GPRA/GPRAMA 2014 CRS National Results

Area GPRA Coordinators' Conference

December 4, 2014

GPRA 2014 Results Summary

* 22 GPRA Clinical Measures were reported in FY 2014
  * 14 clinical measures met their targets in FY 2014 (64%) compared to 22 of 22 in 2013 (100%)
  * 17 measures exceeded FY 2013 results
  * 1 measure decreased in performance from FY 2013
  * 3 measures had significant logic changes in FY 2014
  * 1 measure was new for Tribal/IHS programs in FY 2014

GPRA 2014 Results Summary

- Measures that improved over 2013 results:

Measure	FY 2013 Q4	FY 2014 Q4	% Improvement
Breastfeeding Rates	29.0%	35.1%	6.1%
CVD Comprehensive Assessment	46.7%	52.3%	5.6%
Colorectal Cancer Screening	35.0%	37.5%	2.5%
Tobacco Cessation	45.7%	48.2%	2.5%
Retinopathy Exam	57.6%	59.9%	2.3%
Topical Fluoride	26.7%	27.9%	1.2%
DV/IPV Screening	62.4%	63.5%	1.1%
Depression Screening	65.1%	66.0%	0.9%
LDL Assessed	72.7%	73.4%	0.7%
Sealants	13.9%	14.6%	0.7%
Childhood Immunizations	74.8%	75.4%	0.6%
Dental Access	28.3%	28.8%	0.5%
Mammography	53.8%	54.2%	0.4%
Alcohol Screening (FAS Prevention)	65.7%	66.0%	0.3%
Good Glycemic Control	48.3%	48.6%	0.3%
Prenatal HIV Screening	87.7%	88.0%	0.3%
Influenza 65+	68.0%	68.1%	0.1%

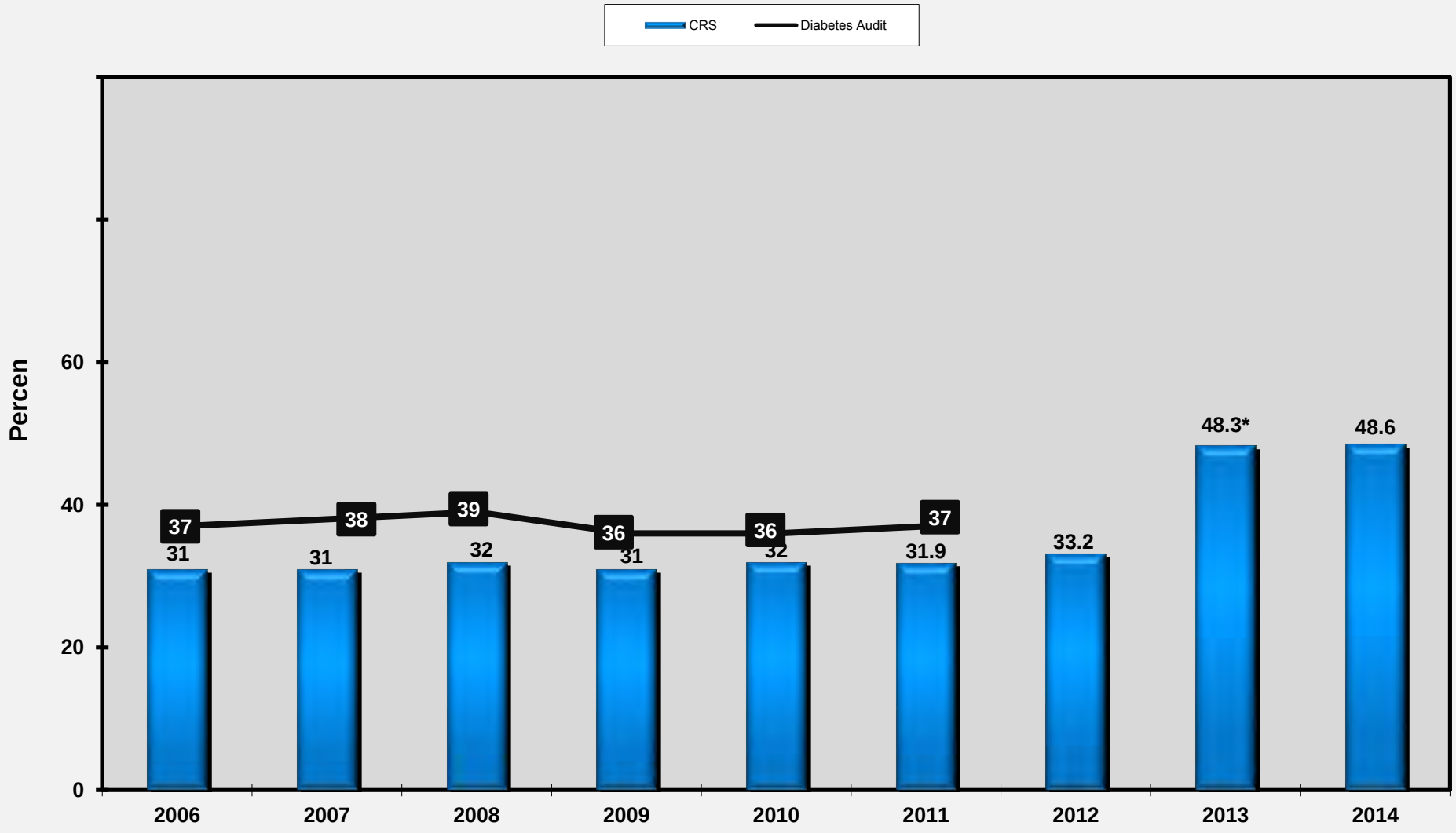
GPRA 2014 Results Summary

* Measures that decreased in performance from 2013:

Measure	FY 2013 Q4	FY 2014 Q4	% Decrease
Controlled BP <140/90	64.6%	63.8%	0.8%

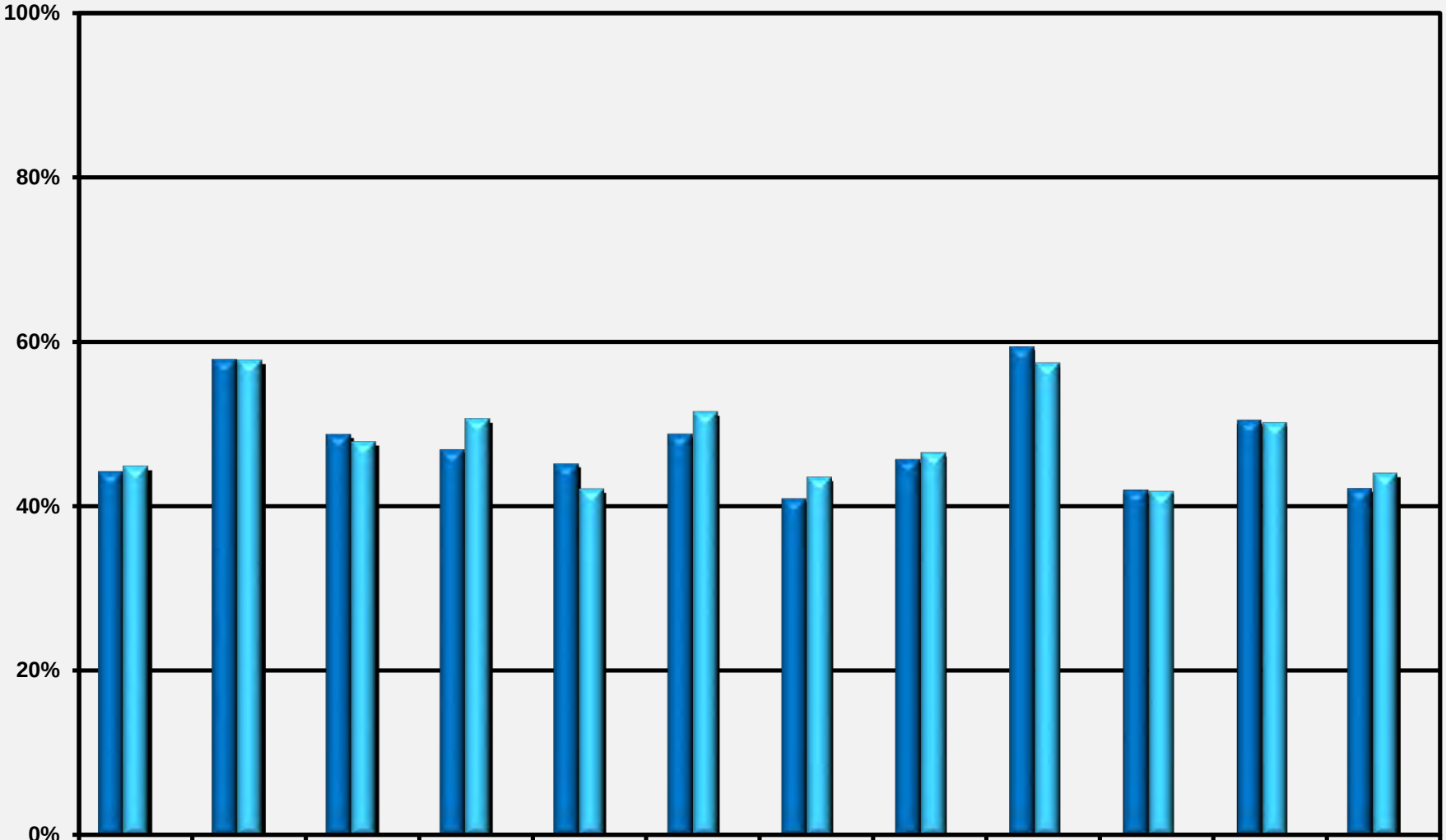
Diabetes: Good Glycemic Control

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 (A1c <7).

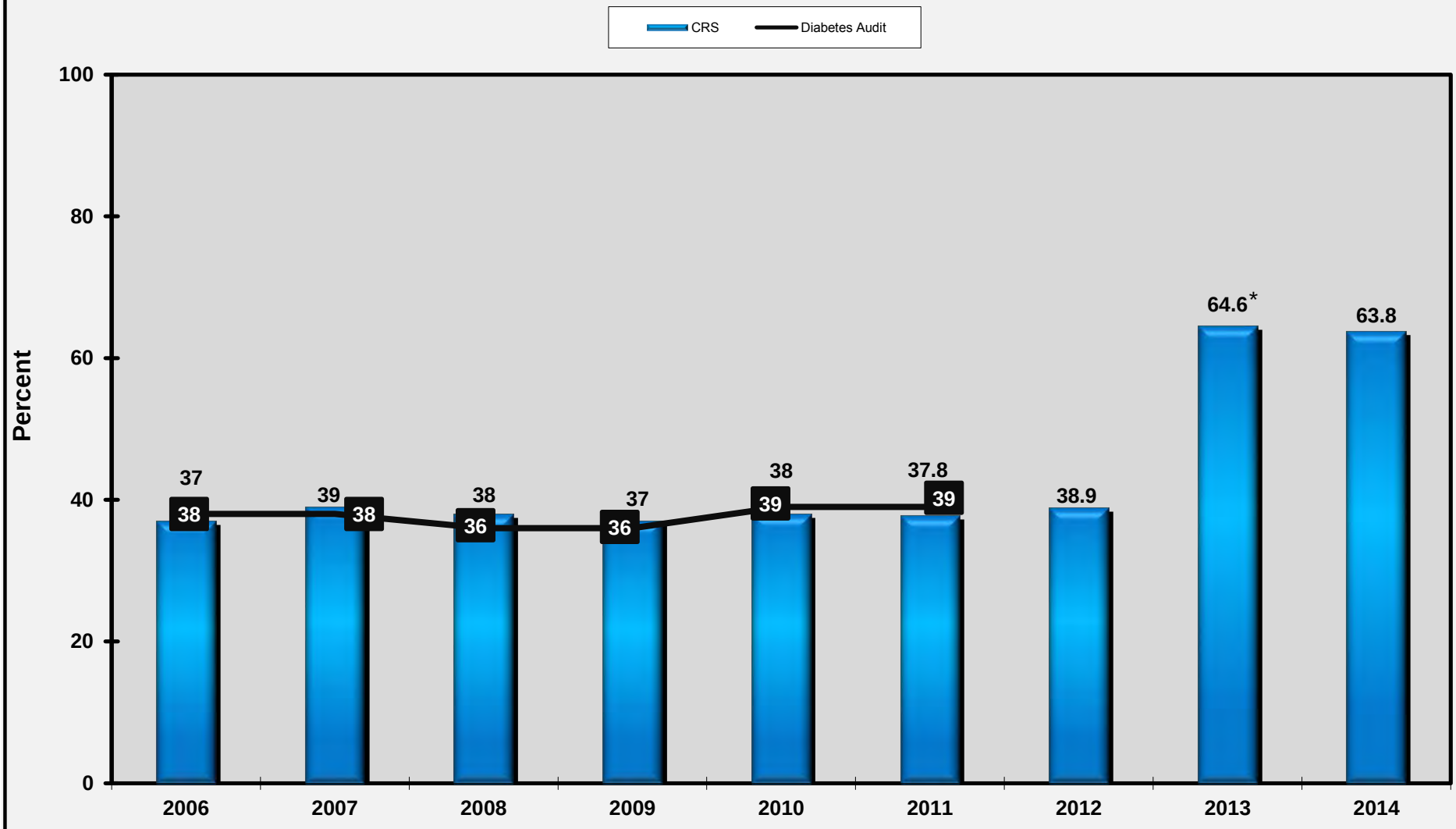
Diabetes: Good Glycemic Control



	ABD	ALA	ALB	BEM	BIL	CAL	NAS	NAV	OKL	PHX	POR	TUC
FY14	44.3%	57.9%	48.8%	47.0%	45.2%	48.8%	41.0%	45.8%	59.4%	42.0%	50.5%	42.2%
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	11732	2503	8274	3218	5539	5156	5506	19116	25934	20180	6308	2898

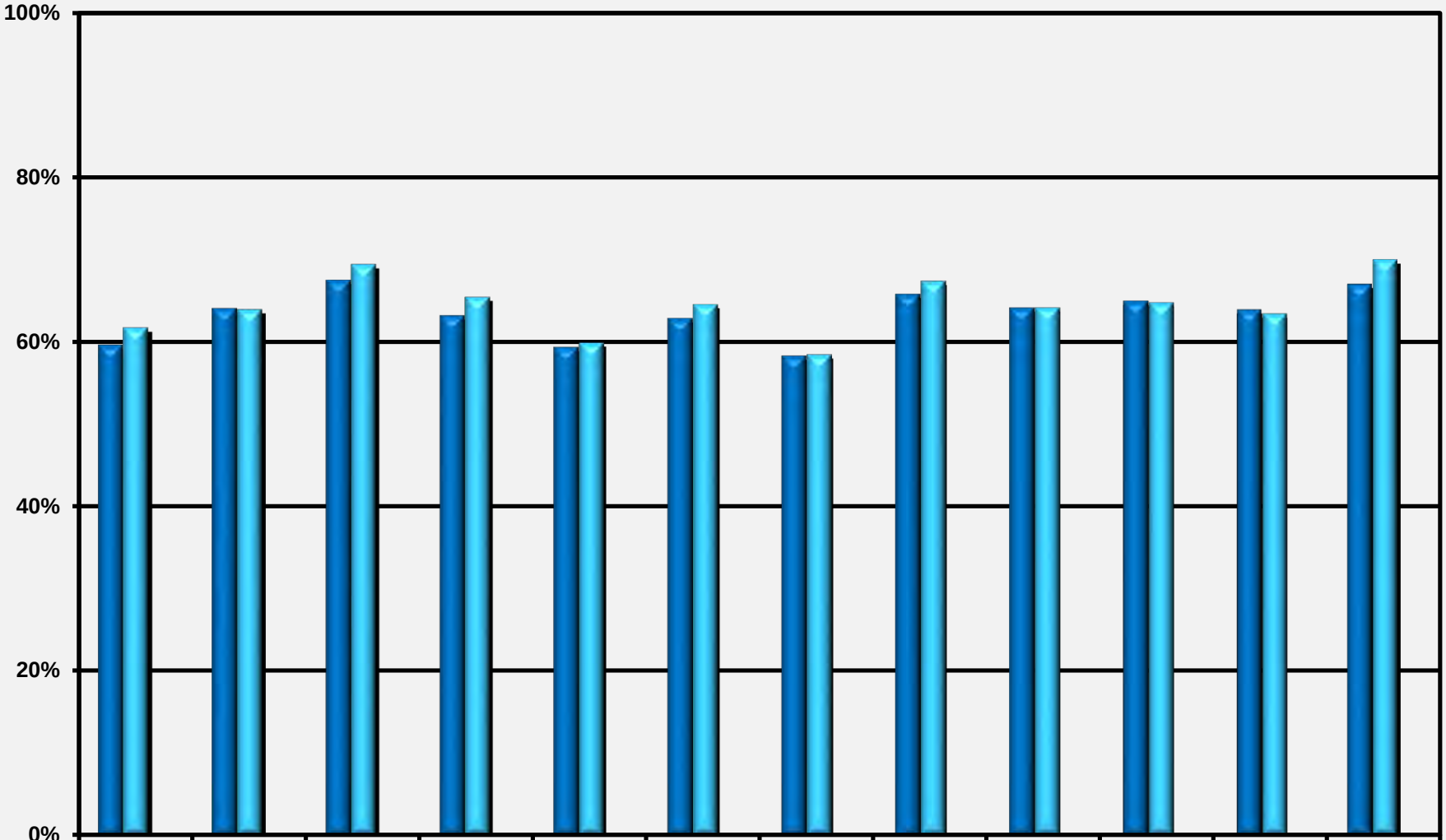
Diabetes: Blood Pressure Control

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



*Prior to FY 2013, this measure tracked the percentage of patients with BP <130/80.

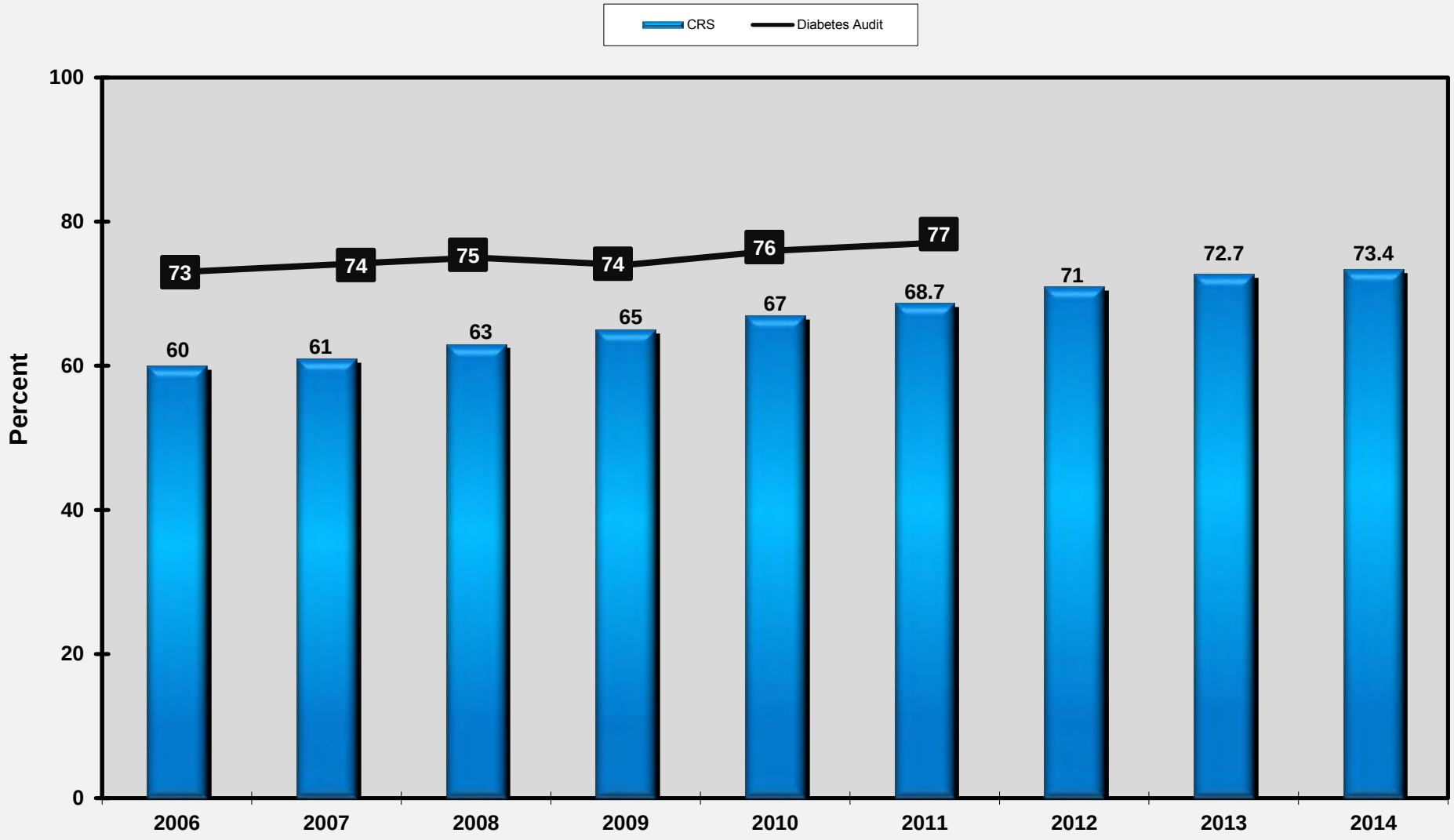
Diabetes: Blood Pressure Control



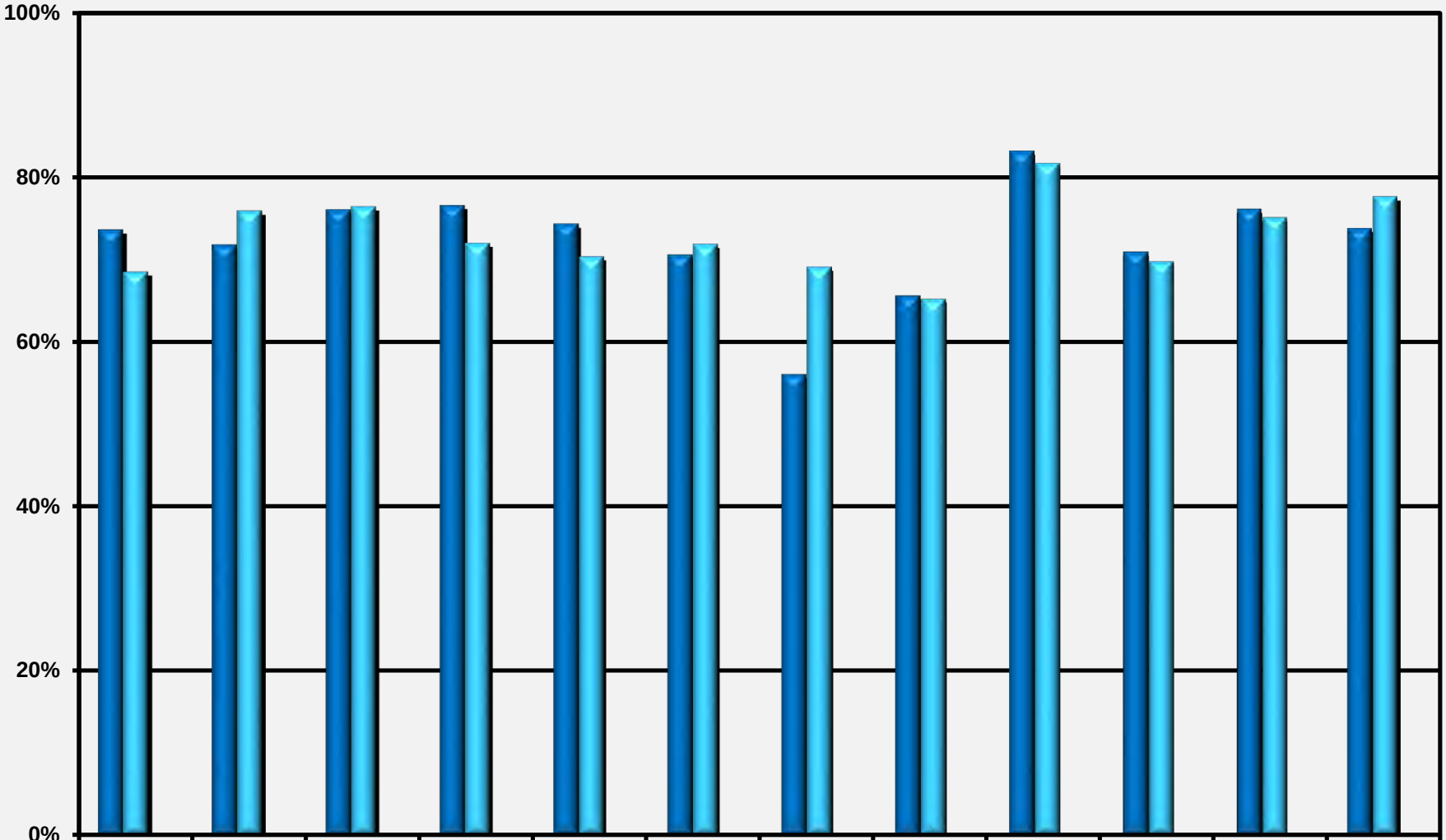
	ABD	ALA	ALB	BEM	BIL	CAL	NAS	NAV	OKL	PHX	POR	TUC
FY14	59.6%	64.1%	67.5%	63.2%	59.4%	62.9%	58.3%	65.8%	64.1%	65.0%	63.9%	67.0%
FY13	61.7%	63.9%	69.4%	65.4%	59.9%	64.5%	58.5%	67.4%	64.2%	64.8%	63.4%	70.0%
N	11732	2503	8274	3218	5539	5156	5506	19116	25934	20180	6308	2898

