FY 2013 Government Performance and Results Act (GPRA)

INDIAN HEALTH SERVICE (IHS) GPRA PERFORMANCE RESULTS

Introduction

IHS clinical GPRA results are calculated from the Clinical Reporting System (CRS) Class 1 software module installed locally on the Resource and Patient Management System (RPMS), IHS's electronic health record.

The CRS measure logic is located [here](#)

Each clinical measure has two graphs:
- the current national performance result and historical data
- IHS Area graphs comparing the current reporting year to the previous year for each of IHS's twelve Area Offices.

Area Abbreviations

Abbreviation	Area
ABD	Aberdeen
ALA	Alaska
ALB	Albuquerque
BEM	Bemidji
BIL	Billings
CAL	California
NAS	Nashville
NAV	Navajo
OKL	Oklahoma
PHO	Phoenix
POR	Portland
TUC	Tucson

Acronym Definitions

Acronym	Definition
NPIRS	National Patient Information Registrations System
AI/AN	American Indian/Alaska Native
A1c	Hemoglobin A1c
BMI	Body Mass Index
BP	Blood Pressure
CHD	Coronary Heart Disease
CVD	Cardiovascular Disease
DV/IPV	Domestic Violence/Intimate Partner Violence
HP	Healthy People
IHD	Ischemic Heart Disease
LDL	Low Density Lipoprotein

GPRA 2013 Results Summary

- 22 GPRA Clinical Measures were reported in FY 2013
    - All 22 clinical measures met their targets in 2013 (100%) compared to 18 of 21 in 2012 (86%)

    - 12 measure results exceeded FY 2012 results

    - 1 measure result decreased in performance from FY 2012

    - 8 measures had significant logic changes in 2013

    - 1 measure was new for Tribal programs in 2013

GPRA 2013 Results Summary

- Measures with significant improvement over FY 2012:

    - Comprehensive CVD Assessment improved by 9.2 percentage points

    - Depression Screening improved by 3.2 percentage points

    - Influenza vaccination improved by 3.0 percentage points

GPRA 2013 Results Summary

- Measures that decreased in performance from 2012
  - Dental Access decreased by 0.5 percentage points

GPRA 2013 Results Summary
Measures that improved over FY 2012 results

- Of the 13 measures that can be compared to previous year results, IHS performed better on 12 measures in 2013 compared to 2012:

Measure	FY 2013 Q4	FY 2012 Q4	% Improvement
Comprehensive CVD Assessment	46.7%	37.5%*	9.2%
Depression Screening	65.1%	61.9%	3.2%
Influenza 65+	68.0%	65.0%	3.0%
Retinopathy Assessed	57.6%	55.7%	1.9%
Mammography	53.8%	51.9%	1.9%
Alcohol Screening	65.7%	63.8%	1.9%
Prenatal HIV Screening	87.7%	85.8%	1.9%
LDL Assessed	72.7%	71.0%	1.7%
Nephropathy Assessed	68.2%	66.7%	1.5%
Childhood Weight Control	22.8%	24.0%	1.2%
DV/IPV Screening	62.4%	61.5%	0.9%
Pneumovax 65+	89.2%	88.5%	0.7%

*FY 2012 result for Comp CVD is the developmental data result (dev logic became actual measure logic in 2013)

GPRA 2013 Results Summary
Measures that decreased in performance from 2011

- Of the 13 measures that can be compared to previous year results, IHS performed worse on 1 measure in 2013 compared to 2012:

Measure	FY 2013 Q4	FY 2012 Q4	% Decrease
Dental Access	28.3%	28.8%	0.5%

Diabetes: Good Glycemic Control
AI/AN patients with diabetes who have maintained Good A1c control (<8) during the past year.
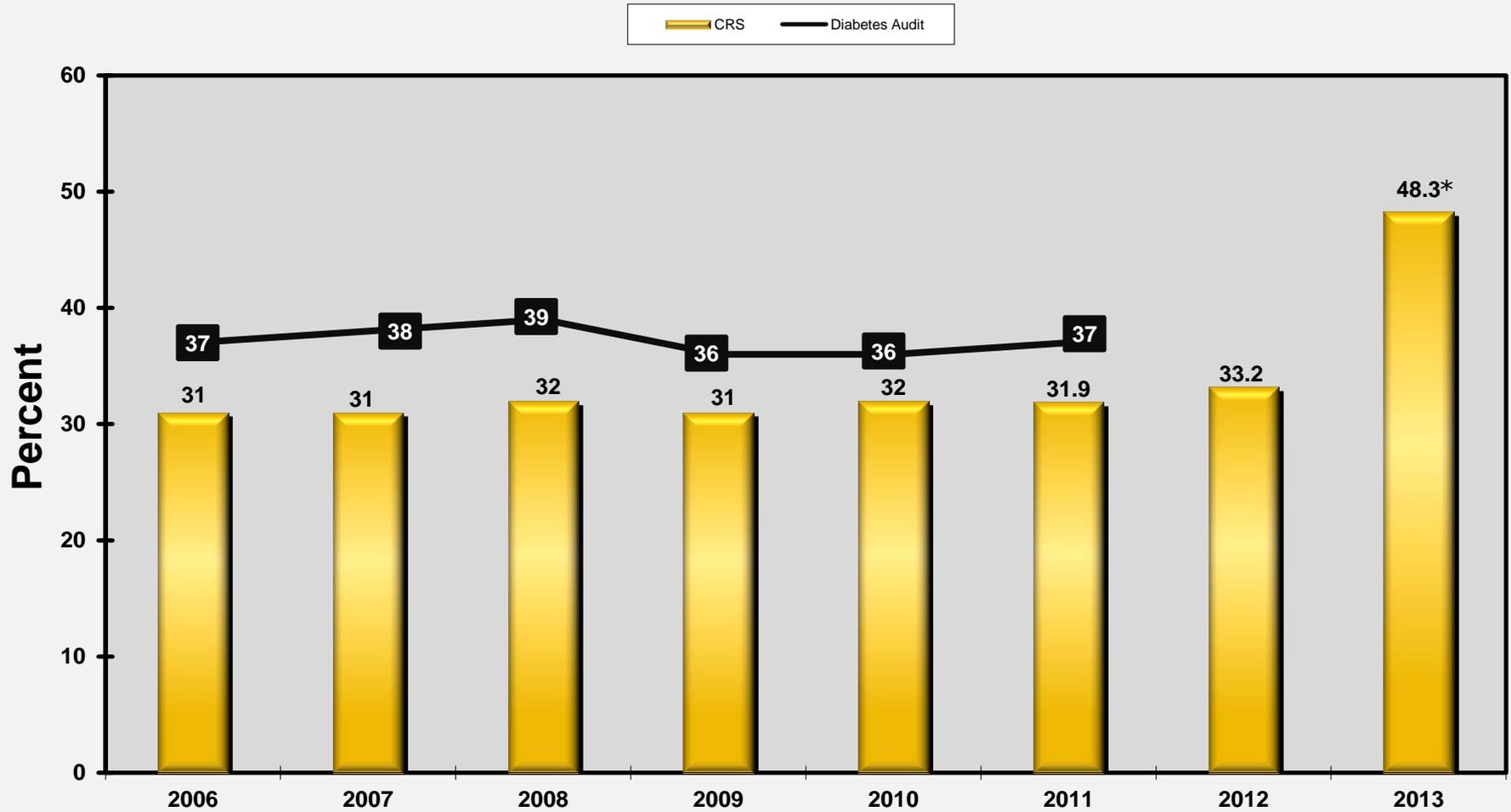
*Prior to FY 2013, this measure tracked the percentage of patients with ideal glycemic control (HbA1c <7).

Diabetes: Good Glycemic Control

	ABD	ALA	ALB	BEM	BIL	CAL	NAS	NAV	OKL	PHX	POR	TUC
FY12												
FY13	44.9%	57.8%	47.9%	50.7%	42.2%	51.5%	43.6%	46.6%	57.4%	41.8%	50.2%	44.1%
N	11520	1619	8230	5470	5470	5004	5520	18465	24251	19634	5914	2798
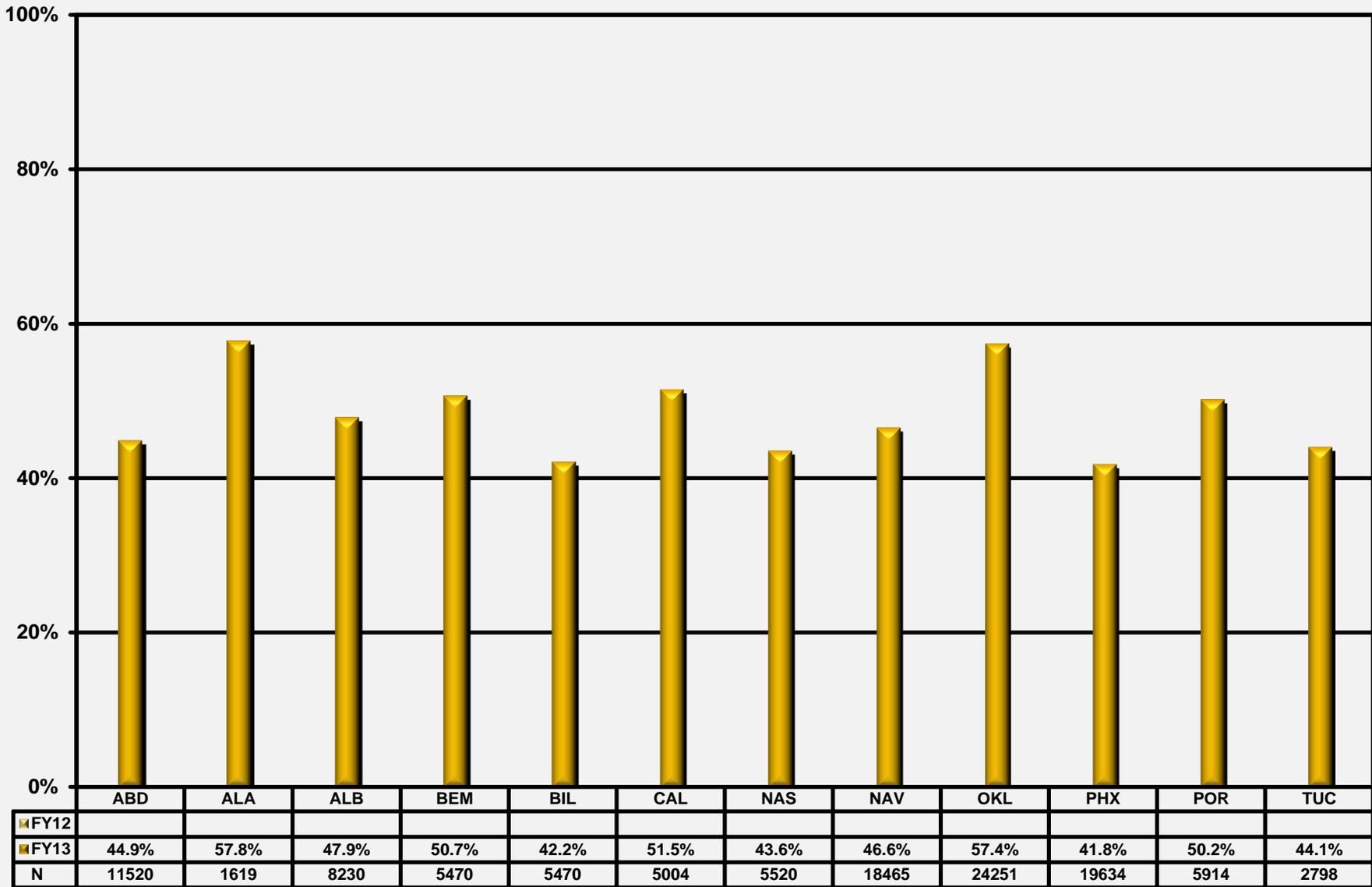
Diabetes: Blood Pressure Control

AI/AN patients with diabetes who have maintained BP control (<140/90) during the past year.

Legend: CRS | Diabetes Audit

Year	CRS	Diabetes Audit
2006	37	38
2007	39	38
2008	38	36
2009	37	36
2010	38	39
2011	37.8	39
2012	38.9	
2013	64.6*	
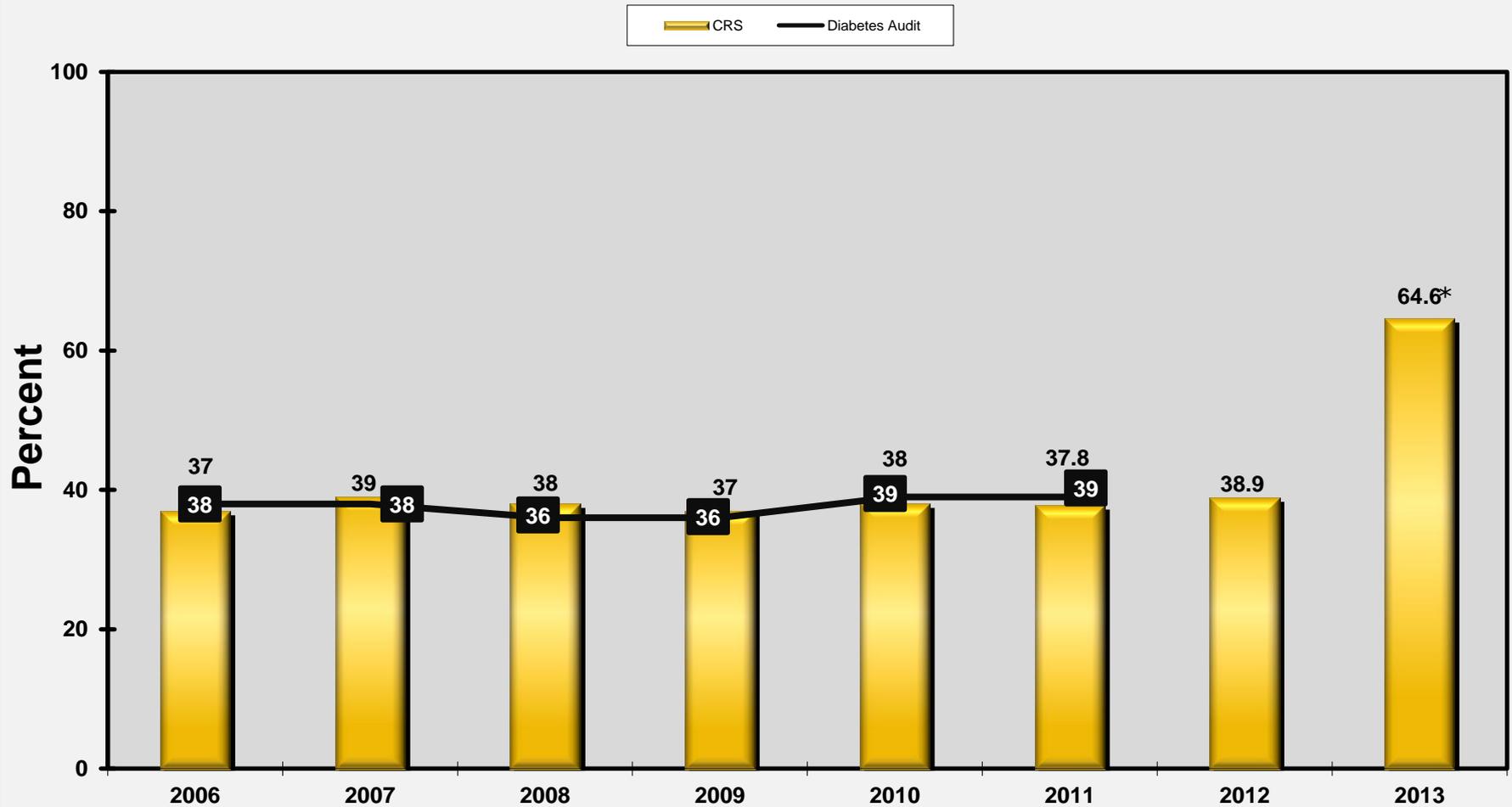
*Prior to FY 2013, this measure tracked the percentage of patients with BP <130/80.

Diabetes: Blood Pressure Control

	ABD	ALA	ALB	BEM	BIL	CAL	NAS	NAV	OKL	PHX	POR	TUC
FY12												
FY13	61.7%	63.9%	69.4%	65.4%	59.9%	64.5%	58.5%	67.4%	64.2%	64.8%	63.4%	70.0%
N	11520	1619	8230	5470	5470	5004	5520	18465	24251	19634	5914	2798
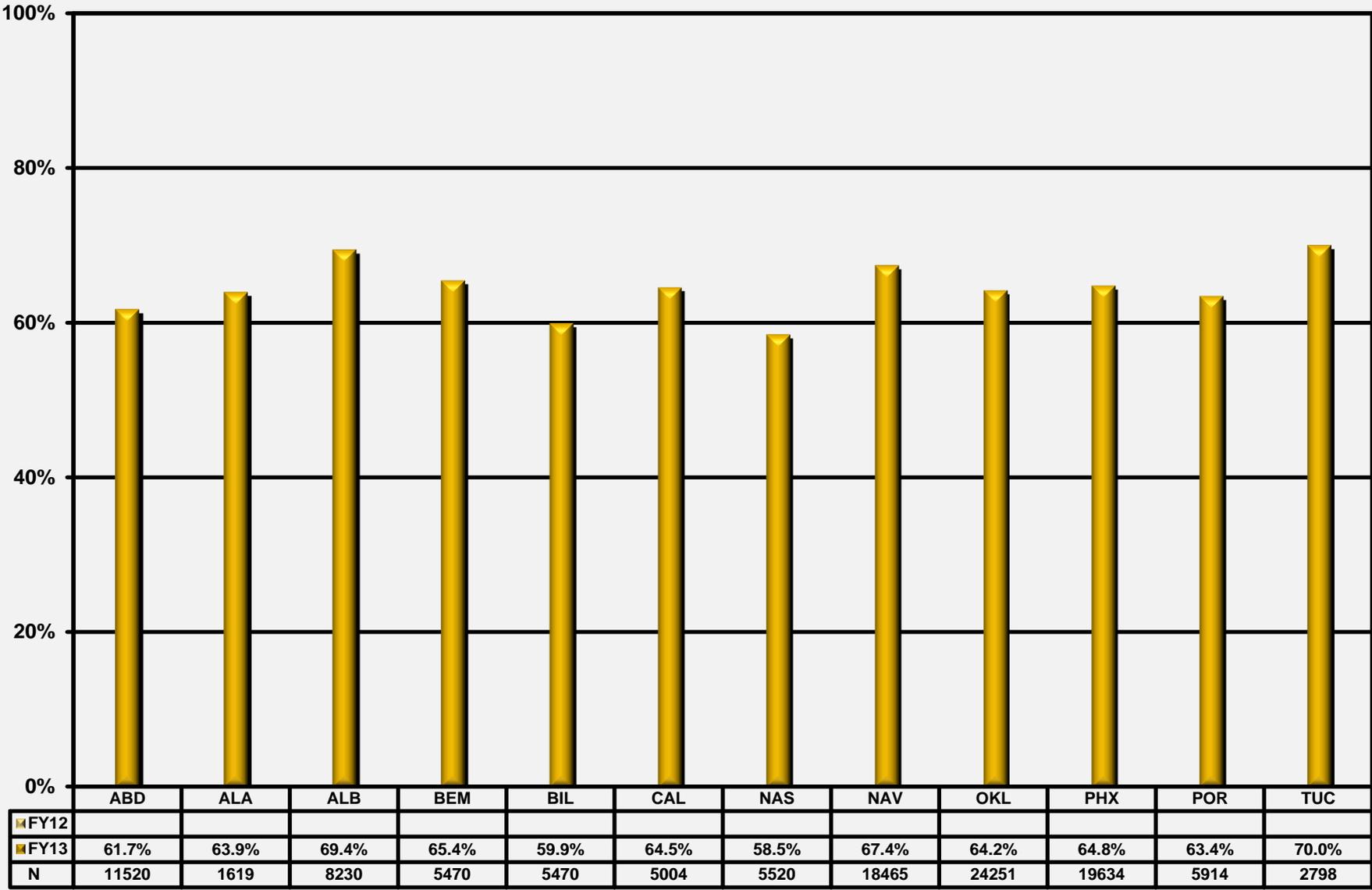
Diabetes: LDL Assessment

AI/AN patients with diabetes who have been assessed for dyslipidemia (LDL) within the past year.
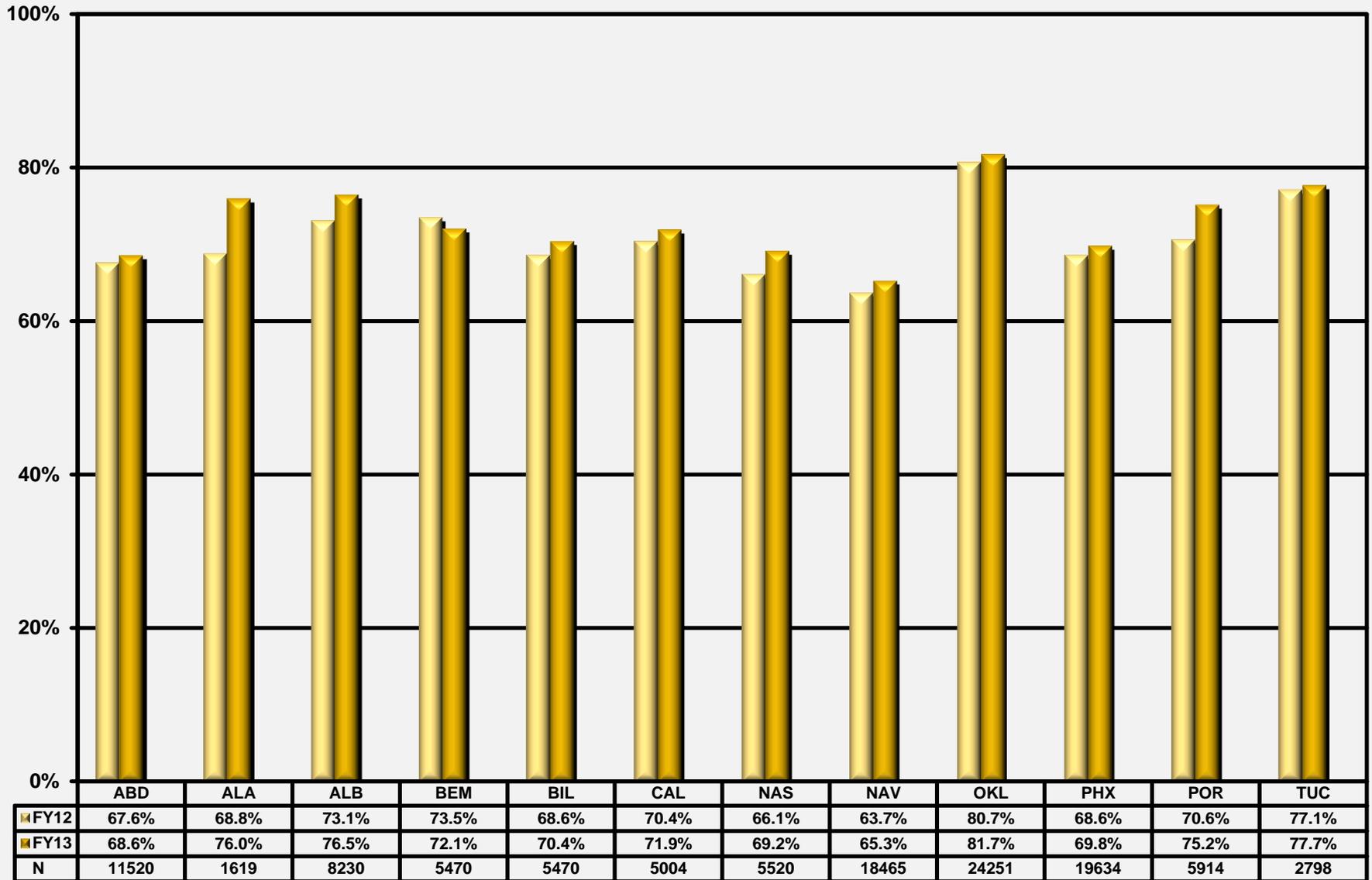
Diabetes: LDL Assessment

