

*Improving Patient Outcomes through Data*

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## **UDS Webinar**

**November 2017**

# Monitoring UDS Throughout the Year

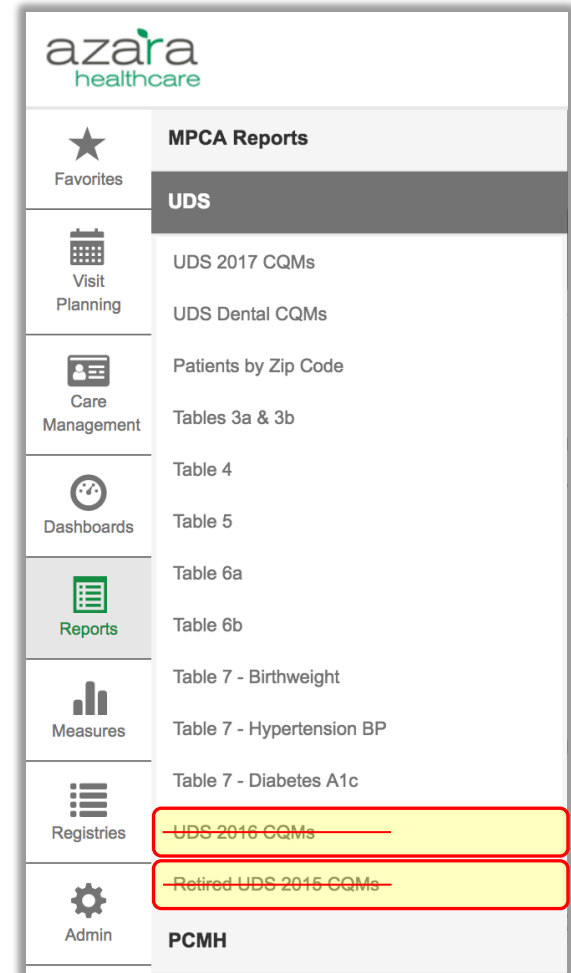
**The best way to improve the health and outcome of your patients and improve your chances of getting a HRSA Clinical Quality Award is to stay on top of your UDS results**

- ✓ Review your numbers early and often
  - UDS Scorecards and Dashboards
  - PVP Alerts
- ✓ Set internal goals and adjust them up as you achieve them
- ✓ Identify opportunities for improvement
  - Under performing providers and locations
  - Collaborate with your peers – take advantage of your PCA
- ✓ Promote your successes internally

# UDS Reporting and DRVS

## Current UDS Reports that exists in DRVS include:

- **Zip Code Data:** Patients by Zip Code
- **Table 3a:** Patients by Age and by Sex Assigned at Birth
- **Table 3b:** Demographic Characteristics
- **Table 4:** Selected Patient Characteristics
- **Table 5:** Staffing and Utilization
- **Table 6a:** Selected Diagnoses & Services Rendered
- **Table 6b:** Quality of Care Measures
- **Table 7:** Health Outcomes and Disparities



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# Key Changes for 2017

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# UDS 2017: Key Changes

## Cervical Cancer Screening

- The numerator now considering the following as compliant and in the numerator
  - Women ages 30-64 who had a Pap Smear/HPV co-test performed within the last five (5) years
  - Women ages 23-64 who had a Pap Smear within the last three (3) years
- Recall that for the 2016 reporting year HPV co-testing was not considered
- Expected Impact: Rates/results may go up

## BMI Screening and Follow-Up 18+ Years

- There is no longer a separate set of parameters for adults ages 18-64 versus ages 65 +
  - Normal parameters are now BMI  $\geq 18.5$  and  $< 25$ . Follow-up is expected to be documented for all patients whose BMI is outside of these parameters

# UDS 2017: Key Changes

## IVD: Use of Aspirin or Another Antiplatelet

- In prior years, the measure was titled “IVD: Use of Aspirin or Another Antithrombotic”
  - The wording of the specification was not in alignment with the eCQM value set; the value set only included antiplatelets (a subset of antithrombotics)
  - This caused confusion for patients on warfarin, an antithrombotic
- The numerator wording now matches the value set, specifying the patient must be on aspirin or an antiplatelet
- An exclusion has been added that excludes patients from denominator if they are on a set of anticoagulant such as warfarin

