

# GPRA UPDATE



Program Director's Meeting  
September 18, 2013

# Agenda



| Topic                                       |
|---|
| California 2013 Final GPRA Results          |
| 2013 High Performers                        |
| 2014 Targets                                |
| 2014 GPRA/GPRAMA Measure Logic Changes      |
| 2014 California Area Improvement Strategies |
| Qualities of High Performing Programs       |
| Final Comments/Questions                    |

California 2013 Final GPRA Results

2013 High Performers

2014 Targets

2014 GPRA/GPRAMA Measure Logic Changes

2014 California Area Improvement Strategies

Qualities of High Performing Programs

Final Comments/Questions

# FY 2013 California Area GPRA Results



Tribal Health Programs

# FY 2013 California Tribal Dashboard

| 2013 Final GPRA Dashboard                       |                 |                            |            |             |                           |
|---|-----------------|----------------------------|------------|-------------|---------------------------|
|   | California Area | California Area            | National   | National    | 2013 Final                |
| DIABETES  | 2013 Final      | 2012 Final                 | 2013 Final | 2013 Target | Results - California Area |
| Diabetes Dx Ever                                | 10.8%           | 10.7%                      | 13.9%      | N/A         | N/A                       |
| Documented A1c                                  | 85.7%           | 85.1%                      | 85.2%      | N/A         | N/A                       |
| <b>Good Glycemic Control<sup>a</sup></b>        | 51.5%           | 38.3%                      | 48.3%      | Baseline    | Met                       |
| Controlled BP <140/90 <sup>a</sup>              | 64.5%           | 34.4%                      | 64.6%      | Baseline    | Met                       |
| LDL Assessed                                    | 71.9%           | 70.4%                      | 72.7%      | 68.0%       | Met                       |
| Nephropathy Assessed                            | 61.3%           | 58.7%                      | 68.2%      | 64.2%       | Not Met                   |
| Retinopathy Exam                                | 50.2%           | 52.2%                      | 57.6%      | 56.8%       | Not Met                   |
| DENTAL  |                 |                            |            |             |                           |
| Dental Access                                   | 41.2%           | 39.9%                      | 28.3%      | 26.9%       | Met                       |
| Sealants <sup>a</sup>                           | 13.7%           | 12,698                     | 13.9%      | Baseline    | Met                       |
| Topical Fluoride <sup>a</sup>                   | 30.0%           | 11,032                     | 26.7%      | Baseline    | Met                       |
| IMMUNIZATIONS                                   |                 |                            |            |             |                           |
| Influenza 65+                                   | 57.5%           | 54.9%                      | 68.0%      | 62.3%       | Not Met                   |
| Pneumovax 65+                                   | 83.9%           | 83.7%                      | 89.2%      | 84.7%       | Not Met                   |
| <b>Childhood IZ<sup>a</sup></b>                 | 62.2%           | 71.3%                      | 74.8%      | Baseline    | Met                       |
| PREVENTION                                      |                 |                            |            |             |                           |
| Pap Screening <sup>a</sup>                      | 54.8%           | 48.5%                      | 61.7%      | Baseline    | Met                       |
| Mammography Screening                           | 42.6%           | 43.9%                      | 53.8%      | 49.7%       | Not Met                   |
| Colorectal Cancer Screening <sup>a</sup>        | 30.8%           | 40.7%                      | 35.0%      | Baseline    | Met                       |
| Tobacco Cessation <sup>a</sup>                  | 37.4%           | 30.4%                      | 45.7%      | Baseline    | Met                       |
| Alcohol Screening (FAS Prevention)              | 56.1%           | 53.0%                      | 65.7%      | 61.7%       | Not Met                   |
| DV/IPV Screening                                | 57.9%           | 55.5%                      | 62.4%      | 58.3%       | Not Met                   |
| <b>Depression Screening</b>                     | 57.2%           | 53.5%                      | 65.1%      | 58.6%       | Not Met                   |
| <b>CVD-Comprehensive Assessment<sup>a</sup></b> | 38.6%           | 47.1% (40.8%) <sup>c</sup> | 46.7%      | 32.3%       | Met                       |
| Prenatal HIV Screening                          | 70.6%           | 72.1%                      | 87.7%      | 82.3%       | Not Met                   |
| Childhood Weight Control <sup>b</sup>           | 24.6%           | 22.8%                      | 22.8%      | 24.0%       | Not Met                   |
| Breastfeeding Rates <sup>a</sup>                | 43.0%           | N/A                        | 29.0%      | Baseline    | Met                       |

<sup>a</sup>Measure logic revised in FY 2013

<sup>b</sup>Long-term measure as of FY 2009, reported in FY 2013

<sup>c</sup>Developmental Comp. CVD measure result is shown in parenthesis. This measure is the GPRAMA measure in FY 2013.