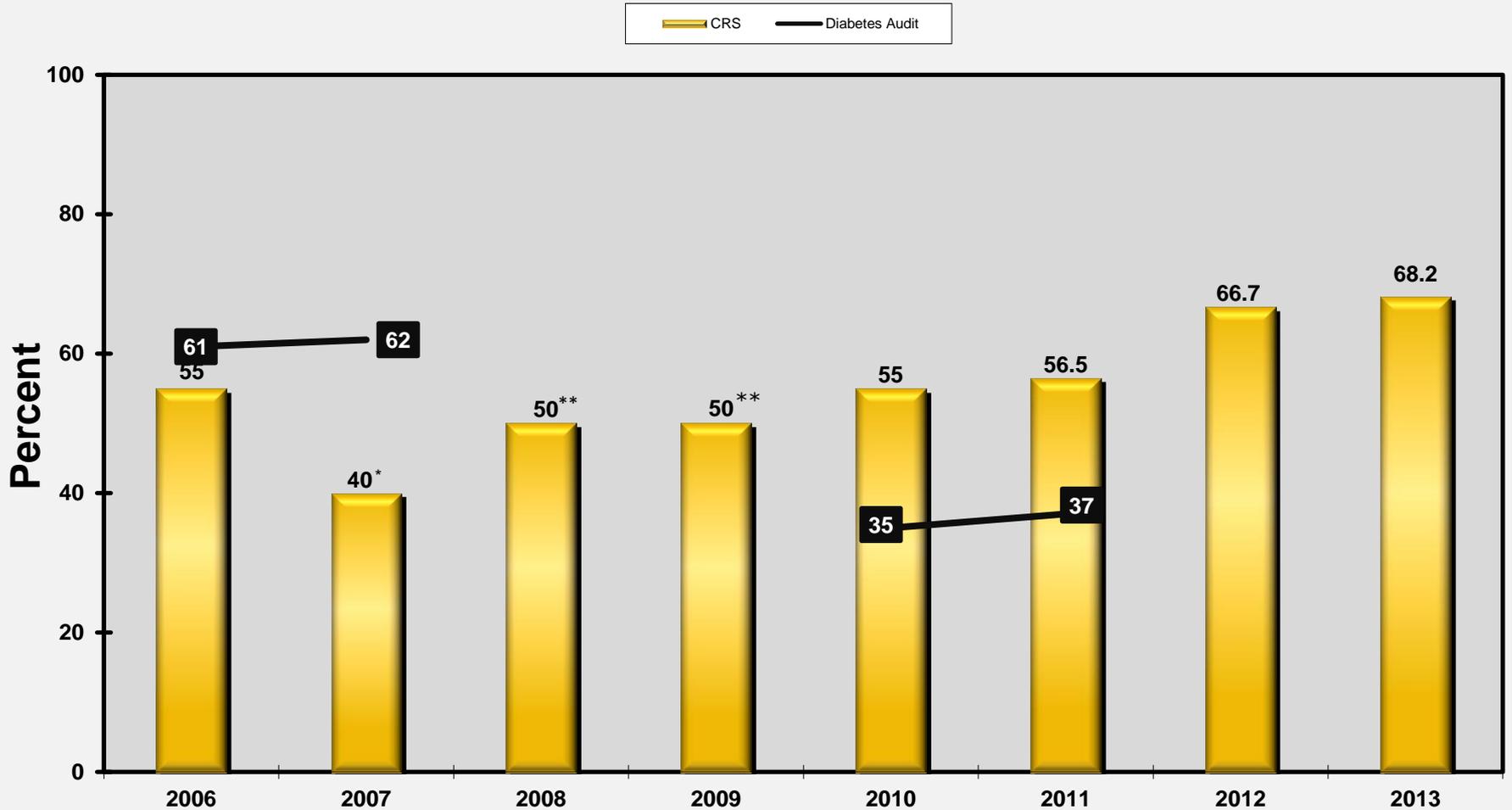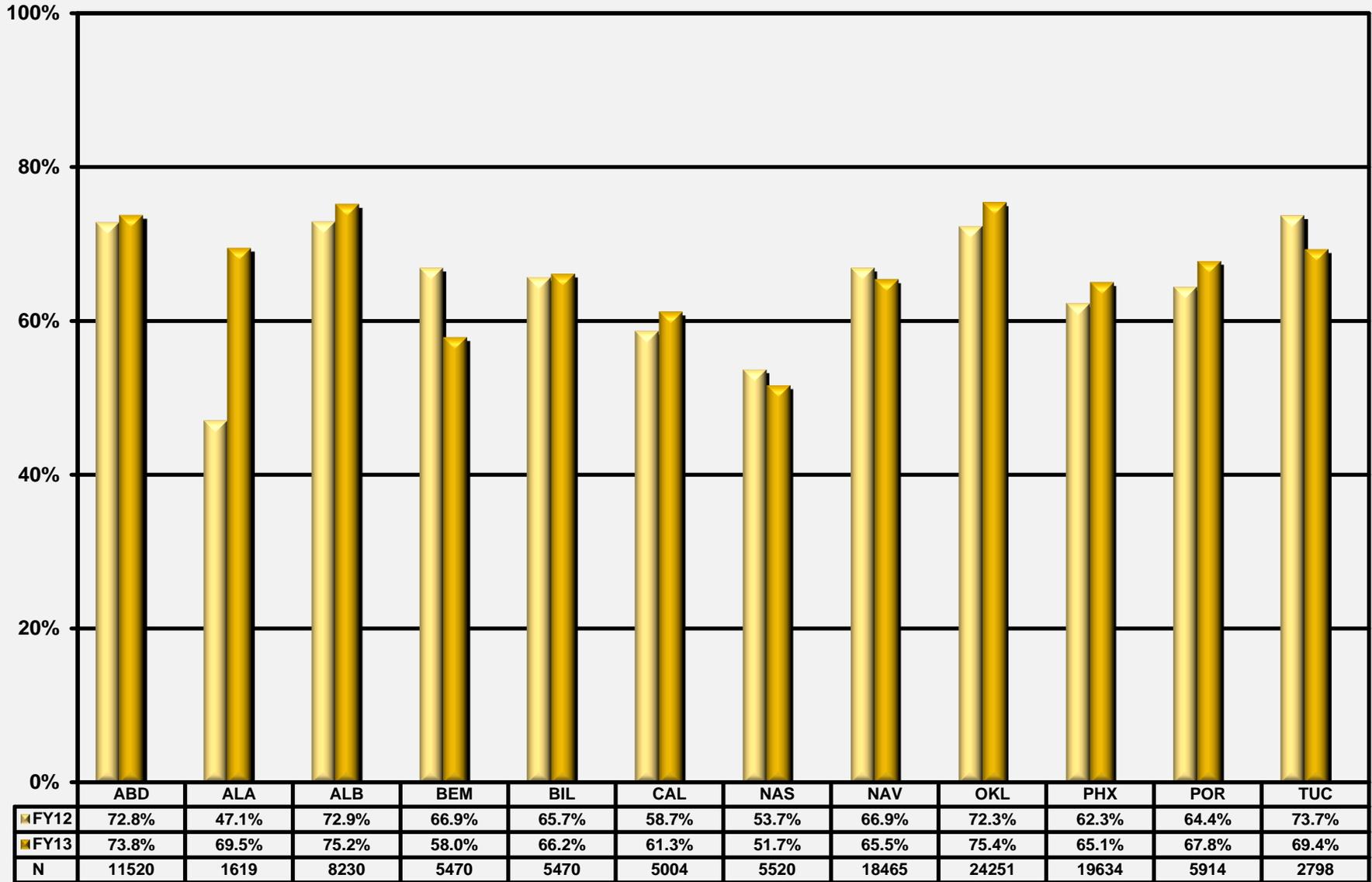|	ABD	ALA	ALB	BEM	BIL	CAL	NAS	NAV	OKL	PHX	POR	TUC
FY12	67.6%	68.8%	73.1%	73.5%	68.6%	70.4%	66.1%	63.7%	80.7%	68.6%	70.6%	77.1%
FY13	68.6%	76.0%	76.5%	72.1%	70.4%	71.9%	69.2%	65.3%	81.7%	69.8%	75.2%	77.7%
N	11520	1619	8230	5470	5470	5004	5520	18465	24251	19634	5914	2798
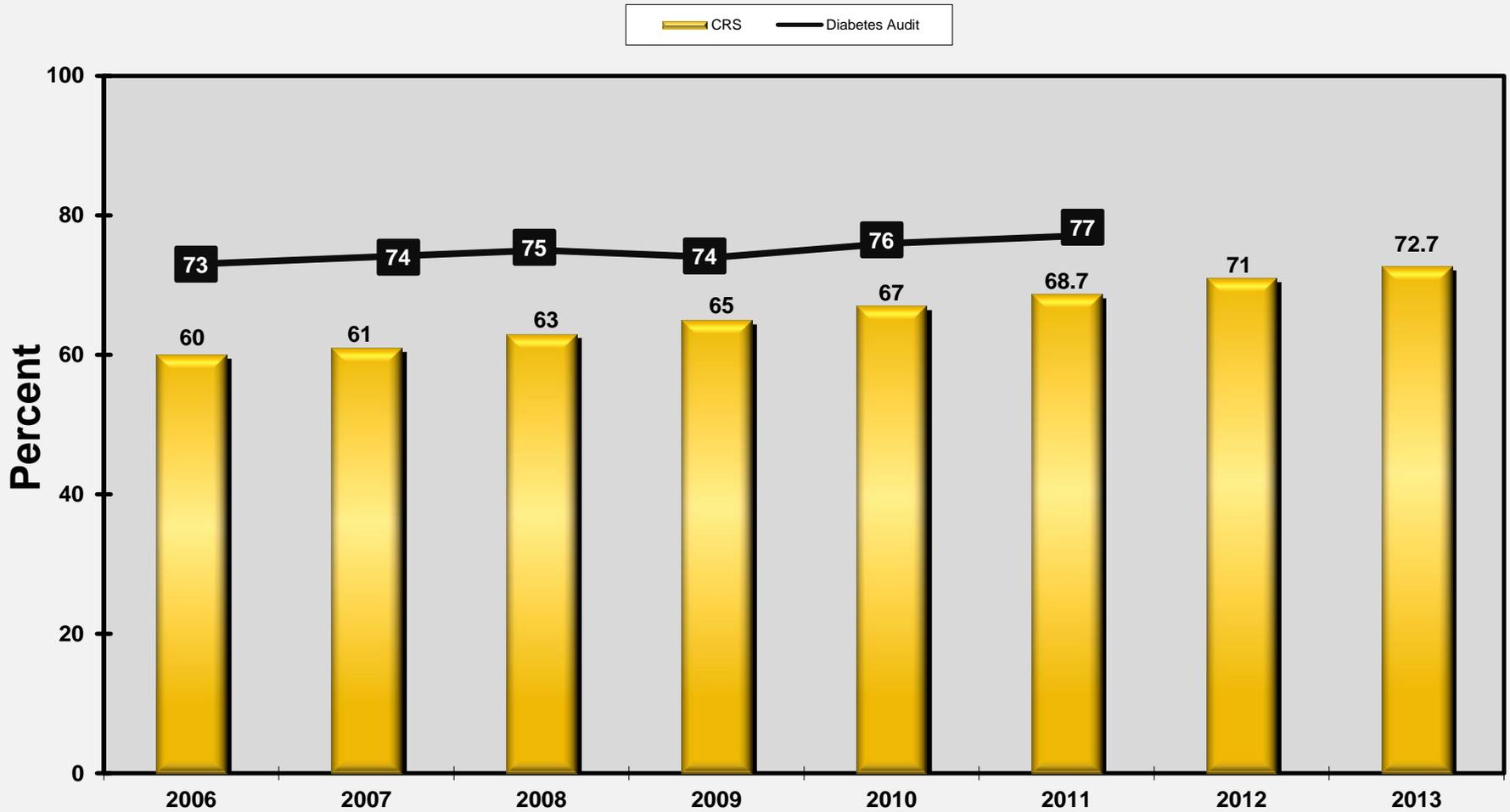
Diabetes: Nephropathy Assessment

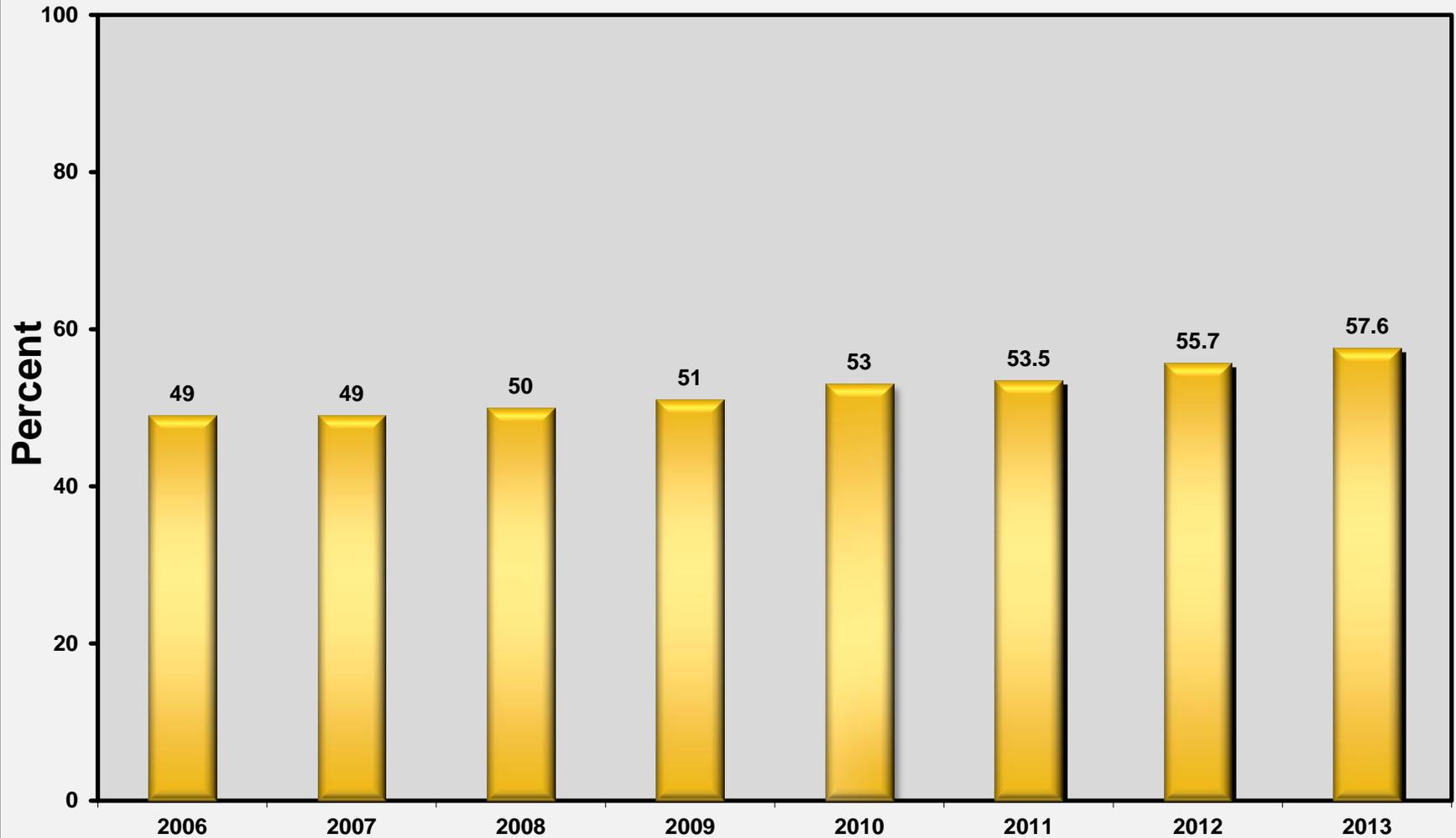AI/AN patients with diabetes who have been assessed for nephropathy within the past year.

*New baseline set to reflect updated standards of care. **Due to changes in the urine protein testing data elements, audit data for these elements was not reliable and no result is available for this measure for 2008, or 2009.

Diabetes: Nephropathy Assessment

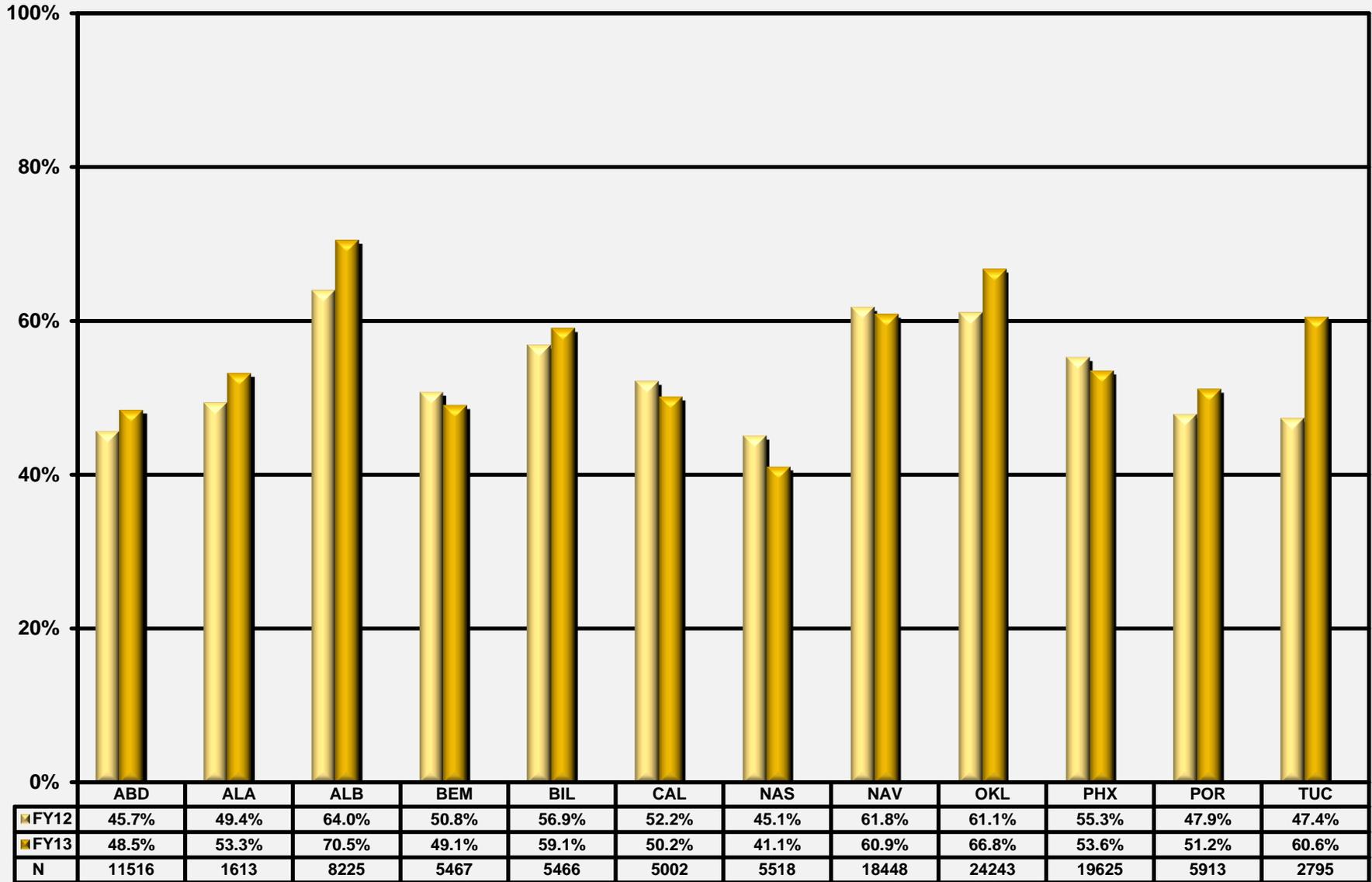|	ABD	ALA	ALB	BEM	BIL	CAL	NAS	NAV	OKL	PHX	POR	TUC
FY12	72.8%	47.1%	72.9%	66.9%	65.7%	58.7%	53.7%	66.9%	72.3%	62.3%	64.4%	73.7%
FY13	73.8%	69.5%	75.2%	58.0%	66.2%	61.3%	51.7%	65.5%	75.4%	65.1%	67.8%	69.4%
N	11520	1619	8230	5470	5470	5004	5520	18465	24251	19634	5914	2798

Diabetes: Retinopathy
AI/AN patients with diabetes who have been assessed for retinopathy within the past year.

Diabetes: Retinopathy Assessed

	ABD	ALA	ALB	BEM	BIL	CAL	NAS	NAV	OKL	PHX	POR	TUC
FY12	45.7%	49.4%	64.0%	50.8%	56.9%	52.2%	45.1%	61.8%	61.1%	55.3%	47.9%	47.4%
FY13	48.5%	53.3%	70.5%	49.1%	59.1%	50.2%	41.1%	60.9%	66.8%	53.6%	51.2%	60.6%
N	11516	1613	8225	5467	5466	5002	5518	18448	24243	19625	5913	2795

Dental: General Access

AI/AN patients who have received dental services within the past year.