Diabetes: LDL Assessment

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



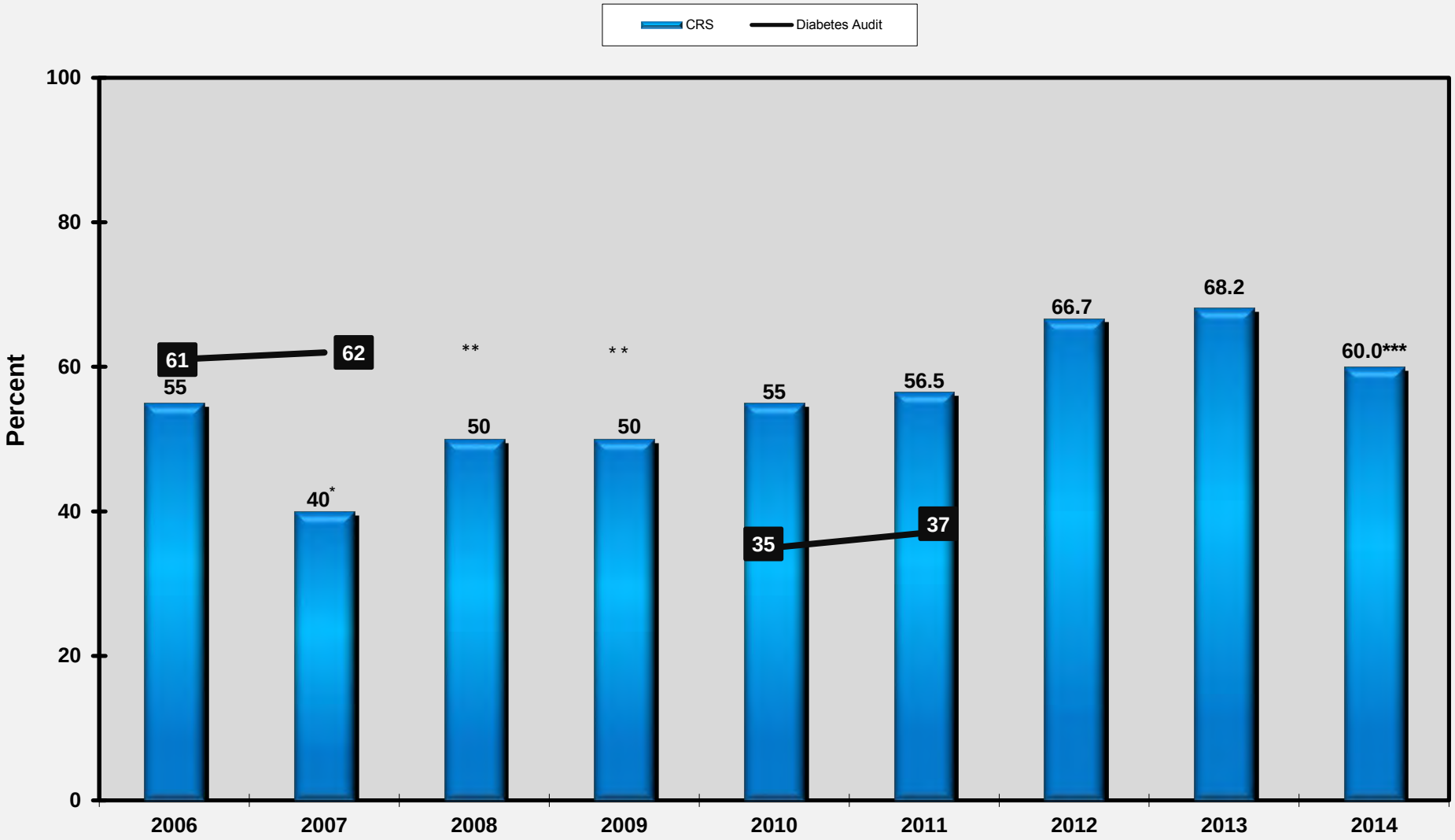
Diabetes: LDL Assessment



	ABD	ALA	ALB	BEM	BIL	CAL	NAS	NAV	OKL	PHX	POR	TUC
FY14	73.7%	71.8%	76.1%	76.6%	74.4%	70.6%	56.1%	65.7%	83.2%	71.0%	76.2%	73.8%
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	11732	2503	8274	3218	5539	5156	5506	19116	25934	20180	6308	2898

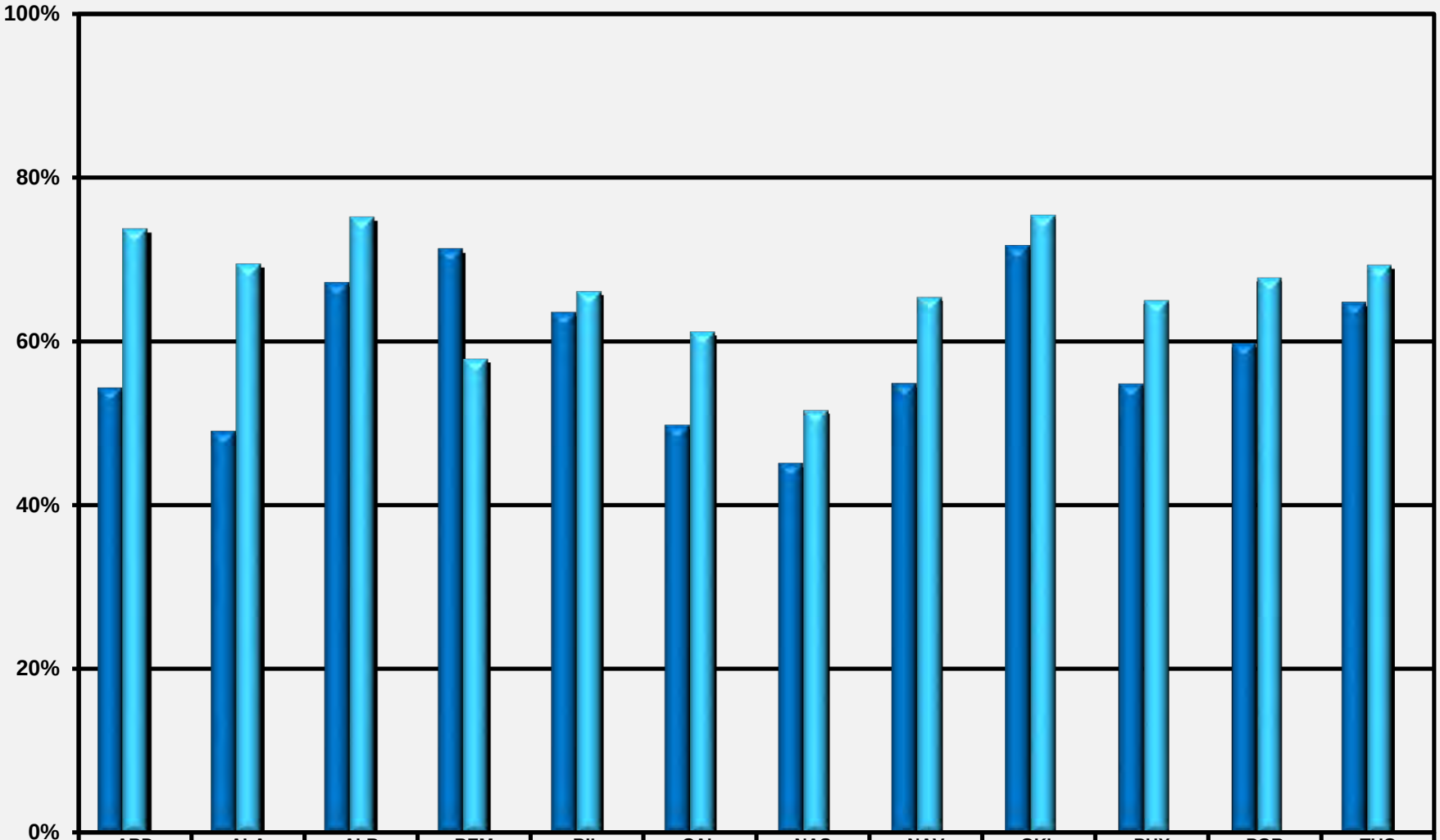
Diabetes: Nephropathy Assessment

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. *** New baseline set to reflect measure change requiring UACR in FY 2014.

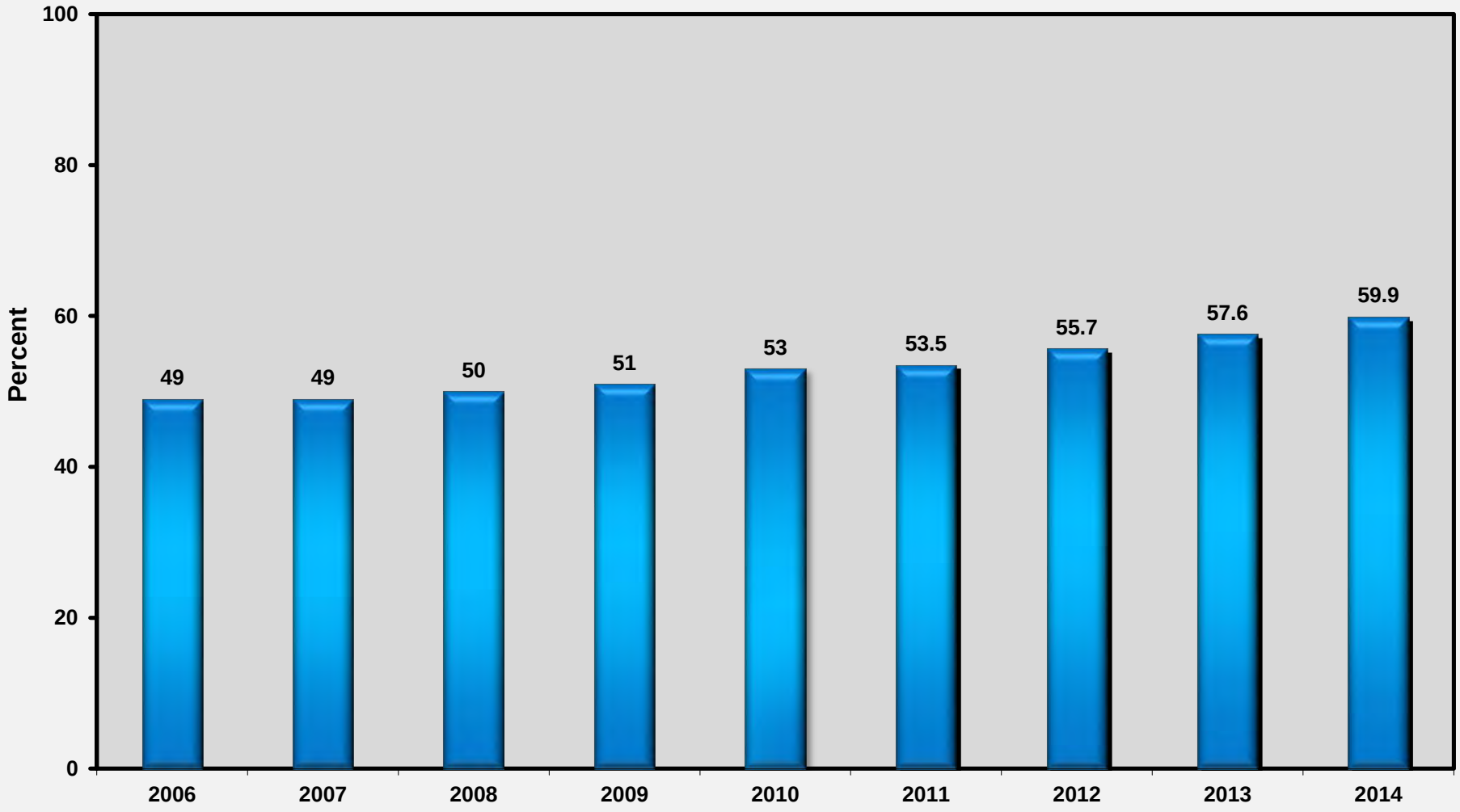
Diabetes: Nephropathy Assessment



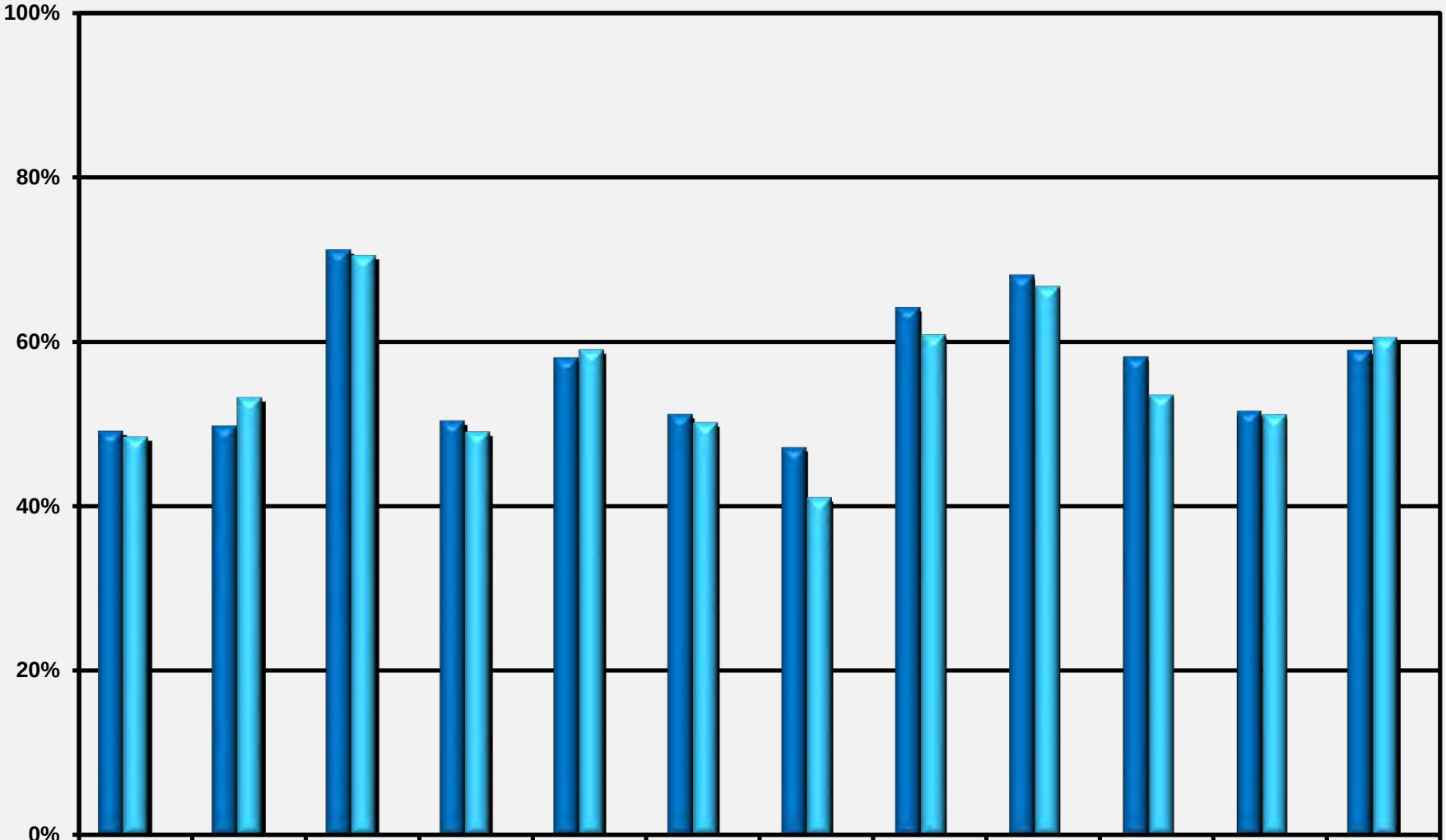
	ABD	ALA	ALB	BEM	BIL	CAL	NAS	NAV	OKL	PHX	POR	TUC
FY14	54.4%	49.1%	67.2%	71.3%	63.6%	49.8%	45.1%	54.9%	71.7%	54.8%	59.8%	64.8%
FY13	73.8%	69.5%	75.2%	58.0%	66.2%	61.3%	51.7%	65.5%	75.4%	65.1%	67.8%	69.4%
N	11732	2503	8274	3218	5539	5156	5506	19116	25934	20180	6308	2898

Diabetes: Retinopathy

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



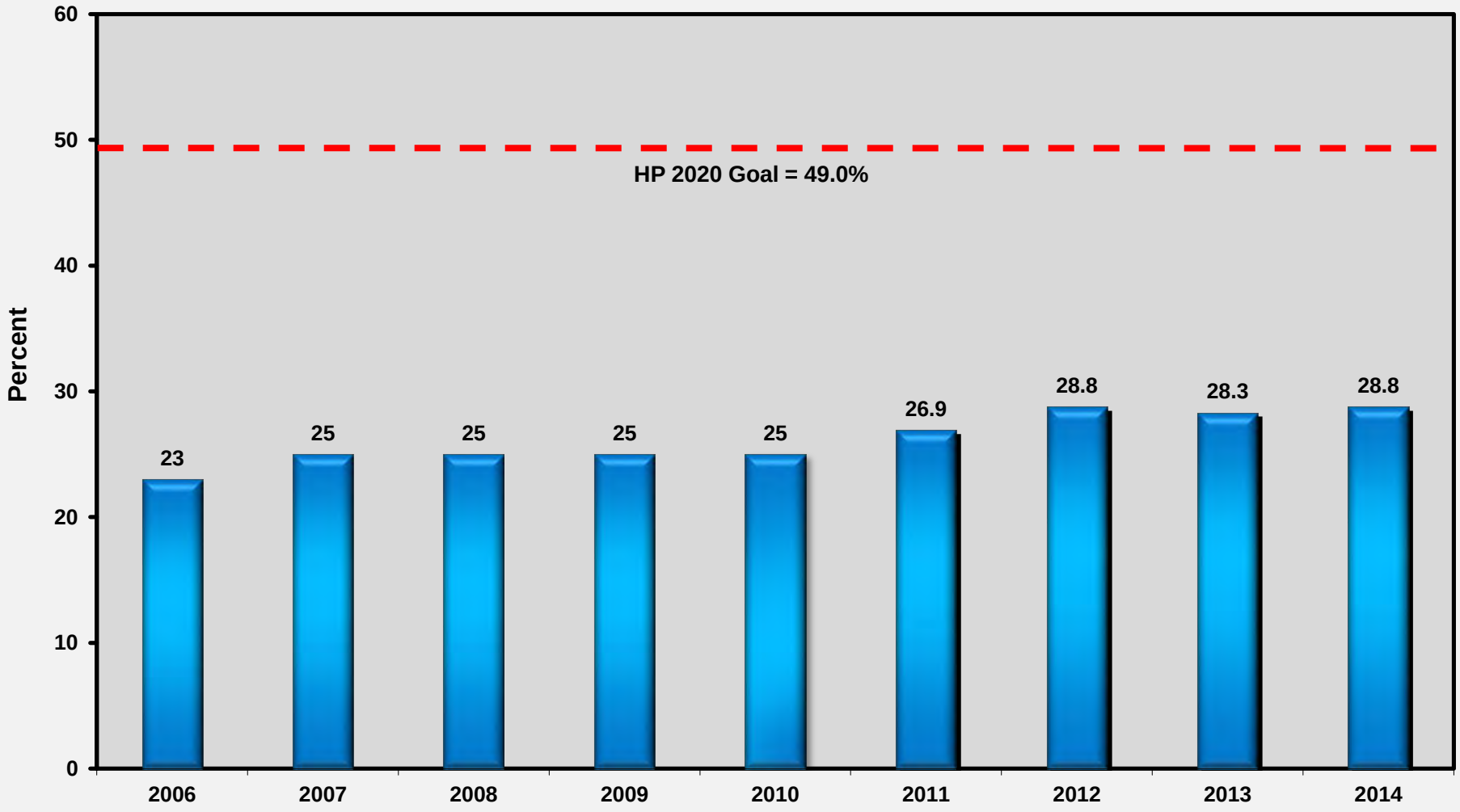
Diabetes: Retinopathy



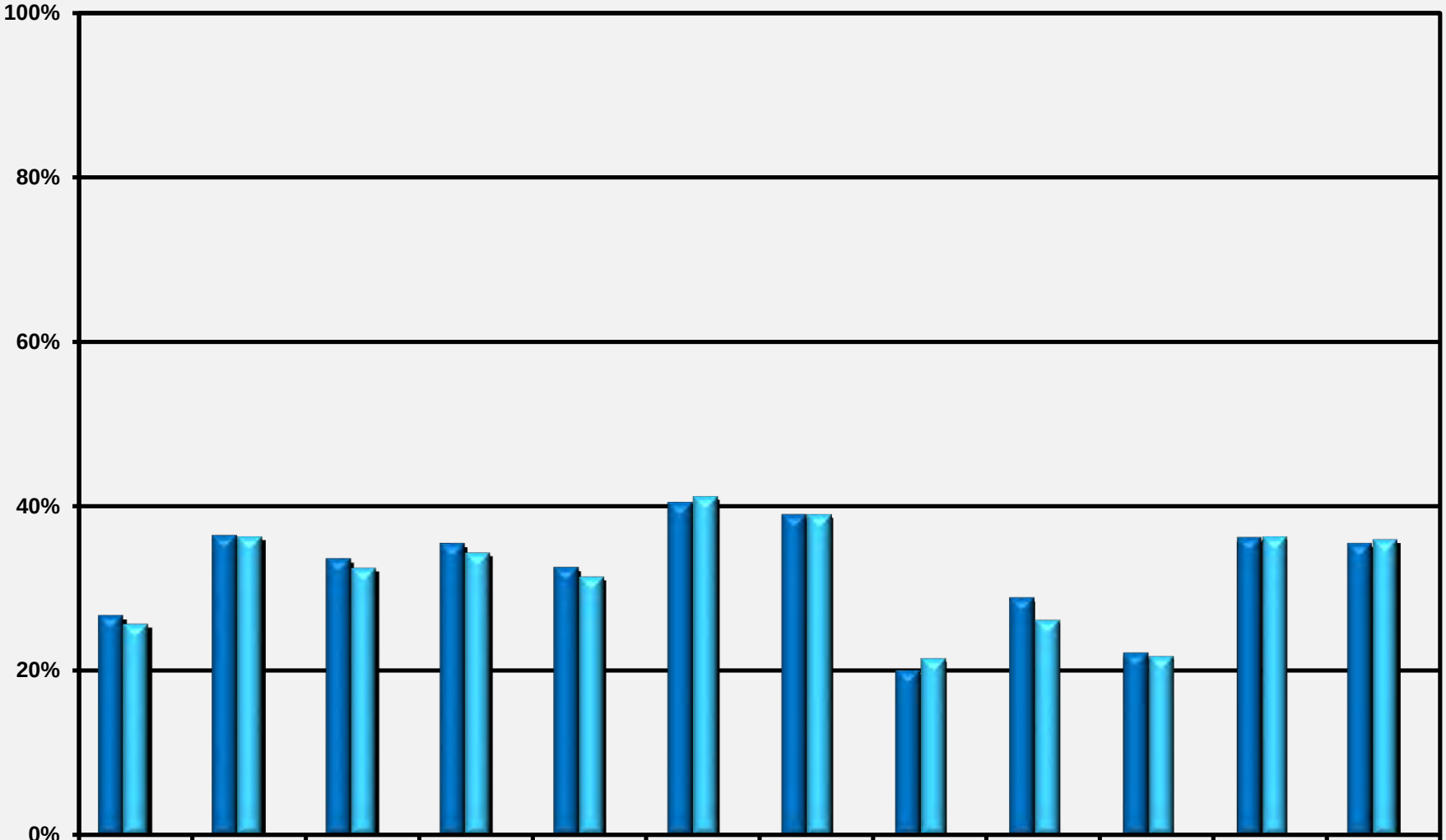
	ABD	ALA	ALB	BEM	BIL	CAL	NAS	NAV	OKL	PHX	POR	TUC
FY14	49.2%	49.8%	71.2%	50.4%	58.1%	51.2%	47.2%	64.2%	68.1%	58.2%	51.6%	59.0%
FY13	48.5%	53.3%	70.5%	49.1%	59.1%	50.2%	41.1%	60.9%	66.8%	53.6%	51.2%	60.6%
N	11729	2496	8269	3215	5536	5153	5504	19091	25926	20168	6305	2895

Dental: General Access

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



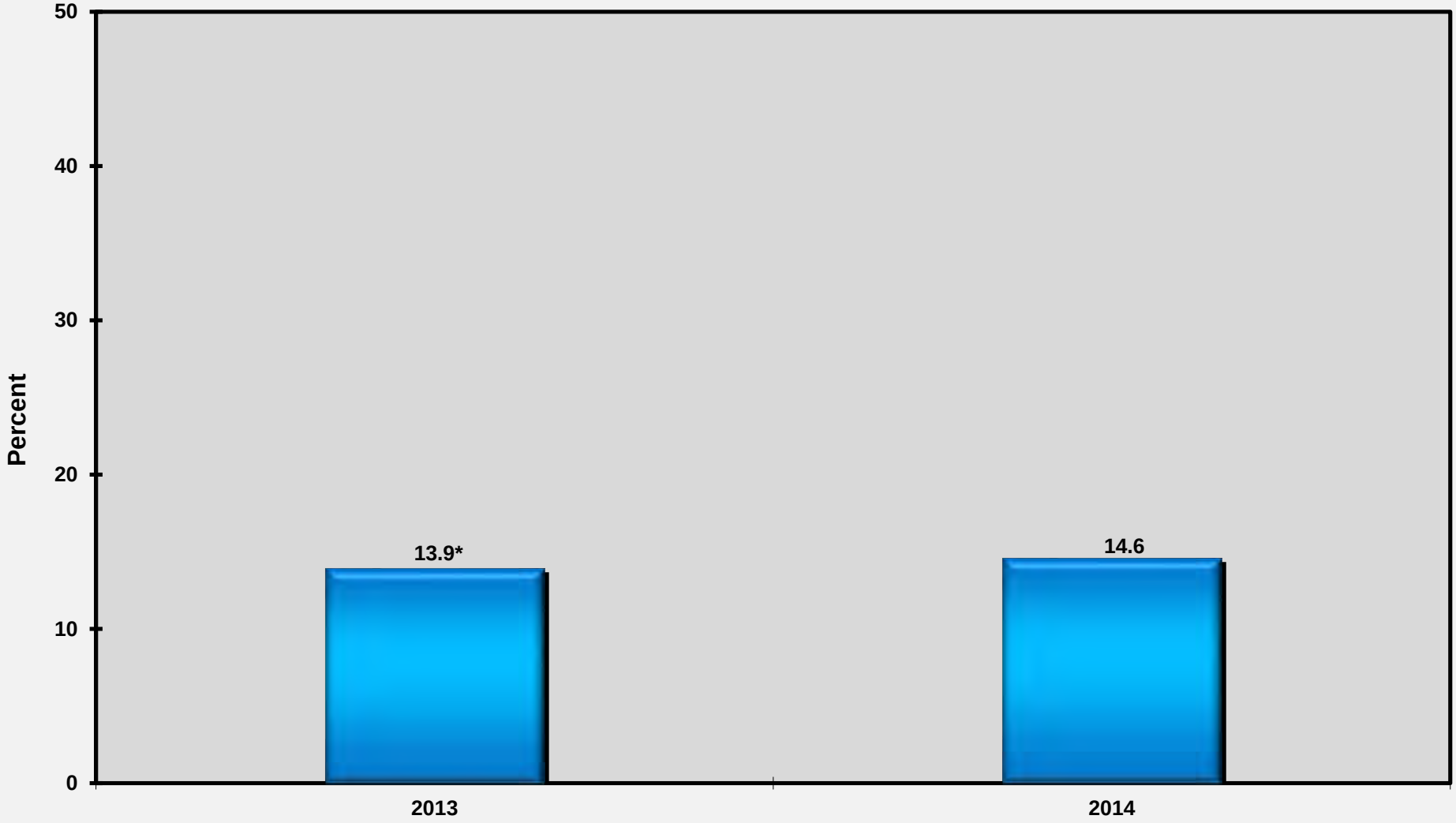
Dental: General Access



	ABD	ALA	ALB	BEM	BIL	CAL	NAS	NAV	OKL	PHX	POR	TUC
FY14	26.7%	36.5%	33.6%	35.5%	32.6%	40.5%	39.0%	20.1%	28.9%	22.2%	36.2%	35.5%
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	128155	44704	75157	32434	57524	71012	38225	195682	271313	170351	82363	19947

