376, FY 2004 - 423,379, FY 2003 - 359,089

REPORT PERIOD	PREV YR %	CHG from PREV YR %	BASE PERIOD	CHG from BASE %
---------------	-----------	--------------------	-------------	-----------------

## \*\*\* IHS 2007 Clinical Performance Report \*\*\*

## DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

## Public Health Nursing (con't)

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
All User Population patients	2,370		2,300			2,332		
# served by PHNs in any Setting	13	0.5	13	0.6	-0.0	13	0.6	-0.0
# served by PHN drivers/interpreter - in any Setting	0	0.0	0	0.0	+0.0	0	0.0	+0.0
# served by PHNs in a Home Setting	3	0.1	3	0.1	-0.0	0	0.0	+0.1
# served by PHN drivers/interpreters in Home Setting	0	0.0	0	0.0	+0.0	0	0.0	+0.0
Total # PHN Visits - Any Setting	18		16		+2	19		-1
A. Ages 0-28 days	0		0		+0	0		+0
B. Ages 29 days - 12 months	1		3		-2	0		+1
C. Ages 1-64 years	16		13		+3	19		-3
D. Ages 65+	1		0		+1	0		+1
E. Driver/Interpreter visits - any setting	0		0		+0	0		+0
Total # PHN Visits - Home Setting	5		3		+2	0		+5
A. Ages 0-28 days	0		0		+0	0		+0
B. Ages 29 days- 12 months	1		1		+0	0		+1

## \*\*\* IHS 2007 Clinical Performance Report \*\*\*

## DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

## Public Health Nursing (con't)

	REPORT PERIOD	PREV YR %	PERIOD	CHG from %	PREV YR	BASE PERIOD	CHG from %	BASE
C. Ages 1-64 years	3		2		+1	0		+3
D. Ages 65+	1		0		+1	0		+1
E. Driver/interpreter visits - Home Setting	0		0		+0	0		+0

\*\*\* IHS 2007 Clinical Performance Report \*\*\*

DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

---

#### Breastfeeding Rates

##### Denominator(s):

Active Clinical patients who are 45-394 days old.

Active Clinical patients who are 45-394 days old who were screened for infant feeding choice at the age of two months (45-89 days).

Active Clinical patients who are 45-394 days old who were screened for infant feeding choice at the age of six months (165-209 days).

Active Clinical patients who are 45-394 days old who were screened for infant feeding choice at the age of nine months (255-299 days).

Active Clinical patients who are 45-394 days old who were screened for infant feeding choice at the age of 1 year (350-394 days).

##### Numerator(s):

Patients who were screened for infant feeding choice at least once.

Patients who were screened for infant feeding choice at the age of two months (45-89 days).

Patients were screened for infant feeding choice at the age of six months (165-209 days).

Patients who were screened for infant feeding choice at the age of nine months (255-299 days).

Patients who were screened for infant feeding choice at the age of 1 year (350-394 days).

Patients who, at the age of two months (45-89 days), were either exclusively or mostly breastfed.

Patients who, at the age of six months (165-209 days), were either exclusively or mostly breastfed.

Patients who, at the age of nine months (255-299 days), were either exclusively or mostly breastfed.

Patients who, at the age of 1 year (350-394 days), were either exclusively or mostly breastfed.

Age of the patient is calculated at the beginning of the Report period. The documented feeding choice from the file V Infant Feeding Choice that is closest to the exact age that is being assessed will be used. For example, if a patient was assessed at 45 days old as 1/2 breastfed and 1/2 formula and assessed again at 65 days old as mostly breastfed, the mostly breastfed value will be used since it is closer to the exact age of 2 months (i.e. 60 days). Another example is a patient who was assessed at 67 days as mostly breastfed and again at 80 days as mostly formula. In this case, the 67 days value of mostly breastfed will be used. The other exact ages are 180 days for 6 months, 270 days for 9 months, and 365 days for 1 year.

In order to be included in the age-specific screening numerators, the patient must have been screened at the specific age range. For example, if a patient was screened at 6 months and was exclusively breastfeeding

\*\*\* IHS 2007 Clinical Performance Report \*\*\*  
DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006  
Previous Year Period: Jan 01, 2005 to Dec 31, 2005  
Baseline Period: Jan 01, 2000 to Dec 31, 2000

-----  
but was not screened at 2 months, then the patient will only be counted  
in the 6 months numerator.

Establish the baseline rate of 2-month olds who are mostly or exclusively  
breastfeeding.