Measures in red are GPRAMA measures

Measures Met = 12

Measures Not Met = 10

# FY 2013 California Tribal GPRA Results



- ❧ Met 12 of 22 clinical measure targets
  - ❧ 9 of the 12 measures met had “Baseline” targets
  - ❧ Met only 3 of 13 measures with actual targets
  
- ❧ Performed below national averages on 18 of 22 measures
  
- ❧ Trends from FY 2012 – FY 2013
  - ❧ Improved performance on 8 measures
  - ❧ Decreased performance on 5 measures

# FY 2013 California Tribal GPRA Results



☞ Largest improvements in performance from 2012:

| Measure                            | FY 2012 | FY 2013 | % Improvement |
|------------------------------------|---------|---------|---------------|
| Depression Screening               | 53.5%   | 57.2%   | 3.7%          |
| Alcohol Screening (FAS Prevention) | 53.0%   | 56.1%   | 3.1%          |
| Nephropathy Assessed               | 58.7%   | 61.3%   | 2.6%          |
| Influenza 65+                      | 54.9%   | 57.5%   | 2.6%          |

# FY 2013 California Tribal GPRA Results



∞ Largest decreases in performance:

| Measure                      | FY 2012 | FY 2013 | % Decrease |
|------------------------------|---------|---------|------------|
| Comprehensive CVD Assessment | 40.8%*  | 38.6%   | 2.2%       |
| Retinopathy Exam             | 52.2%   | 50.2%   | 2.0%       |
| Prenatal HIV Screening       | 72.1%   | 70.6%   | 1.5%       |
| Mammography Screening        | 43.9%   | 42.6%   | 1.3%       |

\*FY 2012 result shown is using FY 2013 measure logic for comparison (these are not the official FY 2012 results that were reported for CA)

# Another way of looking at the data...



| Measure                      | FY 2013 Result | FY 2013 Denom | # Patients NOT receiving Care |
|------------------------------|----------------|---------------|-------------------------------|
| Childhood Immunizations      | 62.2%          | 943           | 356                           |
| Comprehensive CVD Assessment | 38.6%          | 1170          | 718                           |
| Good Glycemic Control        | 51.5%          | 5004          | 2,426                         |
| Retinopathy Screening        | 50.2%          | 5004          | 2,491                         |
| Influenza 65+                | 57.5%          | 3425          | 1,454                         |
| Mammography                  | 42.6%          | 3207          | 1,841                         |

# FY 2013 California Area GPRA Results



Urban Health Programs

# FY 2013 California Urban GPRA Results



- ❧ Individual programs - # measures met ranged from 5 to 17 (out of 17 measures)
  
- ❧ On average, CA urban programs performed below Urban national average on 11 measures
  
- ❧ CA urban average trends from FY 2012 – FY 2013
  - ❧ Improved performance on 7 of 10 measures for which FY 2012 comparable data exists
  - ❧ Maintained performance on 2 of 10 measures
  - ❧ Decreased performance on 1 measure

# FY 2013 California Urban GPRA Results



☞ Largest improvement in performance from FY 2012:

| Measure                | FY 2012 | FY 2013 | % Improvement |
|------------------------|---------|---------|---------------|
| Pneumovax 65+          | 50.8%   | 62.0%   | 11.2%         |
| Nephropathy Assessed   | 42.0%   | 47.1%   | 5.1%          |
| Influenza 65+          | 28.7%   | 33.5%   | 4.8%          |
| Prenatal HIV Screening | 59.1%   | 63.6%   | 4.5%          |
| Depression Screening   | 40.4%   | 43.2%   | 2.8%          |

# FY 2013 California Urban GPRA Results



2 measures maintained performance from 2012:

| Measure               | FY 2011 | FY 2012 | % Change |
|-----------------------|---------|---------|----------|
| LDL Assessed          | 61.0%   | 61.0%   | 0.0%     |
| Mammography Screening | 22.8%   | 22.8%   | 0.0%     |

1 measure decreased in performance from 2012:

| Measure          | FY 2011 | FY 2012 | % Decrease |
|------------------|---------|---------|------------|
| DV/IPV Screening | 37.1%   | 36.4%   | 0.7%       |

# FY 2013 High Performers



Congratulations to the following health programs!