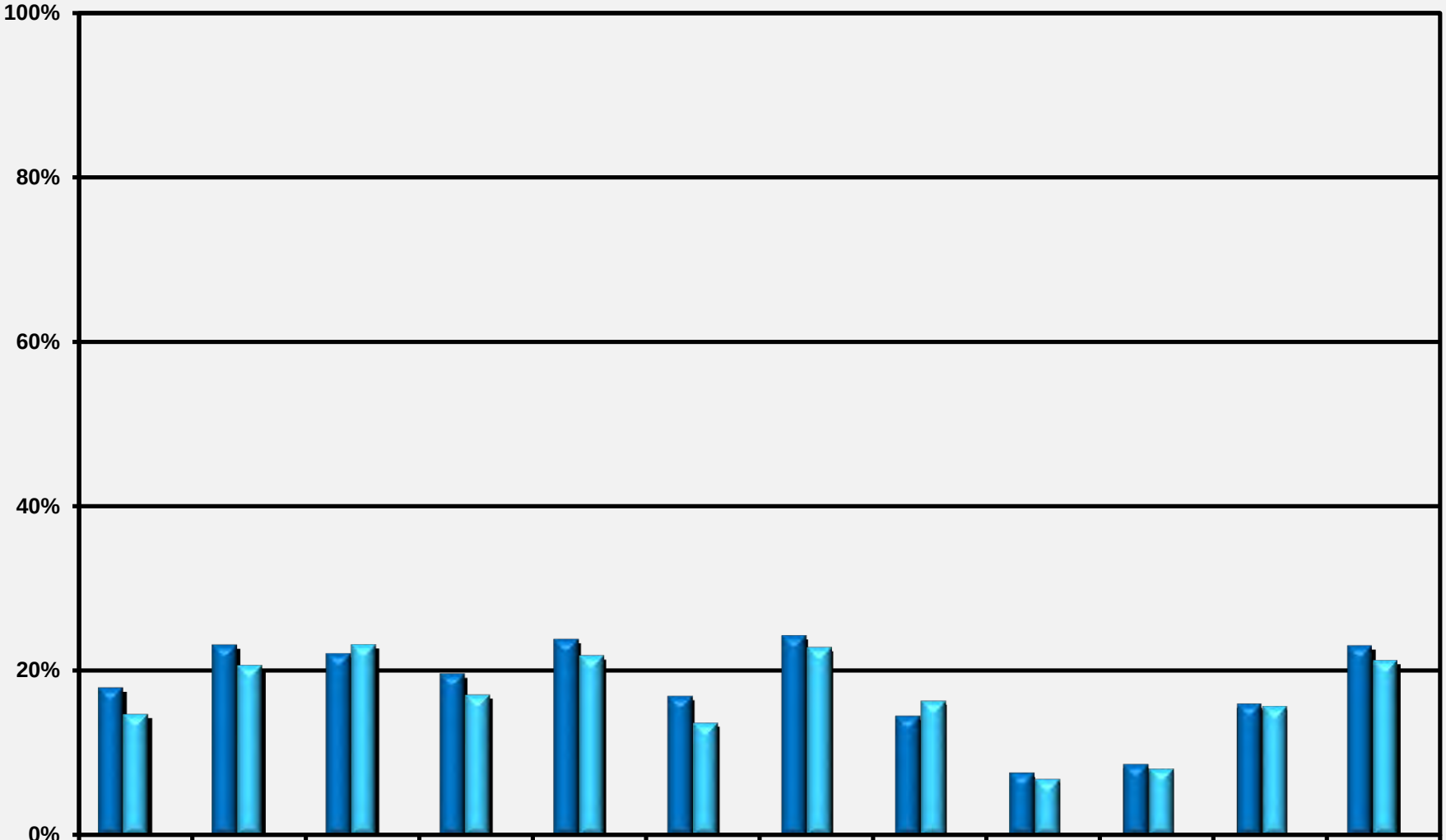
Dental: Sealants

AI/AN children with intact dental sealants.



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

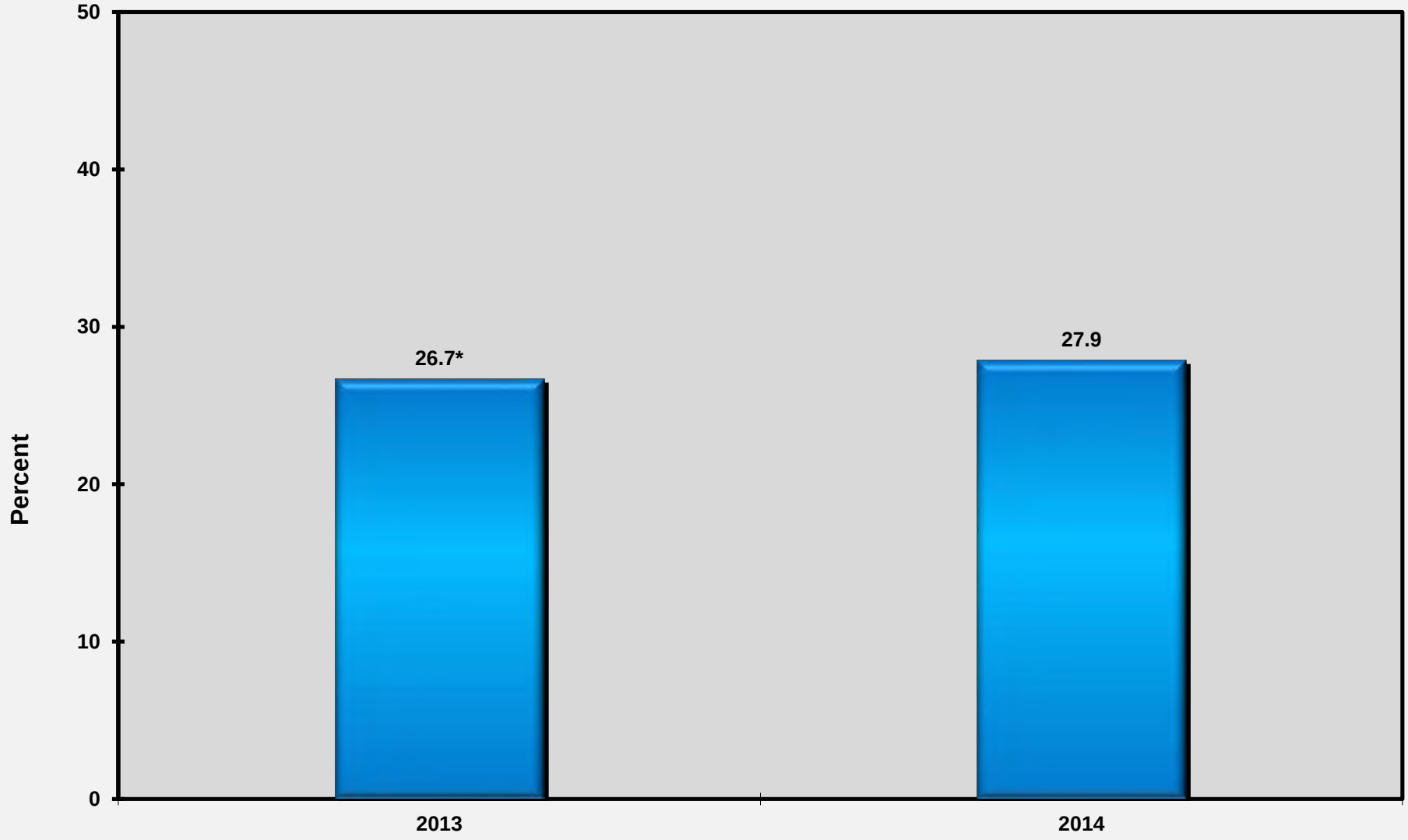
Dental: Sealants



	ABD	ALA	ALB	BEM	BIL	CAL	NAS	NAV	OKL	PHX	POR	TUC
FY14	17.9%	23.1%	22.0%	19.6%	23.8%	16.9%	24.2%	14.5%	7.6%	8.7%	15.9%	23.0%
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	36102	11824	16788	9209	16460	18514	9808	49304	65979	45064	20096	5128

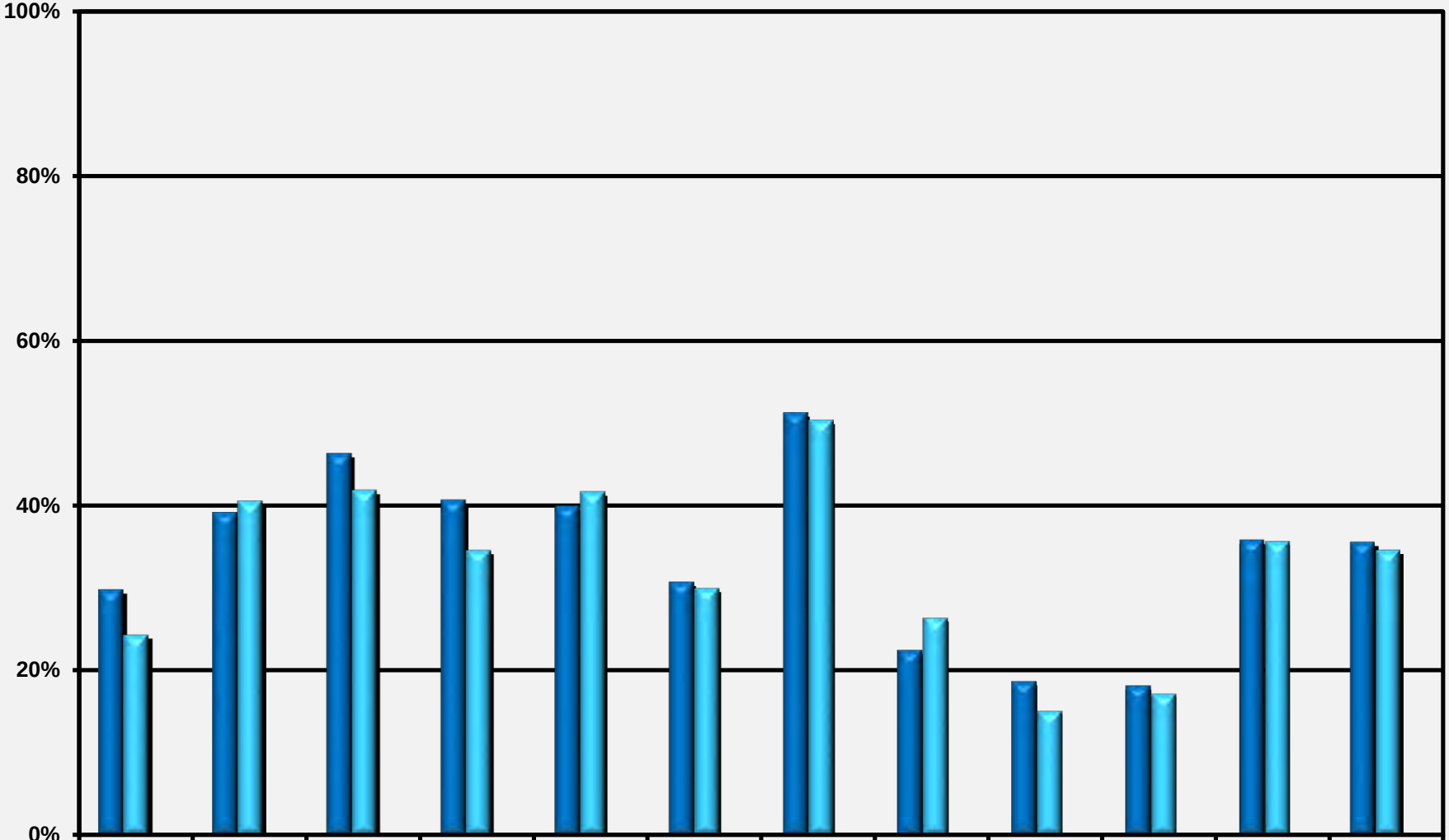
Dental: Topical Fluorides

AI/AN children with at least one topical fluoride treatment within the past year.



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

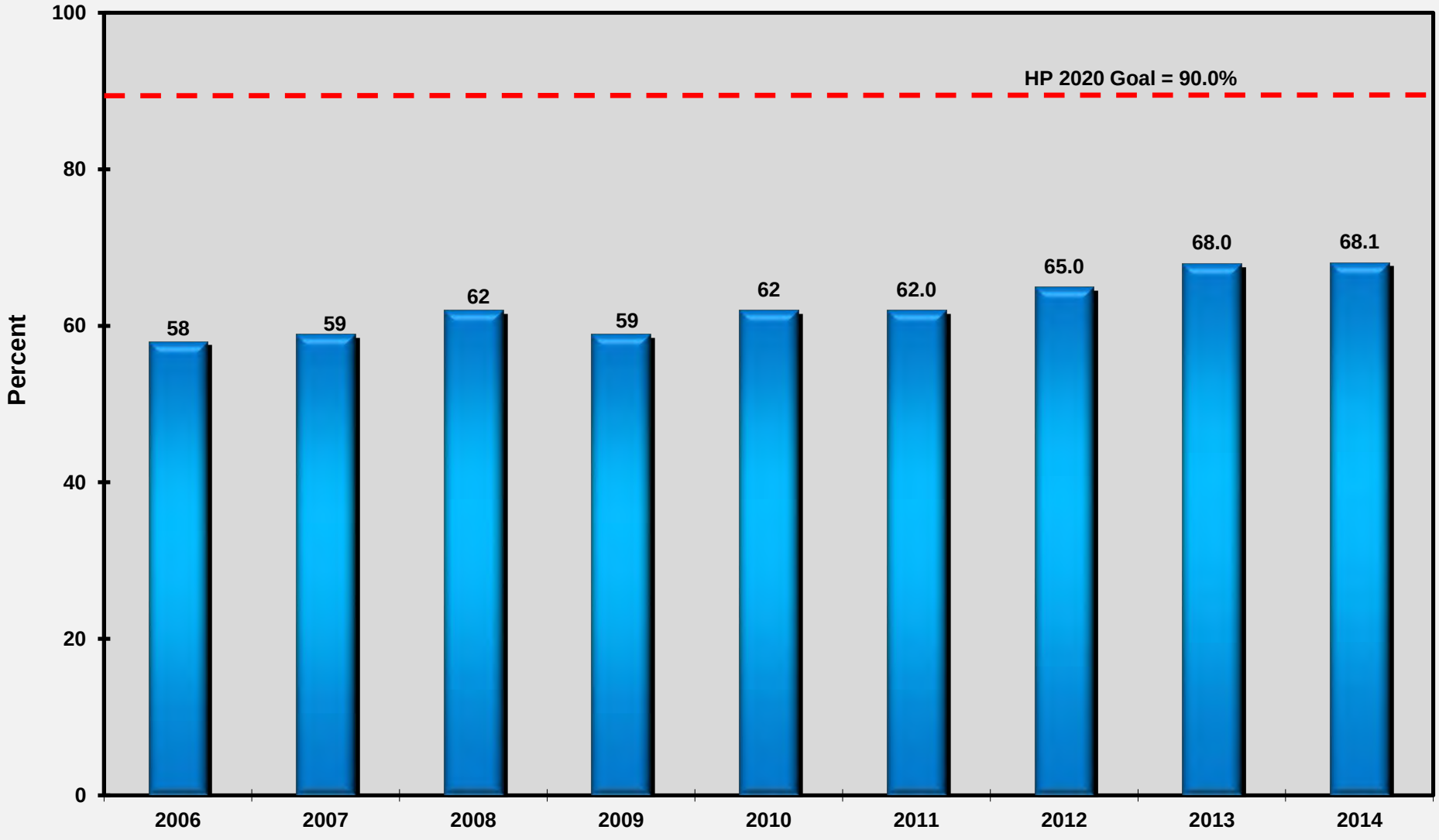
Dental: Topical Fluorides



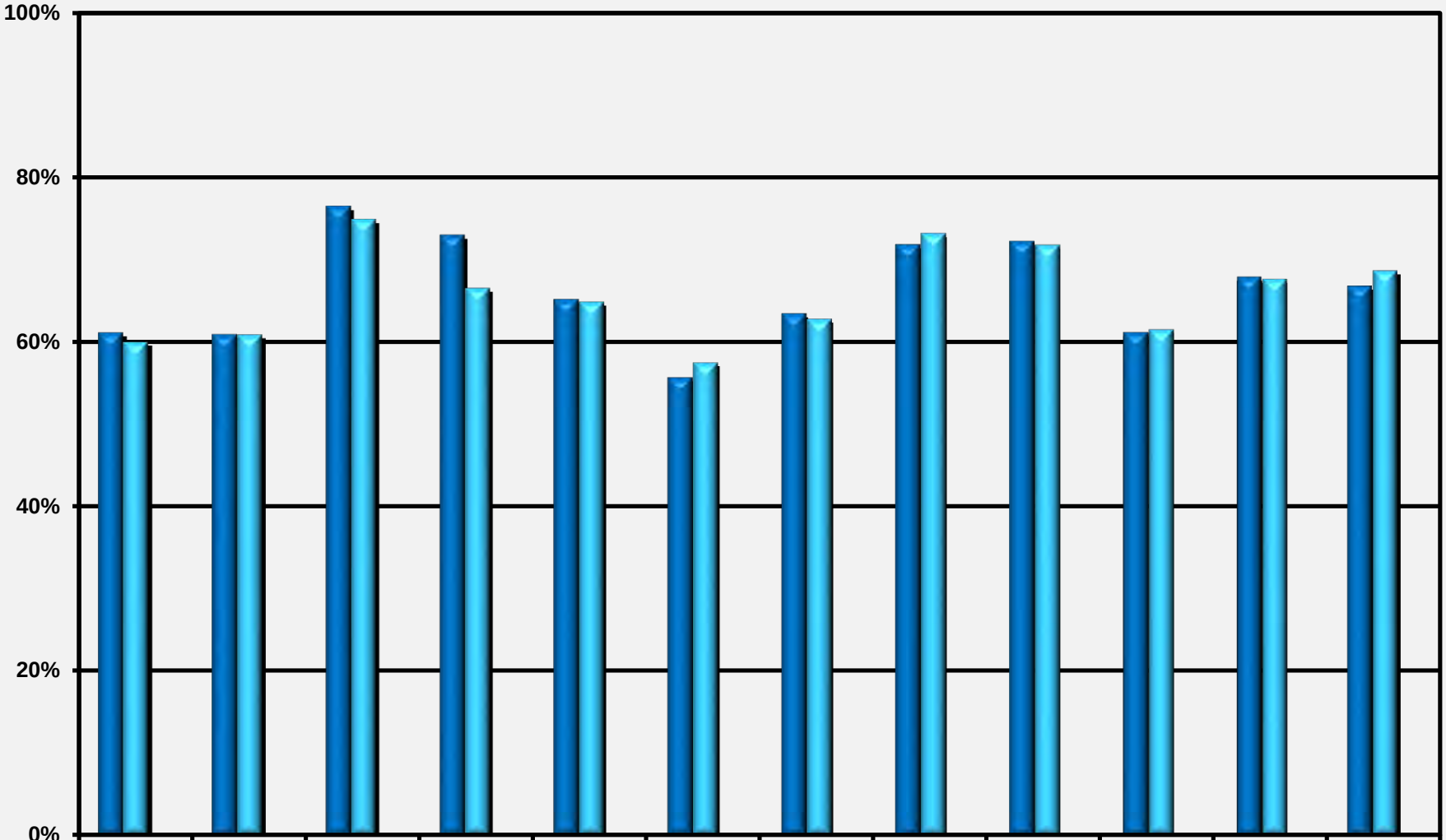
	ABD	ALA	ALB	BEM	BIL	CAL	NAS	NAV	OKL	PHX	POR	TUC
FY14	29.9%	39.2%	46.4%	40.7%	40.0%	30.8%	51.3%	22.5%	18.7%	18.2%	35.9%	35.6%
FY13	24.4%	40.6%	41.9%	34.6%	41.7%	30.0%	50.3%	26.4%	15.2%	17.3%	35.7%	34.6%
n	38964	12688	17846	9904	17684	19570	10492	52369	70219	48468	21291	5529

Immunizations: Influenza

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



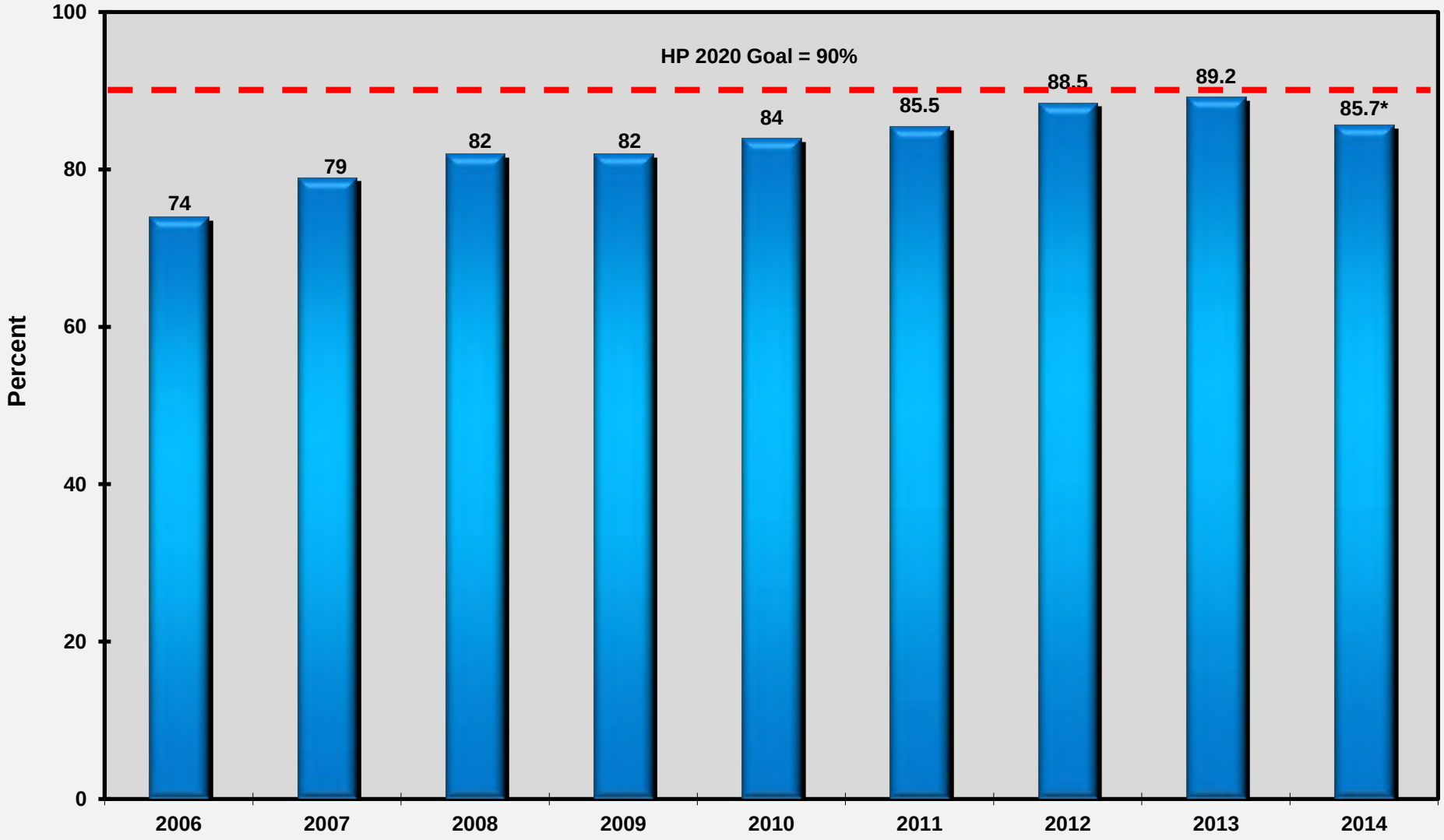
Immunizations: Influenza (65+)



	ABD	ALA	ALB	BEM	BIL	CAL	NAS	NAV	OKL	PHX	POR	TUC
FY14	61.2%	61.0%	76.5%	73.1%	65.3%	55.7%	63.5%	71.9%	72.3%	61.2%	68.0%	66.9%
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	4698	3407	4208	1589	2668	3654	2384	13383	17416	7056	4197	930