HP 2010: Through 3 months: 60%, Through 6 months: 25%

REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR	BASE PERIOD	%	CHG from BASE
---------------	---	----------------	---	------------------	-------------	---	---------------

## \*\*\* IHS 2007 Clinical Performance Report \*\*\*

## DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

## Breastfeeding Rates (con't)

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
Active Clinical Pts 45-394 days	45		27			31		
# w/infant feeding choice screening	10	22.2	0	0.0	+22.2	1	3.2	+19.0
# w/screening @ 2 mos	4	8.9	0	0.0	+8.9	1	3.2	+5.7
# w/screening @ 6 mos	3	6.7	0	0.0	+6.7	0	0.0	+6.7
# w/screening @ 9 mos	4	8.9	0	0.0	+8.9	0	0.0	+8.9
# w/screening @ 1 yr	3	6.7	0	0.0	+6.7	0	0.0	+6.7
AC Pts 45-394 days screened @ 2 mos	4		0			1		
# @ 2 mos exclusive/ mostly breastfed	4	100.0	0	0.0	+100.0	1	100.0	+0.0
AC Pts 45-394 days screened @ 6 mos	3		0			0		
# @ 6 mos exclusive/mostly breastfed	2	66.7	0	0.0	+66.7	0	0.0	+66.7
AC Pts 45-394 days screened at 9 mos	4		0			0		
# @ 9 mos exclusive/mostly breastfed	3	75.0	0	0.0	+75.0	0	0.0	+75.0

\*\*\* IHS 2007 Clinical Performance Report \*\*\*  
 DEMO INDIAN HOSPITAL  
 Report Period: Jan 01, 2006 to Dec 31, 2006  
 Previous Year Period: Jan 01, 2005 to Dec 31, 2005  
 Baseline Period: Jan 01, 2000 to Dec 31, 2000

---

Breastfeeding Rates (con't)

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
AC Pts 45-394 days screened @ 1 yr	3		0			0		
# @ 1 year exclusive/mostly breastfed	2	66.7	0	0.0	+66.7	0	0.0	+66.7

\*\*\* IHS 2007 Clinical Performance Report \*\*\*

DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

---

Drugs to be Avoided in the Elderly

Denominator(s):

Active Clinical patients ages 65 and older, broken down by gender.

User Population patients ages 65 and older, broken down by gender.

Numerator(s):

Patients who received at least one drug to be avoided in the elderly during the Report Period.

Patients who received at least two different drugs to be avoided in the elderly during the Report Period.

Age of the patient is calculated at the beginning of the Report period.

Drugs to be avoided in the elderly (i.e. potentially harmful drugs) defined with medication taxonomies: BGP HEDIS ANTIANXIETY MEDS, BGP HEDIS ANTIEMETIC MEDS, BGP HEDIS ANALGESIC MEDS, BGP HEDIS ANTIHISTAMINE MEDS, BGP HEDIS ANTIPSYCHOTIC MEDS, BGP HEDIS AMPHETAMINE MEDS, BGP HEDIS BARBITURATE MEDS, BGP HEDIS BENZODIAZEPINE MEDS, BGP HEDIS OTHER BENZODIAZEPINE, BGP HEDIS CALCIUM CHANNEL MEDS, BGP HEDIS GASTRO ANTISPASM MED, BGP HEDIS BELLADONNA ALKA MEDS, BGP HEDIS SKL MUSCLE RELAX MED, BGP HEDIS ORAL ESTROGEN MEDS, BGP HEDIS ORAL HYPOGLYCEMIC RX, BGP HEDIS NARCOTIC MEDS, BGP HEDIS VASODILATOR MEDS, BGP HEDIS OTHER MEDS AVOID ELD. (Medication classes are: Antianxiety; antiemetic; analgesic; antihistamines; antipsychotics, typical; amphetamines; barbiturates; long-acting benzodiazepines; other long-acting benzodiazepines; calcium channel blockers; gastrointestinal antispasmodics; belladonna alkaloids (including combination drugs); skeletal muscle relaxants; oral estrogen; oral hypoglycemics; narcotics; vasodilators; and other (desiccated thyroid; methyltestosterone; and nitrofurantoin).

For each medication, the days supply must be >0. If the medication was started and then discontinued, CRS will recalculate the # Days Prescribed by subtracting the prescription date (i.e. visit date) from the V Medication Discontinued Date. Example: Rx Date=11/15/2006, Discontinued Date=11/19/2006, Recalculated # Days Prescribed=4.

Establish the proportion of elderly patients with exposure to potentially harmful drugs.