# UDS 2017: Revised Guidance

## Depression and Follow-Up Plan

- BPHC sent out an email on August 16<sup>th</sup> with revised guidance
  - During the May 9th webinar BPHC stated that a PHQ-9 would not be an acceptable follow-up plan to meet the measure definition
  - Based on guidance from the measurement steward (CMS), the use of the PHQ-9 as a follow-up to a positive depression screening (PHQ-2) is acceptable
  - In the spirit of being consistent with the measure intent and interpretation by the measure steward, and being in full alignment with the electronic specifications of this measure, BPHC is correcting their guidance on the CQM
- DRVS was already calculating results on this measure in this manner

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# Self Service & Answering Your Own Questions

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# Common Questions

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## Have you ever asked ...

- Why is "Jane Doe" in the Denominator of a measure? the Numerator?
- Why isn't "Jim Smith" in the Denominator or Numerator of a measure?

## Have you ever put in a ticket asking ...

- Where / when we saw a patient had a particular diagnosis?

# Measure Investigation Tool

In our continued efforts to provide transparency into measure calculations, we release

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Diabetes A1c > 9 or Untested (NQF 0059) ✕

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MRN:  Go    Center: Access Community Health    Period: TY September 2017

Name: *N/A*    Sex at Birth: *N/A*    DOB: *N/A*

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**Diabetes A1c > 9 or Untested (NQF 0059)**  
**Diabetes**  
Endorser: NQF 0059 / CMS eCQM 122v5

*Percentage of patients 18-75 years of age with diabetes who had hemoglobin A1c > 9.0% during the measurement period.*

**Numerator:**  
Patients whose most recent HbA1c level (performed during the measurement period) is >9.0% .

- No A1c in the last 12 months

OR

- Most recent A1c in the last 12 months is > 9%

**Denominator:**  
Patients 18-75 years of age with diabetes with a visit during the measurement period.

- Age 18-75
- Active diagnosis of Diabetes
- Qualifying visit (see Technical Specifications) in the last 12 months

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[Technical Specifications](#)  
[Value Set Dictionary](#)  
[CMS eCQM Library](#)

*Internal Name: EP\_0059*

Close

tails of

# Measure Investigation Example #1

Diabetes A1c > 9 or Untested (NQF 0059)

Period Type: Trailing Year | Period: TY September 2017

View: Measure Analyzer | Detail

Name
GRIMMIUS, HWA
FROHLING, YULANDA
TEITELBAUM, JAVIER
GOLDIE, KATHLENE
PAIS, EULALIA
MULLENS, SHANTAY
FRYMARK, MICKI
TALBURT, JOYCE

1 2 3 4 5

Diabetes A1c > 9 or Untested (NQF 0059)

MRN: 6337805 | Center: Access Community Health | Period: TY September 2017

Name: DAMIAN LAVERDURE | Sex at Birth: Female | DOB: 7/8/1980 (37 Years as of 9/30/2017)

**Patient In Numerator** !

**Diabetes A1c > 9 or Untested (NQF 0059)**  
Diabetes  
Endorser: NQF 0059 / CMS eCQM 122v5

*Percentage of patients 18-75 years of age with diabetes who had hemoglobin A1c > 9.0% during the measurement period.*

**Age/Sex at Birth Criteria** (Y)  
Age: 37 Years at the end of the period

**Numerator** (Y)  
A1c  
A1c: 9/5/2016 - A1c (DRVS Lab Type)  
A1c Result: 11.4

**Denominator** (Y)  
Diabetes | NQF Qualifying Encounter  
Diabetes: 7/5/2016 - 250.00 (ICD-9-CM)  
NQF Qualifying Encounter: 10/31/2016 - G0438 (HCPCS)

**Other** (N)  
Next Appointment | Medical Encounter  
Next Appointment: N/A  
Next\_Appointment\_Provider: N/A  
Medical Encounter: 10/31/2016  
Most\_Recent\_Provider: Decelles, Larry

**Numerator:**  
Patients whose most recent HbA1c level (performed during the measurement period) is >9.0% .

- No A1c in the last 12 months

OR

- Most recent A1c in the last 12 months is > 9%

**Denominator:**  
Patients 18-75 years of age with diabetes with a visit during the measurement period.

- Age 18-75
- Active diagnosis of Diabetes
- Qualifying visit (see Technical Specifications) in the last 12 months