# FY 2013 California Tribal GPRA Results

| <b>Tribal (RPMS Programs)</b>  | -             | -                    | -                                 | -  |
|--------------------------------|---------------|----------------------|-----------------------------------|--|
| <b>Site Name</b>               | <b>ASUFAC</b> | <b>GPRA User Pop</b> | <b># Met<br/>all targets (22)</b> | <b># Met<br/>non-baseline targets (13)</b> |
| SONOMA                         | 662010        | 5512                 | 22                                | 13   |
| CENTRAL VALLEY                 | 661110        | 8372                 | 19                                | 10   |
| NORTHERN VALLEY                | 661531        | 2819                 | 19                                | 10   |
| SANTA YNEZ                     | 662830        | 1093                 | 18                                | 9  |
| TUOLUMNE ME-WUK CLINIC         | 664110        | 254                  | 18                                | 9  |
| KARUK COMMUNITY HEALTH CLINIC  | 661355        | 2089                 | 17                                | 8  |
| MORONGO                        | 661810        | 13718                | 17                                | 8  |
| NATIVE AMERICAN HEALTH CENTER  | 661610        | 4696                 | 16                                | 7  |
| SO. INDIAN HEALTH COUNCIL      | 662110        | 2412                 | 16                                | 7  |
| HOOPA                          | 661210        | 3232                 | 14                                | 5  |
| TULE RIVER CLINIC              | 662410        | 2769                 | 14                                | 5  |
| FEATHER RIVER INDIAN HEALTH    | 663610        | 4700                 | 14                                | 5  |
| TOIYABE                        | 662310        | 2940                 | 13                                | 4  |
| ROUND VALLEY                   | 662710        | 1245                 | 13                                | 4  |
| LAKE COUNTY TRIBAL HEALTH      | 662930        | 1887                 | 13                                | 4  |
| SUSANVILLE INDIAN RANCHERIA    | 663030        | 1074                 | 13                                | 4  |
| QUARTZ VALLEY                  | 663855        | 184                  | 13                                | 4  |
| AUBURN                         | 661010        | 5956                 | 12                                | 3  |
| SHINGLE SPRINGS TRIB HLTH PROG | 663410        | 1226                 | 12                                | 3  |
| BURNEY                         | 661710        | 951                  | 11                                | 2  |
| SYCUAN                         | 663230        | 126                  | 11                                | 2  |
| CONSOLIDATED THC               | 662210        | 3119                 | 11                                | 2  |

# Met All Measures!!!



- ☞ Sonoma County Indian Health Program
  - ☞ Met all 22 measures reported by IHS/Tribal programs!!!
  
- ☞ American Indian Health Services Corp (Santa Barbara urban program)
  - ☞ Met all 17 measures reported by urban programs!!!

# Highest Result on Highest # of Measures



Large Health Program:

Central Valley Indian Health

Medium Health Program:

Northern Valley Indian Health Program

Small Health Program:

Tuolumne Me-Wuk Indian Health

# Most Improved from 2012

(highest improvement on highest # of measures)



Large Health Program:

Sonoma County Indian Health Program

Medium Health Program:

Karuk Tribal Health Program

Small Health Program:

Tuolumne Me-Wuk Indian Health

# FY 2014 Targets



Tribal and Urban Indian Health Programs

# FY 2014 Targets



| FY 2014 Targets (Federal, Tribal, & Urban Programs) |                          |
|---|--------------------------|
| <b>DIABETES</b>                                     | <b>Final 2014 Target</b> |
| Good Glycemic Control                               | 48.3%                    |
| Controlled BP <140/90                               | 64.6%                    |
| LDL Assessed  | 73.9%                    |
| Nephropathy Assessed                                | 69.0%                    |
| Retinopathy Exam                                    | 58.6%                    |
| <b>DENTAL</b>                                       |                          |
| Dental: General Access                              | 29.2%                    |
| Sealants  | 13.9%                    |
| Topical Fluoride                                    | 26.7%                    |
| <b>IMMUNIZATIONS</b>                                |                          |
| Influenza 65+                                       | 69.1%                    |
| Pneumovax 65+                                       | 90.8%                    |
| Childhood IZ  | 74.8%                    |
| <b>PREVENTION</b>                                   |                          |
| Pap Screening                                       | Baseline                 |
| Mammogram Screening                                 | 54.7%                    |
| Colorectal Cancer Screening                         | 35.0%                    |
| Tobacco Cessation                                   | 45.7%                    |
| Alcohol Screening (FAS Prevention)                  | 65.9%                    |
| DV/IPV Screening                                    | 64.1%                    |
| Depression Screening                                | 66.9%                    |
| Comp. CVD-Related Assessment                        | 51.0%                    |
| Prenatal HIV Screening                              | 89.1%                    |
| Breastfeeding Rates                                 | 29.0%                    |