HP 2020 Goal = 49.0%

Year	Percent
2006	23
2007	25
2008	25
2009	25
2010	25
2011	26.9
2012	28.8
2013	28.3

Dental: Access

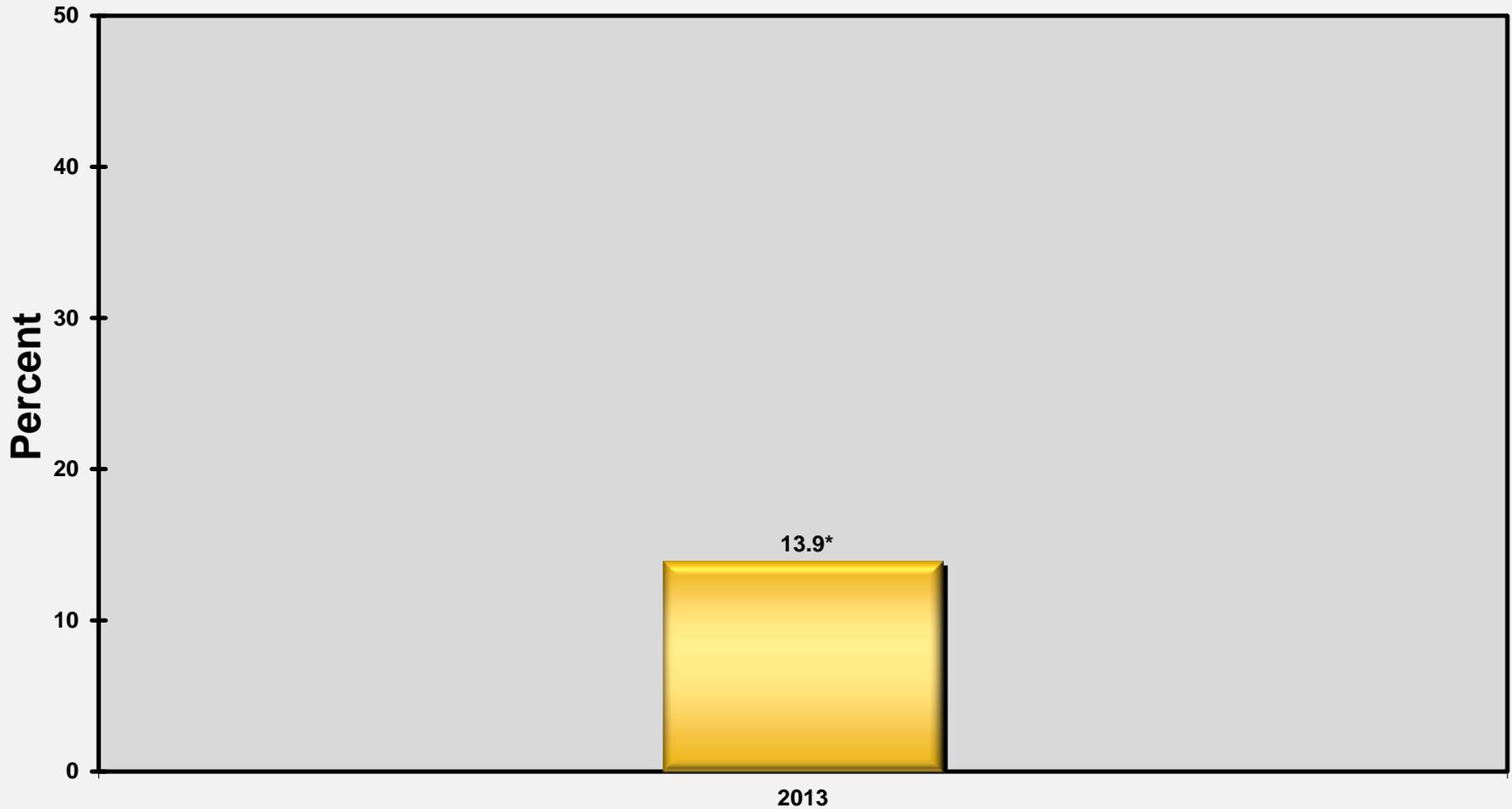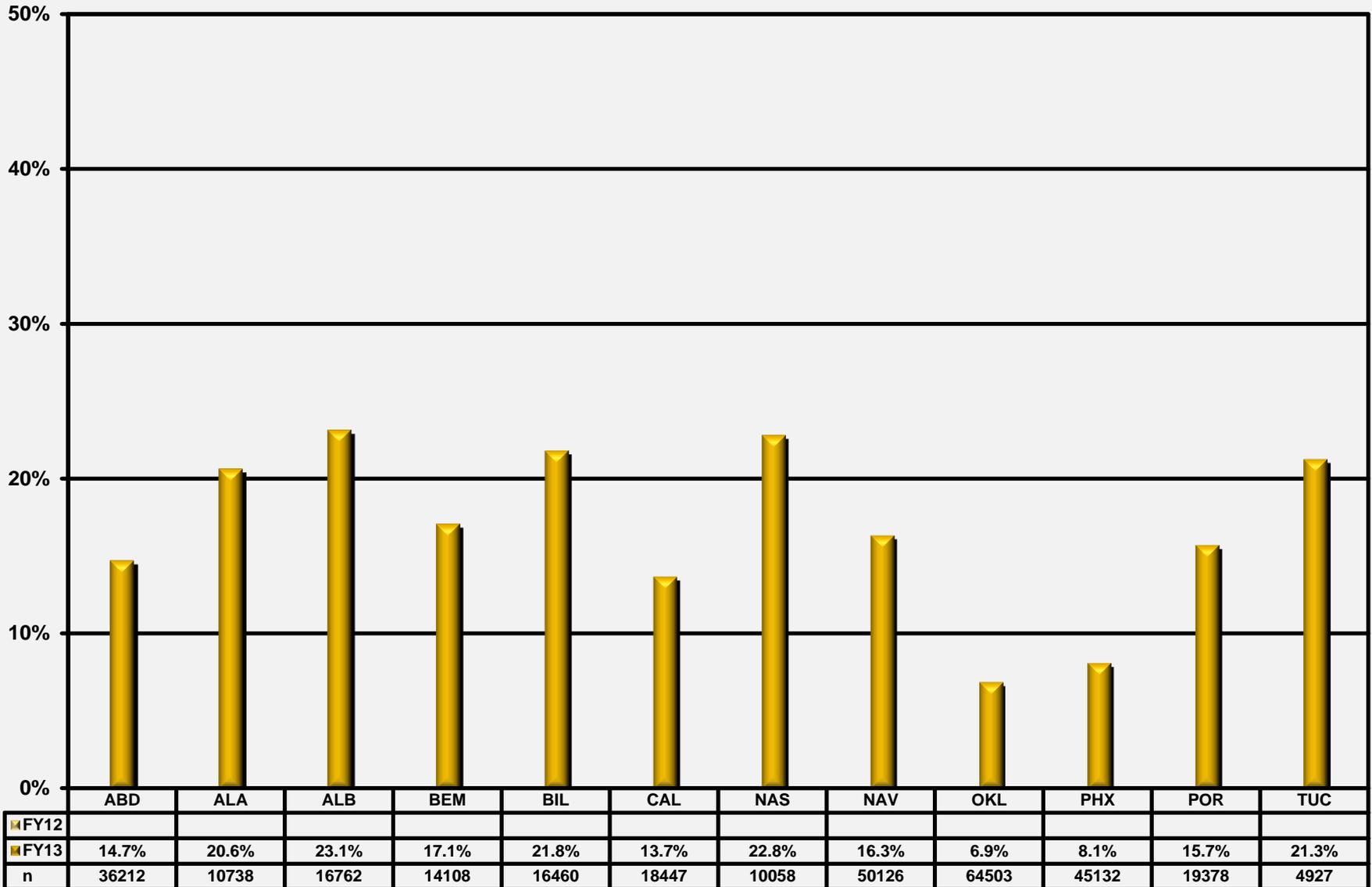|	ABD	ALA	ALB	BEM	BIL	CAL	NAS	NAV	OKL	PHX	POR	TUC
FY12	27.7%	36.7%	31.0%	34.6%	32.9%	39.9%	42.5%	21.9%	25.7%	22.2%	37.6%	34.9%
FY13	25.7%	36.3%	32.5%	34.4%	31.5%	41.2%	39.0%	21.6%	26.2%	21.8%	36.3%	36.0%
N	127219	40934	74923	54099	57524	70374	39472	196268	261390	169819	78917	19202
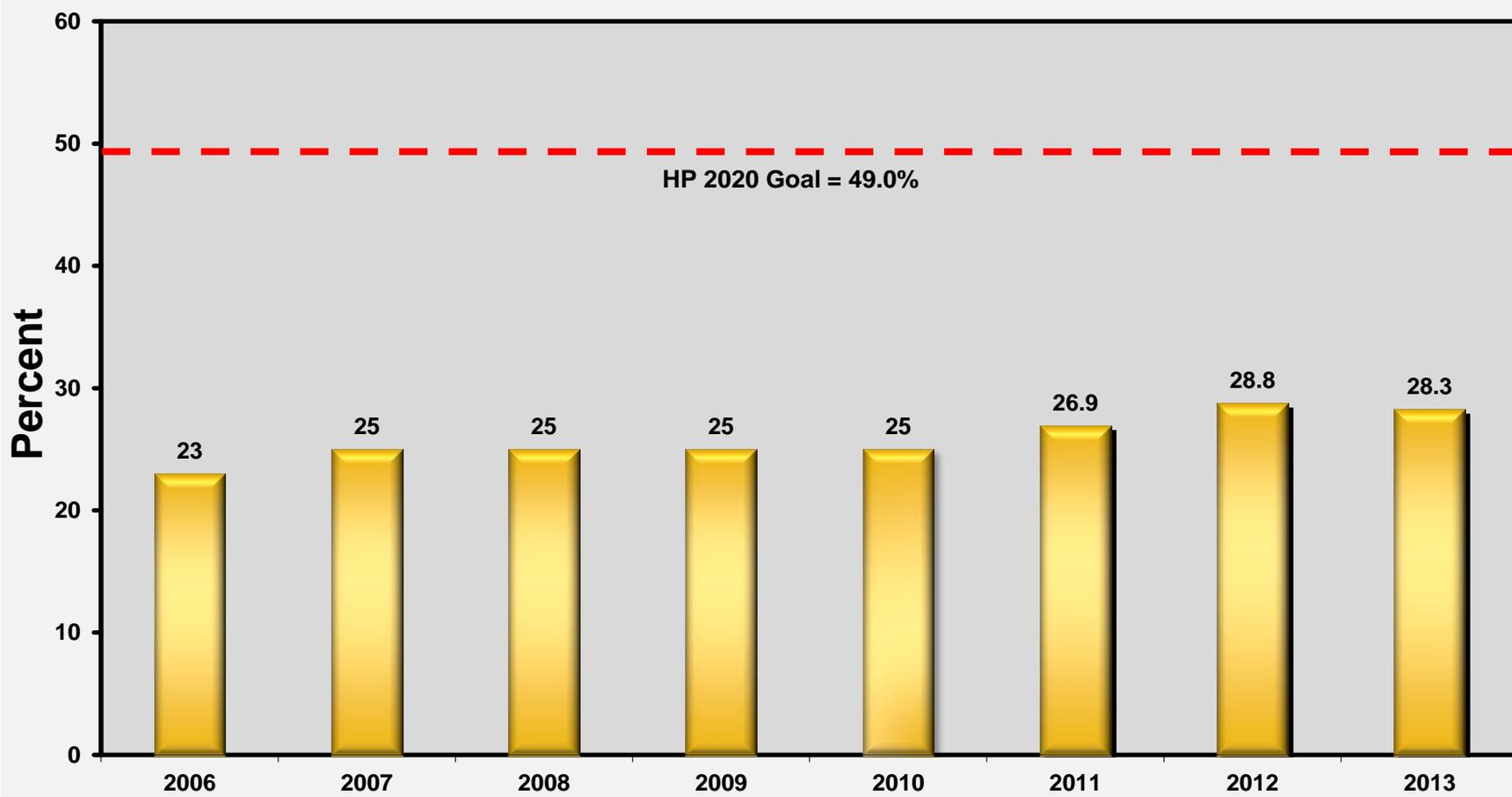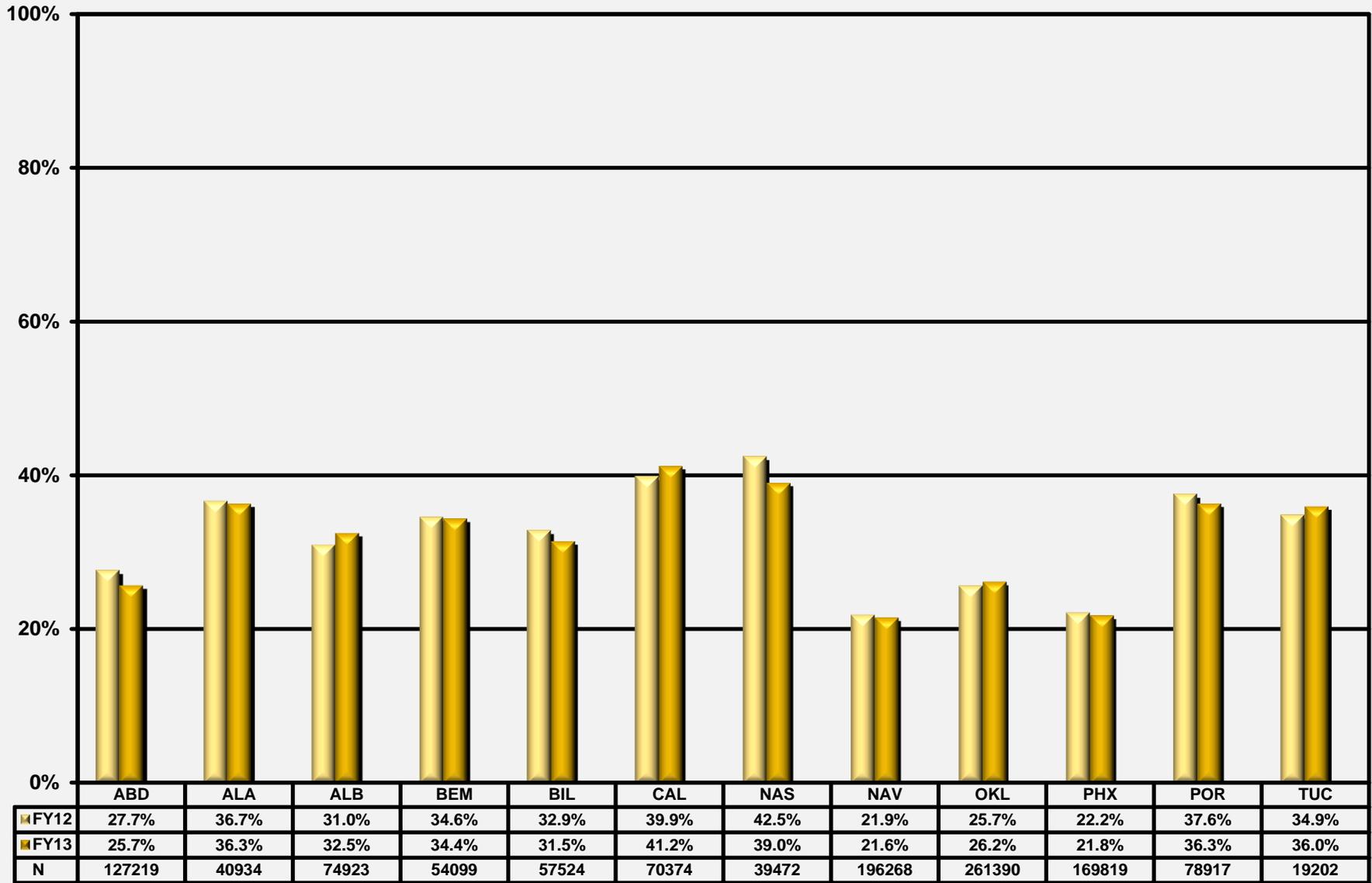
Dental: Sealants
Percentage of AI/AN children with intact dental sealants.

13.9*

2013

*Prior to FY 2013, this measure tracked the number of sealants placed in AI/AN patients within the past year.

Dental: Sealants

	ABD	ALA	ALB	BEM	BIL	CAL	NAS	NAV	OKL	PHX	POR	TUC
■FY12												
■FY13	14.7%	20.6%	23.1%	17.1%	21.8%	13.7%	22.8%	16.3%	6.9%	8.1%	15.7%	21.3%
n	36212	10738	16762	14108	16460	18447	10058	50126	64503	45132	19378	4927

Dental: Topical Fluorides

Percentage of AI/AN children with at least one topical fluoride treatment within the past year.
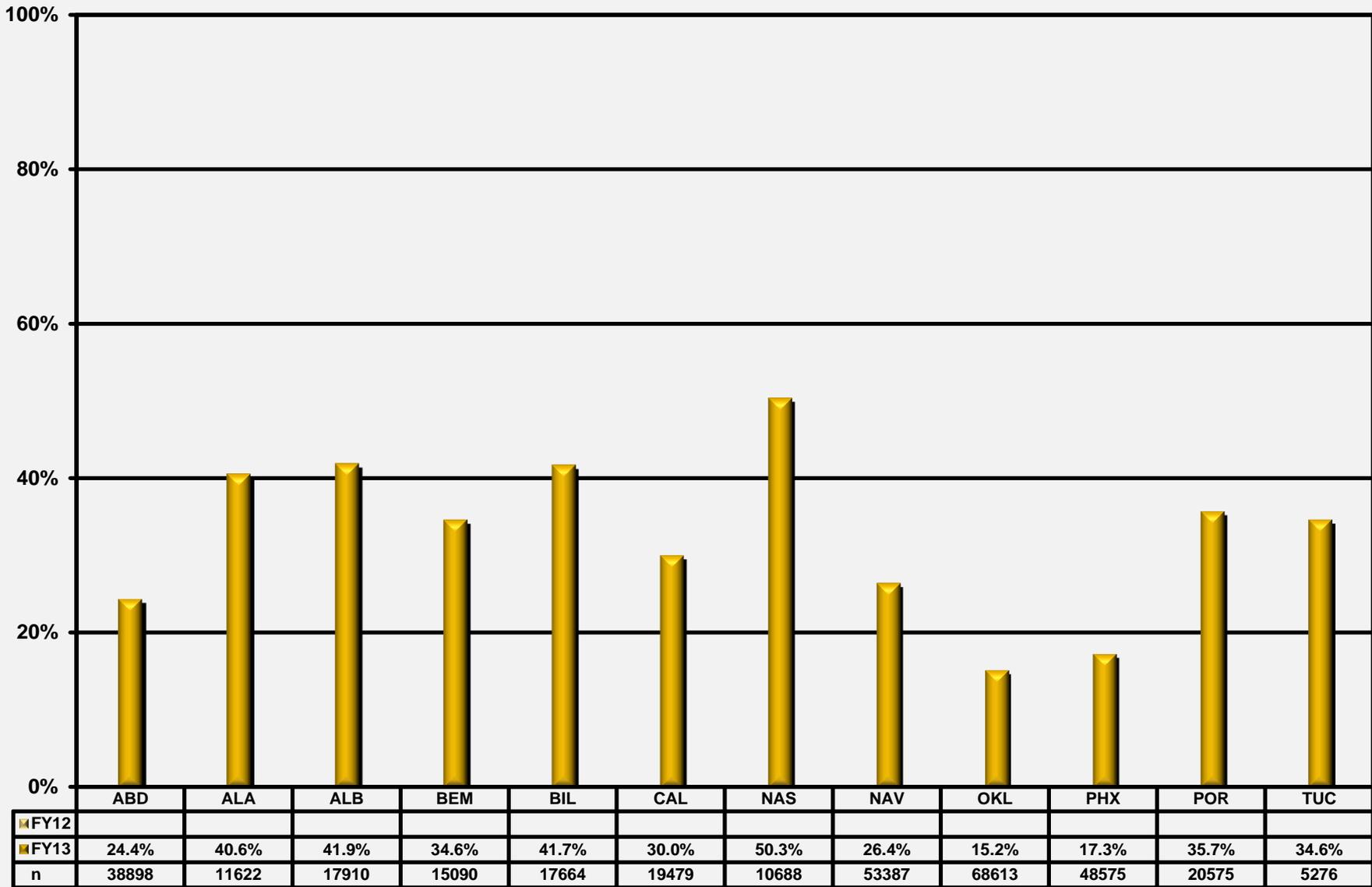
HP 2020 Goal = 90.0%

26.7*
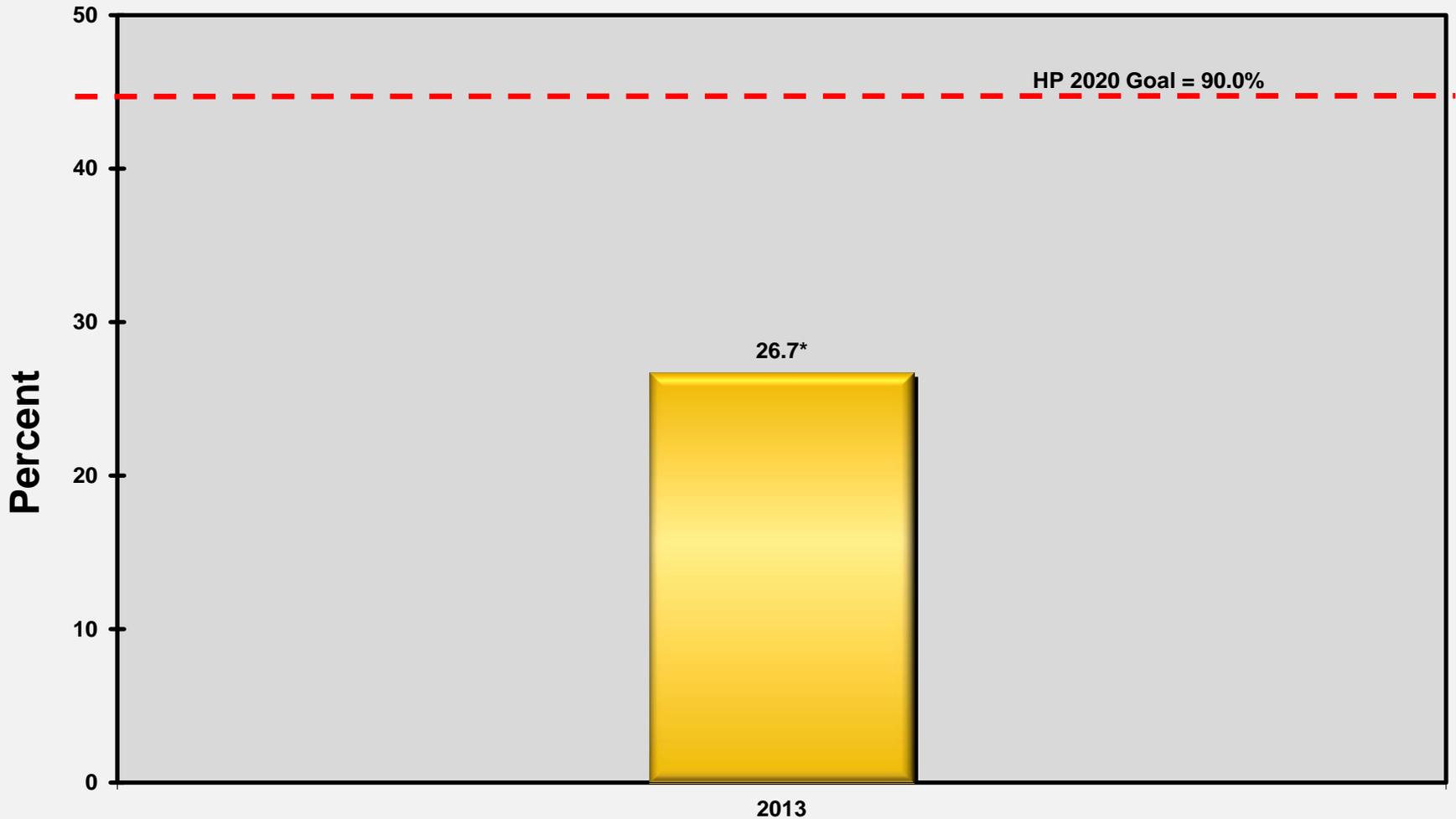
2013

*Prior to FY 2013, this measure tracked the number of patients receiving one or more fluoride applications in the past year.

