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1.0 Introduction

Patch 1 provides enhancements to Version 10.0 of the Clinical Reporting System (CRS) software (namespace: BGP).

Please review these changes and add a copy of them to any printed documentation your site may be using for the CRS Version 10.0. These changes will be integrated into future versions of the software and user manual and will no longer be considered an addendum at the time of the next release.

1.1 Summary of Changes

Patch 1 of the CRS Version 10.0 contains the changes listed below. There are no changes to performance measure logic for any report.

- Updated CRS graphical user interface (GUI).
- Added new topic Physical Activity Assessment to the Selected Measures and Other National Measures Reports.
- Added new topic Comprehensive Health Screening to the Selected Measures Report.
- Added existing topics Antidepressant Medication Management and Chlamydia Testing to the Other National Measures Report.
- Removed Other Benzodiazepine measures from the Healthcare Effectiveness and Data Information Set (HEDIS) and Elder Care Reports.
- Fixed a problem with the logic for the pregnancy definition in the contraindications to ACEI and ARB in the Persistence of Appropriate Medication Therapy after a Heart Attack topic.
- Fixed a problem with the logic for Alcohol Screening in the GPRA Developmental report.
- Fixed a problem with the logic for Tobacco Use and Exposure Assessment topic.
- Updated logic that searches for E-codes for allergies.
- Changed the patient list display for Dental Sealants and Topical Fluoride to show dates and codes in the numerator column.

- Changed the patient list display for Childhood Weight Control to list those in the 85th–94th percentile as “Overweight” and those in the 95th percentile or greater as “Obese”.

2.0 Patch 1 Details

2.1 Updated CRS GUI
Updated the CRS GUI (Visual CRS) to be more user-friendly and a more standardized Windows application.

2.2 Added new 2011 National GPRA & PART Report
In the National GPRA Reports menu; added menu option GP11 that enables users to run the National GPRA & PART Report for the report period of July 1, 2010–June 30, 2011 (GPRA year 2011) using the performance measure logic as it exists in CRS 2010 Version 10.0. This report includes the tentative GPRA and PART 2011 performance measure targets.

For instructions on running this report, please follow the steps in the CRS version 10.0 User Manual, Section 5.2.2 Running the National GPRA & PART Report except for Step 5, type GP11 to run the 2011 National GPRA & PART Report.

2.3 Added New 2011 GPRA & PART Forecast Patient List
Added menu option FO11 that runs the GPRA & PART Forecast Patient List for the report period of July 1, 2010–June 30, 2011 (GPRA year 2011) using the performance measure logic as it exists in CRS 2010 Version 10.0. Also updated the dates to reflect GPRA year 2011 in the text that describes how the measures can be met.

For instructions on running this report, please follow the steps in the CRS Version 10.0 User Manual, Section 5.8.2 Running the GPRA & PART Forecast Patient List except in Step 4, type FO11 to run the 2011 GPRA & PART Forecast Patient List.

2.4 Added New 2011 Area Aggregate National GPRA & PART Report
For instructions on running this report, please follow the steps in the CRS version 10.0 User Manual, Section 6.2.1 Area National GPRA & PART Report except in Step 1, type AG11 to run the 2011 Area National GPRA & PART Report.

2.5 New Topic: Physical Activity Assessment

Added a new topic titled Physical Activity Assessment to the Selected Measures and Other National Measures Reports.

2.5.1 Selected Measures Report

Table 2-1: Content of the Selected Measures Report for Physical Activity Assessment Performance Measure Topic

<table>
<thead>
<tr>
<th>Performance Measure</th>
<th>Denominator</th>
<th>Numerator(s) (documented in past year, unless defined otherwise)</th>
</tr>
</thead>
</table>
| Physical Activity Assessment | 1) Active Clinical patients ages 5 and older. Broken down by gender and age groups.  
2) Numerator 1 (Active Clinical Patients assessed for physical activity during the Report Period). Broken down by gender and age groups.  
3) User Population patients ages 5 and older. Broken down by gender.  
A. Patients from Numerator 1 who have received exercise education following their physical activity assessment. |