# FY 2014 Targets

| Clinical Measures                  | Difference        | Difference            | Difference between improvement last year and improvement needed to meet 2014 Targets |
|------------------------------------|-------------------|-----------------------|--|
|                                    | 2013 Q4 - 2012 Q4 | 2014 Target - 2013 Q4 |  |
| Prenatal HIV Screening             | -1.5%             | 18.5%                 | -20.0%   |
| Childhood IZ                       | -6.8%*            | 12.6%                 | -19.4%   |
| CVD-Comprehensive Assessment       | -2.2%*            | 12.4%                 | -14.6%   |
| Mammography Screening              | -1.3%             | 12.1%                 | -13.4%   |
| Tobacco Cessation                  | N/A               | 12.6%                 | -12.6%   |
| Retinopathy Exam                   | -2.0%             | 8.4%                  | -10.4%   |
| Influenza 65+                      | 2.6%              | 11.6%                 | -9.0%  |
| Pneumovax 65+                      | 0.2%              | 6.9%                  | -6.7%  |
| Alcohol Screening (FAS Prevention) | 3.1%              | 9.8%                  | -6.7%  |
| Depression Screening               | 3.7%              | 9.7%                  | -6.0%  |
| Nephropathy Assessed               | 2.6%              | 7.7%                  | -5.1%  |
| DV/IPV Screening                   | 2.4%              | 6.2%                  | -3.8%  |
| Colorectal Cancer Screening        | 1.1%*             | 4.2%                  | -3.1%  |
| LDL Assessed                       | 1.5%              | 2.0%                  | -0.5%  |
| Sealants                           | N/A               | 0.2%                  | 0.2%   |
| Controlled BP <140/90              | 0.6%*             | 0.1%                  | 0.5%   |
| Good Glycemic Control              | -2.1%*            | -3.2%                 | 1.1%   |
| Topical Fluoride                   | N/A               | -3.3%                 | 3.3%   |
| Breastfeeding Rates                | -1.3%*            | -14.0%                | 12.7%  |
| Dental Access                      | 1.3%              | -12.0%                | 13.3%  |
| Pap Screening                      | -1.0%*            | N/A                   | Baseline   |

\*FY 2012 - FY 2013 result difference shown is using FY 2013 measure logic for FY 2012 comparison (these calculations are not using the official FY 2012 results that were reported for CA)

# FY 2014 GPRAMA/Budget Measure Logic Changes



# FY 2014 Measure Logic Changes



1 measure has a logic change due to changes in standards of care:

## Cervical Cancer Screening

|              | OLD Logic   | NEW Logic   |
|--------------|---|---|
| Numerator:   | Patients with a Pap smear documented in the past four years                             | <b>Patients with a Pap smear documented in the past four years, or if patient is 30 to 64 years of age, either a Pap smear documented in the past four years or a Pap smear and an HPV DNA documented in the past six years</b> |
| Denominator: | Female Active Clinical patients ages 25-64 without a documented history of hysterectomy | Female active clinical patients age 25-64 without a documented history of hysterectomy  |

# FY 2014 Measure Logic Change



## ☞ Cervical Cancer Screening (Continued)

### ☞ 2013 CA Final Results Comparison:

| <b>Pap Screening (2013 logic):<br/>FY 2013 Result</b> | <b>Pap Screening (2014 logic):<br/>FY 2013 Result</b> |
|---|---|
| 54.8%   | 55.6%   |

☞ FY 2014 Target: Baseline

# 2014 Improvement Strategies



# CA Monthly GPRA Webinars



2<sup>nd</sup> Thursday of each month from 12:00 – 1:00 P.M.:

- September 12, 2013
- October 10, 2013
- November 14, 2013
- December 12, 2013
- January 9, 2014
- February 13, 2014
- March 12, 2014
- April 10, 2014
- May 8, 2014
- June 12, 2014