Dental: Fluorides

	ABD	ALA	ALB	BEM	BIL	CAL	NAS	NAV	OKL	PHX	POR	TUC
FY12												
FY13	24.4%	40.6%	41.9%	34.6%	41.7%	30.0%	50.3%	26.4%	15.2%	17.3%	35.7%	34.6%
n	38898	11622	17910	15090	17664	19479	10688	53387	68613	48575	20575	5276

Immunizations: Influenza

AI/AN patients (age 65+) who have received the influenza vaccine within the past year.
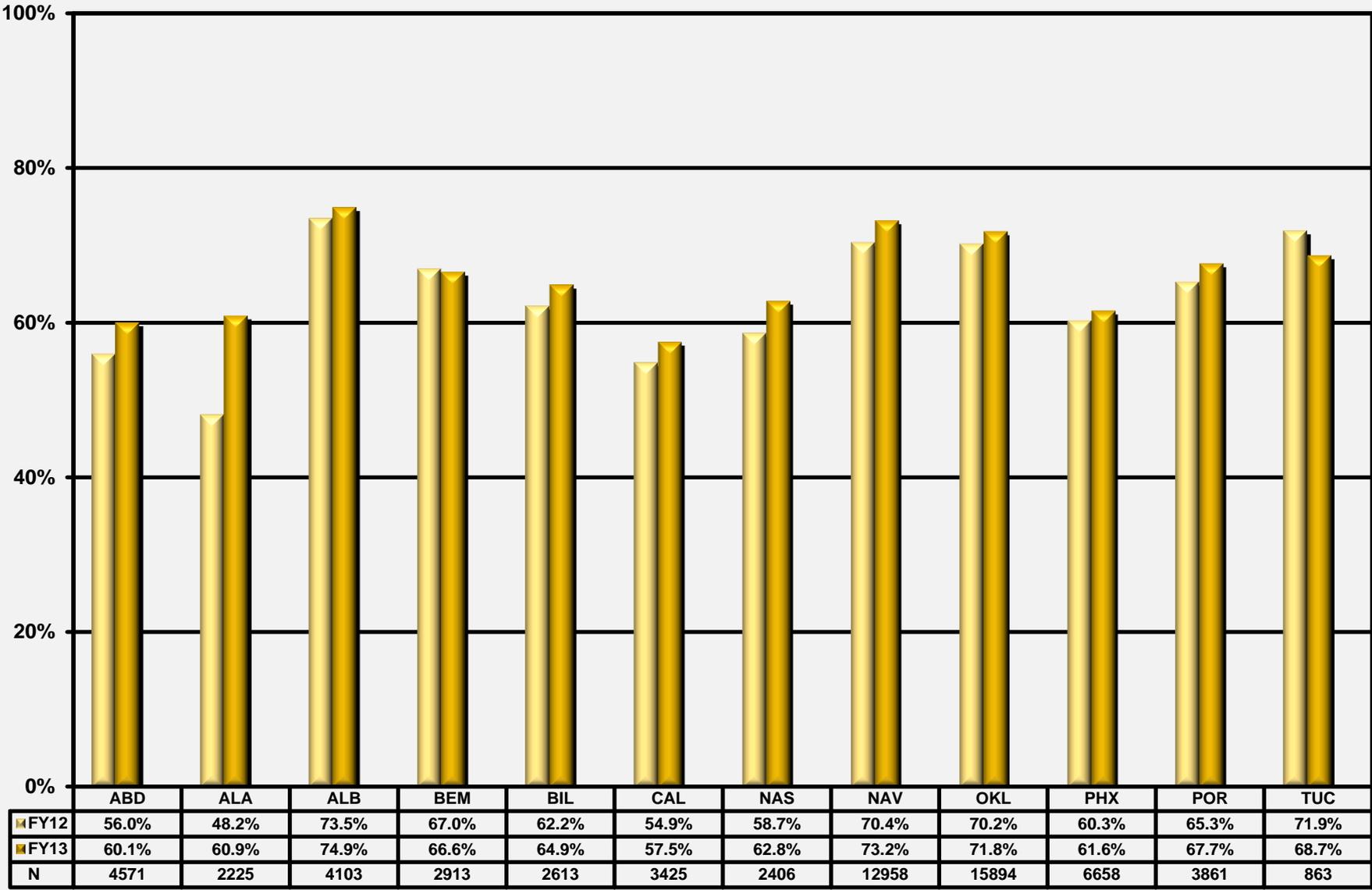
Immunizations: Influenza (65+)

	ABD	ALA	ALB	BEM	BIL	CAL	NAS	NAV	OKL	PHX	POR	TUC
FY12	56.0%	48.2%	73.5%	67.0%	62.2%	54.9%	58.7%	70.4%	70.2%	60.3%	65.3%	71.9%
FY13	60.1%	60.9%	74.9%	66.6%	64.9%	57.5%	62.8%	73.2%	71.8%	61.6%	67.7%	68.7%
N	4571	2225	4103	2913	2613	3425	2406	12958	15894	6658	3861	863
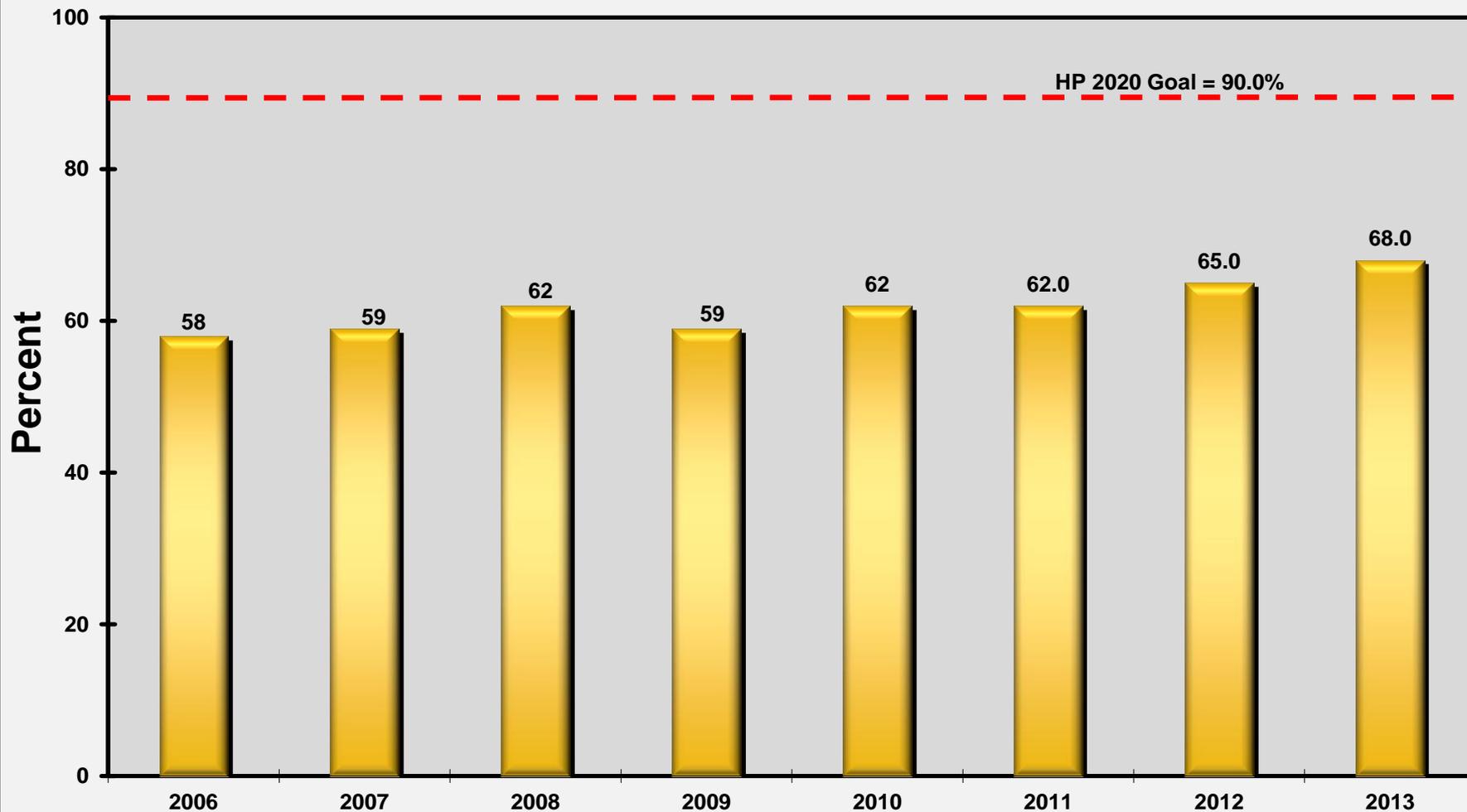
Immunizations: Pneumococcal

AI/AN patients (age 65+) who have ever received the pneumococcal vaccination.

HP 2020 Goal = 90%

Year	Percent
2006	74
2007	79
2008	82
2009	82
2010	84
2011	85.5
2012	88.5
2013	89.2

Immunizations: Pneumococcal (65+)

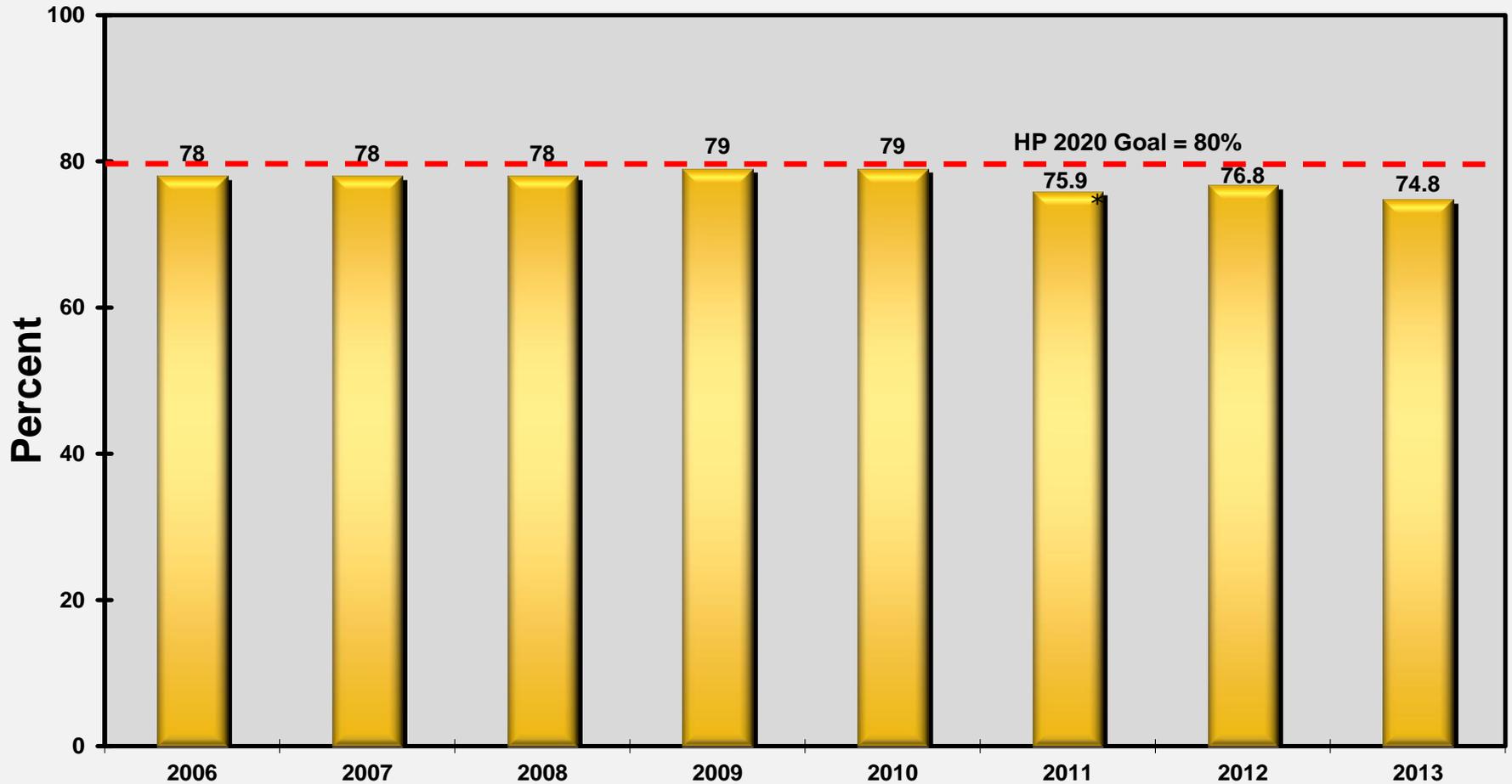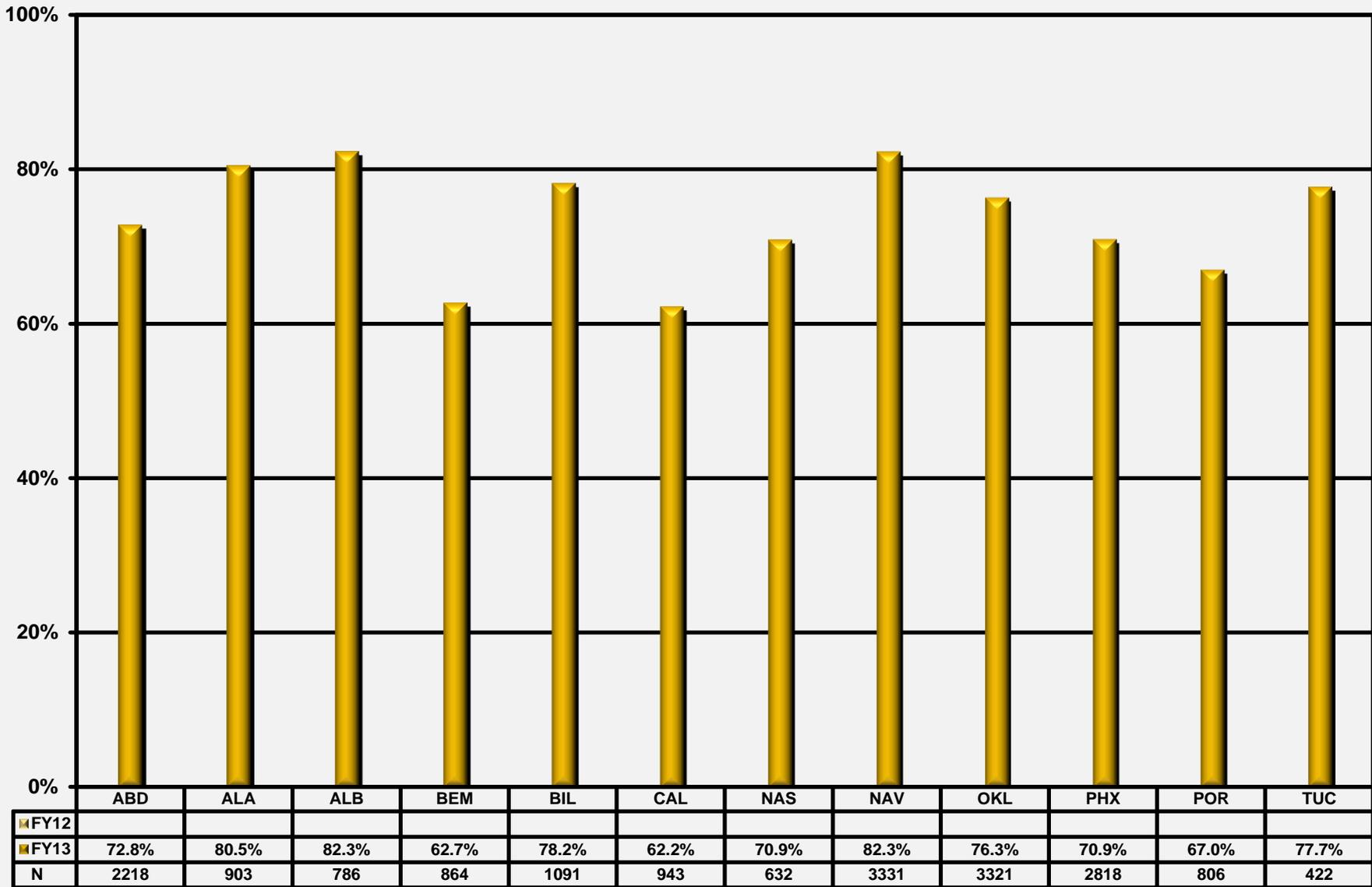|	ABD	ALA	ALB	BEM	BIL	CAL	NAS	NAV	OKL	PHX	POR	TUC
FY12	85.2%	94.1%	93.8%	83.6%	89.2%	83.7%	85.0%	92.7%	87.7%	85.1%	84.0%	94.9%
FY13	85.8%	94.1%	94.3%	84.3%	90.3%	83.9%	85.8%	94.0%	88.5%	86.0%	86.0%	93.5%
N	4571	2225	4103	2913	2613	3425	2406	12958	15894	6658	3861	863
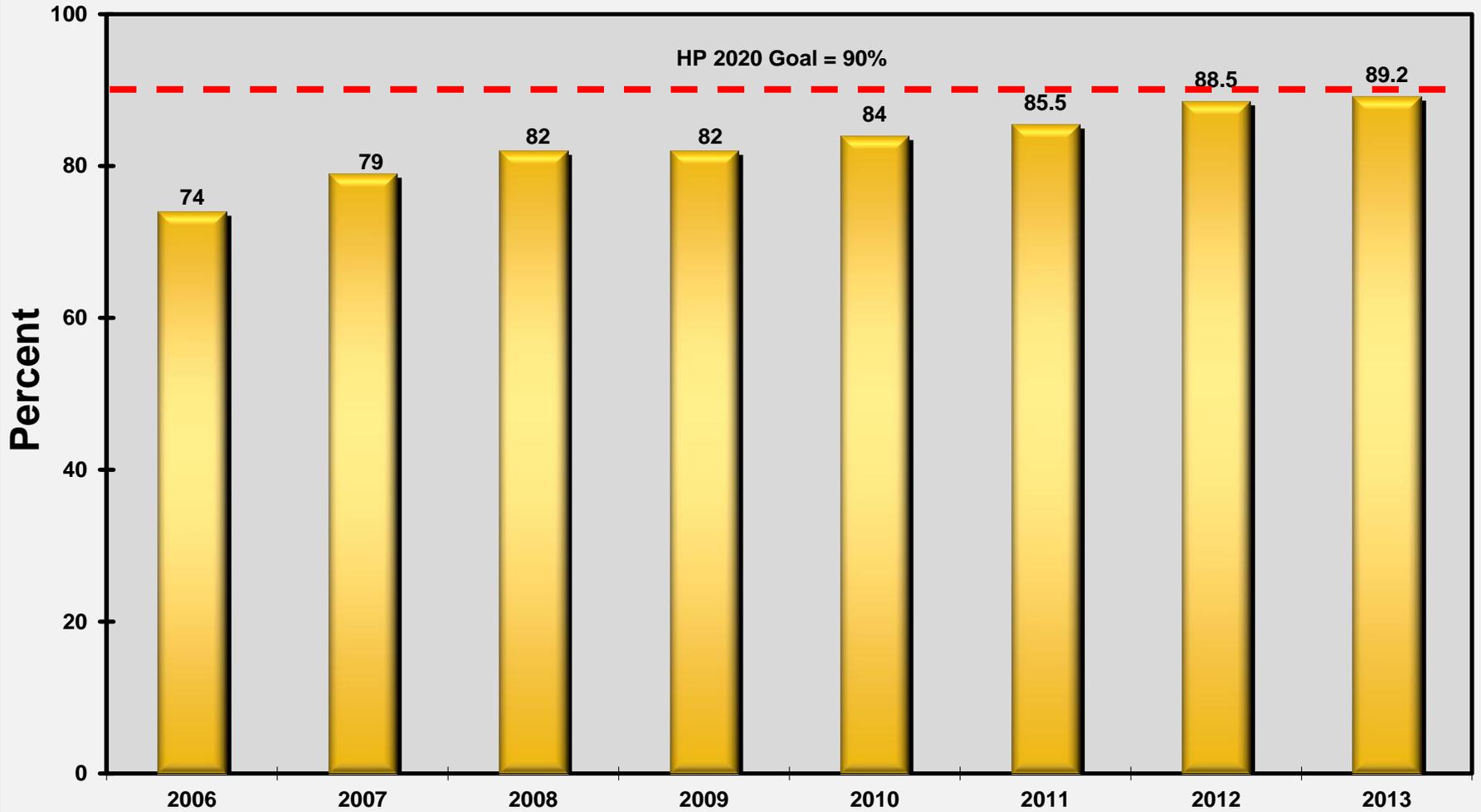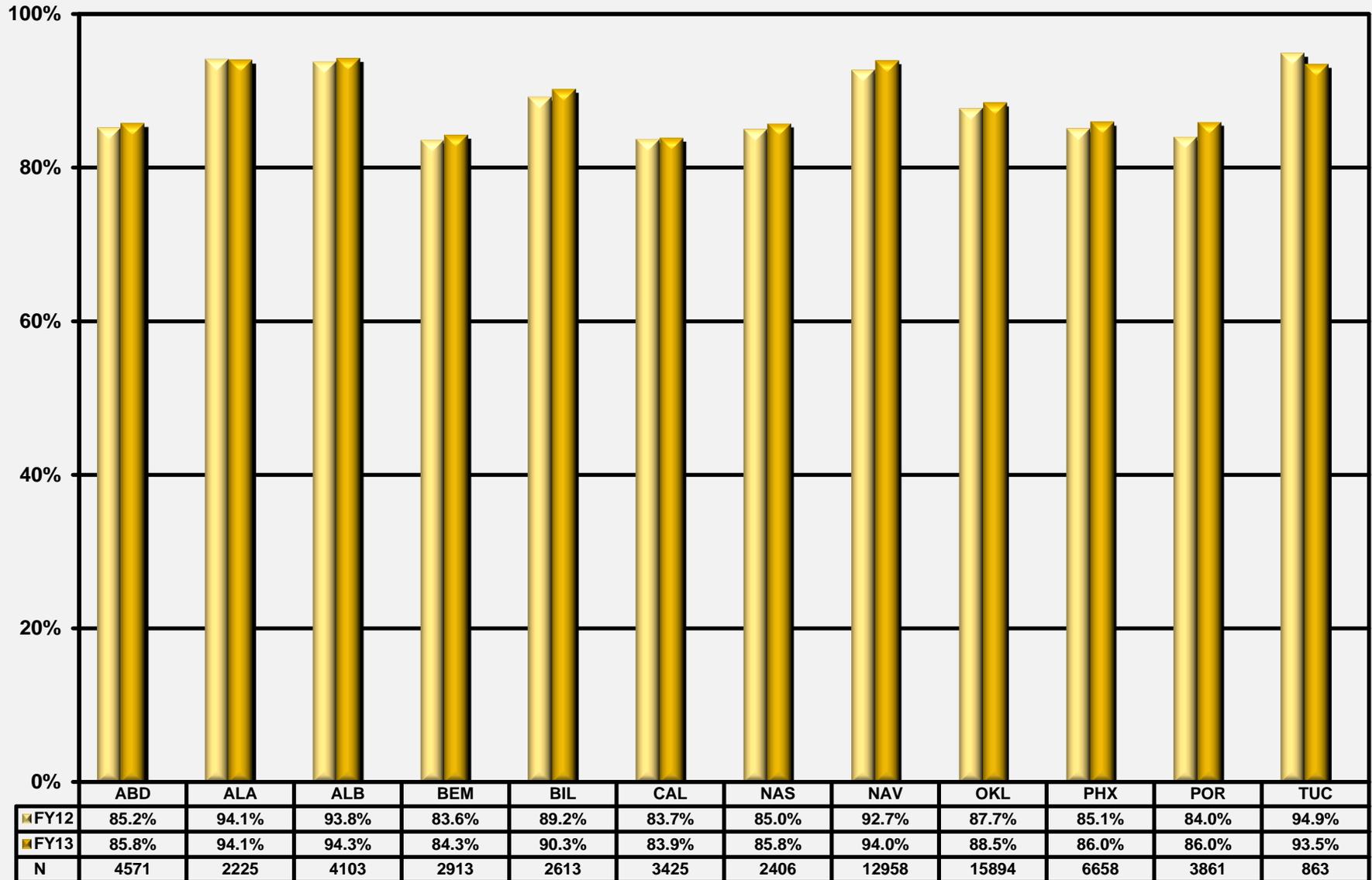
Immunizations: Childhood (19-35 months)