Table 2-2: Content of the Selected Measures Patient List Report for Physical Activity Assessment Performance Measure Topic

<table>
<thead>
<tr>
<th>Performance Measure Topic</th>
<th>Patient List</th>
</tr>
</thead>
<tbody>
<tr>
<td>Physical Activity Assessment</td>
<td>List of patients with physical activity assessment and any exercise education.</td>
</tr>
</tbody>
</table>
2.5.2 Other National Measures Report

**Table 2-3: Content of the Other National Measures Report for Physical Activity Assessment Performance Measure Topic**

<table>
<thead>
<tr>
<th>Performance Measure</th>
<th>Denominator</th>
<th>Numerator(s) (documented in past year, unless defined otherwise)</th>
</tr>
</thead>
</table>
| Physical Activity Assessment | 1) Active Clinical patients ages 5 and older.  
2) Numerator 1 (Active Clinical Patients assessed for physical activity during the Report Period).  
3) User Population patients ages 5 and older.  
4) Numerator 1 (User Population Patients assessed for physical activity during the Report Period). | Patients assessed for physical activity during the Report Period. A. Patients from Numerator 1 who have received exercise education following their physical activity assessment. |

**Table 2-4: Content of the Other National Measures Patient List Report for Physical Activity Assessment Performance Measure Topic**

<table>
<thead>
<tr>
<th>Performance Measure Topic</th>
<th>Performance Measure</th>
<th>Patient List (Time frame for meeting the measure is during the report period, unless defined otherwise.)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Physical Activity Assessment</td>
<td>Active Clinical 5+ with physical activity assessment</td>
<td>List of Active Clinical patients 5 and older who had a physical activity assessment.</td>
</tr>
<tr>
<td></td>
<td>Active Clinical 5+ without physical activity assessment</td>
<td>List of Active Clinical patients 5 and older who did not have a physical activity assessment.</td>
</tr>
<tr>
<td></td>
<td>Active Clinical 5+ with physical activity assessment and exercise education</td>
<td>List of Active Clinical patients 5 and older who had a physical activity assessment and received exercise education.</td>
</tr>
<tr>
<td></td>
<td>Active Clinical 5+ with physical activity assessment and without exercise education</td>
<td>List of Active Clinical patients 5 and older who had a physical activity assessment and did not receive exercise education.</td>
</tr>
</tbody>
</table>

2.6 New Topic: Comprehensive Health Screening

Added a new topic titled Comprehensive Health Screening to the Selected Measures Report.
### 2.6.1 Selected Measures Report

#### Table 2-5: Content of the Selected Measures Report for Comprehensive Health Screening Performance Measure Topic

<table>
<thead>
<tr>
<th>Performance Measure</th>
<th>Denominator</th>
<th>Numerator(s) (documented in past year, unless defined otherwise)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Comprehensive Health Screening</td>
<td>1) Active Clinical patients ages 2 and older.</td>
<td>1) ALL Comprehensive Health Screening: Patients with Comprehensive Health Screening for which they are eligible, defined as having alcohol, depression, and Intimate Partner Violence (IPV)/Domestic Violence (DV) screening, Body Mass Index (BMI) calculated, and tobacco use, Blood Pressure (BP), and physical activity assessed. <strong>NOTE:</strong> This does not include refusals.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>2) Comprehensive Health Screening: Patients with Comprehensive Health Screening minus physical activity assessment, for which they are eligible, defined as having alcohol, depression, and IPV/DV screening, BMI calculated, and tobacco use and BP assessed. <strong>NOTE:</strong> This does not include physical activity assessment and does not include refusals.</td>
</tr>
<tr>
<td></td>
<td>2) Active Clinical patients ages 12 to 75.</td>
<td>3) Alcohol Screening: Patients screened for alcohol use or had an alcohol-related diagnosis or procedure during the Report Period. <strong>NOTE:</strong> This numerator does not include refusals or alcohol-related patient education.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>3) Active Clinical patients ages 18 and older. 4) Depression Screening: Patients screened for depression or diagnosed with a mood disorder at any time during the Report Period. <strong>NOTE:</strong> This numerator does not include refusals.</td>
</tr>
</tbody>
</table>
### Performance Measure | Denominator | Numerator(s) (documented in past year, unless defined otherwise)
---|---|---
4) Female Active Clinical patients ages 15-40. | 5) IPV/DV Screening: Patients screened for intimate partner (domestic) violence at any time during the Report Period. <br>Note: This numerator does not include refusals. | 6) Tobacco Use Assessed: Patients who have been screened for tobacco use during the Report period.
5) Active Clinical patients ages 5 and older. | 7) BMI Available: Patients for whom a BMI could be calculated. <br>Note: This numerator does not include refusals. | 8) BP Assessed: Patients with Blood Pressure value documented at least twice in prior two years.
6) Active Clinical patients ages 2 through 74. | 7) All Active Clinical patients ages 20 and over. | 8) BP Assessed: Patients with Blood Pressure value documented at least twice in prior two years.
7) All Active Clinical patients ages 20 and over. | 8) BP Assessed: Patients with Blood Pressure value documented at least twice in prior two years. | 9) Physical Activity Assessed: Patients assessed for physical activity during the Report Period.