\*Dates in red are Quarterly CA GPRA Coordinator Calls

# California Area GPRA Portal



Welcome Christine (Edit Profile / Logout) CA Home CA Site Map CA Member Portal Access

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INDIAN HEALTH SERVICE

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## GPRA / GPRAMA

### GPRA Results

[LEARN MORE](#)

Welcome to the California Area GPRA/GPRAMA Portal! This portal will allow you to access resources, connect with other healthcare programs and the GPRA Team, and learn of upcoming trainings. This portal is available to California Area healthcare program GPRA Coordinators and other interested staff.

#### Training Content

[Best Practices Conference](#)

#### Upcoming Events

JUL 26  
[2013 Final GPRA/GPRAMA Report and ONM Report DUE](#)

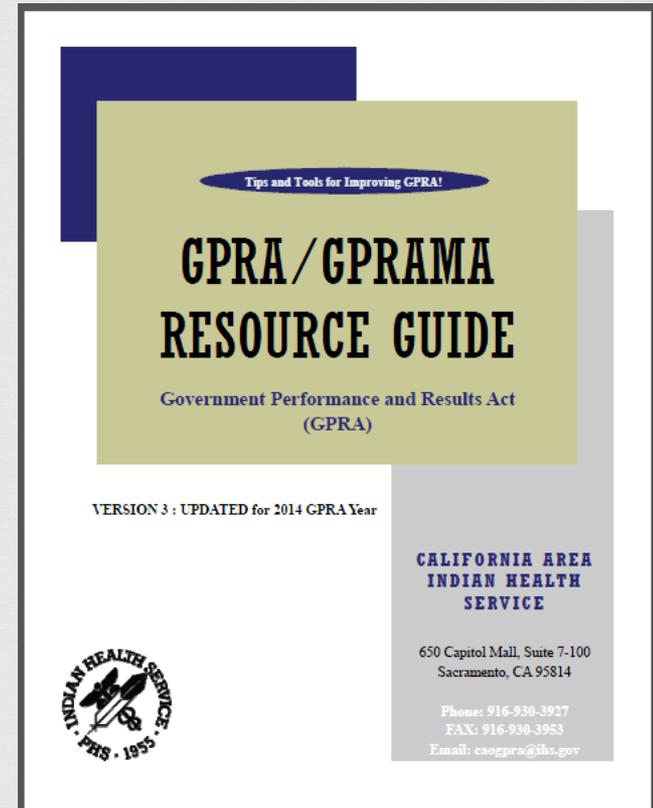
#### Discussions

There are currently no discussions.

# GPRA/GPRAMA Resource Guide



- Version 3.0 – updated for FY 2014
- Now available for download on GPRA Portal on CAO Website
- Contains new tips, tools, and resources for improving GPRA



# Individual Site GPRA Trainings



- ❧ Contact the GPRA Support Team to set up an individual program GPRA training
  
- ❧ Customized data and applicable best practices presented via Adobe Connect
  - ❧ GPRA 101 for your clinic staff
  - ❧ CRS demonstrations
  - ❧ Troubleshoot data issues
  - ❧ Review GPRA measure logic

# Qualities of High Performing Programs



# Qualities of High Performing Sites

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## ☞ Strong Leadership

- ☞ Is involved in quality improvement and is aware of clinic's performance
- ☞ Ensures clinic staff has time and resources to engage in improvement activities
- ☞ Ensures ALL clinic staff members are involved and can share improvement ideas
- ☞ Holds clinic staff accountable for results
- ☞ Ensures all staff are trained on GPRA measures
- ☞ Promotes health competition to meet GPRA targets

# Qualities of High Performing Sites

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- ☞ GPRA data is monitored on a continuous basis and shared with all staff
  - ☞ GPRA reports run daily or weekly
  - ☞ Patient lists or forecast reports are run daily or weekly
- ☞ EHR reminders are utilized
  - ☞ Reminder screens alert providers and health staff of needed tests and exams
- ☞ Services are delegated away from provider level
- ☞ Patients are empaneled (patients are assigned a PCP or care team)
- ☞ GPRA indicators are prioritized as measures of quality of care provided to the community
- ☞ Standing Orders and Protocols are used
- ☞ Process in place for clinic to obtain data from outside providers

# Contacts



## ☞ National GPRA Support Team

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Questions / Comments?

