

Integrated Data Collection System (IDCS) Data Mart

Area GPRA Coordinators' Conference

December 3, 2014

Agenda

- Background of the Integrated Data Collection System (IDCS) Data Mart
- Comparison of IDCS to RPMS's Clinical Reporting System (CRS)

BACKGROUND OF THE IDCS

Evolution of IHS Clinical GPRA Reporting

- **Aggregation:** IHS currently reports clinical GPRA measure results using the CRS Report in RPMS.
- **Centralization** – calculate national GPRA results from data in the IHS National Data Warehouse (NDW), while retaining individual facilities' and users' ability to run local reports.
 - The Integrated Data Collection System (IDCS) is planned as a national performance reporting Data Mart within the NDW.

Evolution of IHS Clinical GPRA Reporting, cont.

- **Alignment** – adopt national standard measures to replace IHS electronic measures, where appropriate.
 - Colorectal cancer screening (HEDIS)
 - Million Hearts Controlling blood pressure (NQF 0018)
 - Primary open-angle glaucoma with an optic nerve head evaluation (NQF 0024) – *CRS Developmental Report v.15.0 – released November 2014*
 - Weight assessment & counseling for nutrition & physical activity, 3-17 y.o. (NQF 0086) - *CRS v.14.0 Developmental Report*
- Alignment activities will continue as IHS transitions to the IDCS.

Integrated Data Collection System

- The Integrated Data Collection System (IDCS) Data Mart is the new name for the national performance data mart formerly known as the Agency Level Performance Measurement Reports (ALPMR) Data Mart.
- The IDCS will be a centralized data source to calculate annual GPRA results reported in IHS's annual budget to Congress.
- The IDCS will utilize demographic and clinical data that has been exported to the National Patient Information Reporting System (NPIRS) in the NDW to calculate performance results.
- The IDCS will include data from RPMS exports, exports from commercial off the shelf (COTS) electronic health records (EHR), and IHS purchased/referred care (PRC—formerly CHS) records from the Fiscal Intermediary (FI).

IDCS Development

- All clinical GPRA measures have been programmed centrally in IDCS using the CRS *Performance Measure List and Definitions* document, version 14.1, dated June 2014.
- The web address for this document is http://www.ihs.gov/crs/documents/crsv14/bg_p_141u_logicselected.pdf

IDCS Programming

- Some of the clinical measures use data logic not currently exported to NPIRS. The IDCS programmers created “hooks” in the programming logic that act as placeholders until the needed data can be exported to NPIRS.
- The architecture of the NDW needs to be expanded to house these new data requirements.
- The RPMS export file for NPIRS needs to be revised to include these new data requirements.
- The export file guidance for COTS EHRs will need to be revised to include these new data requirements.

COMPARISON OF IDCS TO CRS

Comparison of IDCS and CRS

Integrated Data Collection System

1. Measure logic programmed centrally at IDCS
2. On-demand web based reports at Area and national levels
3. IDCS uses all data exported to the NDW for performance calculation: RPMS, COTS, FI
4. National reports run at each quarter from the IDCS

Clinical Reporting System

1. CRS measure logic updates pushed out to local sites as RPMS patches
2. Locally run CRS reports
3. CRS reports search the local RPMS server for results
4. Reports run at Q2, Q3 and Q4 for national aggregation from local site to IHS Area to nationally aggregated results

Comparison of IDCS and CRS, cont.

Integrated Data Collection System

5. Uses the IHS User Population definition for the denominator
6. Results are calculated based on the patient. It will not matter where the patient received services so long as that information has been exported to NPIRS.

Clinical Reporting System

5. Uses the Active Clinical Population definition for the denominator
6. Results are based on demographic and clinical data housed in the local RPMS server using the community taxonomy created for each local facility. (Taxonomies are based on Area Offices' defined PRC (CHS) catchments.)

Comparison of IDCS and CRS, cont.

Integrated Data Collection System

7. The IDCS allows unduplication of patients across the NDW. This is related to calculation of results based on the individual patient.

Clinical Reporting System

7. There is no unduplication in CRS. The CRS logic is only able to utilize the data that is in the local RPMS server.

FY 2013 NATIONAL DASHBOARD (IHS/TRIBAL/URBAN)					
Measure	2012		2013		2013 Final Results
	Target	Actual	Target	Actual	
DIABETES					
Controlled BP < 140/90	38.7%	61.9%	Baseline	60.4%	MET
Good Glycemic Control [GPRAMA]	32.7%	42.0%	Baseline	40.9%	MET
LDL Assessed	70.3%	61.7%	68.0%	62.5%	NOT MET
Nephropathy Assessed	57.8%	4.7%	64.2%	4.7%	NOT MET
Retinopathy Assessed	54.8%	51.5%	56.8%	53.6%	NOT MET

2013 Final National Dashboard (IHS/Tribal)					
DIABETES	2012 Target	2012 Final	2013 Target	2013 Final	2013 Final Results
Controlled BP <140/90	38.7%	38.9%	Baseline	64.6%	Met
Good Glycemic Control	32.7%	33.2%	Baseline	48.3%	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

2013 Comparison of CRS and IDCS

GPRO Measure	2013 Target	CRS IHS-All Result	IDCS I/T/U Result	IDCS - CRS
Good Glycemic Control	Baseline	48.3%	60.4%	+12.1%
Controlled BP <140/90	Baseline	64.6%	40.9%	-23.7%
LDL (Cholesterol) Assessed	68.0%	72.7%	62.5%	-10.2%
Nephropathy Assessed	64.2%	68.2%	4.7%	-63.5%
Retinopathy Exam	56.8%	57.6%	53.6%	-4.0%