\*\*\* IHS 2007 Clinical Performance Report \*\*\*  
 DEMO INDIAN HOSPITAL  
 Report Period: Jan 01, 2006 to Dec 31, 2006  
 Previous Year Period: Jan 01, 2005 to Dec 31, 2005  
 Baseline Period: Jan 01, 2000 to Dec 31, 2000

Drugs to be Avoided in the Elderly (con't)

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
Active Clinical Pts =>65	61		62			65		
# w/exposure to at least 1 harmful drug	22	36.1	14	22.6	+13.5	19	29.2	+6.8
# w/exposure to multiple harmful drugs	9	14.8	2	3.2	+11.5	9	13.8	+0.9
Male Active Clinical =>65	25		28			27		
# w/exposure to at least 1 harmful drug	10	40.0	5	17.9	+22.1	7	25.9	+14.1
# w/exposure to multiple harmful drugs	3	12.0	1	3.6	+8.4	2	7.4	+4.6
Female Active Clinical =>65	36		34			38		
# w/exposure to at least 1 harmful drug	12	33.3	9	26.5	+6.9	12	31.6	+1.8
# w/exposure to multiple harmful drugs	6	16.7	1	2.9	+13.7	7	18.4	-1.8

\*\*\* IHS 2007 Clinical Performance Report \*\*\*  
 DEMO INDIAN HOSPITAL  
 Report Period: Jan 01, 2006 to Dec 31, 2006  
 Previous Year Period: Jan 01, 2005 to Dec 31, 2005  
 Baseline Period: Jan 01, 2000 to Dec 31, 2000

Drugs to be Avoided in the Elderly (con't)

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
User Pop Pts =>65	138		135			142		
# w/exposure to at least 1 harmful drug	24	17.4	15	11.1	+6.3	19	13.4	+4.0
# w/exposure to multiple harmful drugs	9	6.5	3	2.2	+4.3	9	6.3	+0.2
Male User Pop =>65	53		53			54		
# w/exposure to at least 1 harmful drug	11	20.8	5	9.4	+11.3	7	13.0	+7.8
# w/exposure to multiple harmful drugs	3	5.7	1	1.9	+3.8	2	3.7	+2.0
Female User Pop =>65	85		82			88		
# w/exposure to at least 1 harmful drug	13	15.3	10	12.2	+3.1	12	13.6	+1.7
# w/exposure to multiple harmful drugs	6	7.1	2	2.4	+4.6	7	8.0	-0.9

\*\*\* IHS 2007 Clinical Performance Report \*\*\*  
 DEMO INDIAN HOSPITAL  
 Report Period: Jan 01, 2006 to Dec 31, 2006  
 Previous Year Period: Jan 01, 2005 to Dec 31, 2005  
 Baseline Period: Jan 01, 2000 to Dec 31, 2000

Functional Status Assessment in Elders

Denominator(s):

Active Clinical patients ages 55 and older, broken down by gender.

Numerator(s):

Patients screened for functional status at any time during the Report period.

Age is calculated at the beginning of the Report period. Functional status screening defined as: any non-null values in V Elder Care for 1) at least one of the following ADL fields: toileting, bathing, dressing, transfers, feeding, or continence AND 2) at least one of the following IADL fields: finances, cooking, shopping, housework/chores, medications or transportation during the Report period.

Establish the baseline rate of functional status assessment in adults 55 years or older.

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
Active Clinical Pts =>55	153		153			125		
# w/functional status screening	2	1.3	0	0.0	+1.3	0	0.0	+1.3
Male Active Clinical =>55	69		71			58		
# w/functional status screening	1	1.4	0	0.0	+1.4	0	0.0	+1.4
Female Active Clinical =>55	84		82			67		
# w/functional status screening	1	1.2	0	0.0	+1.2	0	0.0	+1.2

\*\*\* IHS 2007 Clinical Performance Report \*\*\*

DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

Fall Risk Assessment in Elders

Denominator(s):

Active Clinical patients ages 65 and older, broken down by gender.  
 User Population patients ages 65 and older, broken down by age groups.

Numerator(s):

Patients who have been screened for fall risk or with a fall-related diagnosis in the past year, including documented refusals.  
 A: Patients who have been screened for fall risk in the past year.  
 B: Patients with a documented history of falling in the past year.  
 C: Patients with a fall-related injury diagnosis in the past year.  
 D: Patients with abnormality of gait/balance or mobility diagnosis in the past year.  
 E: Patients with a documented refusal of fall risk screening exam in the past year.

Age of the patient is calculated at the beginning of the Report period.  
 Fall Risk Screen defined as any of the following: Fall Risk Exam defined as: V Exam Code 37; History of Falling defined as: POV V15.88 (Personal History of Fall); Fall-related Injury Diagnosis defined as: V POV (Cause Codes #1-3) E880.\*, E881.\*, E883.\*, E884.\*, E885.\*, E886.\*, E888.\*;  
 Abnormality of Gait/Balance or Mobility defined as: V POV 781.2, 781.3, 719.7, 719.70, 719.75-719.77, 438.84, 333.99, 443.9; Refusal defined as: Refusal Exam 37.