AI/AN patients (age 19-35 months) who have received the combined childhood vaccination series (4:3:1:3:3:1:4*).

HP 2020 Goal = 80%

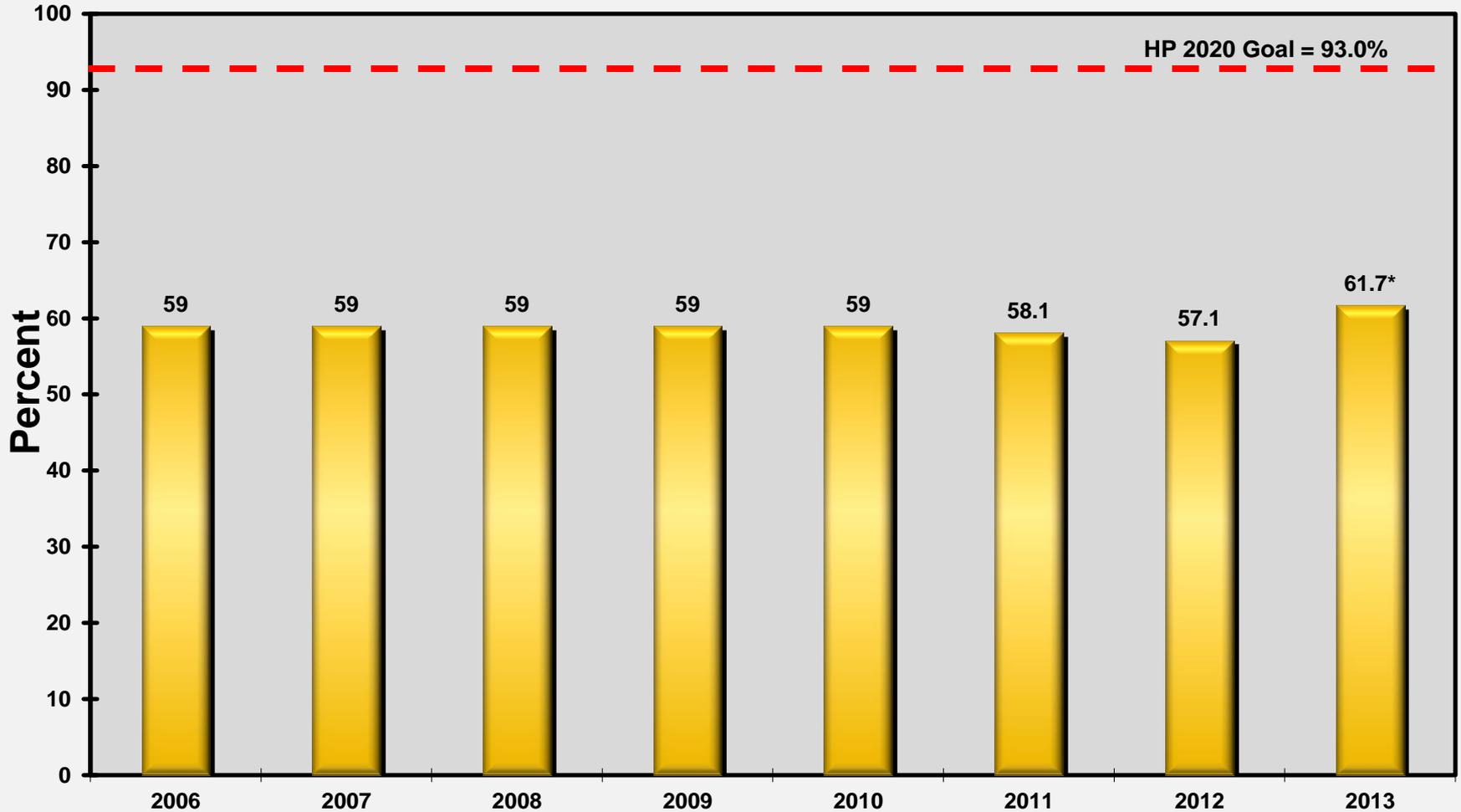| Year	Percent
2006	78
2007	78
2008	78
2009	79
2010	79
2011	75.9 *
2012	76.8
2013	74.8

*4 Pneumococcal conjugate vaccines were added to the childhood immunization series in FY 2011.

Immunizations: Childhood (19-35 months)

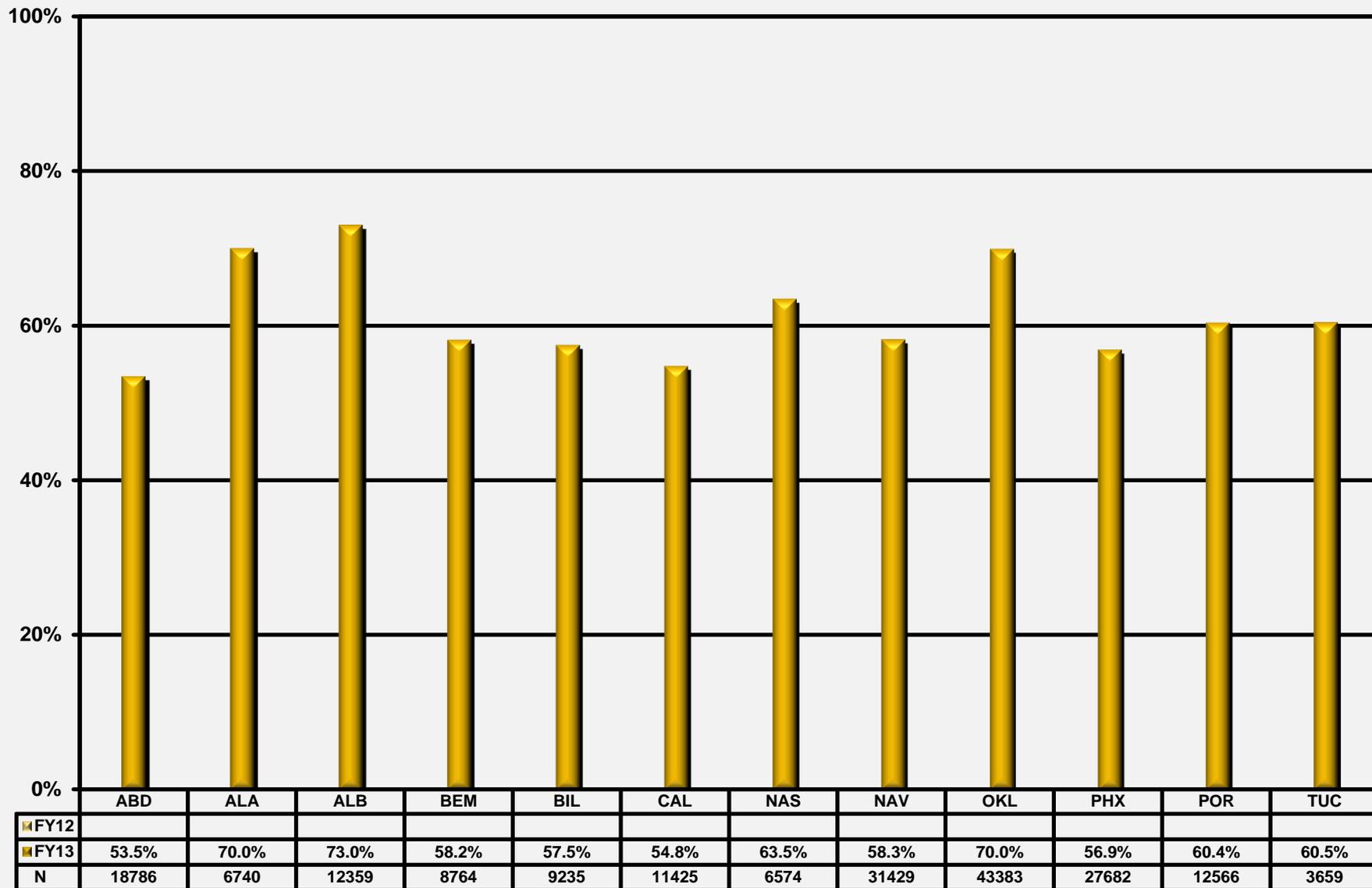|	ABD	ALA	ALB	BEM	BIL	CAL	NAS	NAV	OKL	PHX	POR	TUC
FY12												
FY13	72.8%	80.5%	82.3%	62.7%	78.2%	62.2%	70.9%	82.3%	76.3%	70.9%	67.0%	77.7%
N	2218	903	786	864	1091	943	632	3331	3321	2818	806	422

Cancer Screening: Cervical (Pap Screen)
AI/AN women (age 25-64) who have received a Pap screen
within the previous four years.

HP 2020 Goal = 93.0%

Percent

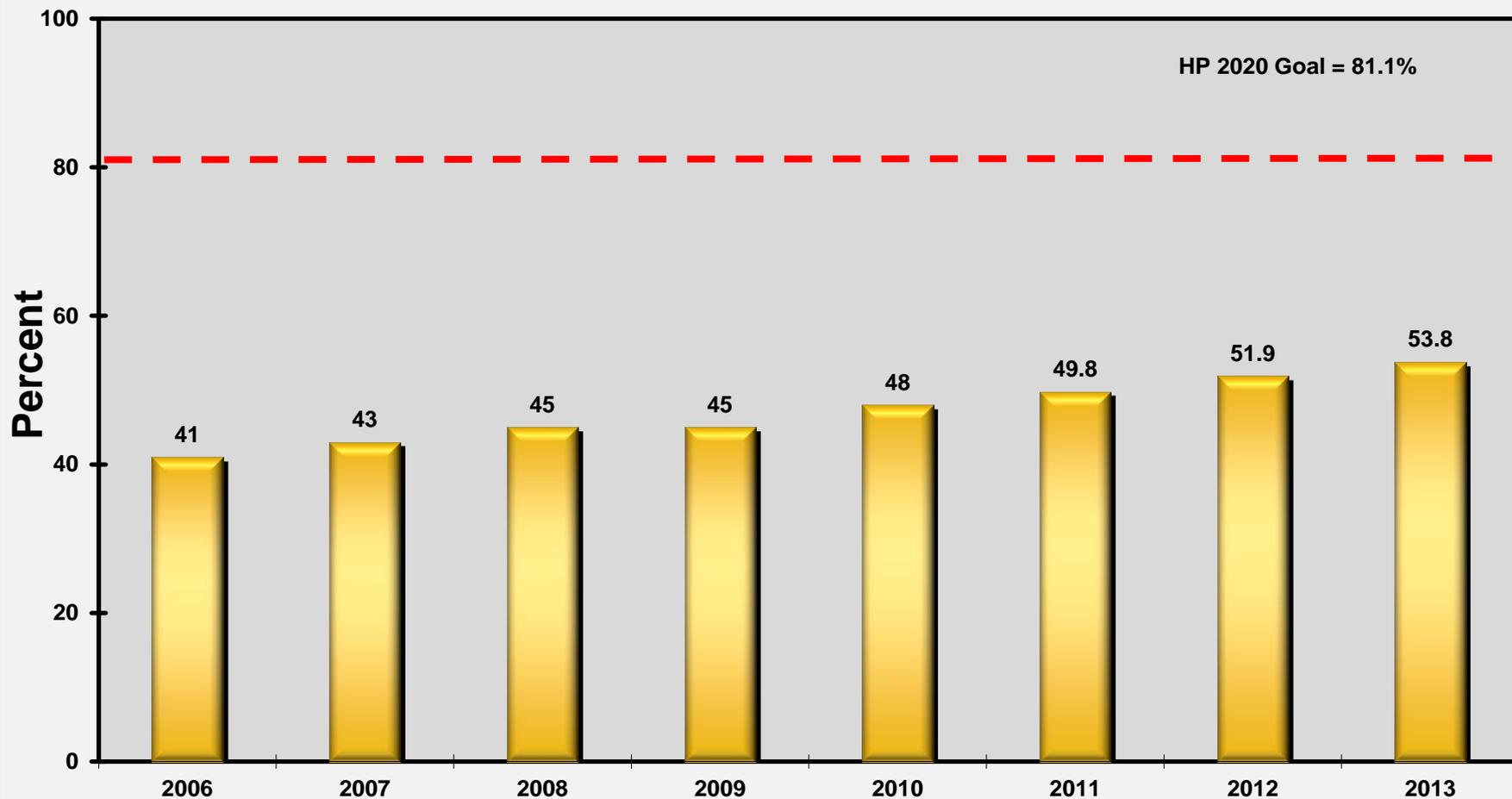| 2006	2007	2008	2009	2010	2011	2012	2013
59	59	59	59	59	58.1	57.1	61.7*

*Prior to FY 2013, this measure tracked the percentage of women age 21-64 with a Pap screen in the previous three years.

Cancer Screening: Cervical (Pap Screening)

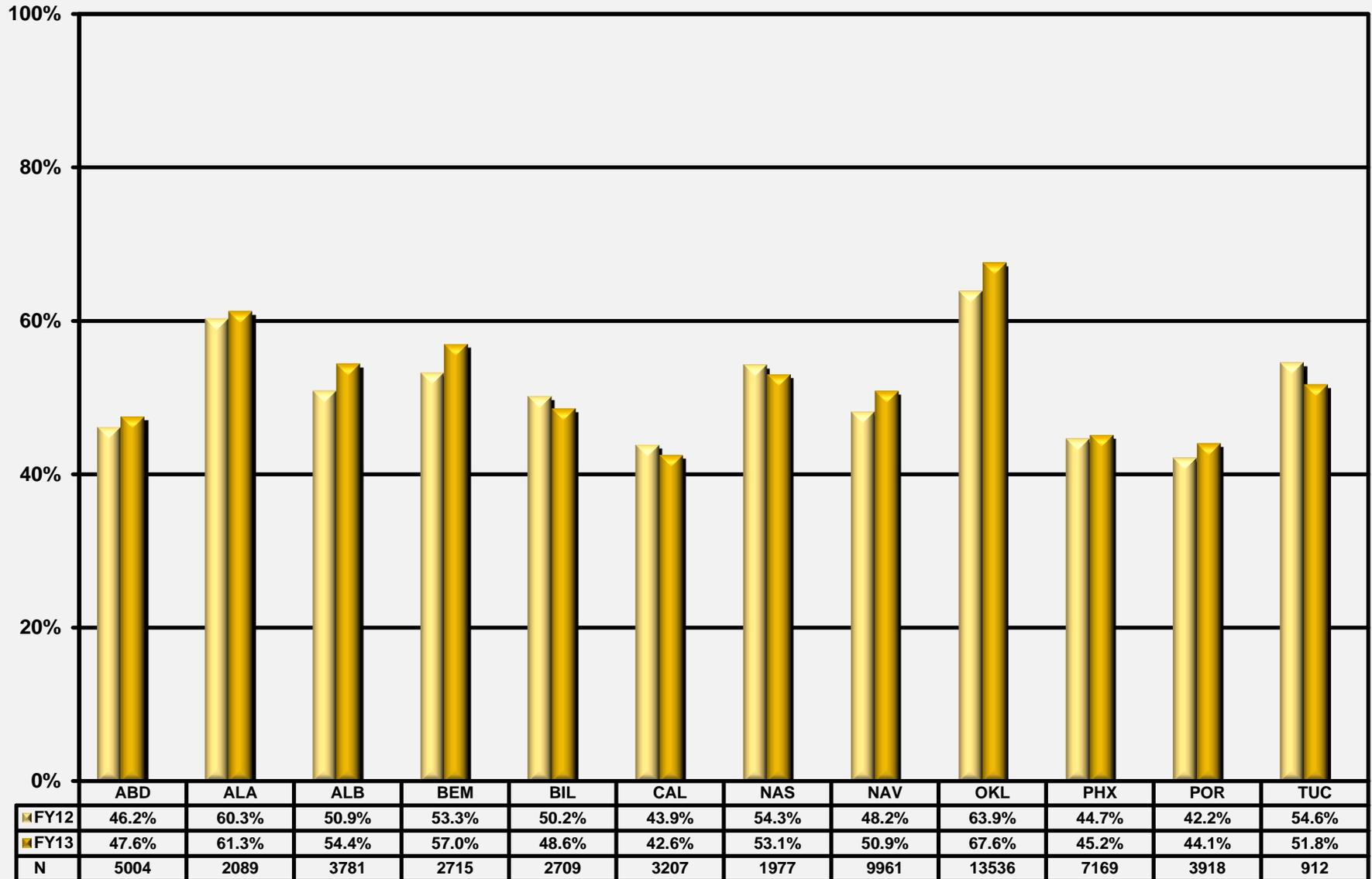|	ABD	ALA	ALB	BEM	BIL	CAL	NAS	NAV	OKL	PHX	POR	TUC
FY12												
FY13	53.5%	70.0%	73.0%	58.2%	57.5%	54.8%	63.5%	58.3%	70.0%	56.9%	60.4%	60.5%
N	18786	6740	12359	8764	9235	11425	6574	31429	43383	27682	12566	3659

Cancer Screening: Breast (Mammography)
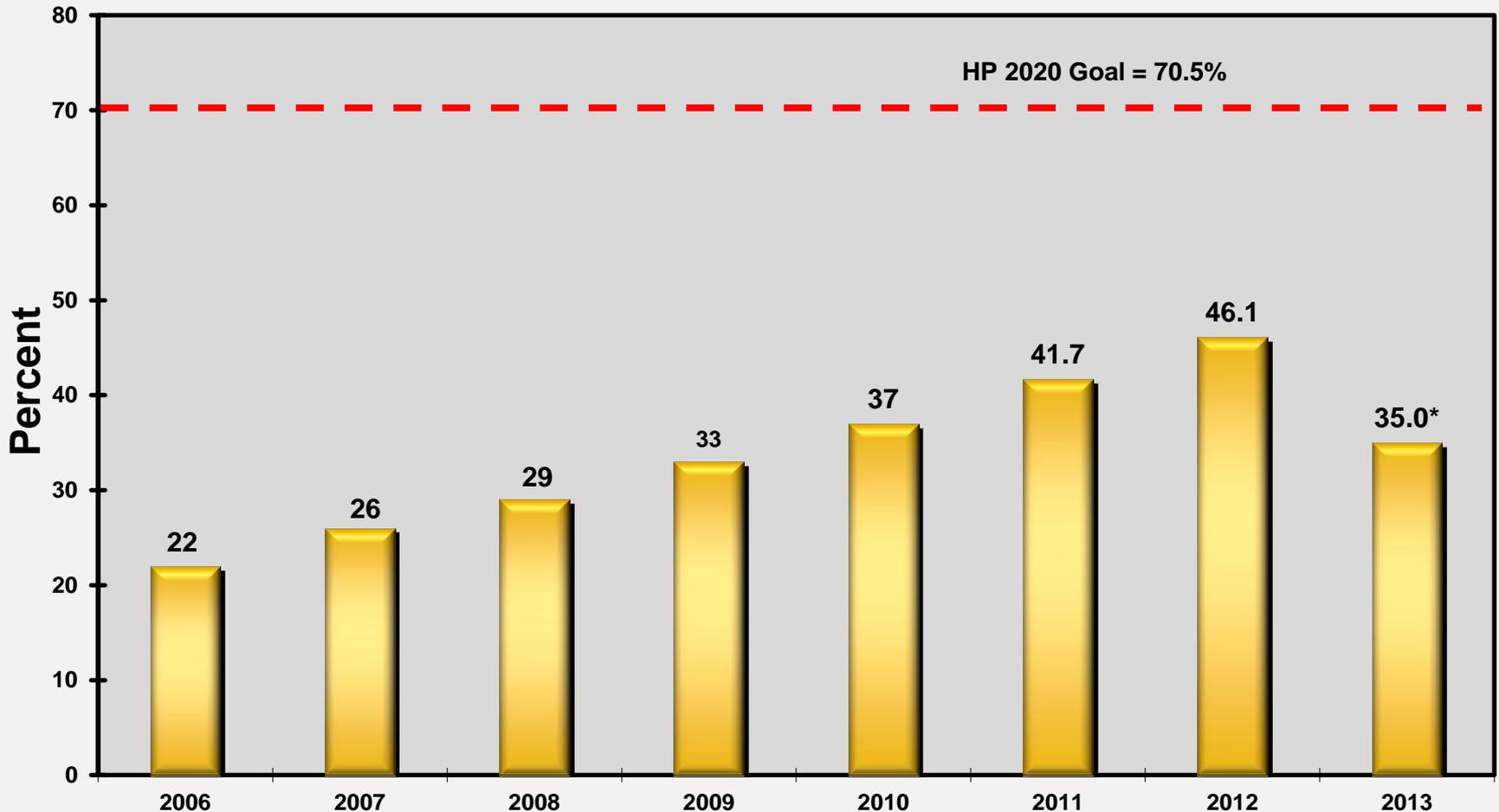AI/AN women (age 52-64) who have received mammography screening within the previous two years.