#### 2.7 Added Existing Topics to the Other National Measures Report

Added existing topics Antidepressant Medication Management and Chlamydia Testing to the Other National Measures Report.
2.7.1 Antidepressant Medication Management

Table 2-7: Content of the Other National Measures Report for Antidepressant Medication Management Performance Measure Topic

<table>
<thead>
<tr>
<th>Performance Measure</th>
<th>Denominator</th>
<th>Numerator(s) (documented in past year, unless defined otherwise)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Antidepressant Medication Management</td>
<td>1) As of the 120th day of the Report period, Active Clinical patients 18 years and older who were diagnosed with a new episode of depression and treated with antidepressant medication in the past year.</td>
<td>1) Optimal Practitioner Contacts: Patients with at least three mental health visits with a non-mental-health or mental health provider within 12 weeks (84 days) after diagnosis, two of which must be face-to-face visits and one of which must be with a prescribing provider. 2) Effective Acute Phase Treatment: Patients who filled a sufficient number of separate prescriptions/refills of antidepressant medication for continuous treatment of at least 84 days (12 weeks). 3) Effective Continuation Phase Treatment: Patients who filled a sufficient number of separate prescriptions/refills of antidepressant medication treatment to provide continuous treatment for at least 180 days (6 months).</td>
</tr>
</tbody>
</table>

Table 2-8: Content of the Other National Measures Patient List Report for Antidepressant Medication Management Performance Measure Topic

<table>
<thead>
<tr>
<th>Performance Measure Topic</th>
<th>Performance Measure</th>
<th>Patient List (Time frame for meeting the measure is during the Report period, unless defined otherwise.)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Antidepressant Medication Management</td>
<td>Active Clinical 18+ with new depression diagnosis and no OPC</td>
<td>List of Active Clinical patients with new depression DX and no optimal practitioner contact (OPC).</td>
</tr>
<tr>
<td></td>
<td>Active Clinical 18+ with new depression diagnosis and no APT</td>
<td>List of Active Clinical patients with new depression DX and no acute phase treatment (APT).</td>
</tr>
<tr>
<td></td>
<td>Active Clinical 18+ with new depression diagnosis and no CONPT</td>
<td>List of Active Clinical patients with new depression DX and no continuation phase treatment (CONPT).</td>
</tr>
</tbody>
</table>
### 2.7.2 Chlamydia Testing

**Table 2-9: Content of the Other National Measures Report for Chlamydia Testing Performance Measure Topic**

<table>
<thead>
<tr>
<th>Performance Measure</th>
<th>Denominator</th>
<th>Numerator(s) (documented in past year, unless defined otherwise)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Chlamydia Testing</td>
<td>1) Female Active Clinical patients ages 16 through 25. 2) Female User Population patients ages 16 through 25.</td>
<td>Patients tested for Chlamydia during the Report Period.</td>
</tr>
</tbody>
</table>

