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

<table>
<thead>
<tr>
<th>Abbreviation</th>
<th>Area</th>
</tr>
</thead>
<tbody>
<tr>
<td>ABD</td>
<td>Aberdeen</td>
</tr>
<tr>
<td>ALA</td>
<td>Alaska</td>
</tr>
<tr>
<td>ALB</td>
<td>Albuquerque</td>
</tr>
<tr>
<td>BEM</td>
<td>Bemidji</td>
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<td>BIL</td>
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<td>NAV</td>
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<tr>
<td>PHO</td>
<td>Phoenix</td>
</tr>
<tr>
<td>POR</td>
<td>Portland</td>
</tr>
<tr>
<td>TUC</td>
<td>Tucson</td>
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</table>
# Acronym Definitions

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

<table>
<thead>
<tr>
<th>Measure</th>
<th>FY 2013 Q4</th>
<th>FY 2012 Q4</th>
<th>% Improvement</th>
</tr>
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<tr>
<td>Comprehensive CVD Assessment</td>
<td>46.7%</td>
<td>37.5%*</td>
<td>9.2%</td>
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<tr>
<td>Depression Screening</td>
<td>65.1%</td>
<td>61.9%</td>
<td>3.2%</td>
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<tr>
<td>Influenza 65+</td>
<td>68.0%</td>
<td>65.0%</td>
<td>3.0%</td>
</tr>
<tr>
<td>Retinopathy Assessed</td>
<td>57.6%</td>
<td>55.7%</td>
<td>1.9%</td>
</tr>
<tr>
<td>Mammography</td>
<td>53.8%</td>
<td>51.9%</td>
<td>1.9%</td>
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<tr>
<td>Alcohol Screening</td>
<td>65.7%</td>
<td>63.8%</td>
<td>1.9%</td>
</tr>
<tr>
<td>Prenatal HIV Screening</td>
<td>87.7%</td>
<td>85.8%</td>
<td>1.9%</td>
</tr>
<tr>
<td>LDL Assessed</td>
<td>72.7%</td>
<td>71.0%</td>
<td>1.7%</td>
</tr>
<tr>
<td>Nephropathy Assessed</td>
<td>68.2%</td>
<td>66.7%</td>
<td>1.5%</td>
</tr>
<tr>
<td>Childhood Weight Control</td>
<td>22.8%</td>
<td>24.0%</td>
<td>1.2%</td>
</tr>
<tr>
<td>DV/IPV Screening</td>
<td>62.4%</td>
<td>61.5%</td>
<td>0.9%</td>
</tr>
<tr>
<td>Pneumovax 65+</td>
<td>89.2%</td>
<td>88.5%</td>
<td>0.7%</td>
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*FY 2012 result for Comp CVD is the developmental data result (dev logic became actual measure logic in 2013)
Of the 13 measures that can be compared to previous year results, IHS performed worse on 1 measure in 2013 compared to 2012:

<table>
<thead>
<tr>
<th>Measure</th>
<th>FY 2013 Q4</th>
<th>FY 2012 Q4</th>
<th>% Decrease</th>
</tr>
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<tr>
<td>Dental Access</td>
<td>28.3%</td>
<td>28.8%</td>
<td>0.5%</td>
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</table>
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

<table>
<thead>
<tr>
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<th>FY13</th>
<th>N</th>
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</thead>
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<td>44.9%</td>
<td>44.1%</td>
<td>11520</td>
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<tr>
<td>ALA</td>
<td>57.8%</td>
<td>50.2%</td>
<td>1619</td>
</tr>
<tr>
<td>ALB</td>
<td>47.9%</td>
<td>47.9%</td>
<td>8230</td>
</tr>
<tr>
<td>BEM</td>
<td>50.7%</td>
<td>50.7%</td>
<td>5470</td>
</tr>
<tr>
<td>BIL</td>
<td>42.2%</td>
<td>42.2%</td>
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</tr>
<tr>
<td>CAL</td>
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<td>51.5%</td>
<td>5004</td>
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<tr>
<td>NAS</td>
<td>43.6%</td>
<td>43.6%</td>
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<tr>
<td>NAV</td>
<td>46.6%</td>
<td>46.6%</td>
<td>18465</td>
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<tr>
<td>OKL</td>
<td>57.4%</td>
<td>57.4%</td>
<td>24251</td>
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<tr>
<td>PHX</td>
<td>41.8%</td>
<td>41.8%</td>
<td>19634</td>
</tr>
<tr>
<td>POR</td>
<td>50.2%</td>
<td>50.2%</td>
<td>5914</td>
</tr>
<tr>
<td>TUC</td>
<td>44.1%</td>
<td>44.1%</td>
<td>2798</td>
</tr>
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</table>
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