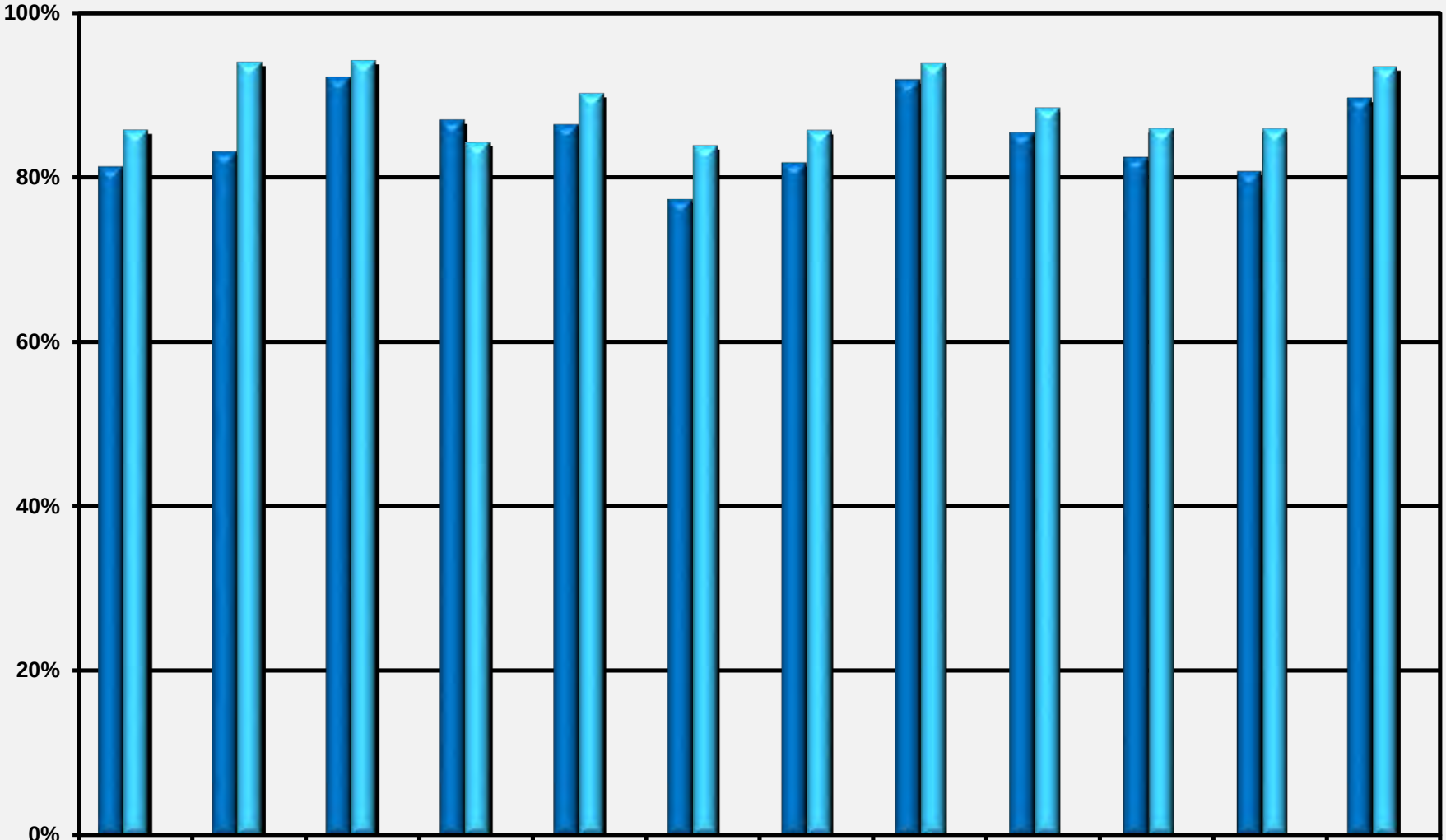
Immunizations: Pneumococcal

AI/AN patients with pneumo vaccine or contraindication documented ever, and, if patient is older than 65 years, either a dose of pneumovax after the age of 65 or a dose of pneumovax in the past five years.



*New baseline in FY 2014 due to measure logic change.

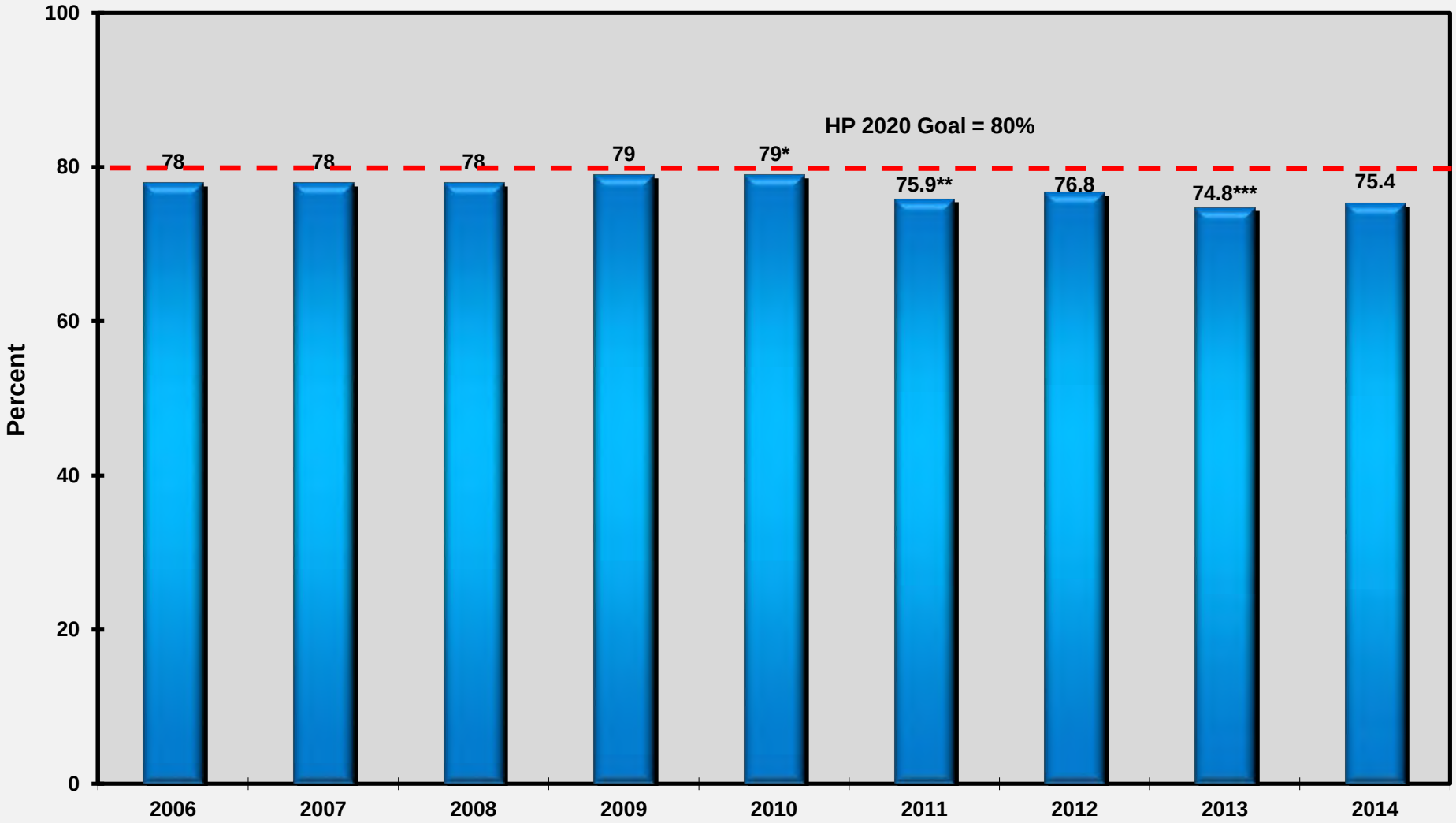
Immunizations: Pneumococcal (65+)



	ABD	ALA	ALB	BEM	BIL	CAL	NAS	NAV	OKL	PHX	POR	TUC
FY14	81.4%	83.2%	92.2%	87.0%	86.5%	77.4%	81.8%	91.9%	85.5%	82.5%	80.8%	89.7%
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	4698	3407	4208	1589	2668	3654	2384	13383	17416	7056	4197	930

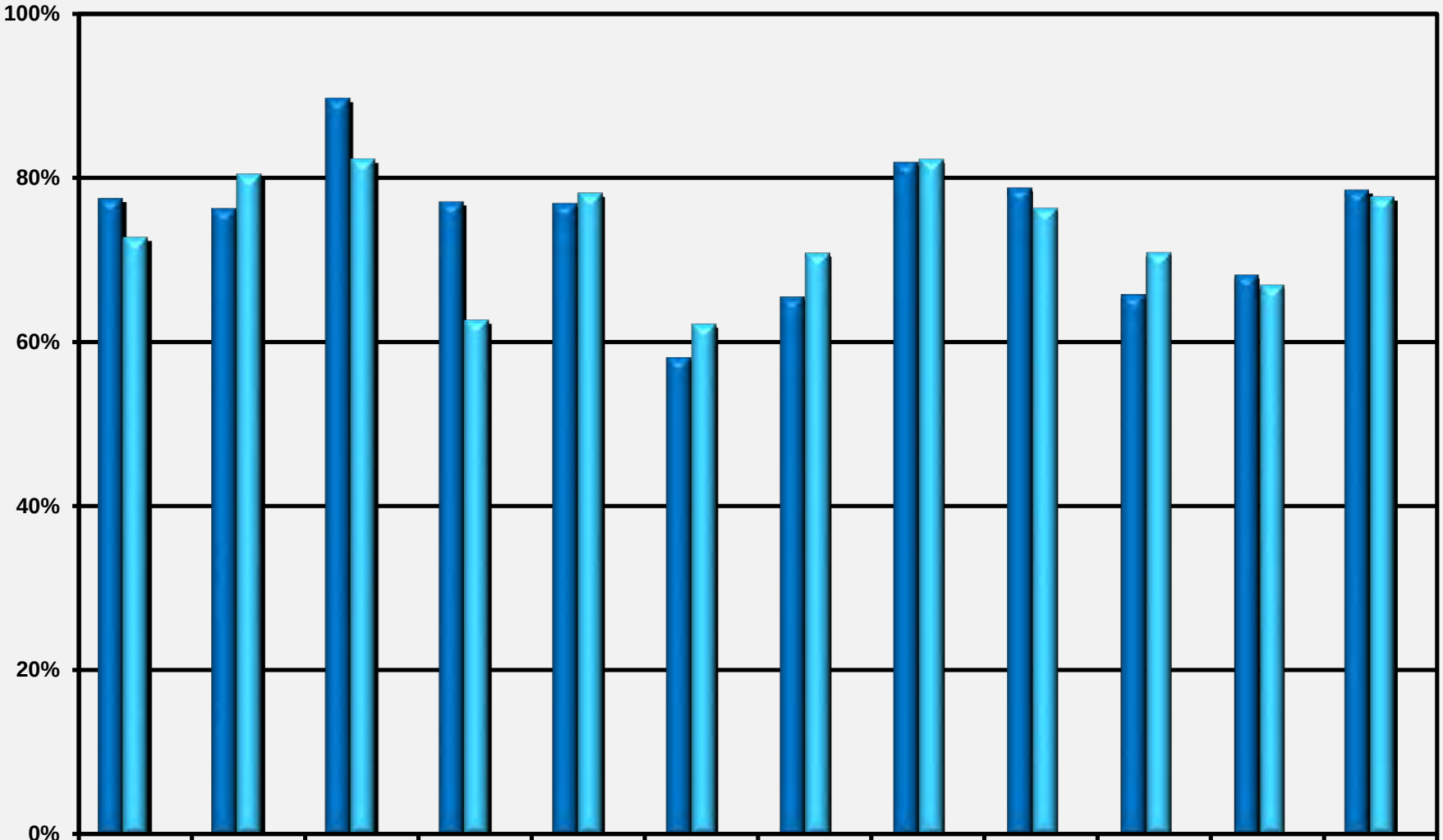
Immunizations: Childhood (19-35 months)

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



* 1 Varicella vaccine added to the series in FY 2010. **4 Pneumococcal conjugate vaccines were added to the series in FY 2011. ***In FY 2013, 3 or 4 HiB vaccines were required depending on the brand

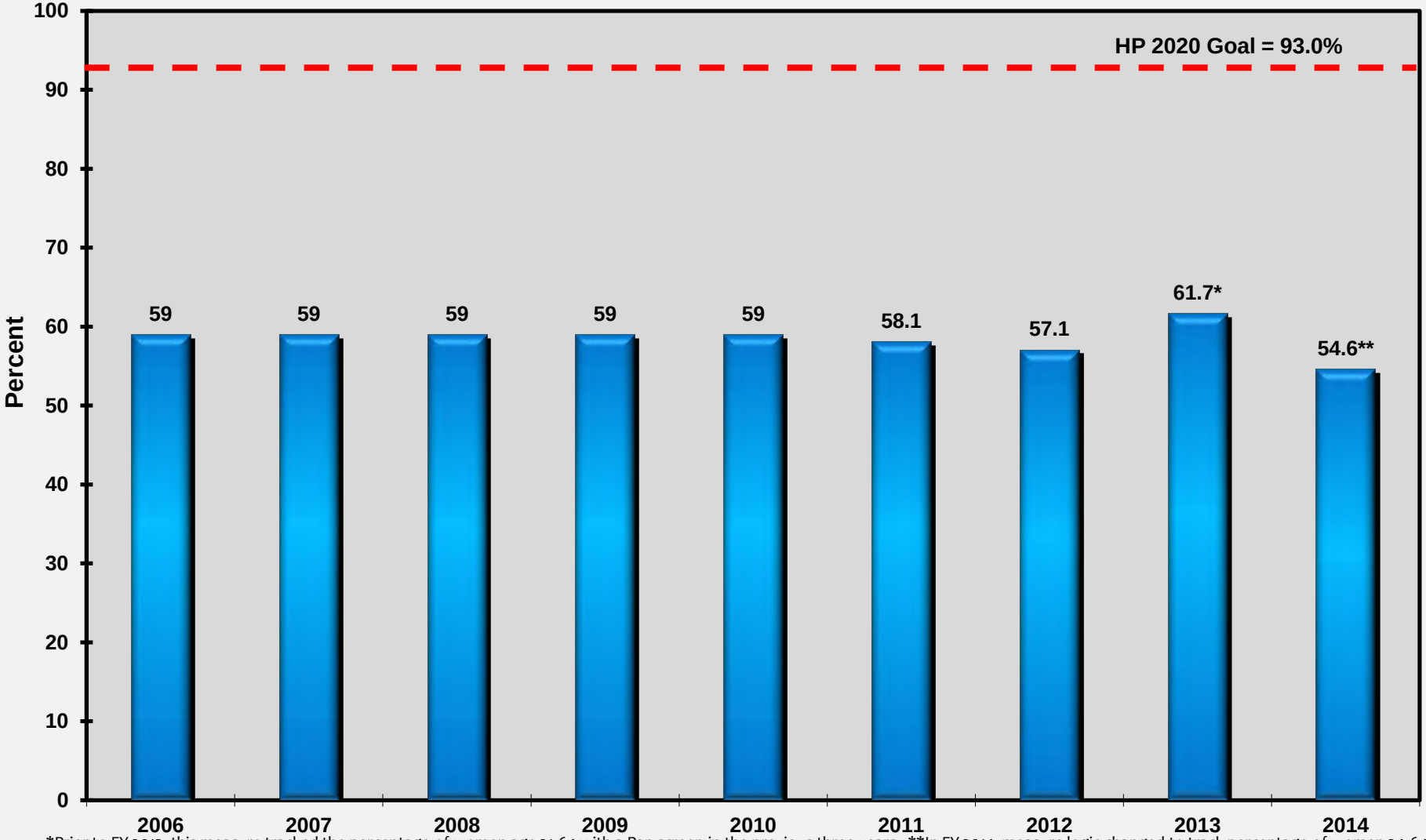
Immunizations: Childhood (19-35 months)



	ABD	ALA	ALB	BEM	BIL	CAL	NAS	NAV	OKL	PHX	POR	TUC
FY14	77.6%	76.4%	89.8%	77.2%	77.0%	58.3%	65.7%	82.0%	78.9%	65.9%	68.3%	78.6%
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	2211	1114	773	680	1018	1074	661	3366	3692	2646	893	412

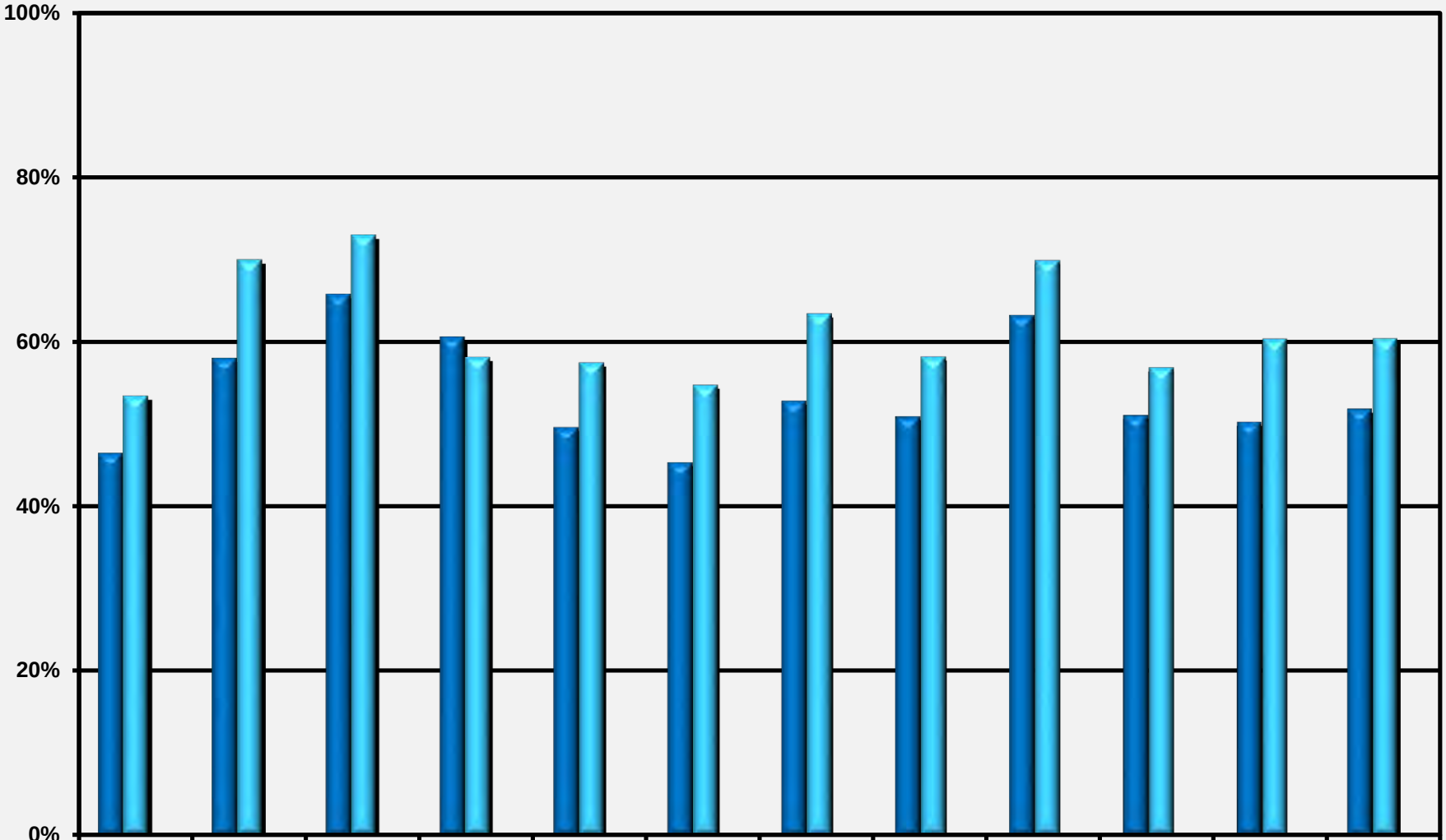
Cancer Screening: Cervical (Pap Screen)

AI/AN women age 24-64 who have received a Pap screen within the previous three years, or AI/AN women 30-64 years with a Pap screen in the past three years or a Pap Screen and an HPV DNA in the past five years.



*Prior to FY 2013, this measure tracked the percentage of women age 21-64 with a Pap screen in the previous three years. **In FY 2014, measure logic changed to track percentage of women 24-64 with a Pap Screen in the past 3 years or women 30 to 64 with a Pap screen and an HPV DNA in the past 5 years.

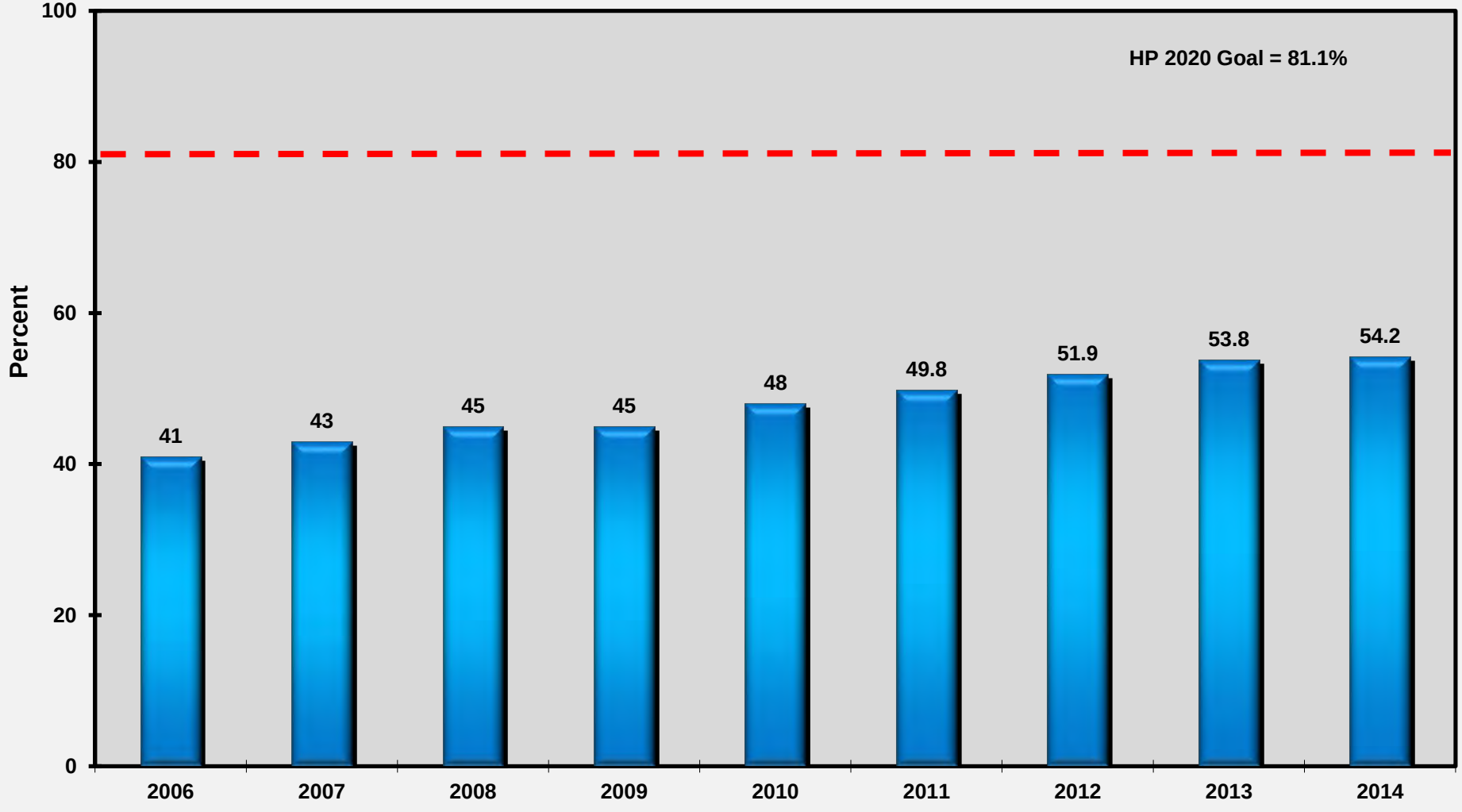
Cancer Screening: Cervical (Pap Screening)