HP 2020 Goal = 81.1%

Year	Percent
2006	41
2007	43
2008	45
2009	45
2010	48
2011	49.8
2012	51.9
2013	53.8

Cancer Screening: Breast (Mammography)

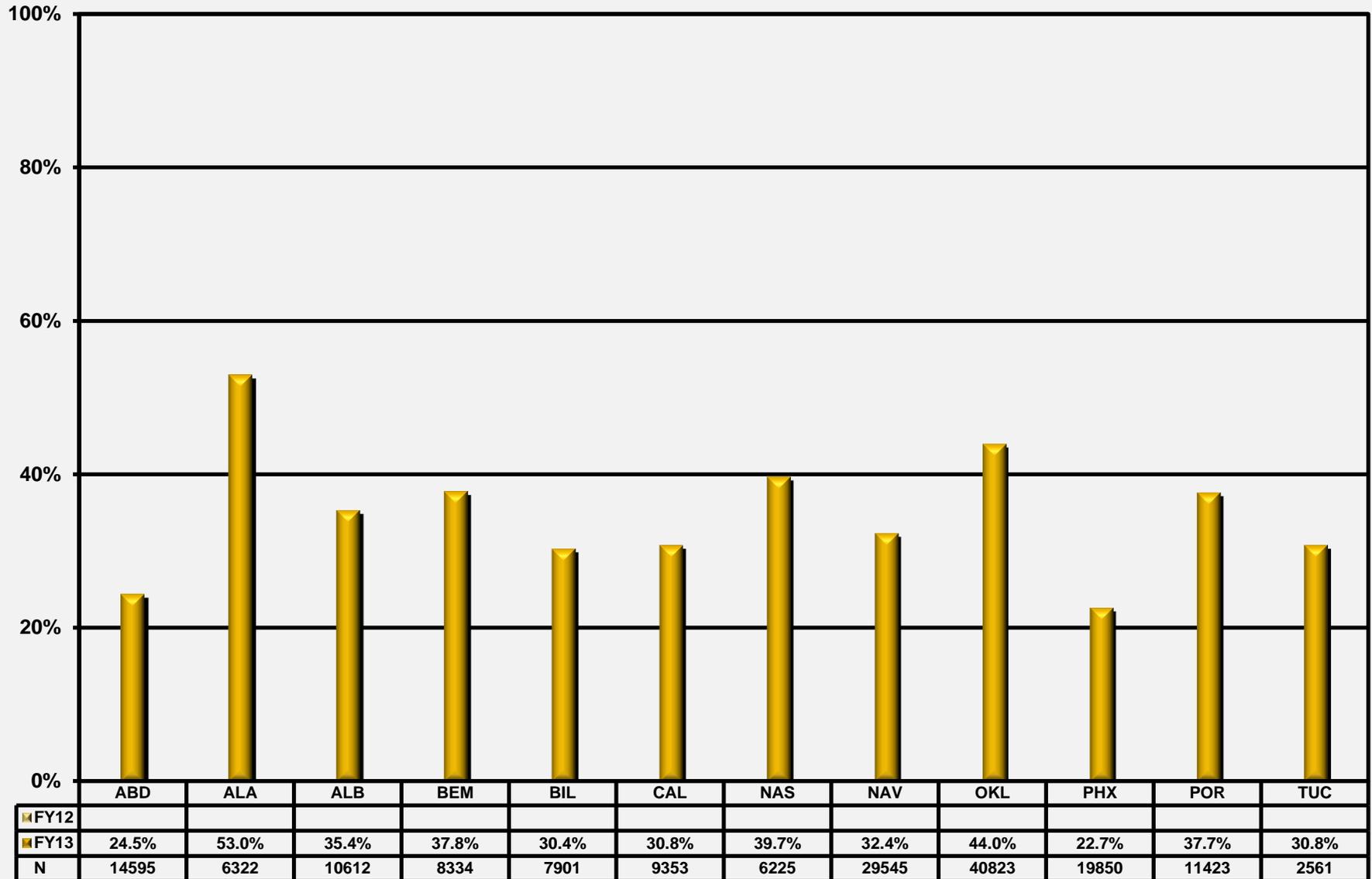|	ABD	ALA	ALB	BEM	BIL	CAL	NAS	NAV	OKL	PHX	POR	TUC
FY12	46.2%	60.3%	50.9%	53.3%	50.2%	43.9%	54.3%	48.2%	63.9%	44.7%	42.2%	54.6%
FY13	47.6%	61.3%	54.4%	57.0%	48.6%	42.6%	53.1%	50.9%	67.6%	45.2%	44.1%	51.8%
N	5004	2089	3781	2715	2709	3207	1977	9961	13536	7169	3918	912

Cancer Screening: Colorectal
AI/AN patients ages 50-75 who have received appropriate Colorectal Cancer Screening.

HP 2020 Goal = 70.5%

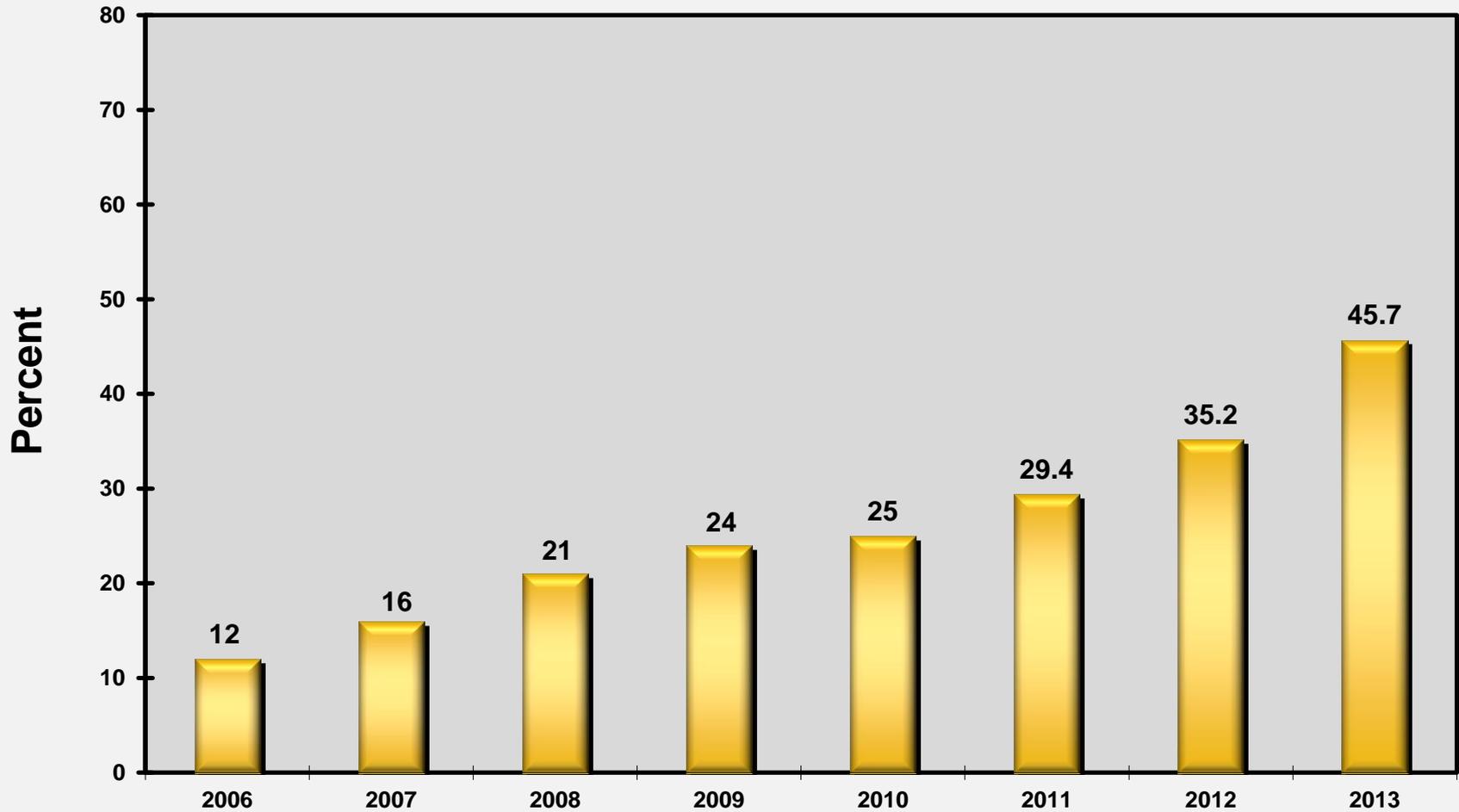| Year	Percent
2006	22
2007	26
2008	29
2009	33
2010	37
2011	41.7
2012	46.1
2013	35.0*

*Prior to FY 2013, this measure tracked the percentage of patients ages 51 to 80 years of age who received appropriate colorectal cancer screening. Beginning in FY 2013, a double contrast barium enema no longer counts toward meeting the measure.
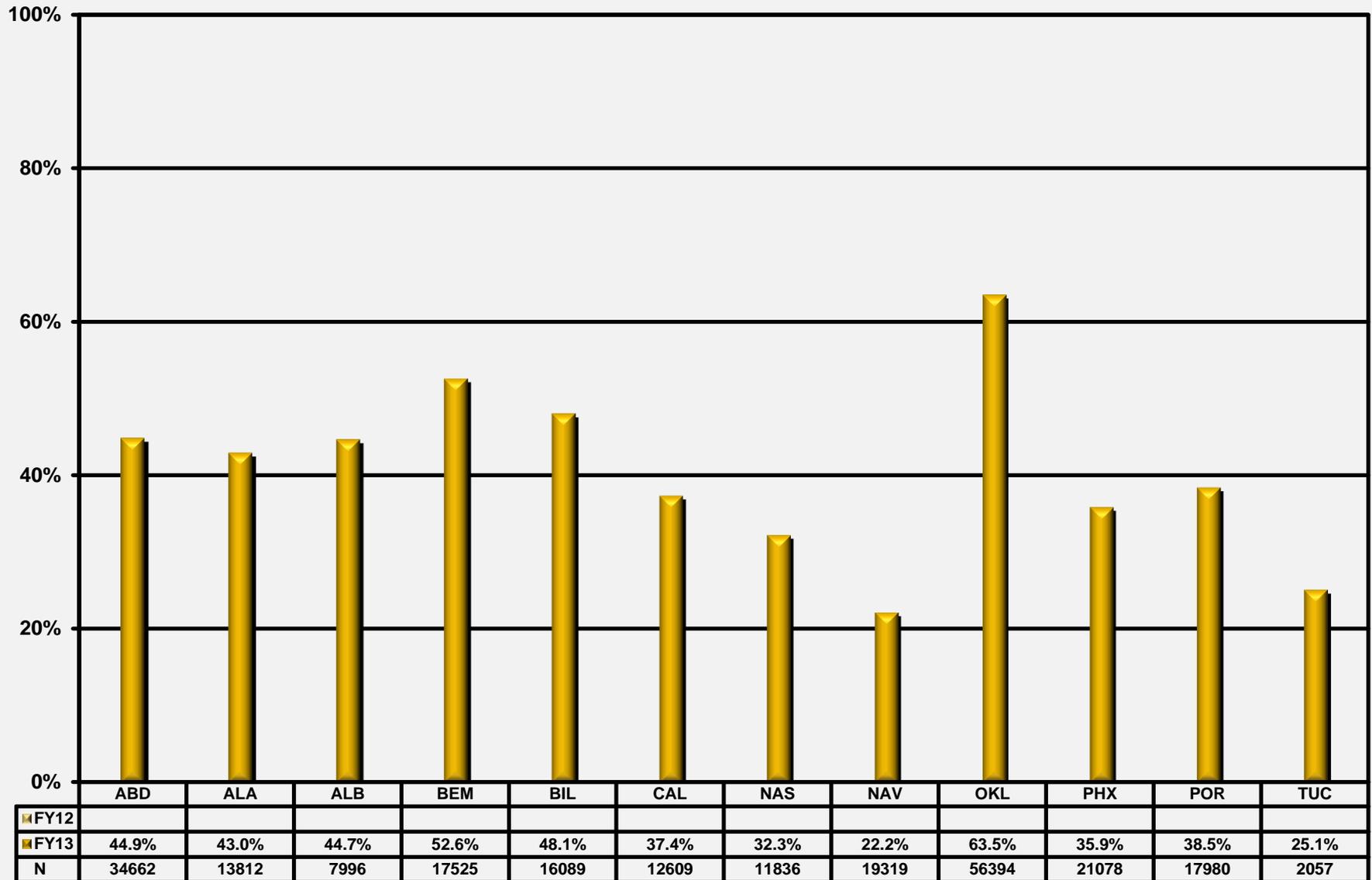
Cancer Screening: Colorectal

	ABD	ALA	ALB	BEM	BIL	CAL	NAS	NAV	OKL	PHX	POR	TUC
FY12												
FY13	24.5%	53.0%	35.4%	37.8%	30.4%	30.8%	39.7%	32.4%	44.0%	22.7%	37.7%	30.8%
N	14595	6322	10612	8334	7901	9353	6225	29545	40823	19850	11423	2561

Tobacco Cessation
Tobacco-using patients who have received tobacco cessation intervention within the past year.

Tobacco Cessation

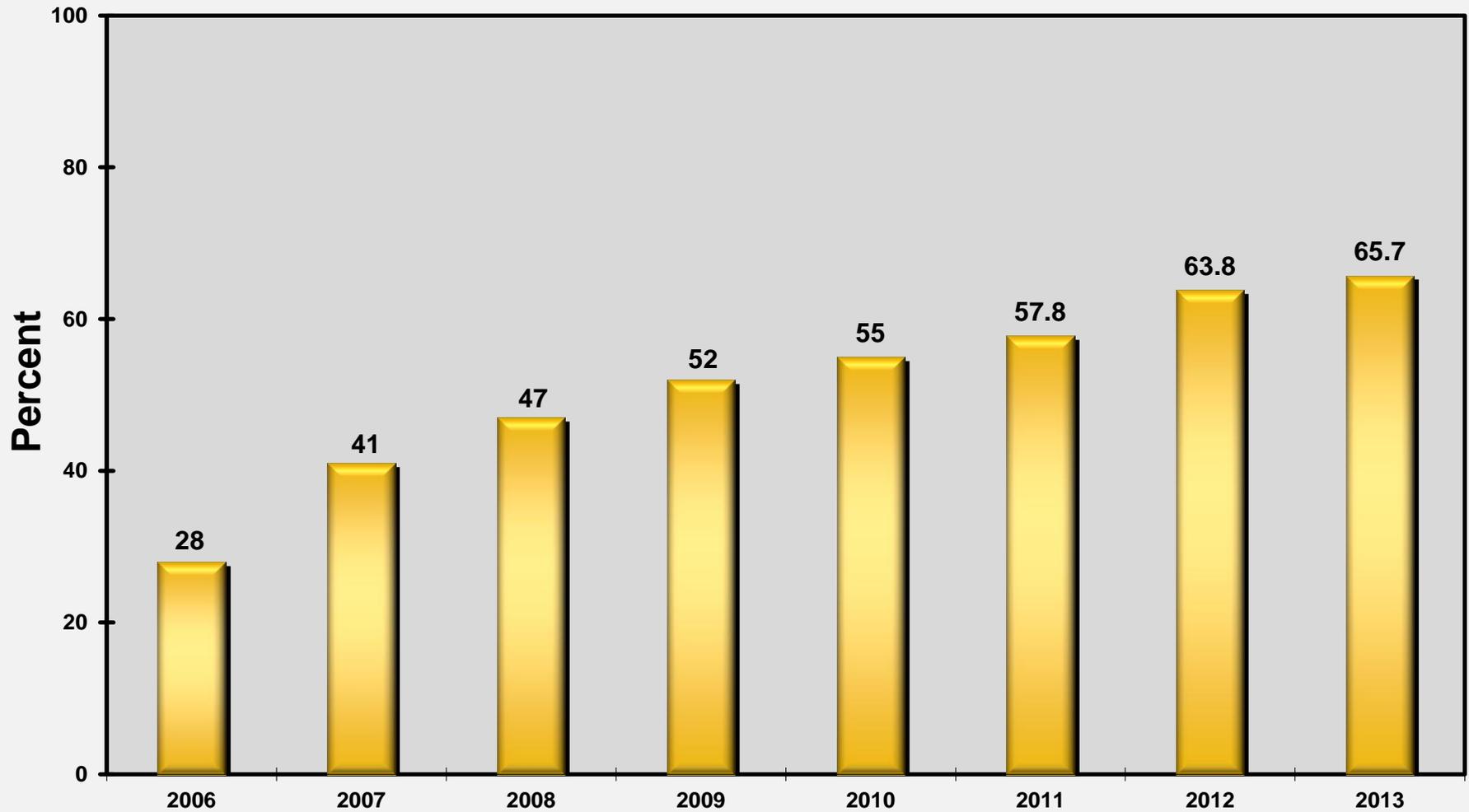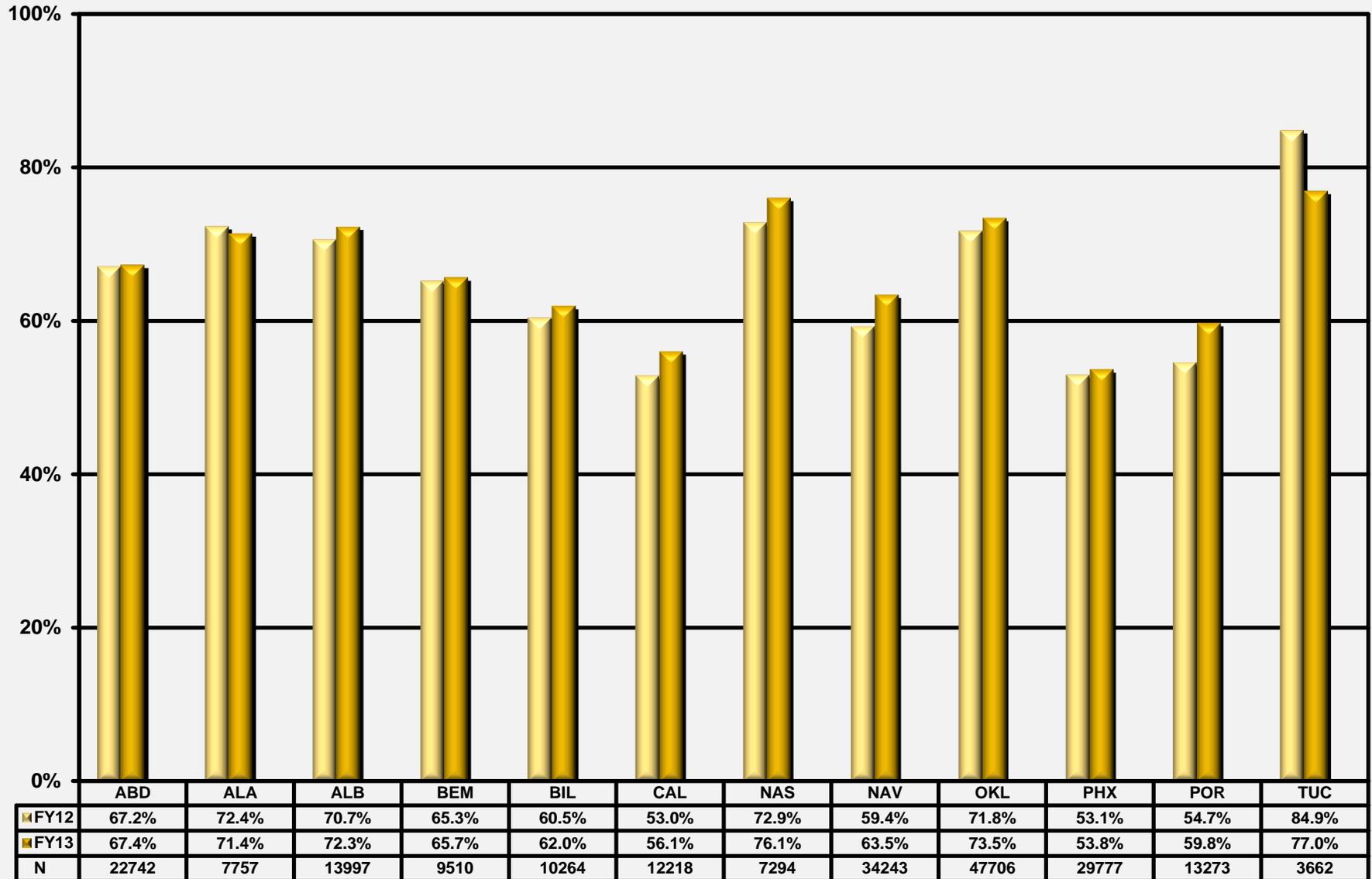|	ABD	ALA	ALB	BEM	BIL	CAL	NAS	NAV	OKL	PHX	POR	TUC
FY12												
FY13	44.9%	43.0%	44.7%	52.6%	48.1%	37.4%	32.3%	22.2%	63.5%	35.9%	38.5%	25.1%
N	34662	13812	7996	17525	16089	12609	11836	19319	56394	21078	17980	2057