<table>
<thead>
<tr>
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</tr>
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<tr>
<td>ALA</td>
<td>63.9%</td>
<td></td>
<td>1619</td>
</tr>
<tr>
<td>ALB</td>
<td>69.4%</td>
<td></td>
<td>8230</td>
</tr>
<tr>
<td>BEM</td>
<td>65.4%</td>
<td></td>
<td>5470</td>
</tr>
<tr>
<td>BIL</td>
<td>59.9%</td>
<td>64.5%</td>
<td>5470</td>
</tr>
<tr>
<td>CAL</td>
<td>58.5%</td>
<td>67.4%</td>
<td>5004</td>
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<tr>
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<td>59.9%</td>
<td>64.2%</td>
<td>5520</td>
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<tr>
<td>NAV</td>
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<td>64%</td>
<td>18465</td>
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<tr>
<td>OKL</td>
<td>67.4%</td>
<td>64.8%</td>
<td>24251</td>
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<tr>
<td>PHX</td>
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<td>19634</td>
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<tr>
<td>POR</td>
<td>64.8%</td>
<td>70.0%</td>
<td>5914</td>
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<tr>
<td>TUC</td>
<td>63.4%</td>
<td>70.0%</td>
<td>2798</td>
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Diabetes: LDL Assessment

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

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<th>ALB</th>
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<th>BIL</th>
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<th>OKL</th>
<th>PHX</th>
<th>POR</th>
<th>TUC</th>
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<tr>
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<td>73.1%</td>
<td>73.5%</td>
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<td>70.4%</td>
<td>66.1%</td>
<td>63.7%</td>
<td>80.7%</td>
<td>68.6%</td>
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<td>1619</td>
<td>8230</td>
<td>5470</td>
<td>5470</td>
<td>5004</td>
<td>5520</td>
<td>18465</td>
<td>24251</td>
<td>19634</td>
<td>5914</td>
<td>2798</td>
</tr>
</tbody>
</table>
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

<table>
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<th>ABD</th>
<th>ALA</th>
<th>ALB</th>
<th>BEM</th>
<th>BIL</th>
<th>CAL</th>
<th>NAS</th>
<th>NAV</th>
<th>OKL</th>
<th>PHX</th>
<th>POR</th>
<th>TUC</th>
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<tr>
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<td>47.1%</td>
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<td>66.9%</td>
<td>65.7%</td>
<td>58.7%</td>
<td>53.7%</td>
<td>66.9%</td>
<td>72.3%</td>
<td>62.3%</td>
<td>64.4%</td>
<td>73.7%</td>
</tr>
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<td>N</td>
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<td>24251</td>
<td>19634</td>
<td>5914</td>
<td>2798</td>
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<tr>
<td>FY13</td>
<td>73.8%</td>
<td>69.5%</td>
<td>75.2%</td>
<td>58.0%</td>
<td>66.2%</td>
<td>61.3%</td>
<td>51.7%</td>
<td>65.5%</td>
<td>75.4%</td>
<td>65.1%</td>
<td>67.8%</td>
<td>69.4%</td>
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Diabetes: Retinopathy

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

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<td>ALA</td>
<td>49.4%</td>
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<tr>
<td>ALB</td>
<td>64.0%</td>
<td>70.5%</td>
</tr>
<tr>
<td>BEM</td>
<td>50.8%</td>
<td>49.1%</td>
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<tr>
<td>CAL</td>
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<td>59.1%</td>
</tr>
<tr>
<td>NAS</td>
<td>52.2%</td>
<td>50.2%</td>
</tr>
<tr>
<td>OKL</td>
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<td>41.1%</td>
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<tr>
<td>NAV</td>
<td>61.8%</td>
<td>60.9%</td>
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<tr>
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<td>61.1%</td>
<td>66.8%</td>
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<tr>
<td>POR</td>
<td>55.3%</td>
<td>53.6%</td>
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<tr>
<td>TUC</td>
<td>47.9%</td>
<td>51.2%</td>
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</tbody>
</table>

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.