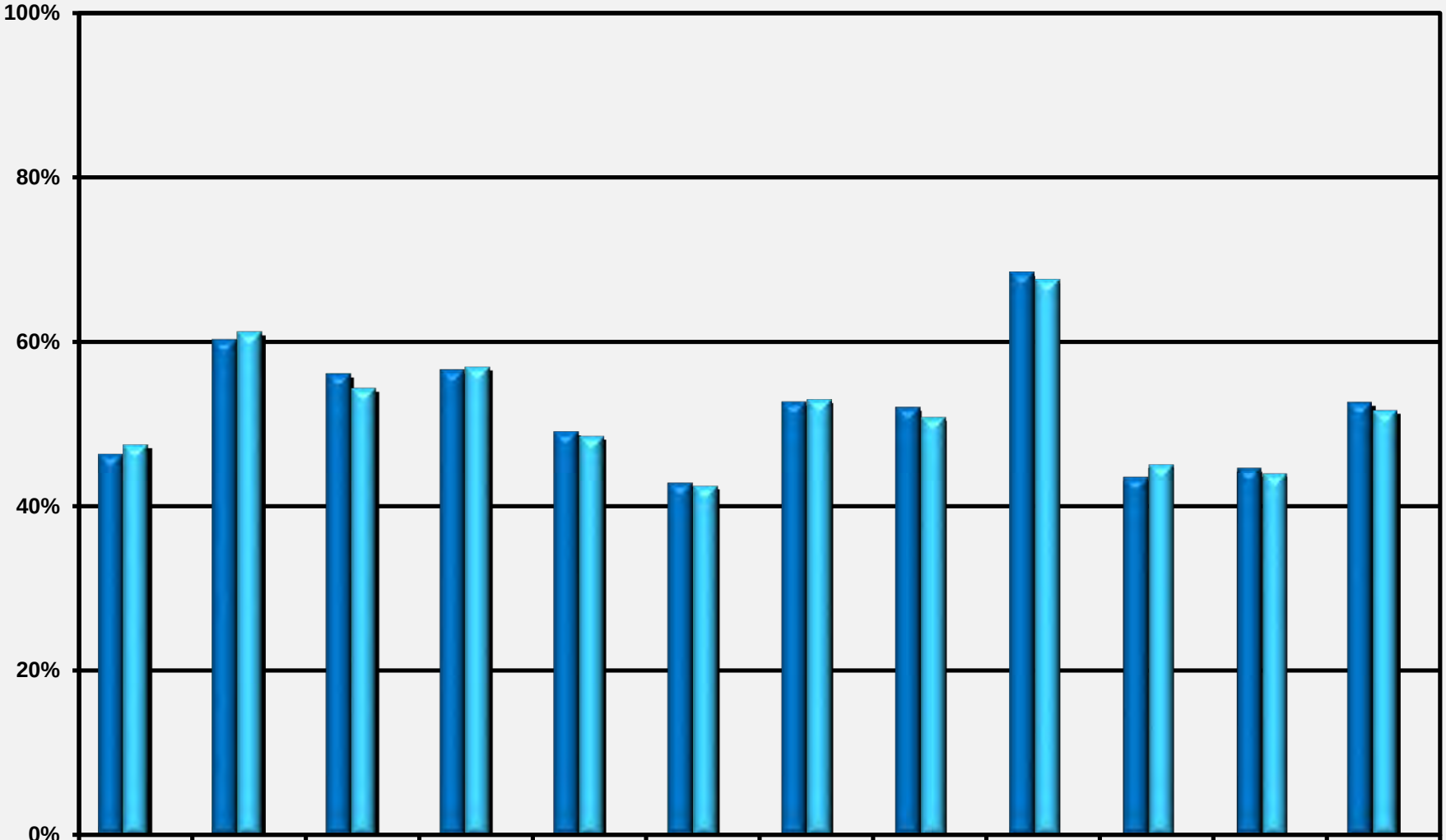
	ABD	ALA	ALB	BEM	BIL	CAL	NAS	NAV	OKL	PHX	POR	TUC
FY14	46.5%	58.0%	65.8%	60.6%	49.6%	45.4%	52.8%	50.9%	63.2%	51.1%	50.3%	51.9%
FY13	53.5%	70.0%	73.0%	58.2%	57.5%	54.8%	63.5%	58.3%	70.0%	56.9%	60.4%	60.5%
N	19955	10110	12946	4818	9586	12214	6671	32822	47327	29300	13793	3806

Cancer Screening: Breast (Mammography)

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



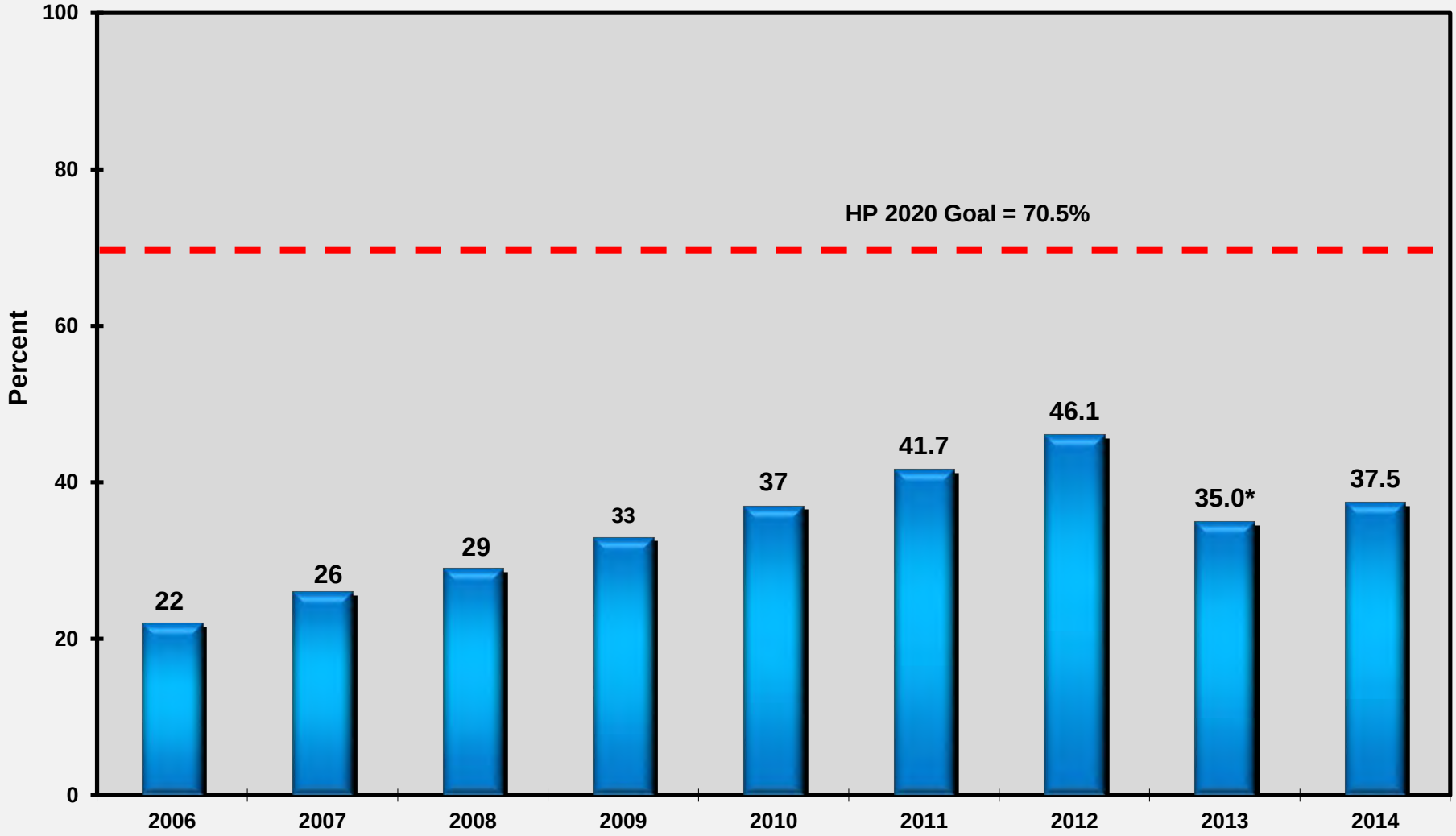
Cancer Screening: Breast (Mammography)



	ABD	ALA	ALB	BEM	BIL	CAL	NAS	NAV	OKL	PHX	POR	TUC
FY14	46.4%	60.3%	56.2%	56.7%	49.1%	42.9%	52.8%	52.1%	68.5%	43.6%	44.7%	52.7%
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	5287	3081	3926	1514	2780	3389	1959	10192	14550	7440	4215	967

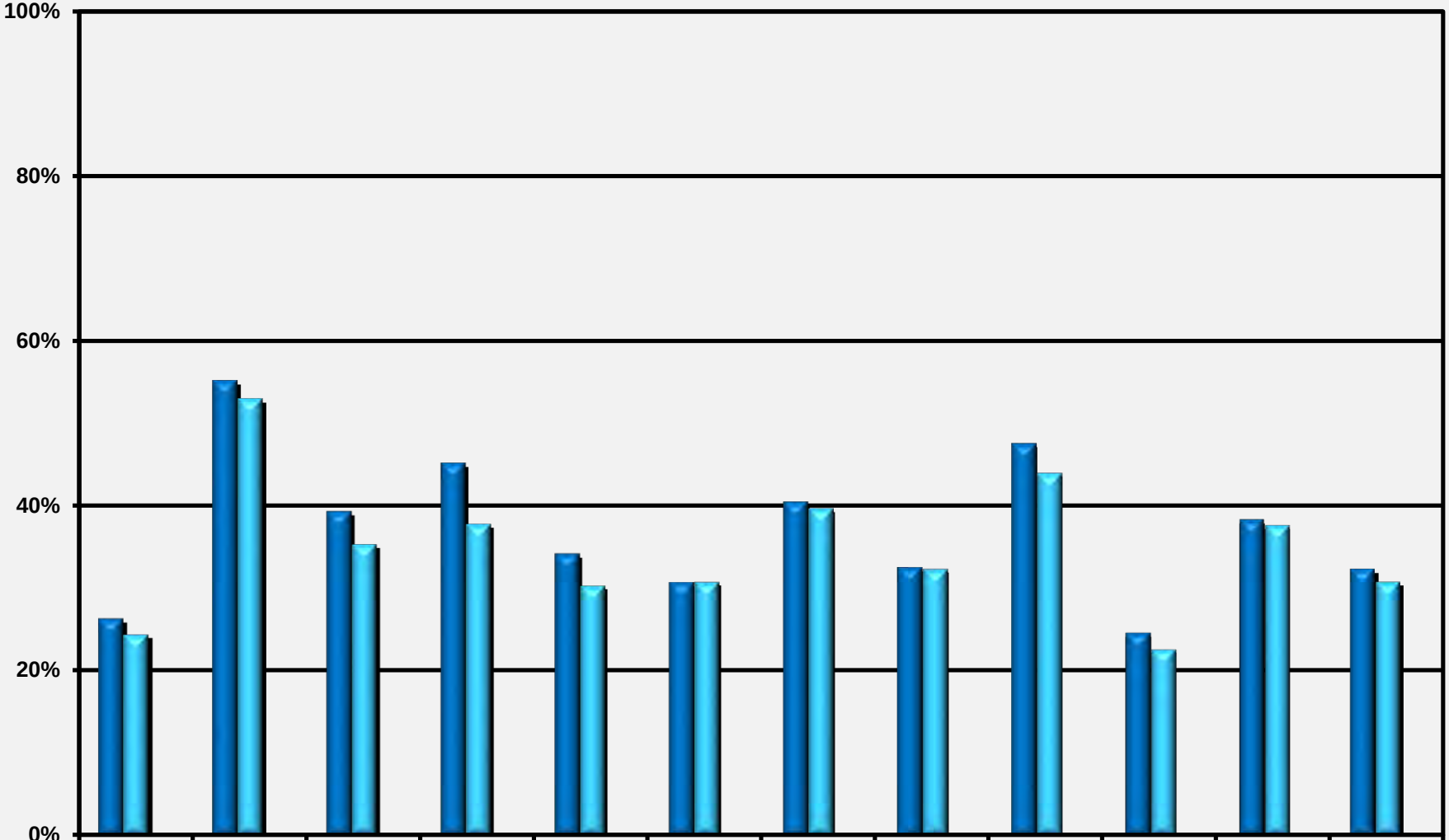
Cancer Screening: Colorectal

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



*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.

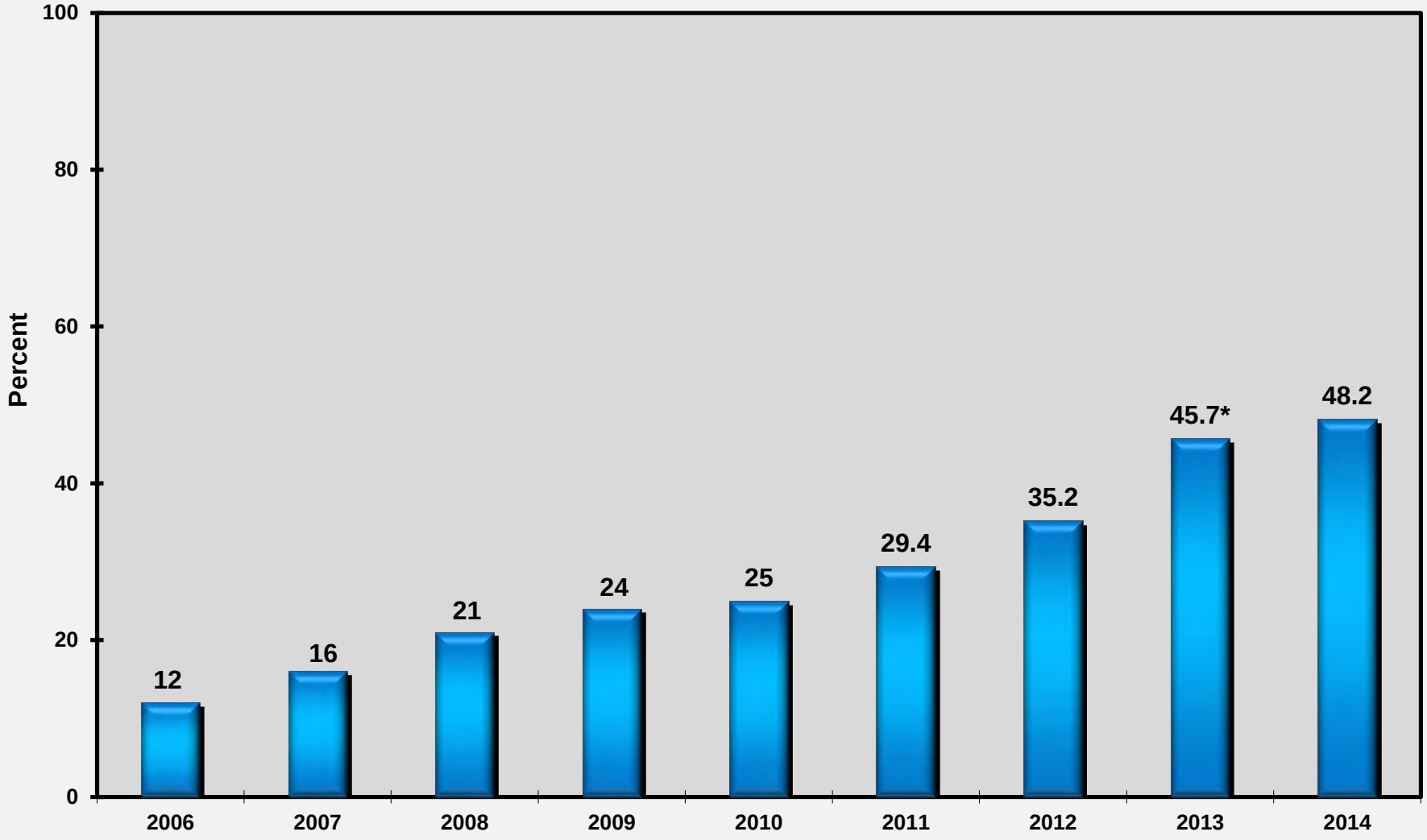
Cancer Screening: Colorectal



	ABD	ALA	ALB	BEM	BIL	CAL	NAS	NAV	OKL	PHX	POR	TUC
FY14	26.3%	55.2%	39.3%	45.2%	34.2%	30.7%	40.5%	32.5%	47.6%	24.6%	38.4%	32.4%
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	15115	9274	10997	4765	8011	9798	6176	30550	44139	20660	12343	2686

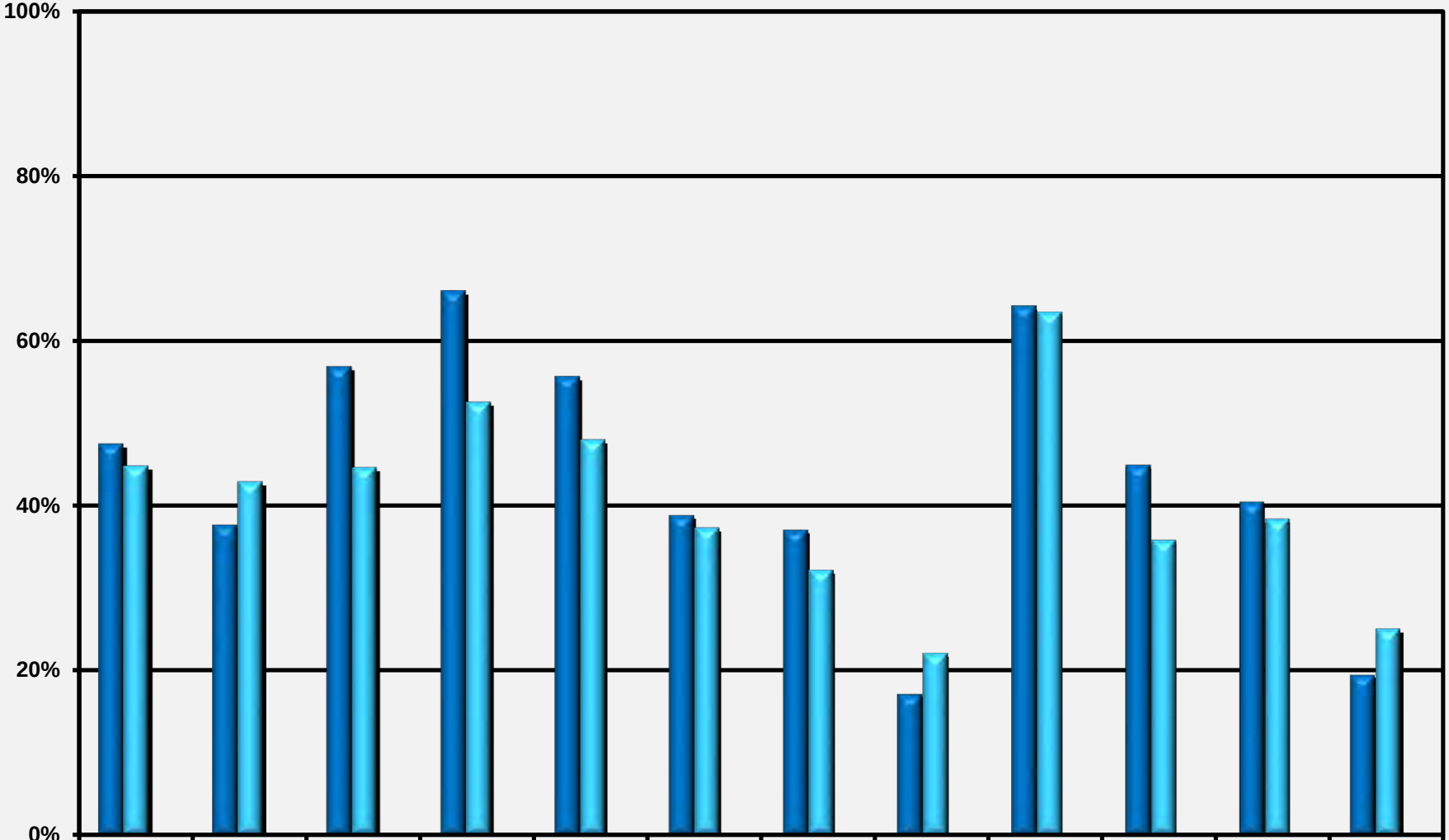
Tobacco Cessation

AI/AN tobacco-using patients who have received tobacco cessation intervention within the past year or quit their tobacco use within the past year.



*Measure logic change in FY 2013 to include tobacco users in cessation

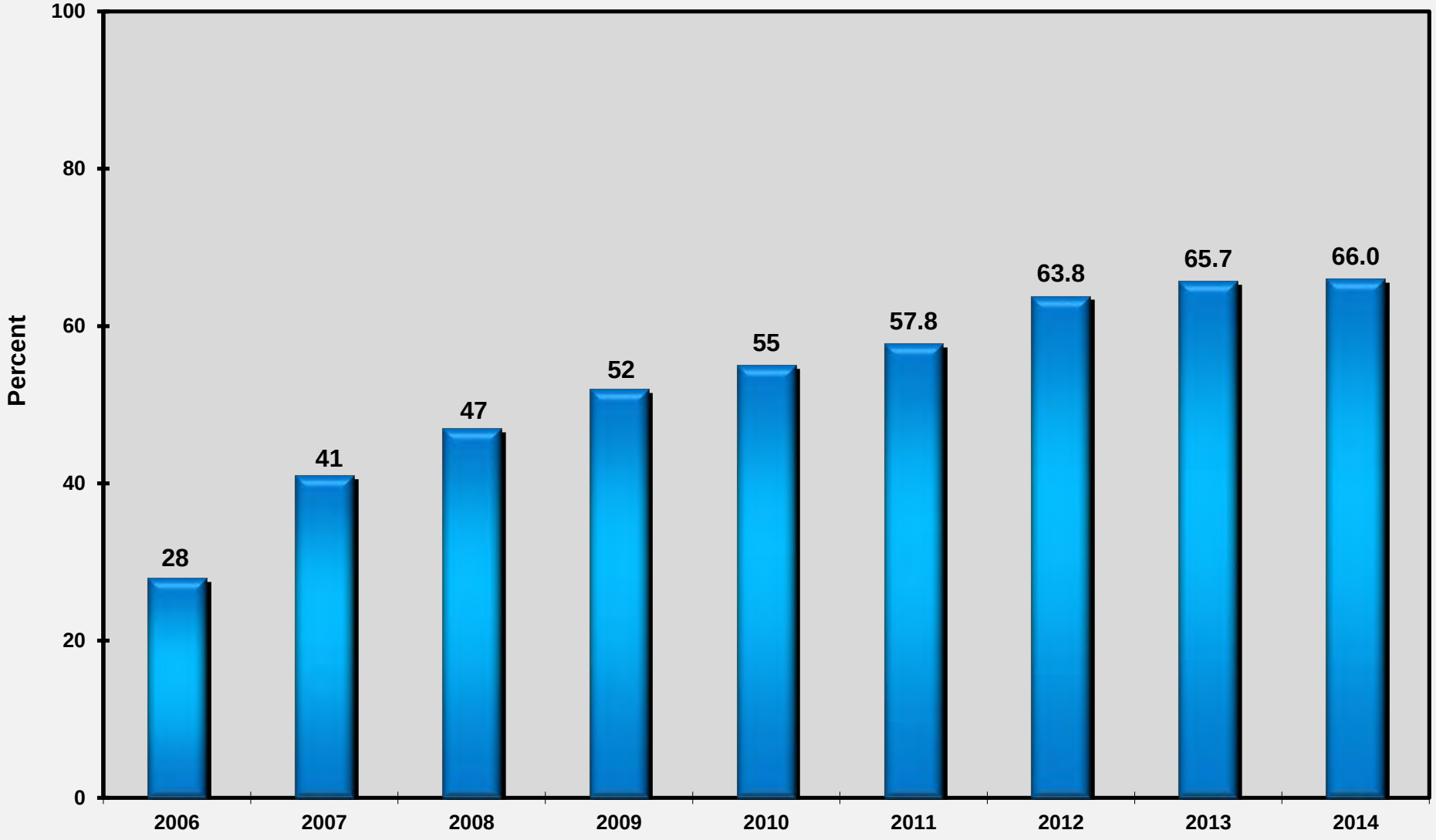
Tobacco Cessation



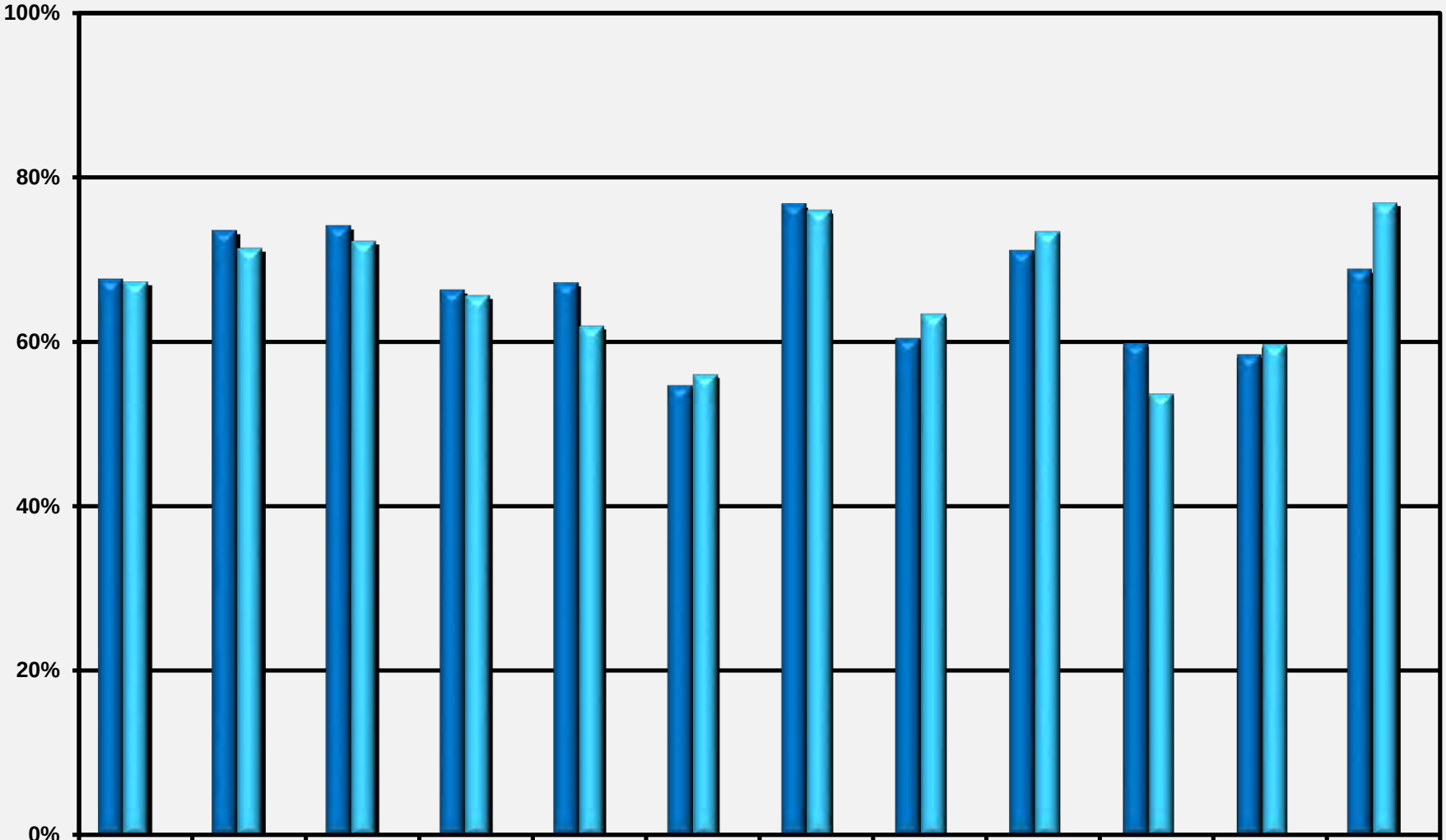
	ABD	ALA	ALB	BEM	BIL	CAL	NAS	NAV	OKL	PHX	POR	TUC
FY14	47.6%	37.8%	56.9%	66.1%	55.7%	38.9%	37.2%	17.4%	64.2%	45.0%	40.6%	19.7%
FY13	44.9%	43.0%	44.7%	52.6%	48.1%	37.4%	32.3%	22.2%	63.5%	35.9%	38.5%	25.1%
N	32638	18242	9237	10389	15604	11818	11257	17885	54811	21870	17665	2110