[Technical Specifications](#)  
[Value Set Dictionary](#)  
[CMS eCQM Library](#)

Internal Name: EP\_0059

Close

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← Back to report | 👤 | 📅

Active	Most Recent Enc	Mo
N	4/4/2017	Aug
N	5/27/2017	Gu
N	2/8/2017	Gu
N	3/18/2017	Wir
N	10/23/2016	Aug
N	7/17/2017	Gu
N	2/23/2017	Dec
N	6/12/2017	Bla

1 of 260 pages (2073 items)

# Measure Investigation Example #2

## Use of Appropriate Medications for Asthma

Period Type: Trailing Year | Period: TY September 2017

View: Measure Analyzer | Detail

Center ID	Center Name
3	Neighborhood Health
3	Neighborhood Health
3	Neighborhood Health
3	Neighborhood Health
2	Family Health Center
2	Family Health Center
2	Family Health Center
1	Access Community Health

1 2 3 4 5

Use of Appropriate Medications for Asthma (NQF 0036)

MRN: 4191347 | Center: Access Community Health | Period: TY September 2017

Name: ABE ROUHOFF | Sex at Birth: Male | DOB: 6/29/1965 (52 Years as of 9/30/2017)

**Patient In Numerator** ✓

**Age/Sex at Birth Criteria** Ⓜ

Age: 52 Years at the end of the period

**Numerator** Ⓜ

Preferred Asthma Therapy

Preferred Asthma Therapy: 8/6/2016 - 153892 (RxNorm)

**Denominator** Ⓜ

NQF Qualifying Encounter: Persistent Asthma

Persistent Asthma

NQF Qualifying Encounter: 12/25/2016 - 99201 (CPT)

Persistent Asthma: 1/8/2016 - J45.30 (ICD-10-CM)

Persistent Asthma: N/A

**Exclusion** Ⓝ

NQF 0036 Exclusion Criteria

NQF 0036 Exclusion Criteria: N/A

**Use of Appropriate Medications for Asthma (NQF 0036)**

Asthma

Endorser: CMS eCQM 126v5.1

Percentage of patients 5 - 64 years of age who were identified as having Persistent Asthma and were appropriately ordered medication during the measurement period.

**Numerator:**

Patients who were ordered at least one prescription for a preferred therapy during the measurement period.

- Active Preferred Asthma Therapy medication in the last 12 months

**Denominator:**

Patients 5-64 years of age with Persistent Asthma and a visit during the measurement period.

- Age 5-64
- Persistent Asthma (identified using the 2011 specification ICD-9 codes and optional "Asthma Severity" data element or current specification ICD-10 and SNOMED-CT codes)
- Qualifying visit (see Technical Specifications) in the last 12 months

**Exclusions:**

- Emphysema
- Chronic Obstructive Pulmonary Disease
- Obstructive Chronic Bronchitis
- Cystic Fibrosis
- Acute Respiratory Failure

Technical Specifications  
Value Set Dictionary  
CMS eCQM Library

Internal Name: EP\_0036

Close

☆ | X | Print | Email

Usual Provider

Usual Provider
Green, Leslie
Cranston, Bill
Green, Leslie
Green, Leslie
Plant, Robert
Branchburg, Tom
Rigoli, Brian
Fritz, Renata

1 of 436 pages (3486 items)