The HP 2020 Goal is 49.0%.
Dental: Access

<table>
<thead>
<tr>
<th></th>
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<th>FY13</th>
<th>N</th>
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</thead>
<tbody>
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<td>31.0%</td>
<td>32.5%</td>
<td>74923</td>
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<td>BEM</td>
<td>34.6%</td>
<td>34.4%</td>
<td>54099</td>
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<tr>
<td>BIL</td>
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<td>31.5%</td>
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</tr>
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<td>POR</td>
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<td>TUC</td>
<td>34.9%</td>
<td>36.0%</td>
<td>19202</td>
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</table>
Dental: Sealants
Percentage of 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

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<thead>
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<td>14.7%</td>
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<td>ALA</td>
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<td>20.6%</td>
</tr>
<tr>
<td>ALB</td>
<td>23.1%</td>
<td>21.8%</td>
</tr>
<tr>
<td>BEM</td>
<td>17.1%</td>
<td>13.7%</td>
</tr>
<tr>
<td>BIL</td>
<td>21.8%</td>
<td>22.8%</td>
</tr>
<tr>
<td>CAL</td>
<td>13.7%</td>
<td>16.3%</td>
</tr>
<tr>
<td>NAS</td>
<td>22.8%</td>
<td>6.9%</td>
</tr>
<tr>
<td>NAV</td>
<td>16.3%</td>
<td>8.1%</td>
</tr>
<tr>
<td>OKL</td>
<td>6.9%</td>
<td>15.7%</td>
</tr>
<tr>
<td>PHX</td>
<td>8.1%</td>
<td>21.3%</td>
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<tr>
<td>POR</td>
<td>15.7%</td>
<td>21.3%</td>
</tr>
<tr>
<td>TUC</td>
<td>21.3%</td>
<td>21.3%</td>
</tr>
</tbody>
</table>

n:
- ABD: 36212
- ALA: 10738
- ALB: 16762
- BEM: 14108
- BIL: 16460
- CAL: 18447
- NAS: 10058
- NAV: 50126
- OKL: 64503
- PHX: 45132
- POR: 19378
- TUC: 4927
Dental: Topical Fluorides

Percentage of 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.

HP 2020 Goal = 90.0%
Dental: Fluorides

<table>
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<th>n</th>
</tr>
</thead>
<tbody>
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<td>17910</td>
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<td>15090</td>
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<td>BIL</td>
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<tr>
<td>TUC</td>
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</table>
Immunizations: Influenza
AI/AN patients (age 65+) who have received the influenza vaccine within the past year.

HP 2020 Goal = 90.0%
Immunizations: Influenza (65+)

<table>
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<tr>
<th></th>
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<th>ALB</th>
<th>BEM</th>
<th>BIL</th>
<th>CAL</th>
<th>NAS</th>
<th>NAV</th>
<th>OKL</th>
<th>PHX</th>
<th>POR</th>
<th>TUC</th>
</tr>
</thead>
<tbody>
<tr>
<td>FY12</td>
<td>56.0%</td>
<td>48.2%</td>
<td>73.5%</td>
<td>67.0%</td>
<td>62.2%</td>
<td>54.9%</td>
<td>58.7%</td>
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</table>
Immunizations: Pneumococcal

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

HP 2020 Goal = 90%
Immunizations: Pneumococcal (65+)

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<td>POR</td>
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<td>86.0%</td>
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<tr>
<td>TUC</td>
<td>94.9%</td>
<td>93.5%</td>
<td>863</td>
</tr>
</tbody>
</table>
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%

*4 Pneumococcal conjugate vaccines were added to the childhood immunization series in FY 2011.
Immunizations: Childhood (19-35 months)

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<td>TUC</td>
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FY12 and FY13 percentages for different locations, with corresponding N values.
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%

*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)

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<td>TUC</td>
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</table>
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%
Cancer Screening: Breast (Mammography)

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<tr>
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</table>

Number of Patients:
- ABD: 5004
- ALA: 2089
- ALB: 3781
- BEM: 2715
- BIL: 2709
- CAL: 3207
- NAS: 1977
- NAV: 9961
- OKL: 13536
- PHX: 7169
- POR: 3918
- TUC: 912
Cancer Screening: Colorectal
AI/AN patients ages 50-75 who have received appropriate Colorectal Cancer Screening.