Alcohol Screening: Fetal Alcohol Syndrome (FAS) Prevention

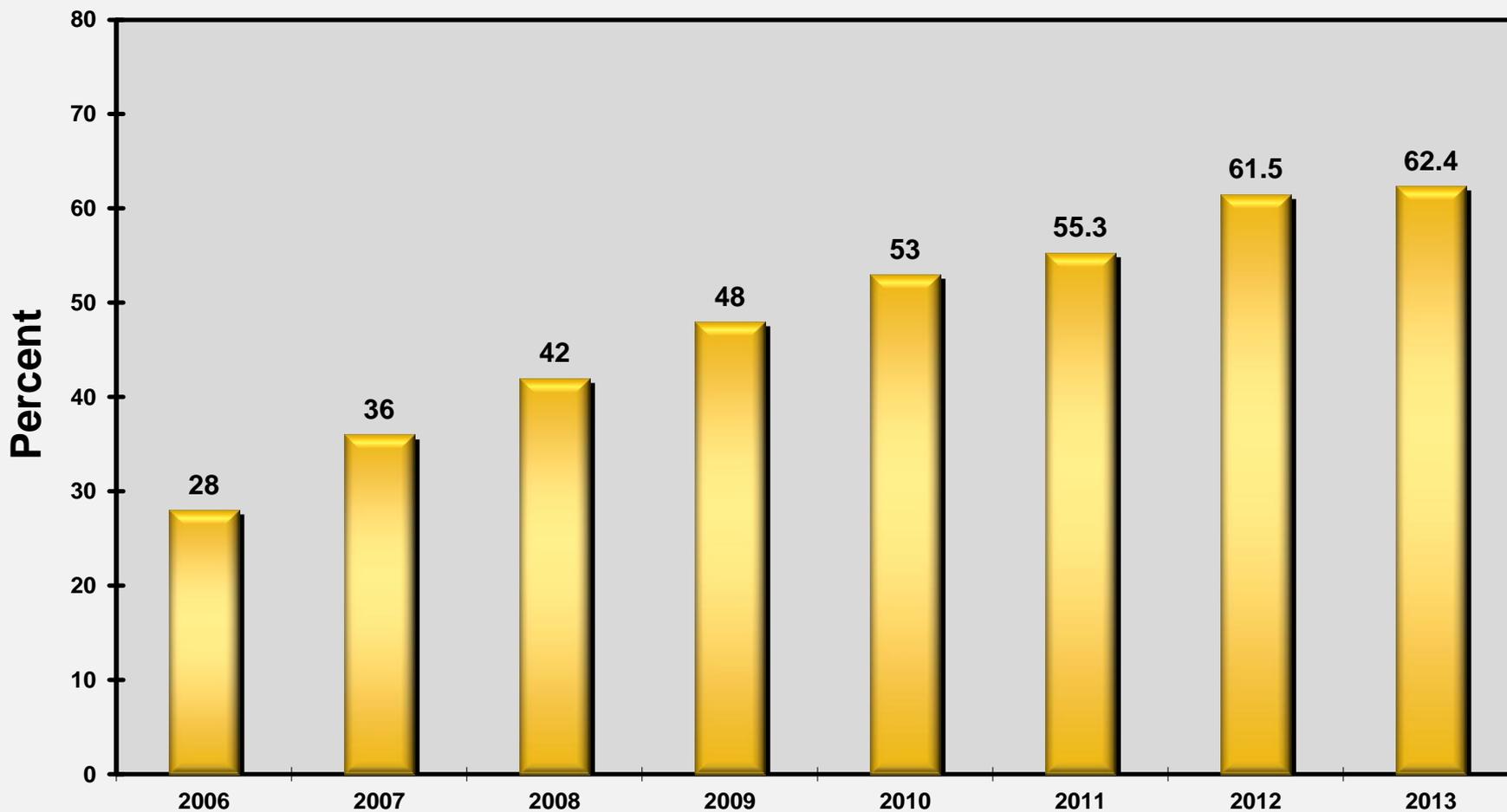AI/AN women (age 15-44) who have been screened for alcohol use within the past year.

Alcohol Screening: FAS Prevention

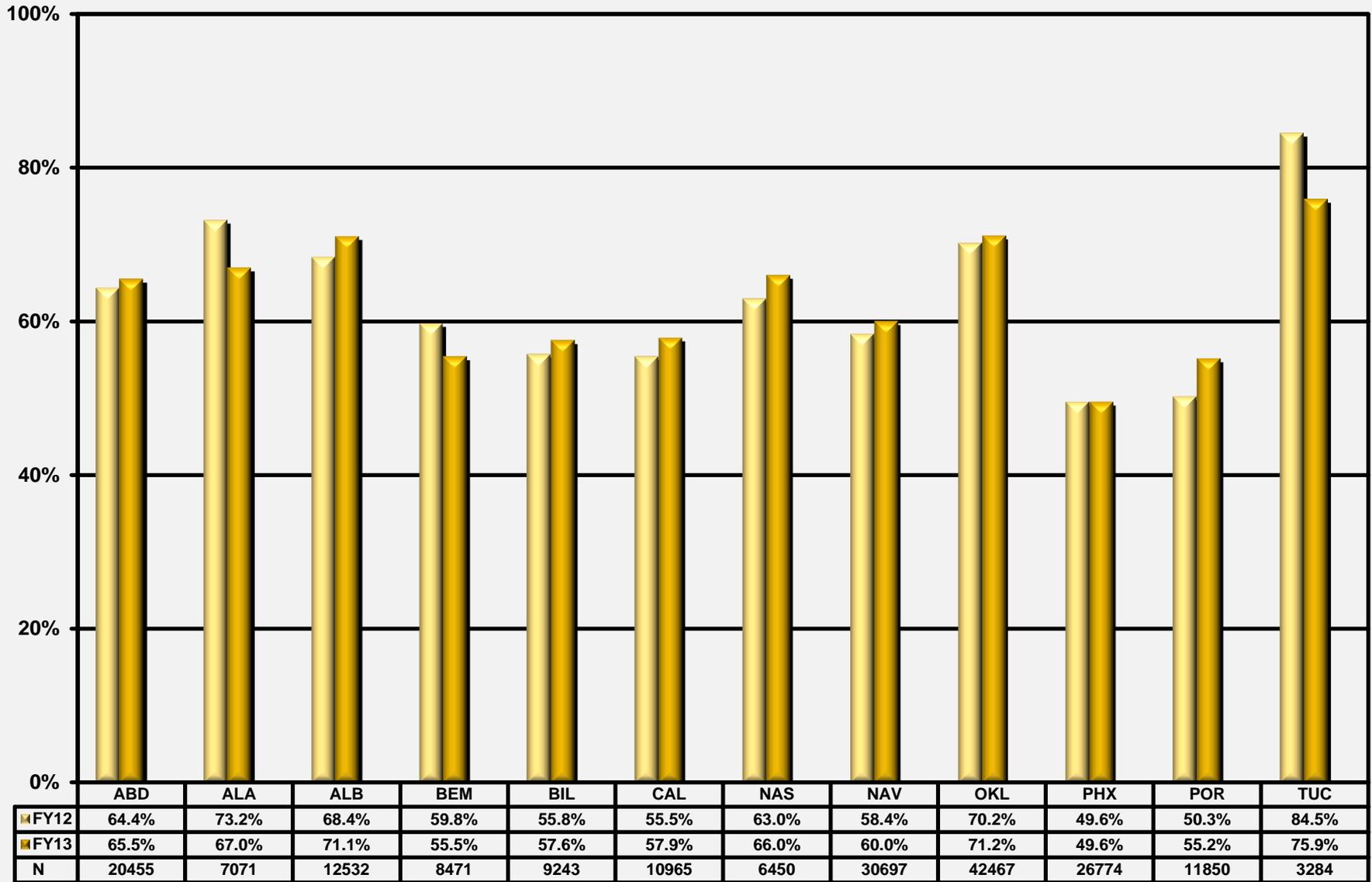|	ABD	ALA	ALB	BEM	BIL	CAL	NAS	NAV	OKL	PHX	POR	TUC
FY12	67.2%	72.4%	70.7%	65.3%	60.5%	53.0%	72.9%	59.4%	71.8%	53.1%	54.7%	84.9%
FY13	67.4%	71.4%	72.3%	65.7%	62.0%	56.1%	76.1%	63.5%	73.5%	53.8%	59.8%	77.0%
N	22742	7757	13997	9510	10264	12218	7294	34243	47706	29777	13273	3662

Domestic Violence/Intimate Partner Violence Screening:
AI/AN women (age 15-40) who were screened for domestic violence /intimate partner violence within the past year.
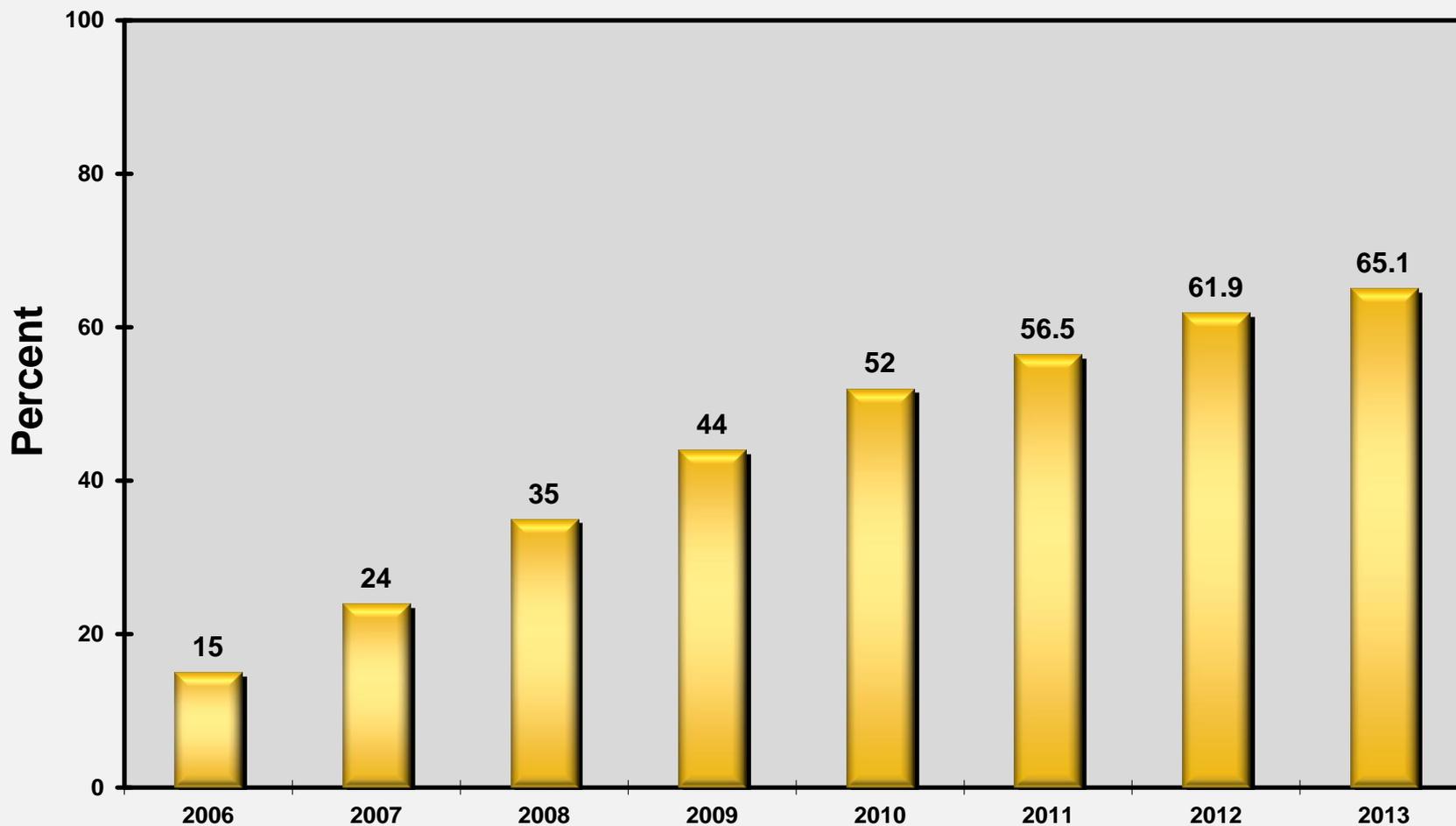
DV/IPV Screening

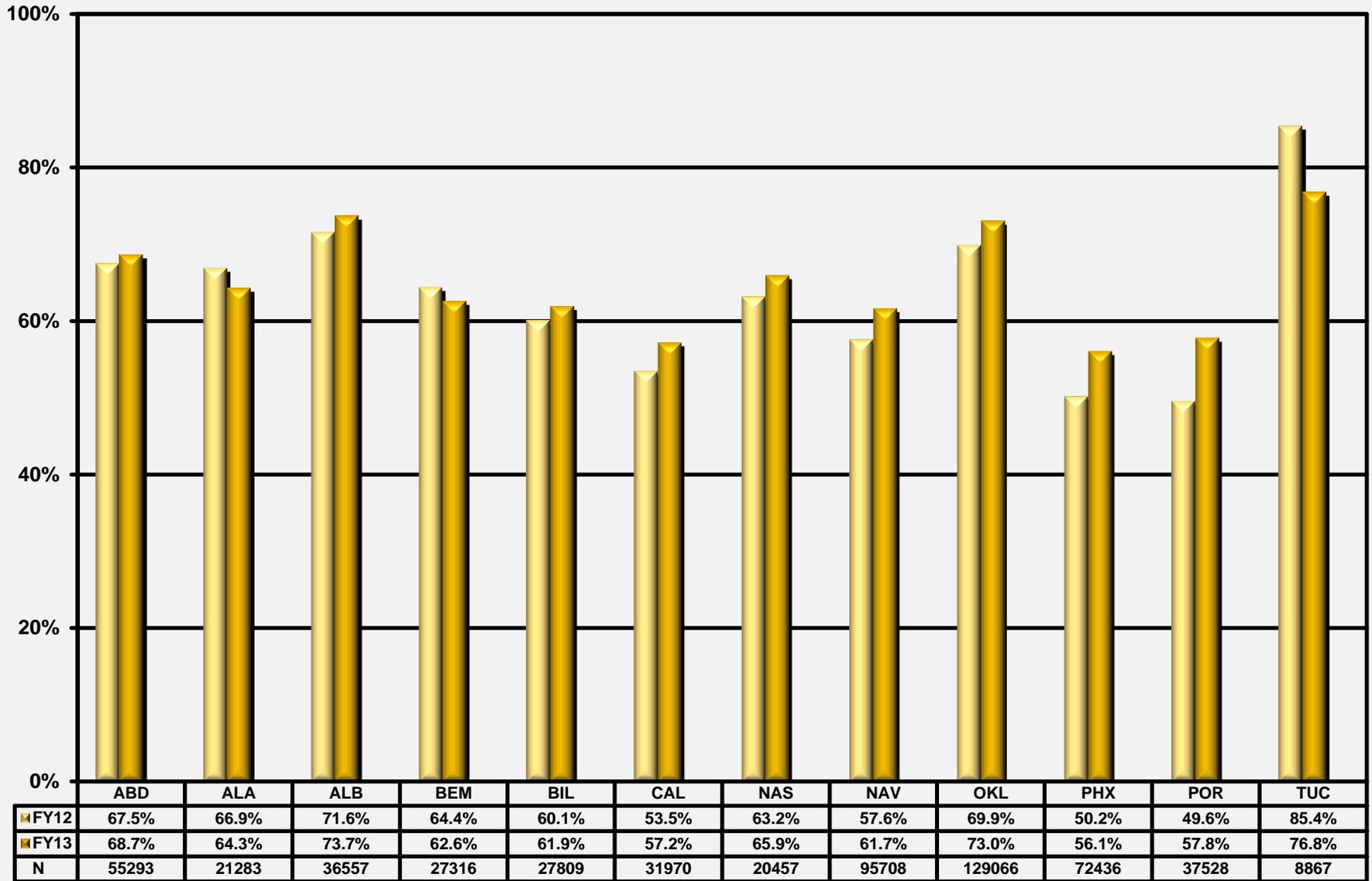|	ABD	ALA	ALB	BEM	BIL	CAL	NAS	NAV	OKL	PHX	POR	TUC
FY12	64.4%	73.2%	68.4%	59.8%	55.8%	55.5%	63.0%	58.4%	70.2%	49.6%	50.3%	84.5%
FY13	65.5%	67.0%	71.1%	55.5%	57.6%	57.9%	66.0%	60.0%	71.2%	49.6%	55.2%	75.9%
N	20455	7071	12532	8471	9243	10965	6450	30697	42467	26774	11850	3284

Depression Screening

AI/AN patients ages 18 and older who have been screened for depression or diagnosed with a mood disorder within the past year.

Depression Screening

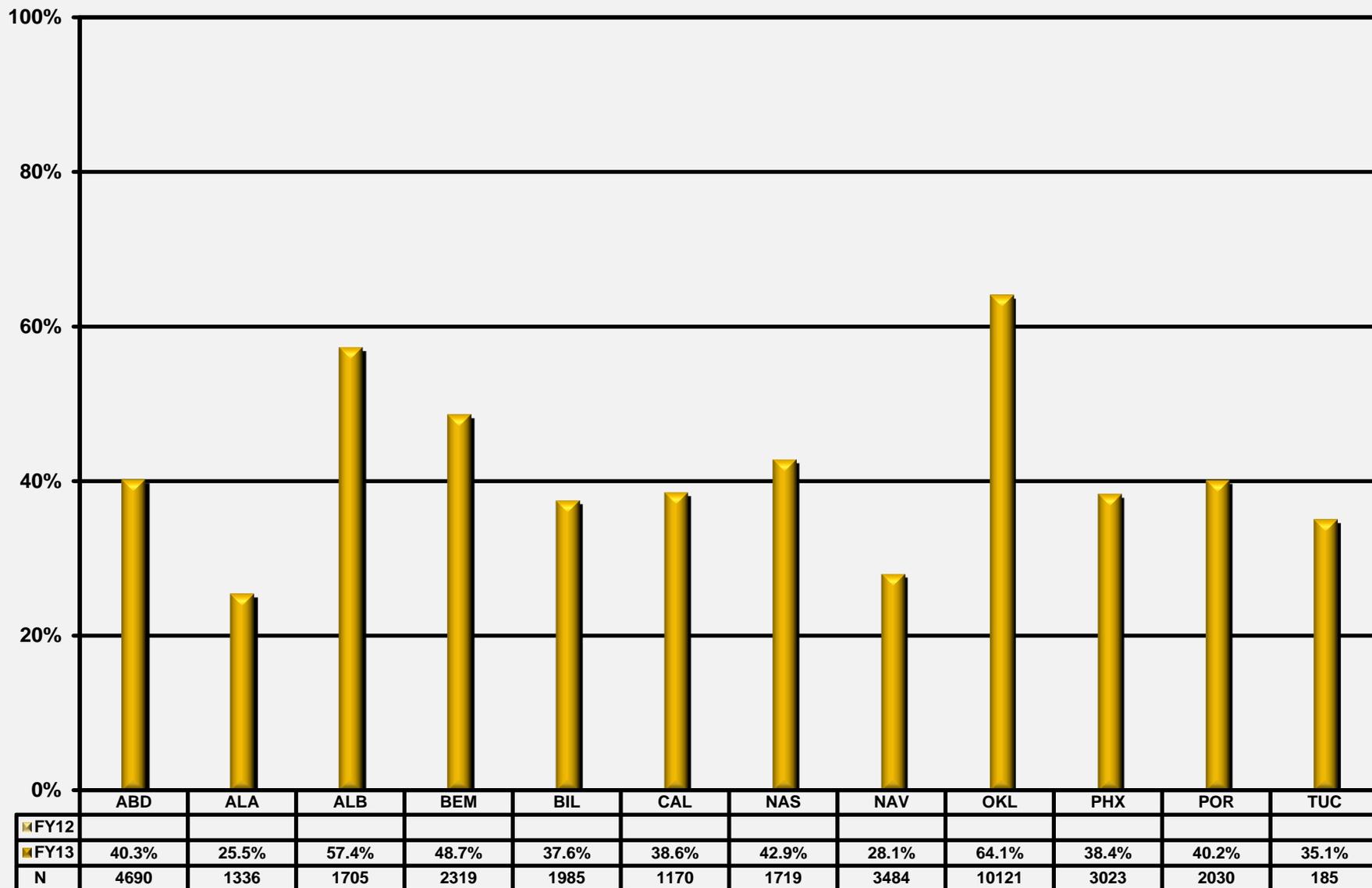|	ABD	ALA	ALB	BEM	BIL	CAL	NAS	NAV	OKL	PHX	POR	TUC
FY12	67.5%	66.9%	71.6%	64.4%	60.1%	53.5%	63.2%	57.6%	69.9%	50.2%	49.6%	85.4%
FY13	68.7%	64.3%	73.7%	62.6%	61.9%	57.2%	65.9%	61.7%	73.0%	56.1%	57.8%	76.8%
N	55293	21283	36557	27316	27809	31970	20457	95708	129066	72436	37528	8867

CVD Prevention: Comprehensive Assessment

Active CHD patients ages 22 and older with a comprehensive assessment: BP, LDL, Tobacco use assessment, body mass index (BMI) calculated, and lifestyle counseling within the past year.