**Table 2-10: Content of the Other National Measures Patient List Report for Chlamydia Testing Performance Measure Topic**

<table>
<thead>
<tr>
<th>Performance Measure Topic</th>
<th>Performance Measure</th>
<th>Patient List (Time frame for meeting the measure is during the Report period, unless defined otherwise.)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Chlamydia Testing</td>
<td>Active Clinical 16-25 with Chlamydia screening</td>
<td>List of Active Clinical patients with documented Chlamydia screening.</td>
</tr>
<tr>
<td></td>
<td>Active Clinical 16-25 without Chlamydia screening</td>
<td>List of Active Clinical patients without documented Chlamydia screening.</td>
</tr>
</tbody>
</table>

### 2.8 Removed Other Benzodiazepine Measures

Removed the Other Benzodiazepine measures in the Use of High-Risk Medications in the Elderly from the HEDIS and Elder Care Reports, as the logic for Other Benzodiazepine medications was deleted in Version 10.0.

### 2.9 Problem Fix for Persistence of Appropriate Medication Therapy after a Heart Attack Topic

Fixed an issue with the logic for the Persistence of Appropriate Medication Therapy after a Heart Attack topic. The pregnancy definition in the contraindications to ACEI and ARB was changed from “at least two visits during the Report Period” to “at least two visits during the period admission/visit date through the 180 days after discharge/visit date.”
2.10 Problem Fix for Alcohol Screening in the GPRA Developmental Report

Fixed an issue with the logic for the Alcohol Screening topic in the GPRA Developmental section of the National GPRA & PART report. Logic now looks for procedure codes listed in the Alcohol-related Diagnosis or Procedure section of the logic.

2.11 Problem Fix for Tobacco Use and Exposure Assessment topic

Fixed an issue with the logic for the Tobacco Use and Exposure Assessment topic in the Selected Measures and National GPRA & PART reports. Logic was changed to only look back 20 months for pregnant patients in measures that have pregnant patients as the denominator. All other measures will look for tobacco screening during the report period only.

2.12 Updated Logic That Searches for E-Codes for Allergies

The logic for allergies to beta-blockers, ASA, ACEI, ARB, and statins currently looked for the first E-codes entered in PCC. Users can now enter more than one E-code per POV in PCC; therefore, the logic was updated to look at all E-codes associated with a POV instead of only the first E-code. This affects the following topics: Appropriate Medication Therapy after a Heart Attack, Persistence of Appropriate Medication Therapy after a Heart Attack, and Appropriate Medication Therapy in High Risk Patients in the Selected Measures, CVD and Other National Measures reports; Beta-Blocker Treatment After a Heart Attack and Persistence of Beta-Blocker Treatment After a Heart Attack in the HEDIS report; CMS report display of allergies.

2.13 Changed the Patient List Display for Dental Sealants and Topical Fluoride

The numerator column in the patient list for the Dental Sealants and Topical Fluoride topics will now include dates and ADA/CPT codes for meeting the measure.
2.14 Changed the Patient List Display for Childhood Weight Control

The numerator column in the patient list for the Childhood Weight Control topic will now list patients in the 85\textsuperscript{th}–94\textsuperscript{th} percentile as “Overweight” and those in the 95\textsuperscript{th} percentile or greater as “Obese.” Previously, those in the 85\textsuperscript{th}–94\textsuperscript{th} percentile were listed as “At Risk” and those in the 95\textsuperscript{th} percentile or greater were listed as “Overweight.”
Contact Information

If you have any questions or comments regarding this distribution, please contact the OIT Help Desk (IHS).

**Phone:** (505) 248-4371 or (888) 830-7280 (toll free)

**Fax:** (505) 248-4363

**Web:** [http://www.ihs.gov/GeneralWeb/HelpCenter/Helpdesk/index.cfm](http://www.ihs.gov/GeneralWeb/HelpCenter/Helpdesk/index.cfm)

**Email:** support@ihs.gov