HP 2020 Goal = 70.5%

*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.
Tobacco Cessation

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

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<tr>
<td>TUC</td>
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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.

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<th>Percent</th>
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<td>2008</td>
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<td>2009</td>
<td>52</td>
</tr>
<tr>
<td>2010</td>
<td>55</td>
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<td>2011</td>
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<tr>
<td>2012</td>
<td>63.8</td>
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<tr>
<td>2013</td>
<td>65.7</td>
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Alcohol Screening: FAS Prevention

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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

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<td>75.9%</td>
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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.
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.
Comprehensive CVD Assessment

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N:
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- ALB: 1705
- BIL: 2319
- CAL: 1985
- NAS: 1170
- NAV: 1719
- OKL: 3484
- PHX: 10121
- POR: 3023
- TUC: 2030
- Total: 185
Prenatal HIV Screening
Pregnant women screened for HIV within the past 20 months.

Year | Percent
--- | ---
2006 | 65
2007 | 74
2008 | 75
2009 | 76
2010 | 78
2011 | 80.0
2012 | 85.8
2013 | 87.7
Prenatal HIV Screening

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

29.0

2013
Breastfeeding Rates

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<td>BEM</td>
<td>136</td>
</tr>
<tr>
<td>BIL</td>
<td>169</td>
</tr>
<tr>
<td>CAL</td>
<td>172</td>
</tr>
<tr>
<td>NAS</td>
<td>75</td>
</tr>
<tr>
<td>NAV</td>
<td>886</td>
</tr>
<tr>
<td>OKL</td>
<td>745</td>
</tr>
<tr>
<td>PHX</td>
<td>600</td>
</tr>
<tr>
<td>POR</td>
<td>82</td>
</tr>
<tr>
<td>TUC</td>
<td>8</td>
</tr>
</tbody>
</table>
## 2013 Final National Dashboard (IHS/Tribal)

### DIABETES

<table>
<thead>
<tr>
<th>Measure</th>
<th>2012 Target</th>
<th>2012 Final</th>
<th>2013 Target</th>
<th>2013 Final</th>
<th>2013 Final Results</th>
</tr>
</thead>
<tbody>
<tr>
<td>Good Glycemic Control&lt;sup&gt;a&lt;/sup&gt;</td>
<td>32.7%</td>
<td>33.2%</td>
<td>Baseline</td>
<td>48.3%</td>
<td>Met</td>
</tr>
<tr>
<td>Controlled BP &lt;140/90&lt;sup&gt;a&lt;/sup&gt;</td>
<td>38.7%</td>
<td>38.9%</td>
<td>Baseline</td>
<td>64.6%</td>
<td>Met</td>
</tr>
<tr>
<td>LDL (Cholesterol) Assessed</td>
<td>70.3%</td>
<td>71.0%</td>
<td>68.0%</td>
<td>72.7%</td>
<td>Met</td>
</tr>
<tr>
<td>Nephropathy Assessed</td>
<td>57.8%</td>
<td>66.7%</td>
<td>64.2%</td>
<td>68.2%</td>
<td>Met</td>
</tr>
<tr>
<td>Retinopathy Exam</td>
<td>54.8%</td>
<td>55.7%</td>
<td>56.8%</td>
<td>57.6%</td>
<td>Met</td>
</tr>
</tbody>
</table>

### DENTAL

<table>
<thead>
<tr>
<th>Measure</th>
<th>2012 Target</th>
<th>2012 Final</th>
<th>2013 Target</th>
<th>2013 Final</th>
<th>2013 Final Results</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dental: General Access</td>
<td>26.9%</td>
<td>28.8%</td>
<td>26.9%</td>
<td>28.3%</td>
<td>Met</td>
</tr>
<tr>
<td>Sealants&lt;sup&gt;a&lt;/sup&gt;</td>
<td>276,893</td>
<td>295,734</td>
<td>Baseline</td>
<td>13.9%</td>
<td>Met</td>
</tr>
<tr>
<td>Topical Fluoride&lt;sup&gt;a&lt;/sup&gt;</td>
<td>161,461</td>
<td>169,083</td>
<td>Baseline</td>
<td>26.7%</td>
<td>Met</td>
</tr>
</tbody>
</table>