Alcohol Screening: Fetal Alcohol Syndrome (FAS) Prevention

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



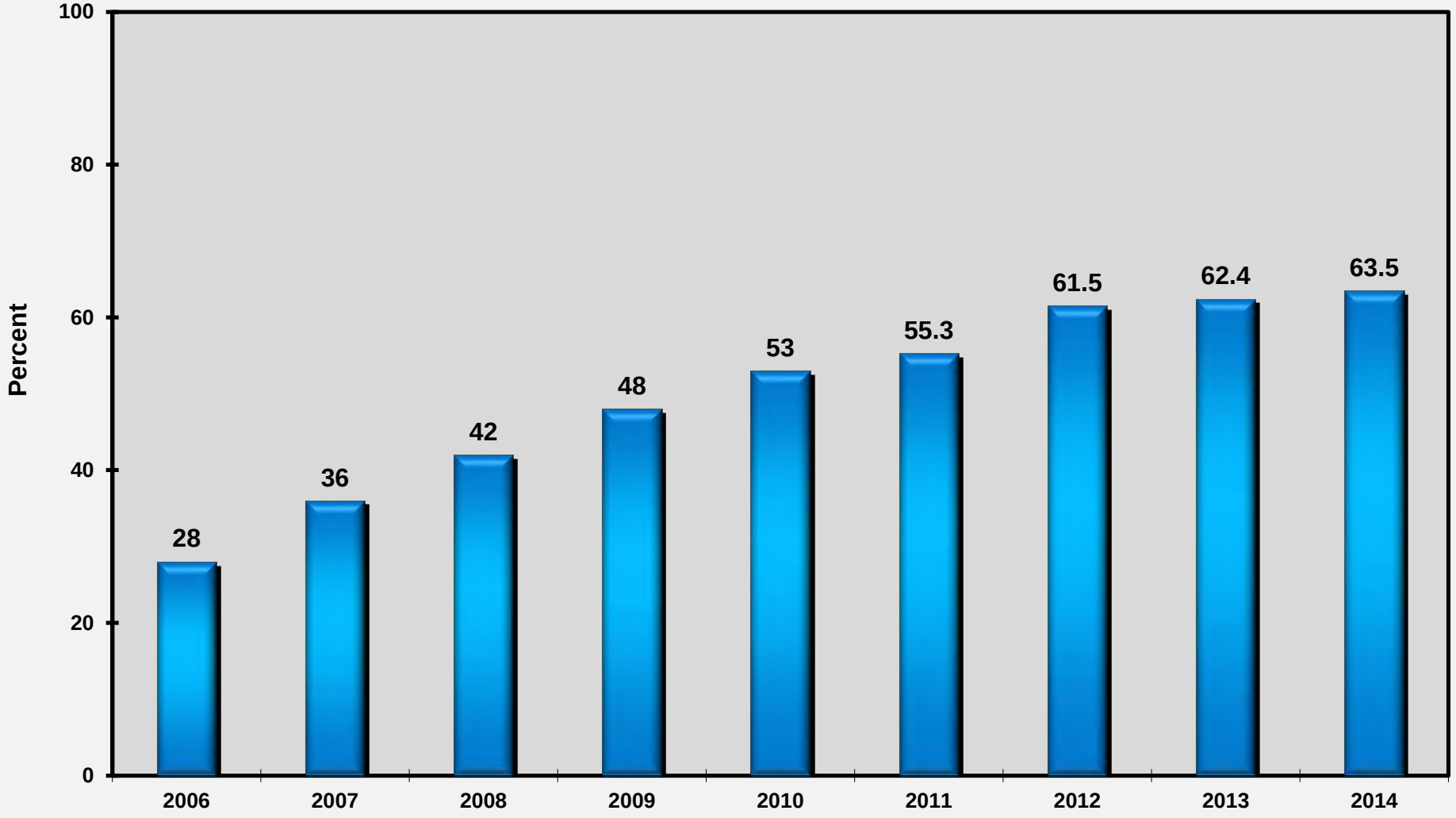
Alcohol Screening: FAS Prevention



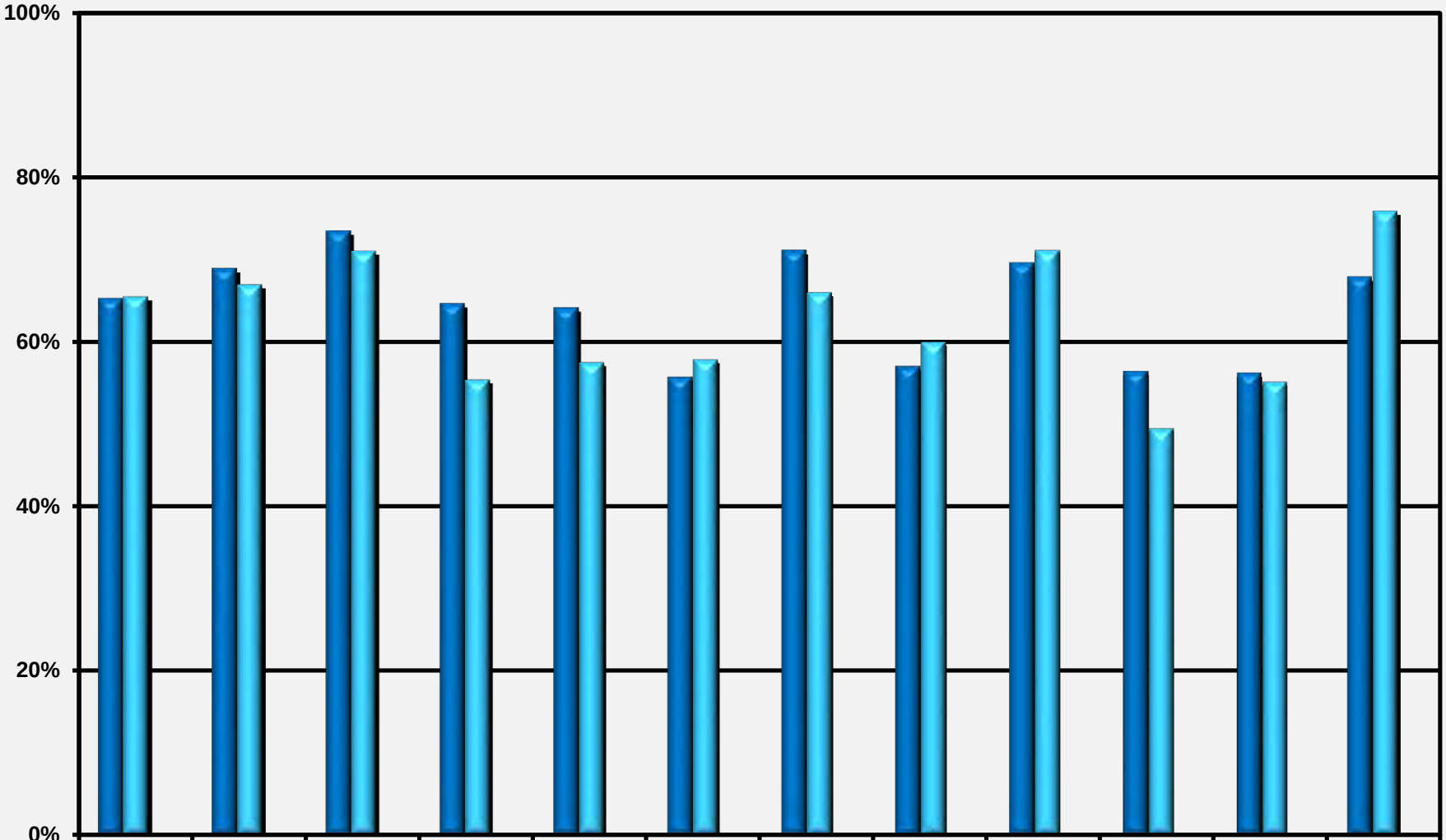
	ABD	ALA	ALB	BEM	BIL	CAL	NAS	NAV	OKL	PHX	POR	TUC
FY14	67.7%	73.6%	74.2%	66.4%	67.3%	54.8%	76.9%	60.5%	71.2%	60.0%	58.6%	68.9%
FY13	67.4%	71.4%	72.3%	65.7%	62.0%	56.1%	76.1%	63.5%	73.5%	53.8%	59.8%	77.0%
N	22642	11144	14013	5507	10010	12283	7141	33621	49600	30023	13905	3826

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.



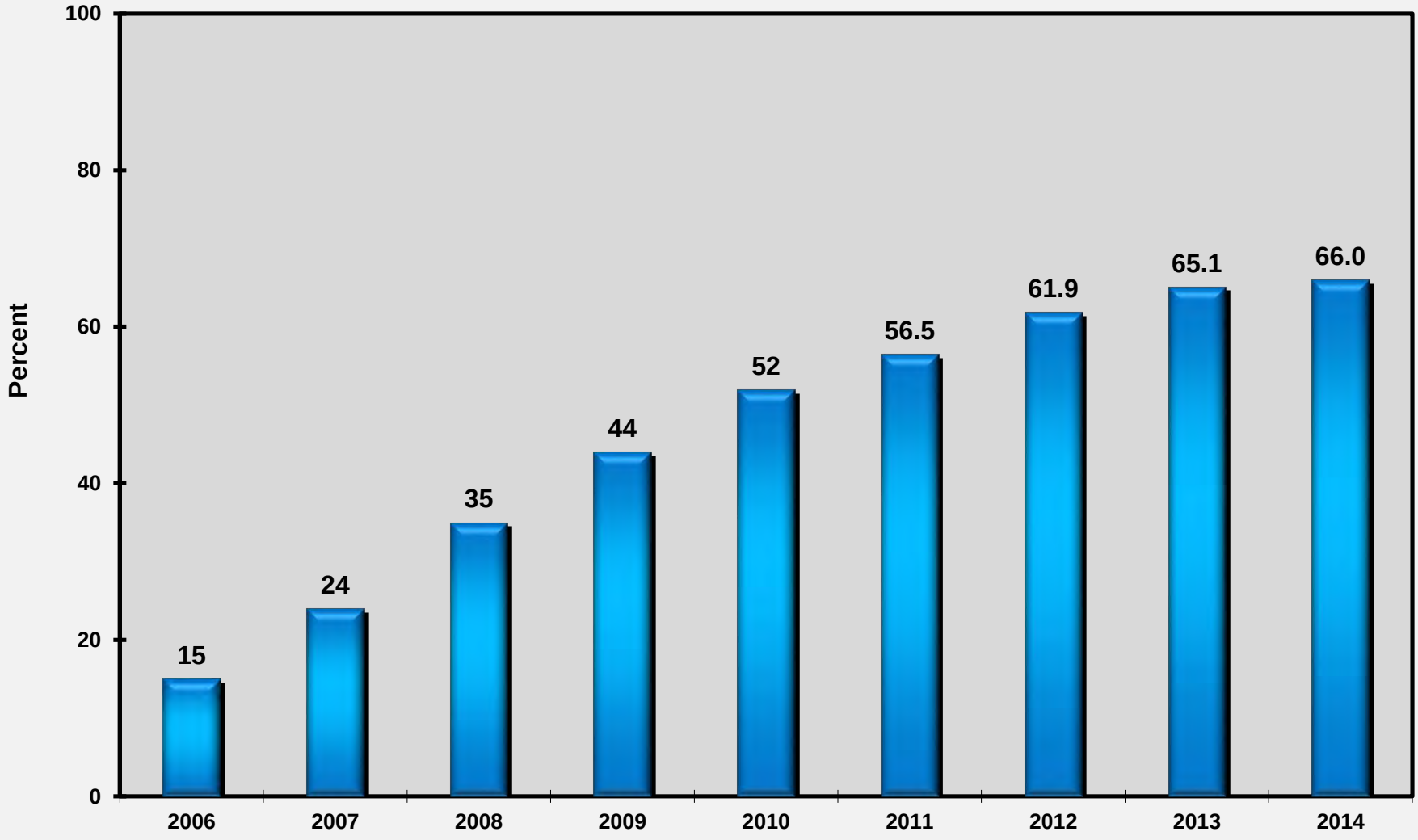
DV/IPV Screening



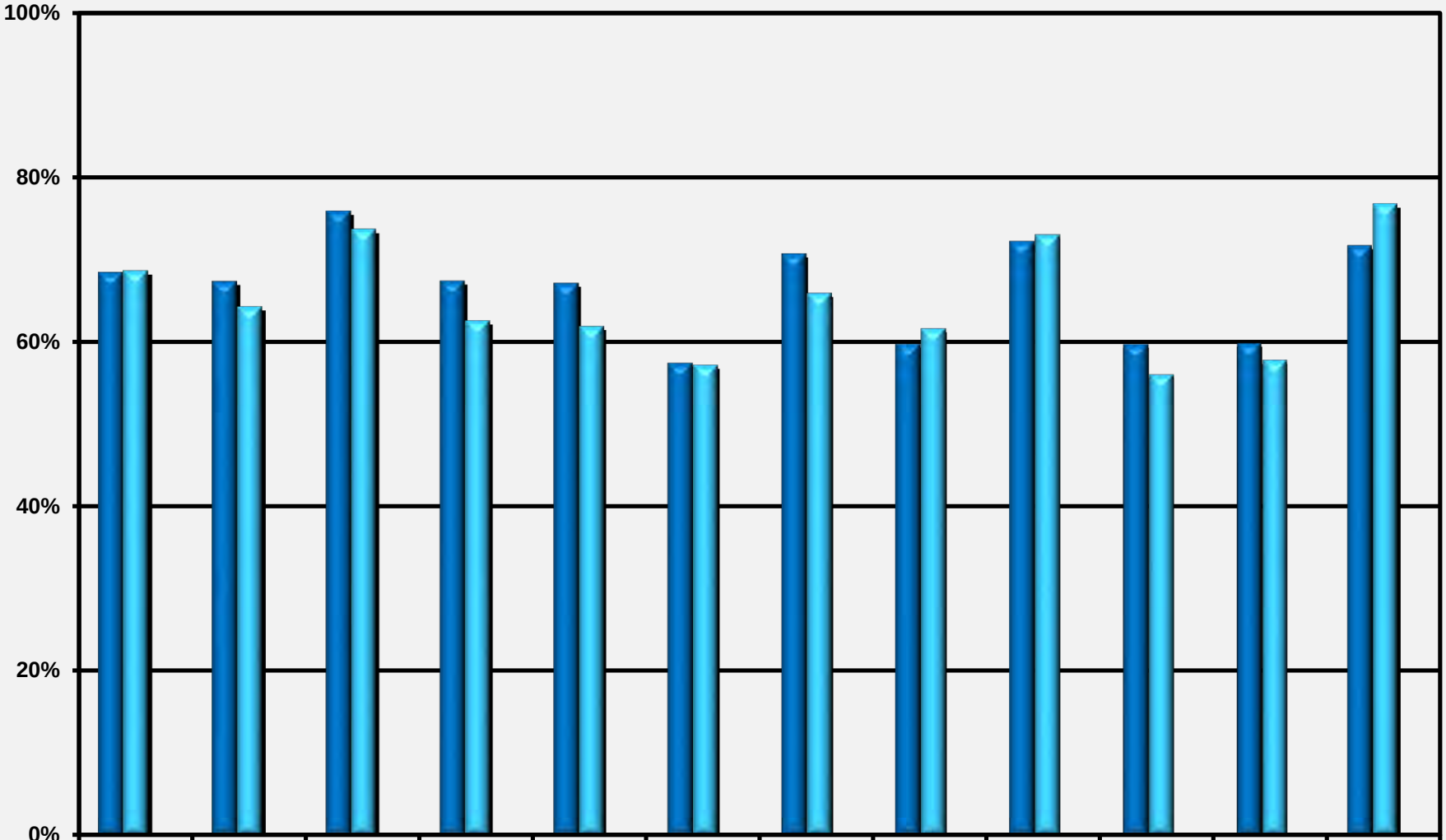
	ABD	ALA	ALB	BEM	BIL	CAL	NAS	NAV	OKL	PHX	POR	TUC
FY14	65.3%	69.0%	73.5%	64.7%	64.2%	55.7%	71.2%	57.1%	69.6%	56.5%	56.3%	67.9%
FY13	65.5%	67.0%	71.1%	55.5%	57.6%	57.9%	66.0%	60.0%	71.2%	49.6%	55.2%	75.9%
N	20328	10161	12515	4924	9024	11053	6320	30160	44052	26935	12365	3402

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.



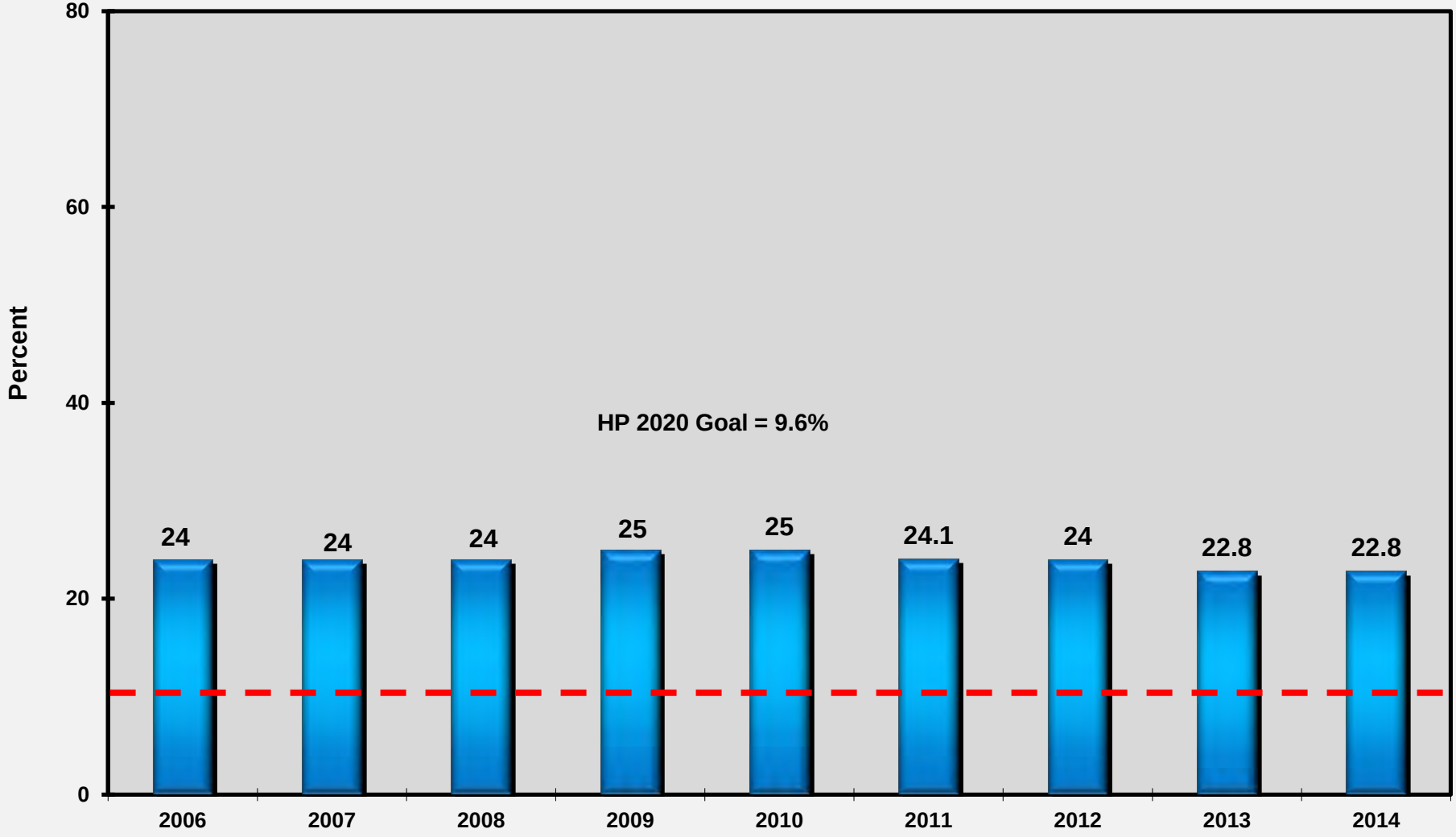
Depression Screening



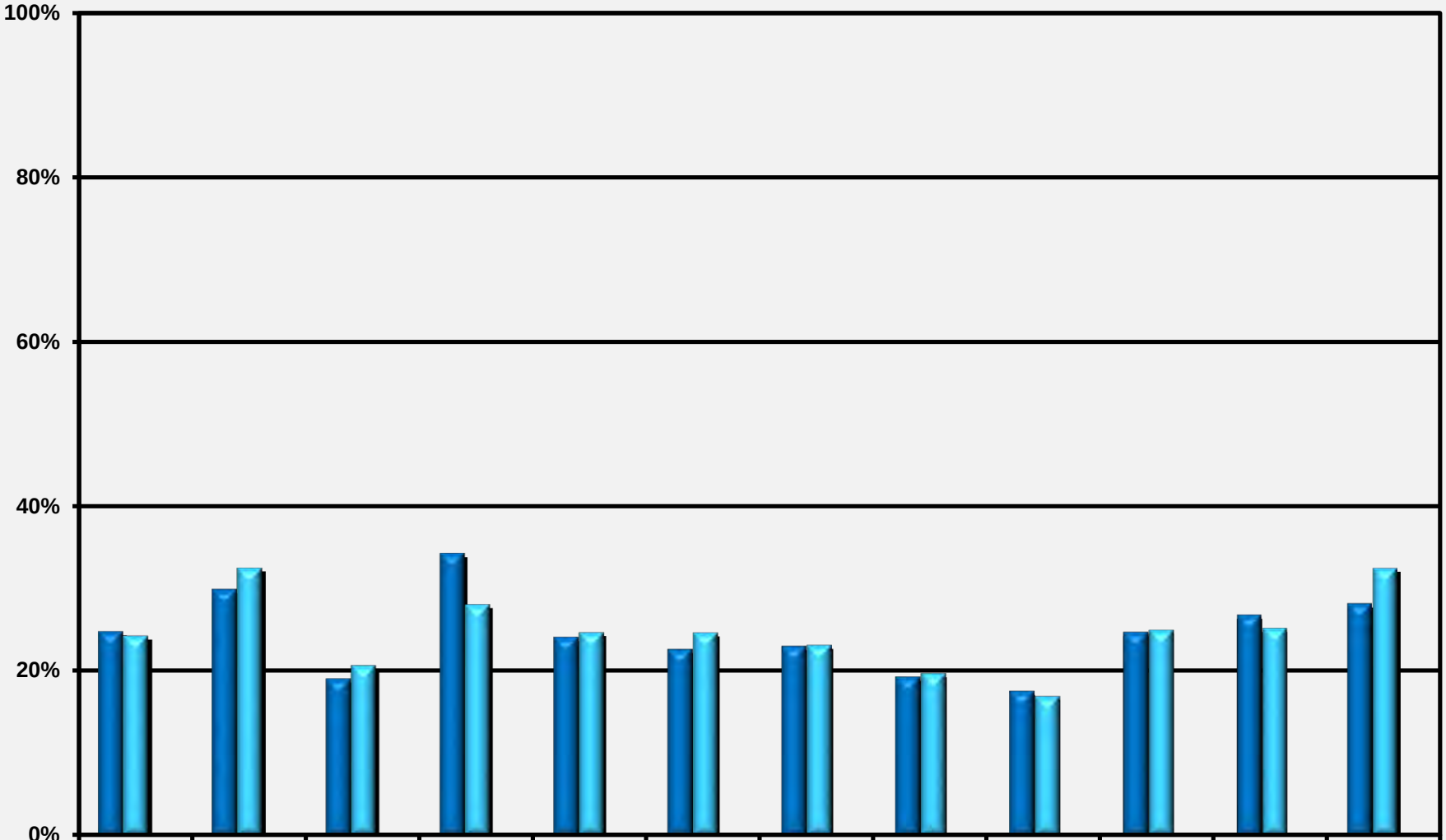
	ABD	ALA	ALB	BEM	BIL	CAL	NAS	NAV	OKL	PHX	POR	TUC
FY14	68.5%	67.4%	75.9%	67.4%	67.2%	57.5%	70.7%	59.8%	72.2%	59.8%	59.9%	71.7%
FY13	68.7%	64.3%	73.7%	62.6%	61.9%	57.2%	65.9%	61.7%	73.0%	56.1%	57.8%	76.8%
N	55705	30812	37102	15258	27198	32654	20075	95291	136303	73676	39159	9242

Childhood Weight Control (CWC)

AI/AN children ages 2-5 years with a BMI at or above 95th percentile.