Dental: General Access

DENTAL - Access to Dental Services

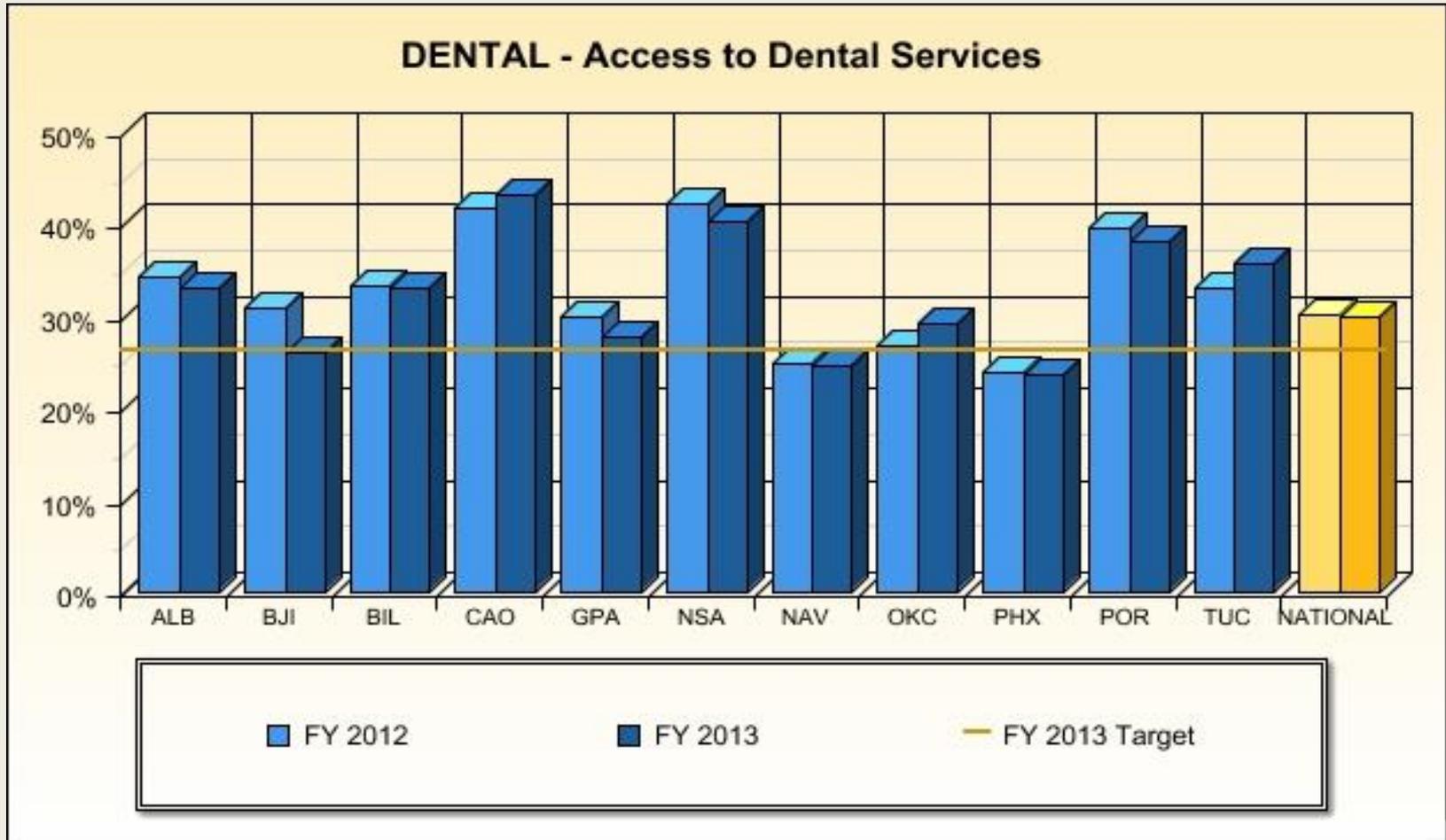
National Targets & Results		 MET
FY 2013 Target: 26.9%	FY 2013 Actual: 29.9%	
FY 2012 Target: 26.9%	FY 2012 Actual: 30.1%	
Note: A higher rate is the long-term goal for this measure.		

The 2013 national percentage for IHS direct, Tribal and Urban facilities for the Access to Dental Services measure is 29.9%. Performance for this measure decreased by 0.2 of a percentage point from 2012 and exceeded the 2013 GPRA target of 26.9%.

8 of the 11 Areas met the national target.

DENTAL	2012 Target	2012 Final	2013 Target	2013 Final	
Dental: General Access	26.9%	28.8%	26.9%	28.3%	Met

IDCS Dental Access Area Graphs



DENTAL - ACCESS TO DENTAL SERVICES MEASURE DESCRIPTION

Numerator:

Patients who have had a Dental Encounter within the Report Period.

Denominator:

User Population patients, subtotaled by age groups: 0 through 5, 6 through 21, 22 through 34, 35 through 44, 45 through 54, 55 through 74, 75 and older.

Definitions:

Documented Dental Visit

For non-CHS visits, searches for any of the following:

Dental ADA code 0000, 0190, 0191

CPT code D0190, D0191

Exam code 30

POV ICD-9: V72.2

For CHS visits, searches for any visit with an ADA code. CHS visit defined as Type code of C in Visit file.

GPRA 2013 Target:

During FY 2013, achieve the tentative target rate of 26.9% or more for the proportion of patients with dental visits.