### IMMUNIZATIONS

<table>
<thead>
<tr>
<th>Measure</th>
<th>2012 Target</th>
<th>2012 Final</th>
<th>2013 Target</th>
<th>2013 Final</th>
<th>2013 Final Results</th>
</tr>
</thead>
<tbody>
<tr>
<td>Influenza 65+</td>
<td>63.4%</td>
<td>65.0%</td>
<td>62.3%</td>
<td>68.0%</td>
<td>Met</td>
</tr>
<tr>
<td>Pneumovax 65+</td>
<td>87.5%</td>
<td>88.5%</td>
<td>84.7%</td>
<td>89.2%</td>
<td>Met</td>
</tr>
<tr>
<td>Childhood Iz&lt;sup&gt;a&lt;/sup&gt;</td>
<td>77.8%</td>
<td>76.8%</td>
<td>Baseline</td>
<td>74.8%</td>
<td>Met</td>
</tr>
</tbody>
</table>

### PREVENTION

<table>
<thead>
<tr>
<th>Measure</th>
<th>2012 Target</th>
<th>2012 Final</th>
<th>2013 Target</th>
<th>2013 Final</th>
<th>2013 Final Results</th>
</tr>
</thead>
<tbody>
<tr>
<td>(Cervical) Pap Screening&lt;sup&gt;a&lt;/sup&gt;</td>
<td>59.5%</td>
<td>57.1%</td>
<td>Baseline</td>
<td>61.7%</td>
<td>Met</td>
</tr>
<tr>
<td>Mammography Screening</td>
<td>51.7%</td>
<td>51.9%</td>
<td>49.7%</td>
<td>53.8%</td>
<td>Met</td>
</tr>
<tr>
<td>Colorectal Cancer Screening&lt;sup&gt;a&lt;/sup&gt;</td>
<td>43.2%</td>
<td>46.1%</td>
<td>Baseline</td>
<td>35.0%</td>
<td>Met</td>
</tr>
<tr>
<td>Tobacco Cessation&lt;sup&gt;a&lt;/sup&gt;</td>
<td>30.0%</td>
<td>35.2%</td>
<td>Baseline</td>
<td>45.7%</td>
<td>Met</td>
</tr>
<tr>
<td>Alcohol Screening&lt;sup&gt;a&lt;/sup&gt;</td>
<td>58.7%</td>
<td>63.8%</td>
<td>61.7%</td>
<td>65.7%</td>
<td>Met</td>
</tr>
<tr>
<td>DV/IPV Screening</td>
<td>55.3%</td>
<td>61.5%</td>
<td>58.3%</td>
<td>62.4%</td>
<td>Met</td>
</tr>
<tr>
<td>Depression Screening&lt;sup&gt;a&lt;/sup&gt;</td>
<td>56.5%</td>
<td>61.9%</td>
<td>58.6%</td>
<td>65.1%</td>
<td>Met</td>
</tr>
<tr>
<td>CVD- Comprehensive Assessment&lt;sup&gt;a&lt;/sup&gt;</td>
<td>40.6%</td>
<td>45.4%</td>
<td>32.3%</td>
<td>46.7%</td>
<td>Met</td>
</tr>
<tr>
<td>Prenatal HIV Screening</td>
<td>81.8%</td>
<td>85.8%</td>
<td>82.3%</td>
<td>87.7%</td>
<td>Met</td>
</tr>
<tr>
<td>Childhood Weight Control&lt;sup&gt;b&lt;/sup&gt;</td>
<td>N/A</td>
<td>24.0%</td>
<td>24.0%</td>
<td>22.8%</td>
<td>Met</td>
</tr>
<tr>
<td>Breastfeeding Rates&lt;sup&gt;c&lt;/sup&gt;</td>
<td>N/A</td>
<td>N/A</td>
<td>Baseline</td>
<td>29.0%</td>
<td>Met</td>
</tr>
<tr>
<td>Public Health Nursing Encounters</td>
<td>424,203</td>
<td>435,848</td>
<td>405,962</td>
<td>Pending</td>
<td>N/A</td>
</tr>
<tr>
<td>Suicide Surveillance&lt;sup&gt;d&lt;/sup&gt;</td>
<td>1,807</td>
<td>1,709</td>
<td>1,376</td>
<td>Pending</td>
<td>N/A</td>
</tr>
</tbody>
</table>

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

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

<sup>c</sup>As of FY 2013 this measure will be reported by IHS and Tribal health programs

<sup>d</sup>Measure data is submitted from 11 Areas

Measures in red are GPRAMA measures