Establish the baseline rate of fall risk assessment in adults 65 years or older.

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
Active Clinical Pts 65+	61		62			65		
# w/ fall risk screen/Dx/refusal	11	18.0	8	12.9	+5.1	8	12.3	+5.7
A. # w/ fall risk screen	1	1.6	0	0.0	+1.6	0	0.0	+1.6
B. # w/ history of fall	1	1.6	0	0.0	+1.6	0	0.0	+1.6
C. # w/ fall injury	2	3.3	1	1.6	+1.7	3	4.6	-1.3
D. # w/ abnormal gait	6	9.8	7	11.3	-1.5	5	7.7	+2.1
E. # w/ refusal	1	1.6	0	0.0	+1.6	0	0.0	+1.6

\*\*\* IHS 2007 Clinical Performance Report \*\*\*

DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

Fall Risk Assessment in Elders (con't)

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
Male Active Clinical 65+	25		28			27		
# w/ fall risk screen/Dx/refusal	5	20.0	3	10.7	+9.3	2	7.4	+12.6
A. # w/ fall risk screen	0	0.0	0	0.0	+0.0	0	0.0	+0.0
B. # w/ history of fall	1	4.0	0	0.0	+4.0	0	0.0	+4.0
C. # w/ fall injury	0	0.0	0	0.0	+0.0	1	3.7	-3.7
D. # w/ abnormal gait	3	12.0	3	10.7	+1.3	1	3.7	+8.3
E. # w/ refusal	1	4.0	0	0.0	+4.0	0	0.0	+4.0
Female Active Clinical 65+	36		34			38		
# w/ fall risk screen/Dx/refusal	6	16.7	5	14.7	+2.0	6	15.8	+0.9
A. # w/ fall risk screen	1	2.8	0	0.0	+2.8	0	0.0	+2.8
B. # w/ history of fall	0	0.0	0	0.0	+0.0	0	0.0	+0.0
C. # w/ fall injury	2	5.6	1	2.9	+2.6	2	5.3	+0.3
D. # w/ abnormal gait	3	8.3	4	11.8	-3.4	4	10.5	-2.2
E. # w/ refusal	0	0.0	0	0.0	+0.0	0	0.0	+0.0
User Pop Pts 65+	138		135			142		
# w/ fall risk screen/Dx/refusal	12	8.7	9	6.7	+2.0	8	5.6	+3.1
A. # w/ fall risk screen	1	0.7	0	0.0	+0.7	0	0.0	+0.7
B. # w/ history of fall	1	0.7	0	0.0	+0.7	0	0.0	+0.7
C. # w/ fall injury	3	2.2	2	1.5	+0.7	3	2.1	+0.1
D. # w/ abnormal gait	6	4.3	7	5.2	-0.8	5	3.5	+0.8
E. # w/ refusal	1	0.7	0	0.0	+0.7	0	0.0	+0.7

## \*\*\* IHS 2007 Clinical Performance Report \*\*\*

## DEMO INDIAN HOSPITAL

Report Period: Jan 01, 2006 to Dec 31, 2006

Previous Year Period: Jan 01, 2005 to Dec 31, 2005

Baseline Period: Jan 01, 2000 to Dec 31, 2000

## Fall Risk Assessment in Elders (con't)

	REPORT PERIOD	%	PREV YR PERIOD	%	CHG from PREV YR %	BASE PERIOD	%	CHG from BASE %
Male User Pop 65+	53		53			54		
# w/ fall risk screen/Dx/refusal	5	9.4	4	7.5	+1.9	2	3.7	+5.7
A. # w/ fall risk screen	0	0.0	0	0.0	+0.0	0	0.0	+0.0
B. # w/ history of fall	1	1.9	0	0.0	+1.9	0	0.0	+1.9
C. # w/ fall injury	0	0.0	1	1.9	-1.9	1	1.9	-1.9
D. # w/ abnormal gait	3	5.7	3	5.7	+0.0	1	1.9	+3.8
E. # w/ refusal	1	1.9	0	0.0	+1.9	0	0.0	+1.9
Female User Pop 65+	85		82			88		
# w/ fall risk screen/Dx/refusal	7	8.2	5	6.1	+2.1	6	6.8	+1.4
A. # w/ fall risk screen	1	1.2	0	0.0	+1.2	0	0.0	+1.2
B. # w/ history of fall	0	0.0	0	0.0	+0.0	0	0.0	+0.0
C. # w/ fall injury	3	3.5	1	1.2	+2.3	2	2.3	+1.3
D. # w/ abnormal gait	3	3.5	4	4.9	-1.3	4	4.5	-1.0
E. # w/ refusal	0	0.0	0	0.0	+0.0	0	0.0	+0.0