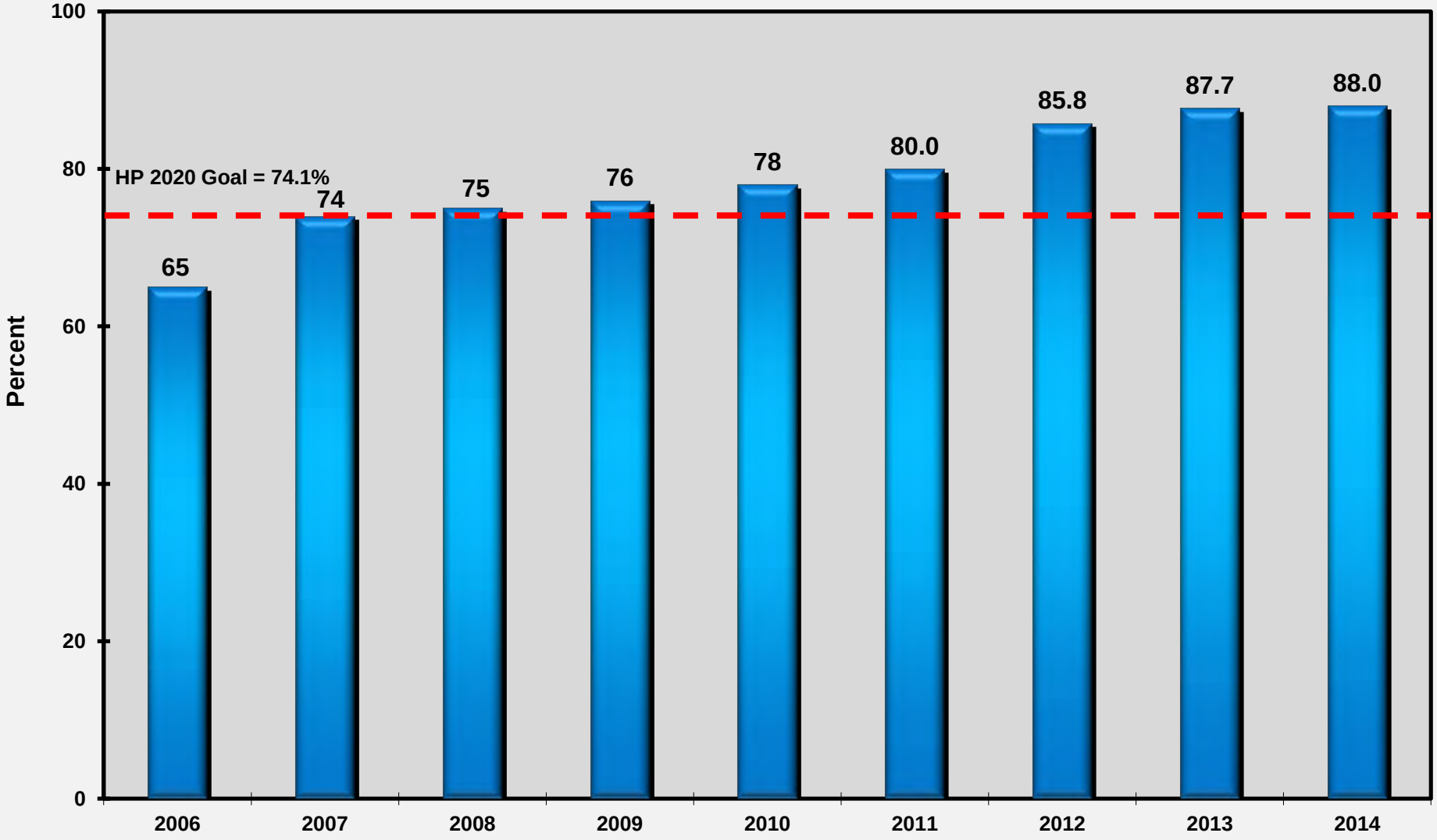
Childhood Weight Control



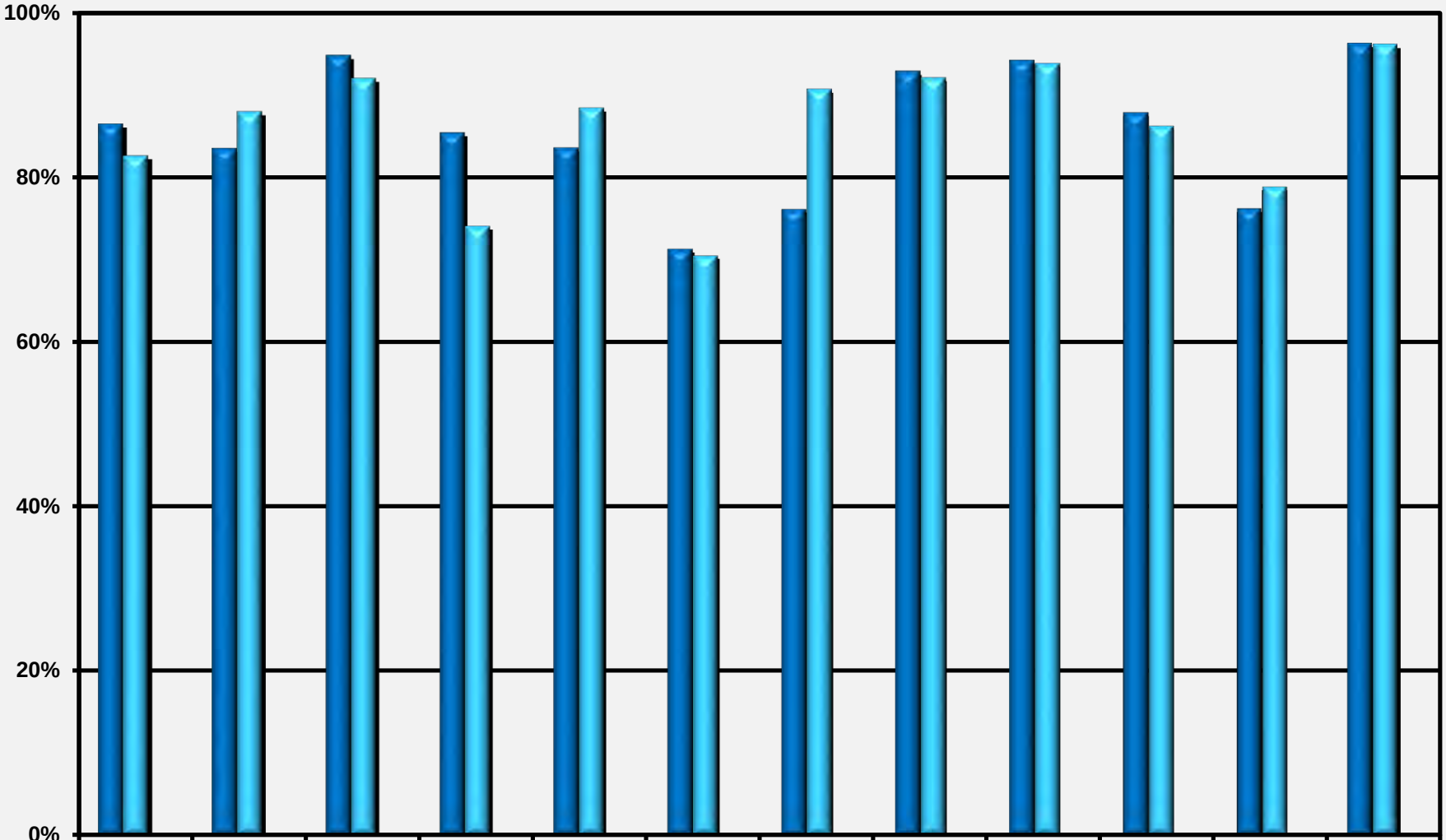
	ABD	ALA	ALB	BEM	BIL	CAL	NAS	NAV	OKL	PHX	POR	TUC
FY14	24.8%	29.9%	19.1%	34.3%	24.1%	22.6%	23.0%	19.3%	17.5%	24.7%	26.8%	28.2%
FY13	24.2%	32.5%	20.7%	28.1%	24.7%	24.6%	23.1%	19.7%	16.9%	24.9%	25.2%	32.5%
n	4181	2068	2183	1232	2084	2139	1465	5224	7337	5839	2314	632

Prenatal HIV Screening

Pregnant AI/AN women screened for HIV within the past 20 months.



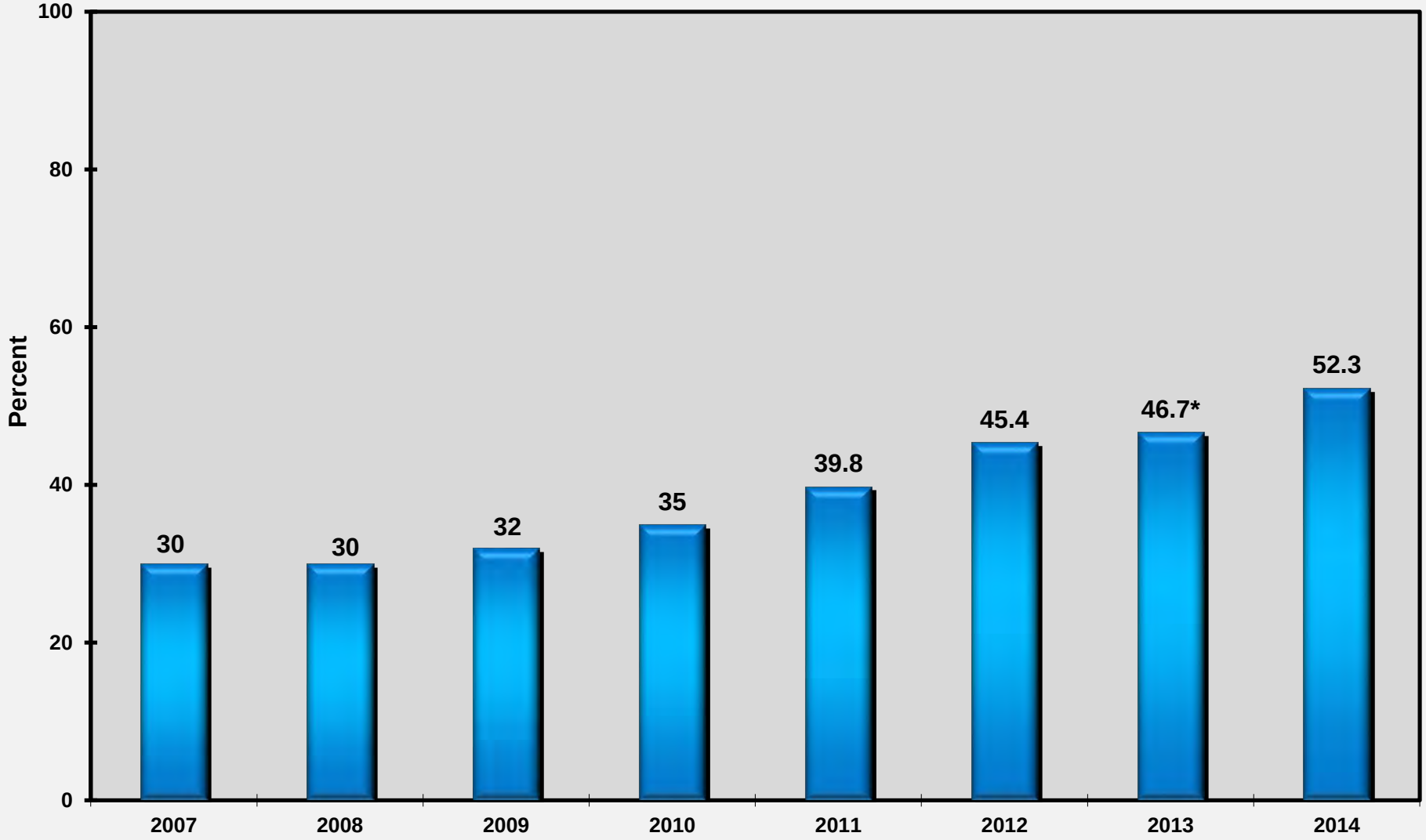
Prenatal HIV Screening



	ABD	ALA	ALB	BEM	BIL	CAL	NAS	NAV	OKL	PHX	POR	TUC
FY14	86.6%	83.6%	94.9%	85.5%	83.7%	71.4%	76.2%	93.0%	94.3%	88.0%	76.3%	96.4%
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	3002	1331	1199	546	1232	724	623	3460	3136	3259	1010	412

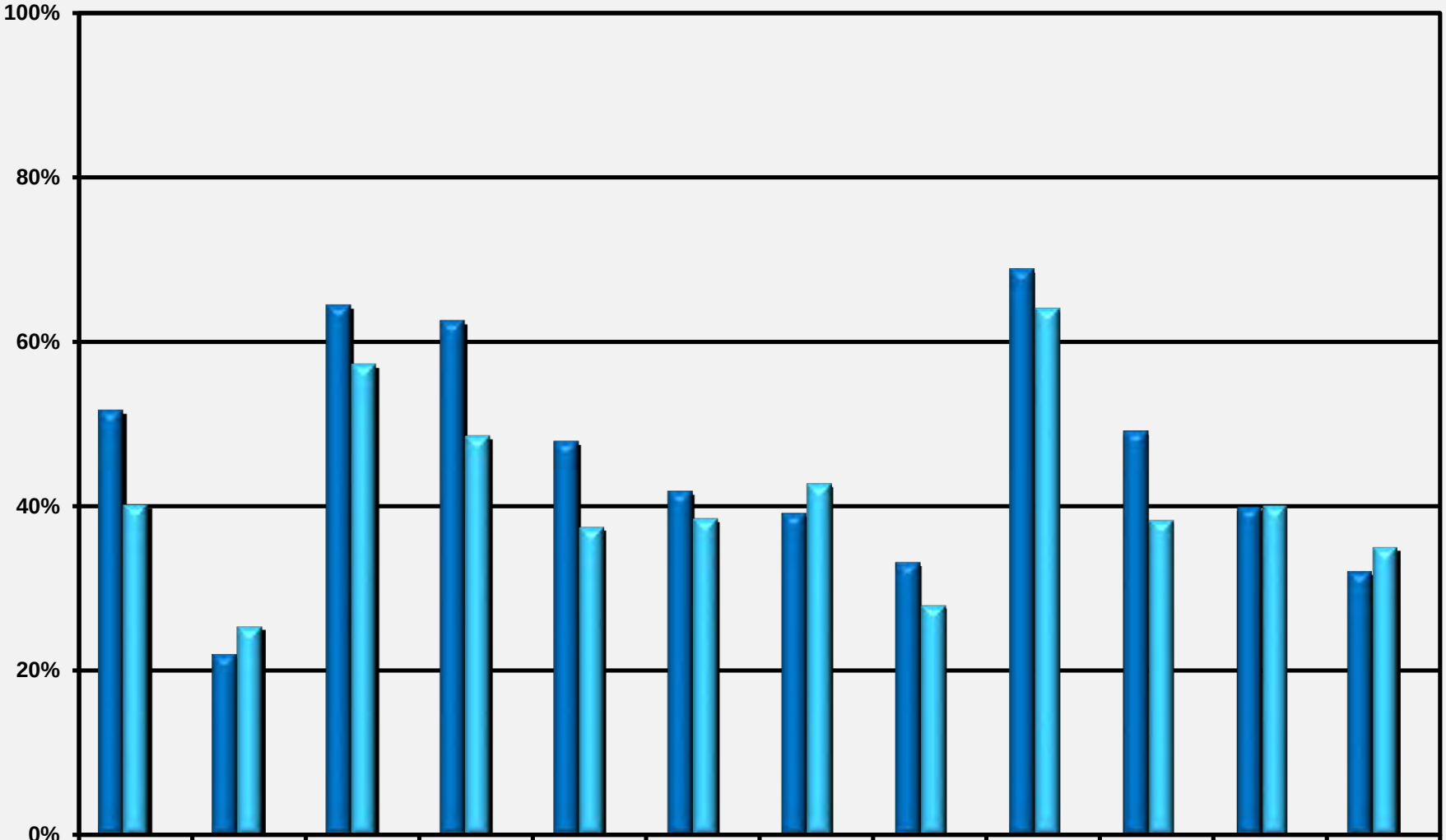
CVD Prevention: Comprehensive Assessment

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.



*Prior to FY 2013, this measure tracked the percentage of active IHD patients ages 22 and older with a comprehensive assessment and included patients with an LDL in the previous five years (beginning in FY 2013, LDL required during report period to meet measure)..

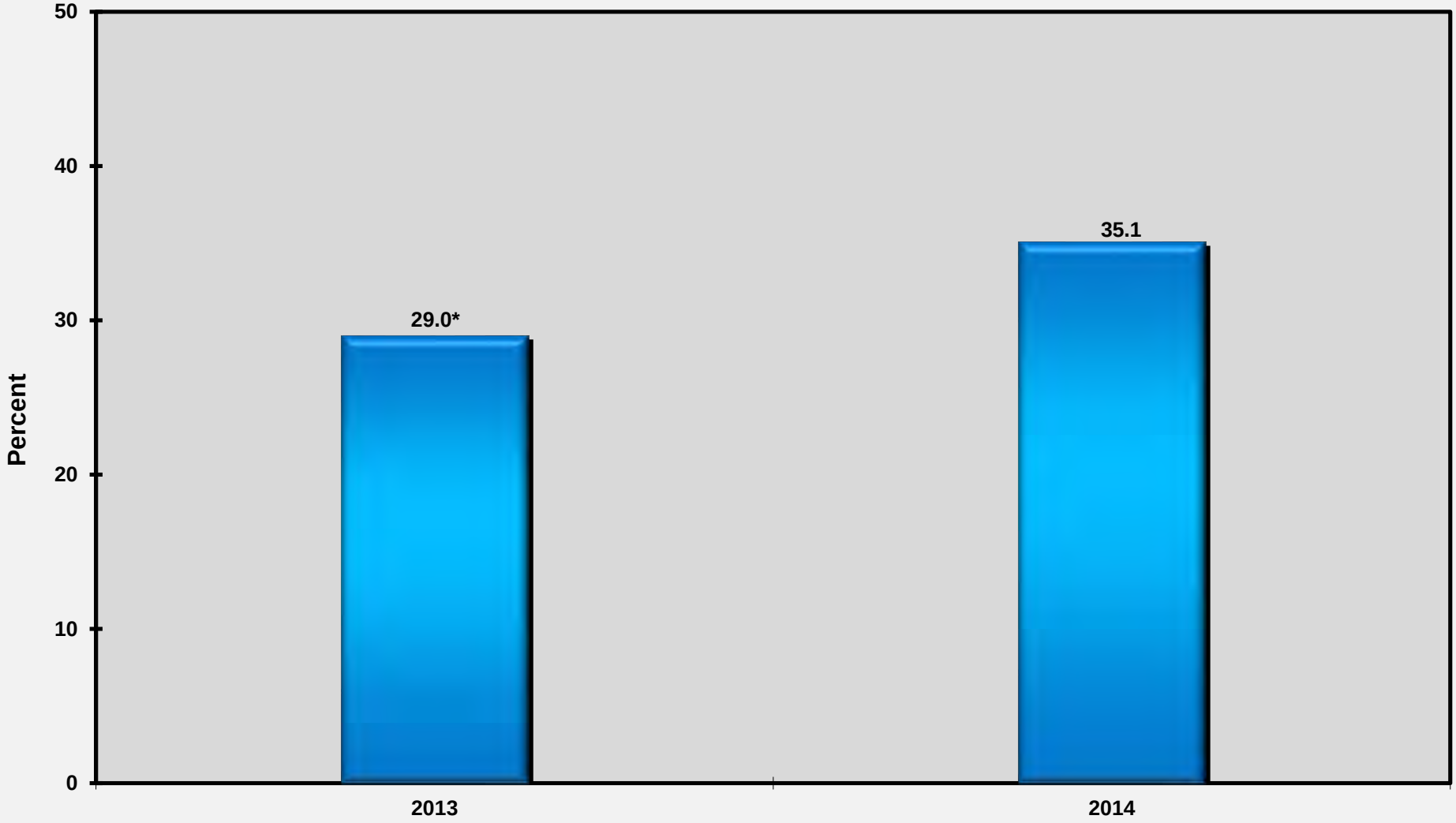
Comprehensive CVD Assessment



	ABD	ALA	ALB	BEM	BIL	CAL	NAS	NAV	OKL	PHX	POR	TUC
FY14	51.7%	22.1%	64.5%	62.6%	48.0%	41.9%	39.2%	33.3%	68.9%	49.2%	40.0%	32.2%
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	4689	1693	1696	1313	1945	1186	1984	3611	10520	3065	2109	230

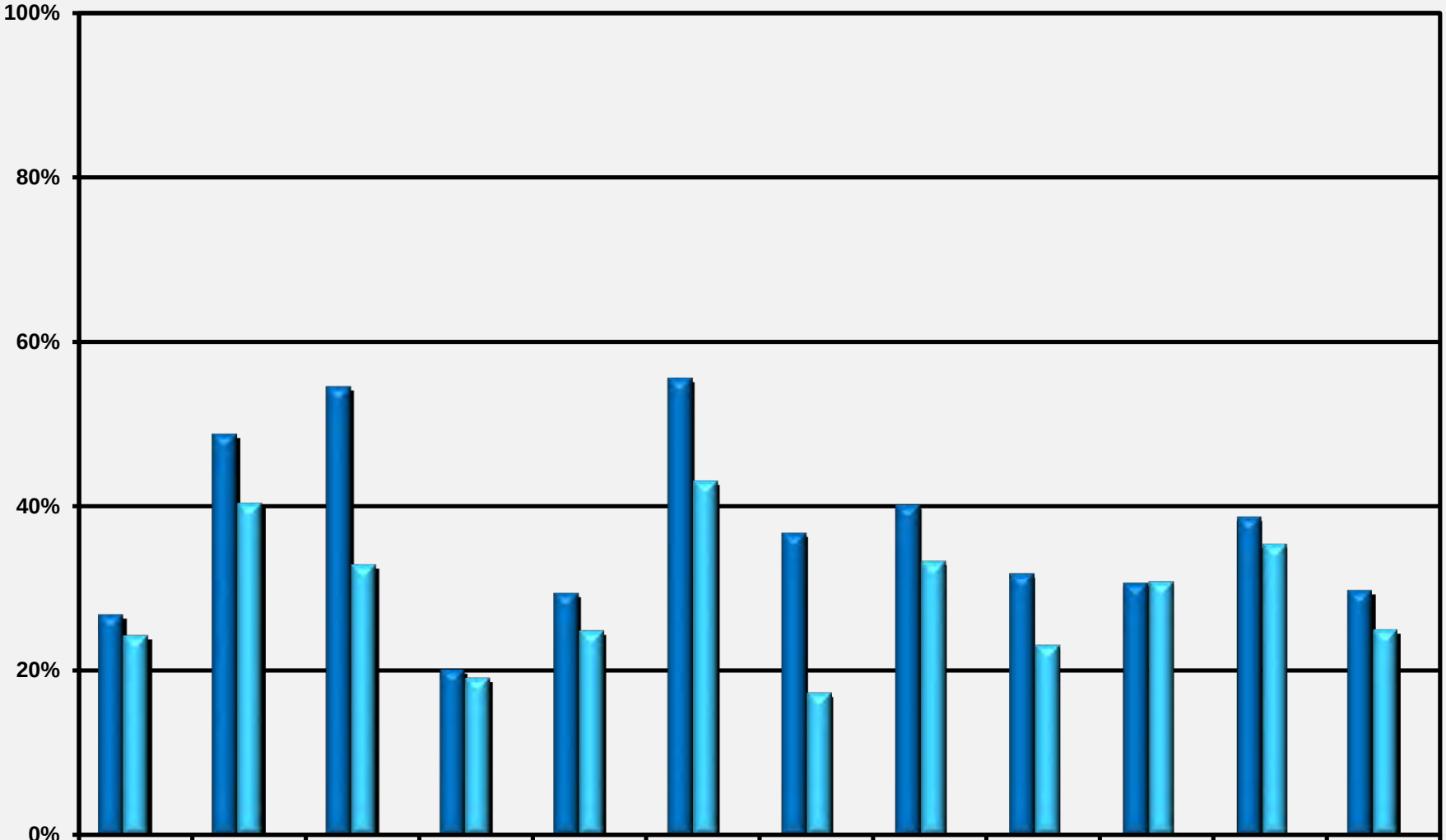
Breastfeeding Rates

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



* Prior to FY 2013, this was a Program Assessment measure only reported by federal health programs. Beginning in FY 2013, federal and tribal (and urban) health programs reported on the Breastfeeding Rates measure.