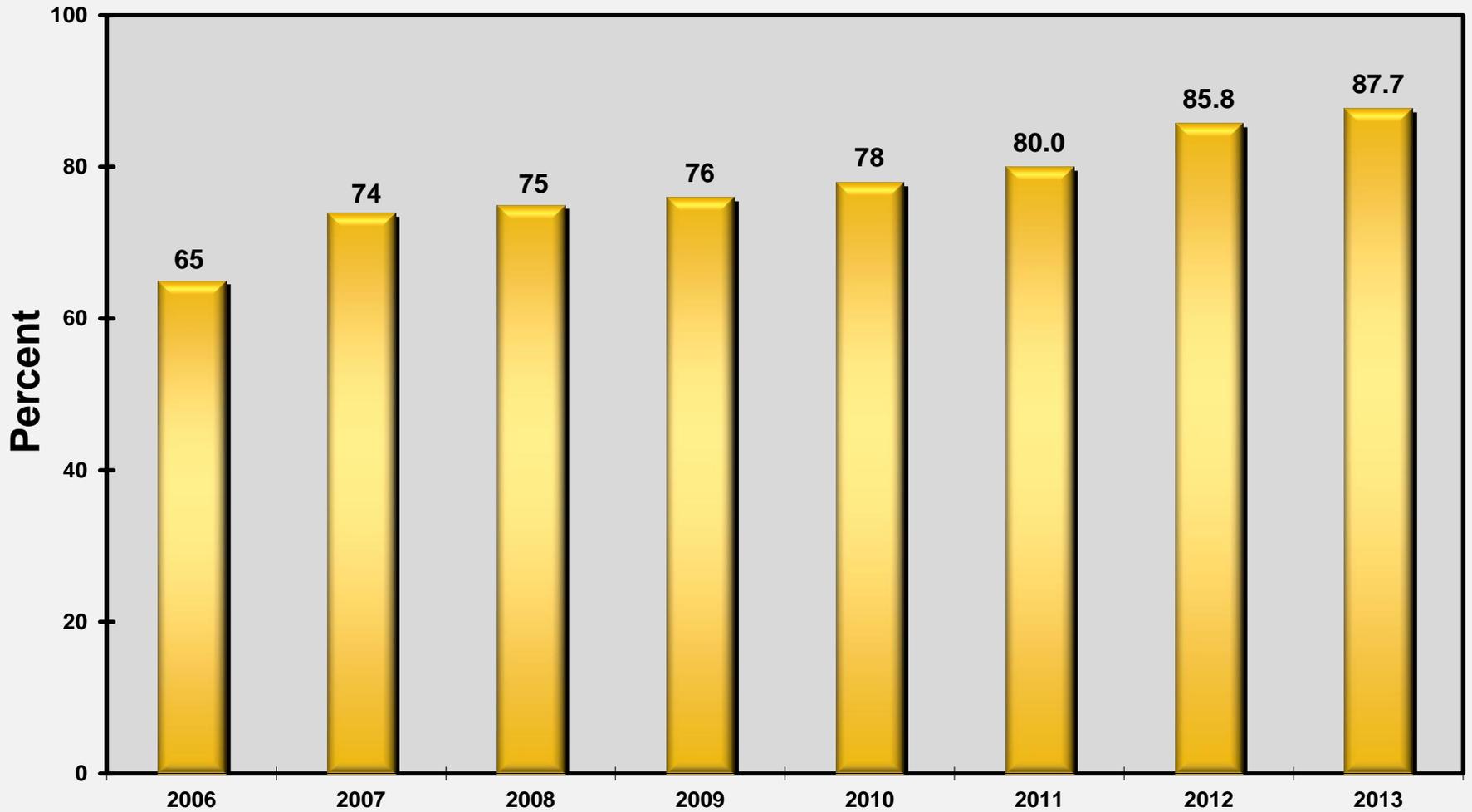| Year	Percent
2007	30
2008	30
2009	32
2010	35
2011	39.8
2012	45.4
2013	46.7*
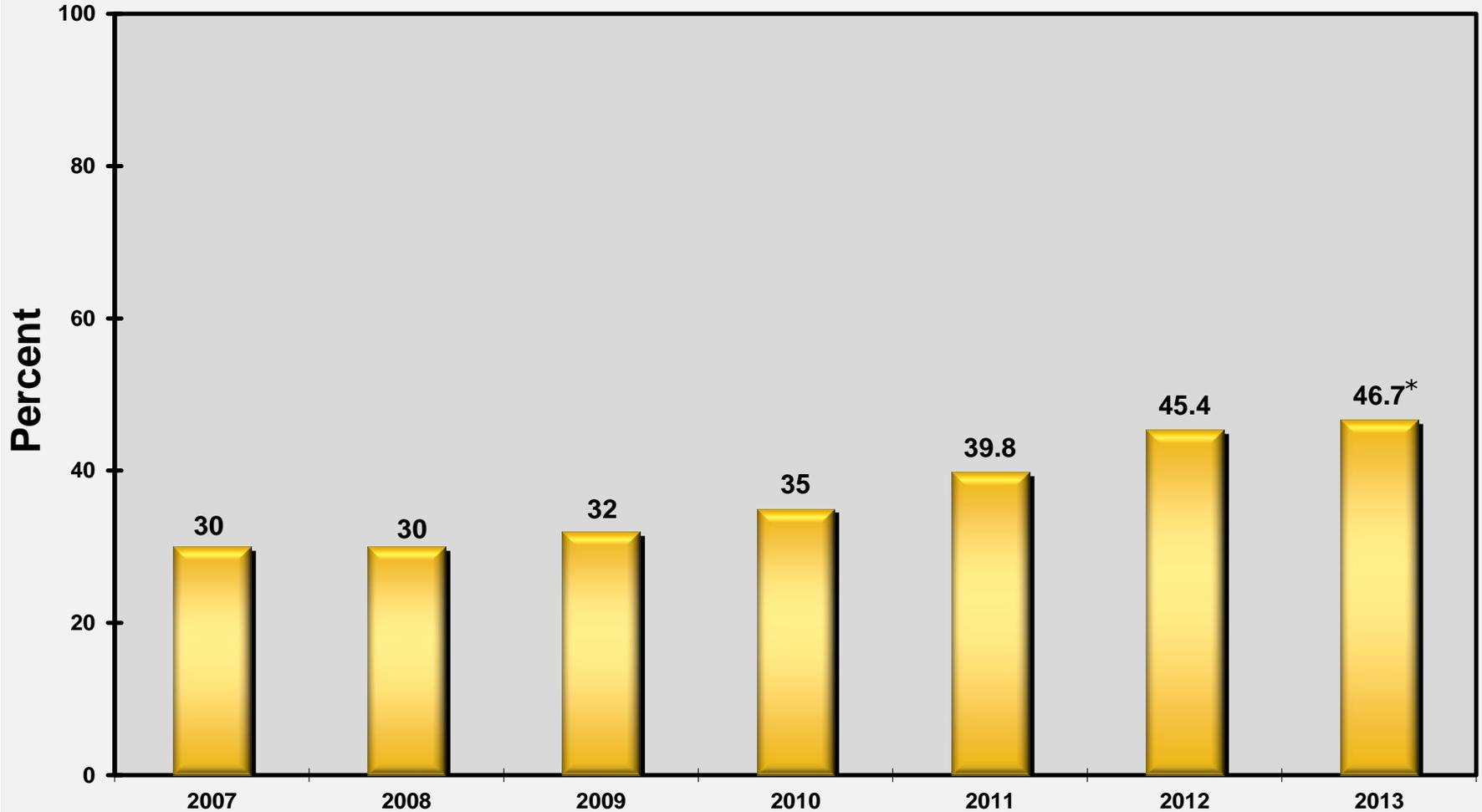
*Prior to FY 2013, this measure tracked the percentage of active IHD patients ages 22 and older with a comprehensive assessment.

Comprehensive CVD Assessment

	ABD	ALA	ALB	BEM	BIL	CAL	NAS	NAV	OKL	PHX	POR	TUC
FY12												
FY13	40.3%	25.5%	57.4%	48.7%	37.6%	38.6%	42.9%	28.1%	64.1%	38.4%	40.2%	35.1%
N	4690	1336	1705	2319	1985	1170	1719	3484	10121	3023	2030	185

Prenatal HIV Screening
Pregnant women screened for HIV within the past 20 months.

Prenatal HIV Screening

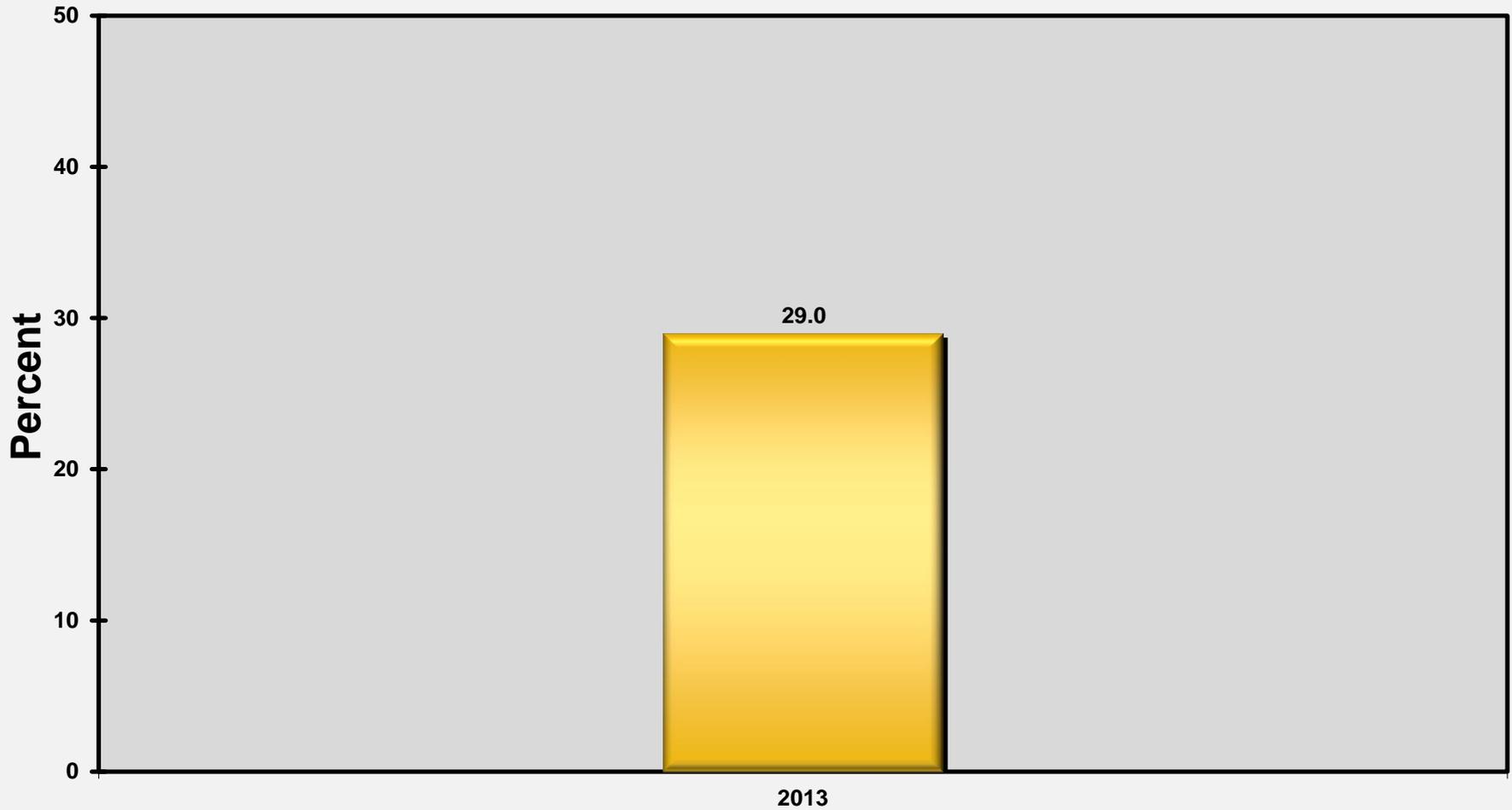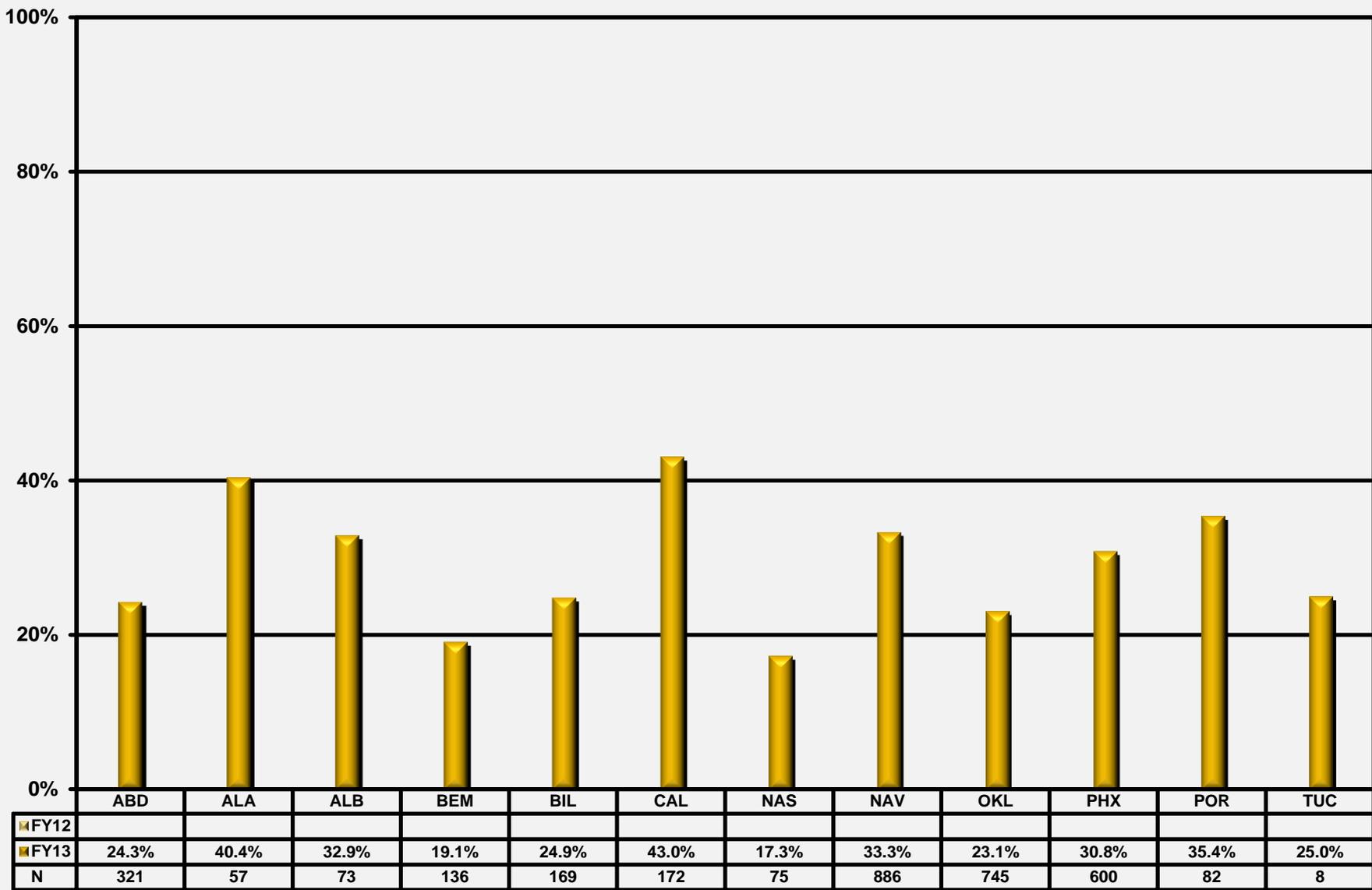|	ABD	ALA	ALB	BEM	BIL	CAL	NAS	NAV	OKL	PHX	POR	TUC
FY12	81.5%	81.8%	91.1%	81.8%	83.6%	72.1%	86.9%	90.2%	93.0%	85.4%	71.7%	97.5%
FY13	82.7%	88.1%	92.1%	74.2%	88.5%	70.6%	90.8%	92.2%	93.9%	86.3%	79.0%	96.3%
N	3066	1032	1323	686	1195	623	577	3692	3048	3129	913	427
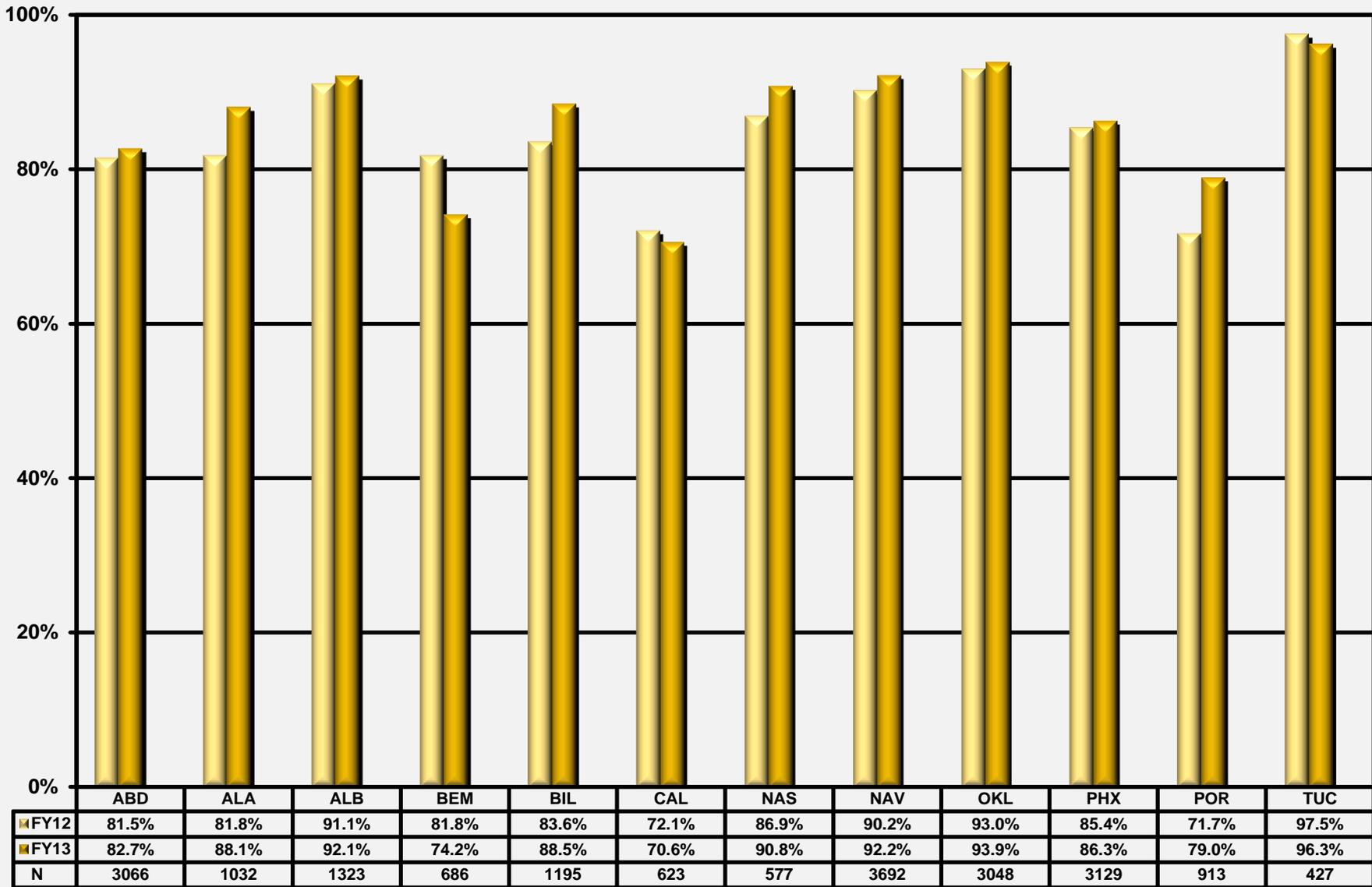
Breastfeeding Rates

Percentage of AI/AN patients who, at the age of two months, were either exclusively or mostly breastfed.

Breastfeeding Rates

	ABD	ALA	ALB	BEM	BIL	CAL	NAS	NAV	OKL	PHX	POR	TUC
FY12												
FY13	24.3%	40.4%	32.9%	19.1%	24.9%	43.0%	17.3%	33.3%	23.1%	30.8%	35.4%	25.0%
N	321	57	73	136	169	172	75	886	745	600	82	8

2013 Final National Dashboard (IHS/Tribal)

DIABETES	2012 Target	2012 Final	2013 Target	2013 Final	2013 Final Results
Good Glycemic Control[a]	32.7%	33.2%	Baseline	48.3%	Met
Controlled BP <140/90[a]	38.7%	38.9%	Baseline	64.6%[a]	Met
LDL (Cholesterol) Assessed	70.3%	71.0%	68.0%	72.7%	Met
Nephropathy Assessed	57.8%	66.7%	64.2%	68.2%	Met
Retinopathy Exam	54.8%	55.7%	56.8%	57.6%	Met
DENTAL					
Dental: General Access	26.9%	28.8%	26.9%	28.3%	Met
Sealants[a]	276,893	295,734	Baseline	13.9%	Met
Topical Fluoride[a]	161,461	169,083	Baseline	26.7%	Met
IMMUNIZATIONS					
Influenza 65+	63.4%	65.0%	62.3%	68.0%	Met
Pneumovax 65+	87.5%	88.5%	84.7%	89.2%	Met
Childhood Iz[a]	77.8%	76.8%	Baseline	74.8%	Met
PREVENTION					
(Cervical) Pap Screening[a]	59.5%	57.1%	Baseline	61.7%	Met
Mammography Screening	51.7%	51.9%	49.7%	53.8%	Met
Colorectal Cancer Screening[a]	43.2%	46.1%	Baseline	35.0%	Met
Tobacco Cessation[a]	30.0%	35.2%	Baseline	45.7%	Met
Alcohol Screening (FAS Prevention)	58.7%	63.8%	61.7%	65.7%	Met
DV/IPV Screening	55.3%	61.5%	58.3%	62.4%	Met
Depression Screening	56.5%	61.9%	58.6%	65.1%	Met
CVD- Comprehensive Assessment[a]	40.6%	45.4%	32.3%	46.7%	Met
Prenatal HIV Screening	81.8%	85.8%	82.3%	87.7%	Met
Childhood Weight Control[b]	N/A	24.0%	24.0%	22.8%	Met
Breastfeeding Rates[c]	N/A	N/A	Baseline	29.0%	Met
Public Health Nursing Encounters	424,203	435,848	405,962	Pending	N/A
Suicide Surveillance[d] (forms completed)	1,807	1,709	1,376	Pending	N/A

[a]Measure logic changes in FY 2013

[b]Long-term measure as of FY 2009, reported in FY 2013

[c]As of FY 2013 this measure will be reported by IHS and Tribal health programs

[d]Measure data is submitted from 11 Areas

Measures in red are GPRAMA measures

Measures Met: 22

Measures Not Met: 0