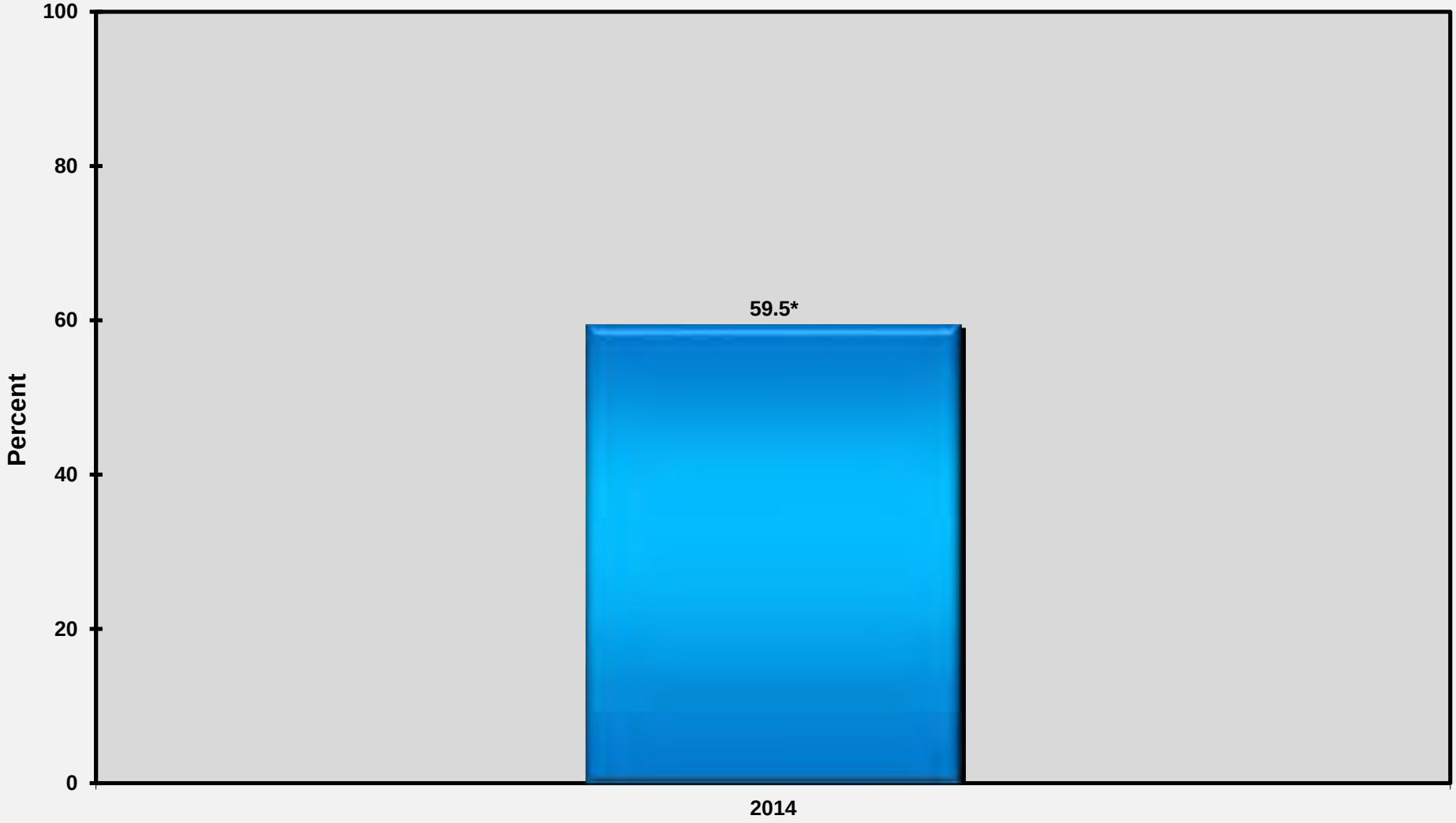
Breastfeeding Rates



	ABD	ALA	ALB	BEM	BIL	CAL	NAS	NAV	OKL	PHX	POR	TUC
FY14	26.9%	48.8%	54.5%	20.2%	29.5%	55.6%	36.8%	40.2%	31.8%	30.7%	38.7%	29.8%
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	432	121	132	119	146	99	136	1075	833	694	93	47

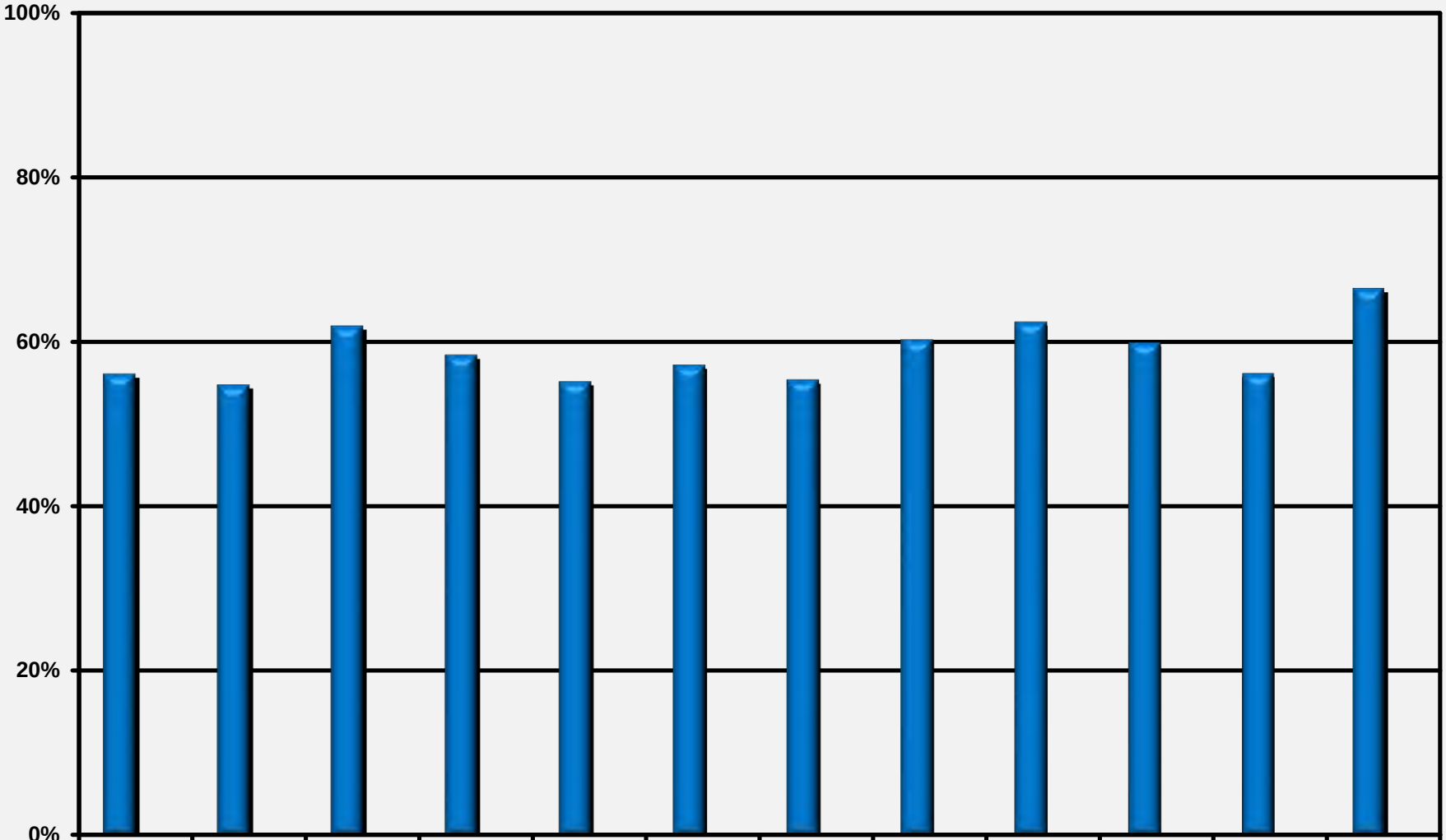
Controlling High Blood Pressure (Million Hearts)

AI/AN patients with diagnosed hypertension who have achieved blood pressure control (<140/90).



* Controlling High Blood Pressure is a new measure for federal and tribal health programs beginning in FY 2014.

Controlling High Blood Pressure (MH)



	ABD	ALA	ALB	BEM	BIL	CAL	NAS	NAV	OKL	PHX	POR	TUC
FY14	56.2%	54.8%	62.0%	58.4%	55.2%	57.2%	55.4%	60.3%	62.5%	59.9%	56.2%	66.5%
N	16079	6992	9214	4472	6805	6949	7329	20792	45964	21516	9830	2790

2014 Final National Dashboard (IHS/Tribal)

DIABETES	2013 Target	2013 Final	2014 Target	2014 Final	2014 Final Results
Good Glycemic Control	Baseline	48.3%	48.3%	48.6%	Met
Controlled BP <140/90	Baseline	64.6%	64.6%	63.8%	Not Met
LDL (Cholesterol) Assessed	68.0%	72.7%	73.9%	73.4%	Not Met
Nephropathy Assessed[a]	64.2%	68.2%	Baseline	60.0%	Met
Retinopathy Exam	56.8%	57.6%	58.6%	59.9%	Met
DENTAL					
Dental: General Access	26.9%	28.3%	29.2%	28.8%	Not Met
Sealants	Baseline	13.9%	13.9%	14.6%	Met
Topical Fluoride	Baseline	26.7%	26.7%	27.9%	Met
IMMUNIZATIONS					
Influenza 65+	62.3%	68.0%	69.1%	68.1%	Not Met
Pneumovax 65+[a]	84.7%	89.2%	Baseline	85.7%	Met
Childhood IZ	Baseline	74.8%	74.8%	75.4%	Met
PREVENTION					
(Cervical) Pap Screening[a]	Baseline	61.7%	Baseline	54.6%	Met
Mammography Screening	49.7%	53.8%	54.7%	54.2%	Not Met
Colorectal Cancer Screening	Baseline	35.0%	35.0%	37.5%	Met
Tobacco Cessation	Baseline	45.7%	45.7%	48.2%	Met
Alcohol Screening (FAS Prevention)	61.7%	65.7%	65.9%	66.0%	Met
DV/IPV Screening	58.3%	62.4%	64.1%	63.5%	Not Met
Depression Screening	58.6%	65.1%	66.9%	66.0%	Not Met
CVD- Comprehensive Assessment	32.3%	46.7%	51.0%	52.3%	Met
Prenatal HIV Screening	82.3%	87.7%	89.1%	88.0%	Not Met
Childhood Weight Control[b]	24.0%	22.8%	N/A[b]	22.8%	N/A
Breastfeeding Rates	Baseline	29.0%	29.0%	35.1%	Met
Controlling High Blood Pressure (MH)[c]	N/A	N/A	Baseline	59.5%	Met
Public Health Nursing Encounters	405,962	388,590	425,679	Pending	N/A
Suicide Surveillance[d] (forms completed)	1,376	1,438	1,668	Pending	N/A

[a]Measure logic changes in FY 2014

[b]Long-term measure; will be reported in FY 2016

[c]New measure reported by federal and tribal programs as of FY 2014

[d]Measure data is submitted from 11 Areas

Measures in red are GPRAMA measures

Measures Met: 14

Measures Not Met: 8

2014 Final National Dashboard (Tribal Only)

DIABETES	2013 Target	2013 Final	2014 Target	2014 Final	2014 Final Results
Good Glycemic Control	Baseline	50.9%	50.9%	51.5%	Met
Controlled BP <140/90	Baseline	63.5%	63.5%	63.1%	Not Met
LDL (Cholesterol) Assessed	66.9%	71.8%	73.1%	71.5%	Not Met
Nephropathy Assessed[a]	55.6%	61.3%	Baseline	57.8%	Met
Retinopathy Exam	53.6%	54.5%	55.5%	58.5%	Met
DENTAL					
Dental: General Access	N/A	N/A	N/A	N/A	N/A
Sealants	N/A	N/A	N/A	N/A	N/A
Topical Fluoride	N/A	N/A	N/A	N/A	N/A
IMMUNIZATIONS					
Influenza 65+	59.0%	65.4%	66.5%	65.5%	Not Met
Pneumovax 65+[a]	81.8%	85.9%	Baseline	81.7%	Met
Childhood IZ	Baseline	68.8%	68.8%	69.7%	Met
PREVENTION					
(Cervical) Pap Screening[a]	Baseline	61.7%	Baseline	55.1%	Met
Mammography Screening	50.7%	54.9%	55.8%	55.3%	Not Met
Colorectal Cancer Screening	Baseline	36.2%	36.2%	39.6%	Met
Tobacco Cessation	Baseline	42.8%	42.8%	43.1%	Met
Alcohol Screening (FAS Prevention)	57.5%	61.5%	61.6%	61.9%	Met
DV/IPV Screening	53.6%	56.7%	58.0%	59.2%	Met
Depression Screening	53.8%	60.0%	61.5%	61.1%	Not Met
CVD- Comprehensive Assessment	27.2%	45.4%	49.7%	48.4%	Not Met
Prenatal HIV Screening	N/A	N/A	N/A	82.9%	N/A
Childhood Weight Control[b]	24.0%	21.3%	N/A	21.6%	N/A
Breastfeeding Rates	Baseline	27.8%	27.8%	37.9%	Met
Controlling High Blood Pressure (MH)[c]	N/A	N/A	Baseline	59.1%	Met

[a]Measure logic changes in FY 2014

[b]Long-term measure; will be reported in FY 2016

[c]New measure reported by federal and tribal programs as of FY 2014

Tribal programs do not report separately for Dental and Prenatal HIV Screening measures

Measures in red are GPRAMA measures

2014 GPRA REPORTING & RESULTS : Urban Programs

Area GPRA Coordinators' Conference
Dec 3, 2014

FY 2014 Urban Measures

- Diabetes Dx Ever
- Documented A1c
- Good Glycemic Control
- Controlled BP <140/90
- LDL Assessed
- Nephropathy Assessed
- Influenza 65+
- Pneumovax 65+
- Childhood Immunizations
- Pap Screening
- Mammography Screening
- Colorectal Cancer Screening
- Tobacco Cessation
- Alcohol Screening (FAS Prevention)
- DV/IPV Screening
- Depression Screening
- Prenatal HIV Screening
- Childhood Weight Control
- Breastfeeding Rates
- Suicide Surveillance (CRS only)

Grey = Context Measures with no targets
Green = Measure with no specific urban target

FY 2014 Urban GPRA Results

Urban Program Reporting

» Number of Urban Sites Reporting: 33

» Number of urban sites reporting via CRS:

> **2014- 23 sites****
> 2013- 24 sites*
> 2012 –24 sites
> 2011 –21 sites
> 2010 –18 sites
> 2009 –11 sites
> 2008 – 9 sites
> 2007 – 9 sites
> 2006 – 7 sites

*Counts prior to FY 2013 include 2 OK hybrid programs that are not included in FY 2013. 2 additional urban programs began reporting via CRS in 2013.

** One urban program switched to a non-RPMS system in FY 2014.

FY 2014 Results

»Urban programs reporting via CRS* met 4 of 16 measures in FY 2014 (25%)

- 3 of the 4 measures met had “baseline” targets
- Urban programs met the Diabetes: Controlled Blood Pressure measure

*Only results from programs reporting via CRS are included in “official” urban results.

FY 2014 Results

- Of the 16 measures that Urban programs reported in FY 2014:
  - 10 measures improved over the FY 2013 results
  - 3 measures decreased in performance from FY 2013 results
  - 3 measures had significant logic changes in 2014 so previous year comparable data is not available

FY 2014 Results

» 10 of 13 measures with comparable FY 2013 data improved in performance from 2013:

Measure	FY 2014	FY 2013	% Increase
Mammography Screening	26.6%	20.5%	6.1%
Tobacco Cessation Intervention	38.2%	33.9%	4.3%
LDL Assessed	68.3%	65.2%	3.1%
Influenza 65+	43.1%	40.2%	2.9%
DV/IPV Screening	52.6%	50.1%	2.5%
Depression Screening	55.4%	53.4%	2.0%
Colorectal Cancer Screening	17.1%	15.2%	1.9%
Alcohol Screening (FAS Prevention)	55.3%	53.7%	1.5%
Controlled BP <140/90	66.1%	64.7%	1.4%
Childhood Immunizations	39.0%	38.5%	0.5%

FY 2014 Results

» 3 of 13 measures with comparable FY 2013 data decreased in performance from 2013:

Measure	FY 2014	FY 2013	% Decrease
Breastfeeding Rates	*11.1%*	*50.0%*	*38.9%*
Good Glycemic Control	47.1%	49.1%	2.0%
Prenatal HIV Screening	65.3%	66.1%	0.8%

014 Final - CRS Urban National Dashboard	CRS	CRS		2014 Final
IABETES	2014-Final	2013-Final	2014 Target	Results
ood Glycemic Control	47.1%	49.1%	48.3%	Not Met
ontrolled BP <140/90	66.1%	64.7%	64.6%	Met
DL Assessed	68.3%	65.2%	73.9%	Not Met
ephropathy Assessed[a]	53.5%	52.6%	Baseline	Met
etinopathy Exam	N/A	N/A	58.6%	N/A
ENTAL				
ental Access	N/A	N/A	29.2%	N/A
ealants	N/A	N/A	13.9%	N/A
opical Fluoride	N/A	N/A	26.7%	N/A
MMUNIZATIONS				
nfluenza 65+	43.1%	40.2%	69.1%	Not Met
neumovax 65+[a]	54.5%	51.2%	Baseline	Met
hildhood IZ	39.0%	38.5%	74.8%	Not Met
REVENTION				
ap Screening[a]	41.6%	47.3%	Baseline	Met
lammography Screening	26.6%	20.5%	54.7%	Not Met
olorectal Cancer Screening	17.1%	15.2%	35.0%	Not Met
obacco Cessation	38.2%	33.9%	45.7%	Not Met
lcohol Screening (FAS Prevention)	55.3%	53.7%	65.9%	Not Met
V/IPV Screening	52.6%	50.1%	64.1%	Not Met
epression Screening	55.4%	53.4%	66.9%	Not Met
VD-Comprehensive Assessment	N/A	N/A	51.0%	N/A
renatal HIV Screening	65.3%	66.1%	89.1%	Not Met
hildhood Weight Control[b]	27.7%	19.9%	N/A[b]	N/A
reastfeeding Rates[c]	*11.1%*	*50.0%*	29.0%	Not Met
ontrolling High Blood Pressure	N/A	N/A	Baseline	N/A

Measure logic revised in FY 2014

Long-term measure as of FY 2009, reported next in FY 2016.

New Measure for Urban Programs in FY 2013

ashboard includes data from 23 Urban Programs reporting via CRS

esults in italics represent measures with fewer than 20 patients in the denominator; use caution when interpreting these results.

leasures in red are GPRAMA measures

Measures Met = 4

Measures Not Met =12

Measures with No Data =0

2014 Final Urban Dashboard (By Program Type)	CRS Comprehensive Service	CRS Limited Service	CRS Outreach/ Referral	Non CRS	
DIABETES	2014-Final	2014- Final	2014-Final	2014-Final	2014 Target
Good Glycemic Control	49.1%	41.5%	23.5%	46.2%	48.3%
Controlled BP <140/90	67.0%	64.5%	47.1%	72.8%	64.6%
LDL Assessed	69.1%	70.9%	31.4%	66.4%	73.9%
Nephropathy Assessed[a]	55.9%	50.5%	0.0%	65.2%	Baseline
Retinopathy Exam	N/A	N/A	N/A	N/A	58.6%
DENTAL					
Dental Access	N/A	N/A	N/A	N/A	29.2%
Sealants	N/A	N/A	N/A	N/A	13.9%
Topical Fluoride	N/A	N/A	N/A	N/A	26.7%
IMMUNIZATIONS					
Influenza 65+	45.3%	41.1%	12.2%	40.5%	69.1%
Pneumovax 65+[a]	56.6%	48.3%	46.3%	42.6%	Baseline
Childhood IZ	37.8%	53.1%	*0.0%*	59.5%	74.8%
PREVENTION					
Pap Screening[a]	41.5%	47.3%	11.8%	40.7%	Baseline
Mammography Screening	27.3%	28.3%	6.3%	30.8%	54.7%
Colorectal Cancer Screening	18.2%	13.7%	13.1%	24.4%	35.0%
Tobacco Cessation	37.7%	43.7%	16.8%	33.6%	45.7%
Alcohol Screening (FAS Prevention)	56.1%	55.3%	21.0%	47.3%	65.9%
DV/IPV Screening	54.0%	49.7%	16.4%	48.0%	64.1%
Depression Screening	57.2%	52.6%	21.8%	48.9%	66.9%
CVD-Comprehensive Assessment	N/A	N/A	N/A	N/A	51.0%
Prenatal HIV Screening	65.1%	66.7%	No Data	81.7%	89.1%
Childhood Weight Control[b]	26.9%	40.9%	*0.0%*	21.9%	N/A[b]
Breastfeeding Rates[c]	*11.1%*	No Data	No Data	30.0%	29.0%
Controlling High Blood Pressure	N/A	N/A	N/A	N/A	Baseline

[a]Measure logic revised in FY 2014

[b]Long-term measure as of FY 2009, reported next in FY 2016.

[c]New Measure for Urban Programs in FY 2013

Dashboard includes data from 23 Urban Programs reporting via CRS

Results in italics represent measures with fewer than 20 patients in the denominator; use caution when interpreting these results.

FY 2015 Urban Measures

- Diabetes Dx Ever
- Documented A1c
- Good Glycemic Control
- Controlled BP <140/90
- LDL Assessed
- Nephropathy Assessed
- Influenza 65+
- Pneumovax 65+
- Childhood Immunizations
- Pap Screening
- Mammography Screening
- Colorectal Cancer Screening
- Tobacco Cessation
- Alcohol Screening (FAS Prevention)
- DV/IPV Screening
- Depression Screening
- Prenatal HIV Screening
- Childhood Weight Control
- Breastfeeding Rates
- Suicide Surveillance (CRS only)

Light Grey = Context Measures with no targets
Green = Measure with no specific urban target

Quality Control

- RPMS Users:
  - Communities
  - Date Range
  - Double check user populations against previous year if possible
- Non-RPMS Users:
  - Date Range
  - ASUFAC
  - Auditor’s Initials
  - Audit methodology (100% only, electronic or manual)
  - Denominators
  - **Data must be reported for all measures**

FY 2015: Improvement Strategies

- For programs using or transitioning to CRS:
  - Actively encourage programs to attend additional CRS training when available
  - **Next CRS Training: Tuesday, December 16th @ 10:00 am PT**
- For non-RPMS programs:
  - Have quality checks in place to assure accuracy and validity of data
  - Encourage programs to refer to CRS manual for measure logic and patient eligibility
  - Encourage programs to keep audit trail for reports
- Continue Quality Initiative (QI) group at each program.
  - QI groups should be meeting quarterly, per their Title V grant requirements.

Resources

- CRS Website:

  http://www.ihs.gov/crs/index.cfm?module=crs_urban_reporting

  - Urban GPRA Reporting Questions & Answers
  - Training Opportunities
  - List of Area GPRA Coordinators

- Available for Download:
  - 2015 GPRA Quarterly Reporting Instructions for non-RPMS programs (Posted at least 1 month before due dates)
  - Manual Chart Review Sheet for non-RPMS programs
  - 2015 GPRA Excel Reporting Template for non-RPMS programs

Contacts

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  - Cynthia Perez: Cynthia.Perez@ihs.gov
- National GPRA Support Team- Sacramento
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2014 Other National Measures (ONM)

Area GPRA Coordinators' Conference

December 2014

2014 Q4 National Other National Measures Dashboard (IHS/Tribal)

	2014 ONM	2013 ONM
Comprehensive Care - All Assessments	26.9%	26.7%
Fluoride- # Apps	219,801	224,726
DM Influenza	65.1%	64.7%
DM Up-To-Date Pneumovax	82.1%	81.3%
Adolescent Iz -1:3:2:1	89.3%	87.1%
Adolescent IZ - 1 Tdap	99.3%	98.5%
Adolenscent IZ - 1 Meningococcal	89.8%	87.9%
Adolescent IZ - 3 HPV Female	63.7%	60.6%
ER Injury - AC Alcohol Screen	9.8%	12.3%
ER Injury - AC BNI	0.1%	0.2%
CVD Cholesterol Screening 23+	64.4%	63.3%
CVD 18+ BP Assessed	79.0%	84.6%
CVD 18+ Normal BP	29.1%	29.2%
CVD 18+ Pre-HTN I	21.3%	22.2%
CVD 18+ Pre-HTN II	28.4%	28.8%
CVD 18+ State 1 HTN	18.0%	17.1%
CVD 18+ Stage 2 HTN	3.2%	2.6%
CVD CHD BP Assessed	96.6%	97.7%
CVD CHD Normal BP	20.2%	20.7%
CVD CHD Pre-HTN I	22.9%	24.0%
CVD CHD Pre-HTN II	27.8%	27.5%
CVD CHD Stage 1 HTN	23.8%	23.1%
CVD CHD Stage 2 HTN	5.4%	4.7%
Med Therapy Post AMI-BB	78.9%	68.8%
Med Therapy Post AMI-ASA	68.4%	75.0%
Med Therapy Post AMI-ACEI/ARB	47.4%	56.3%
Med Therapy Post AMI-Statin	52.6%	68.8%
Med Therapy Post AMI-All Meds	26.3%	37.5%
Persistent Therapy Post AMI-BB	71.5%	70.9%
Persistent Therapy Post AMI-ASA	51.7%	52.1%
Persistent Therapy Post AMI-ACEI/ARB	47.5%	46.1%
Persistent Therapy Post AMI-Statin	50.2%	50.8%

2014 Q4 National Other National Measures Dashboard (IHS/Tribal)

	2014 ONM	2013 ONM
Persistent Therapy Post AMI-All Meds	21.7%	20.6%
Med Therapy High Risk-BB	70.5%	70.3%
Med Therapy High Risk-ASA	56.8%	56.8%
Med Therapy High Risk-ACEI/ARB	57.0%	56.0%
Med Therapy High Risk - Statin	54.7%	54.4%
Med Therapy High Risk - All Meds	25.2%	23.8%
Cholesterol Mgmt After CV Event-LDL Assessed	80.2%	78.7%
Cholesterol Mgmt After CV Event-LDL <=100	71.0%	72.2%
Cholesterol Mgmt After CV Event-LDL 101-130	16.4%	15.4%
Cholesterol Mgmt After CV Event -LDL >130	9.6%	9.2%
HF and LVS Function	19.6%	22.1%
#STI Patients	7,617	7,443
# STI Incidents	8,878	8,600
STI AC Patients with Complete STI Screens	30.4%	27.1%
Prediabetes/Msyn-All Assessments	N/A	18.1%
PHN Visits - Any Setting	308,243	328,560

FY 2015 Reporting Due Dates
&
FY 2015 Targets

Area GPRA Coordinators' Conference
December 2014

FY 2015 Reporting Due Dates

- 2nd Quarter: January 23, 2015
- 3rd Quarter: April 24, 2015
- 4th Quarter: July 24, 2015

FY 2015 GPRA Coordinator Calls

- 3rd Quarter: March 19, 2015@ 10AM PT
- 4th Quarter: June 18, 2015 @ 10AM PT

FY 2015 Targets

FY 2015 Targets (Federal, Tribal, & Urban Programs) DIABETES	Final 2015 Target
Good Glycemic Control	47.7%
Controlled BP <140/90	63.8%
LDL Assessed	71.8%
Nephropathy Assessed	60.0%
Retinopathy Exam	60.1%
DENTAL	
Dental: General Access	27.9%
Sealants	14.1%
Topical Fluoride	26.4%
IMMUNIZATIONS	
Influenza 65+	67.2%
Pneumovax 65+	85.7%
Childhood IZ	73.9%
PREVENTION	
Pap Screening	54.6%
Mammogram Screening	54.8%
Colorectal Cancer Screening	35.2%
Tobacco Cessation	46.3%
Alcohol Screening (FAS Prevention)	66.7%
DV/IPV Screening	61.6%
Depression Screening	64.3%
Comp. CVD-Related Assessment	47.3%
Prenatal HIV Screening	86.6%
Breastfeeding Rates	29.0%
Controlling High Blood Pressure: Million Hearts Measure	59.5%