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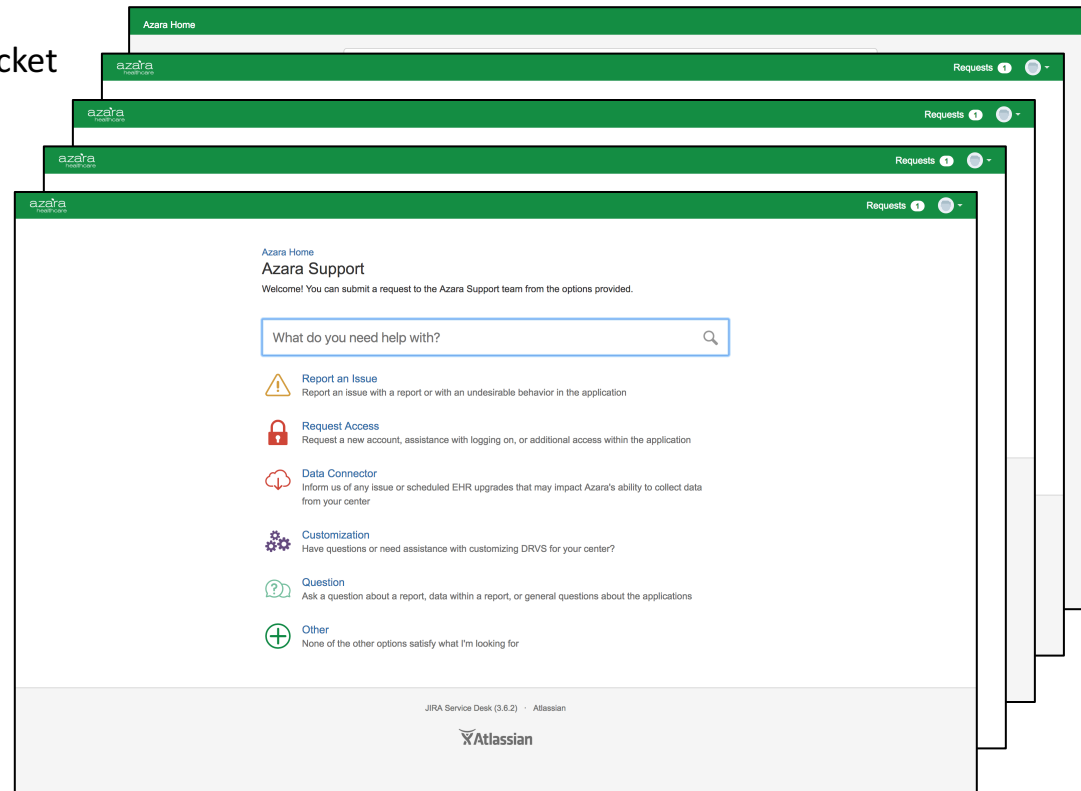
# Azara Service Portal

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# Azara's Service Portal

## Did you know that Azara has Service / Support portal ?

- The URL is: <https://jira.azarahealthcare.com/servicedesk/customer/portal/2>
- From the portal you can:
  - View the contents of current (Open) and historical (Closed) tickets
  - Add comments, questions or notes to ticket
  - Add (securely) attachments
  - CC / Add other participants to a ticket
  - Open / Create a new tickets



# Azara's Service / Support Portal

## AHS-8050 Test Ticket



Azara Support <jiratickets@azarahealthcare.com>

Tuesday, October 10, 2017 at 8:56 PM

To: Gregory Augustine

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Reply above this line.

Just confirming that we got your request. We're on it.

[View request](#) · [Turn off this request's notifications](#)

This is shared with Greg Augustine.

Azara Home, powered by [JIRA Service Desk](#), sent you this message.

# Mapping Administration

## Over the past several releases, we have improved the Mapping Administration functionality by:

- More easily and quickly identifying unmapped values that require action
- Quantifying the number of records where the unmapped values are found / used
- Identifying the time period when records using unmapped values were created or used in the EHR / EPM
- From the portal you can:
  - View the contents of current (Open) and historical (Closed) tickets
  - Add comments, questions or notes to ticket
  - Add (securely) attachments
  - CC / Add other participants to a ticket
  - Open / Create a new tickets

# Mapping Administration

## Mapping Administration ?

Data Element

Race

Center

Community Health Center

Time Period

Last Year

### Mapping Summary

Below is a summary of DRVS standard values mapped from your EHR. Click on any value to see the EHR detailed mappings.

Mapped DRVS Values

[DRVS Values With 0 Count \(0\)](#)



Mapped Race Value	Count
Unmapped	601
<b>Black/African American</b>	<b>17019</b>
More than One Race	1356
White	1000
Unreported/Refused to Report Race	706
Asian	308
Pacific Islander	161
American Indian/Alaska Native	29
Native Hawaiian	23

1 of 1 pages (9 items)

### EHR Mapping Details

The table details all unmapped and mapped items from your EHR based on the selected row in the table to the left.

[Black/African American](#) [All](#)



Mapped Race Value	Count	Source EHR Text
Black/African American	8859	BLACK
Black/African American	7	Black /African American
Black/African American	8153	Black or African American
Black/African American	0	blak

1 of 1 pages (4 items)

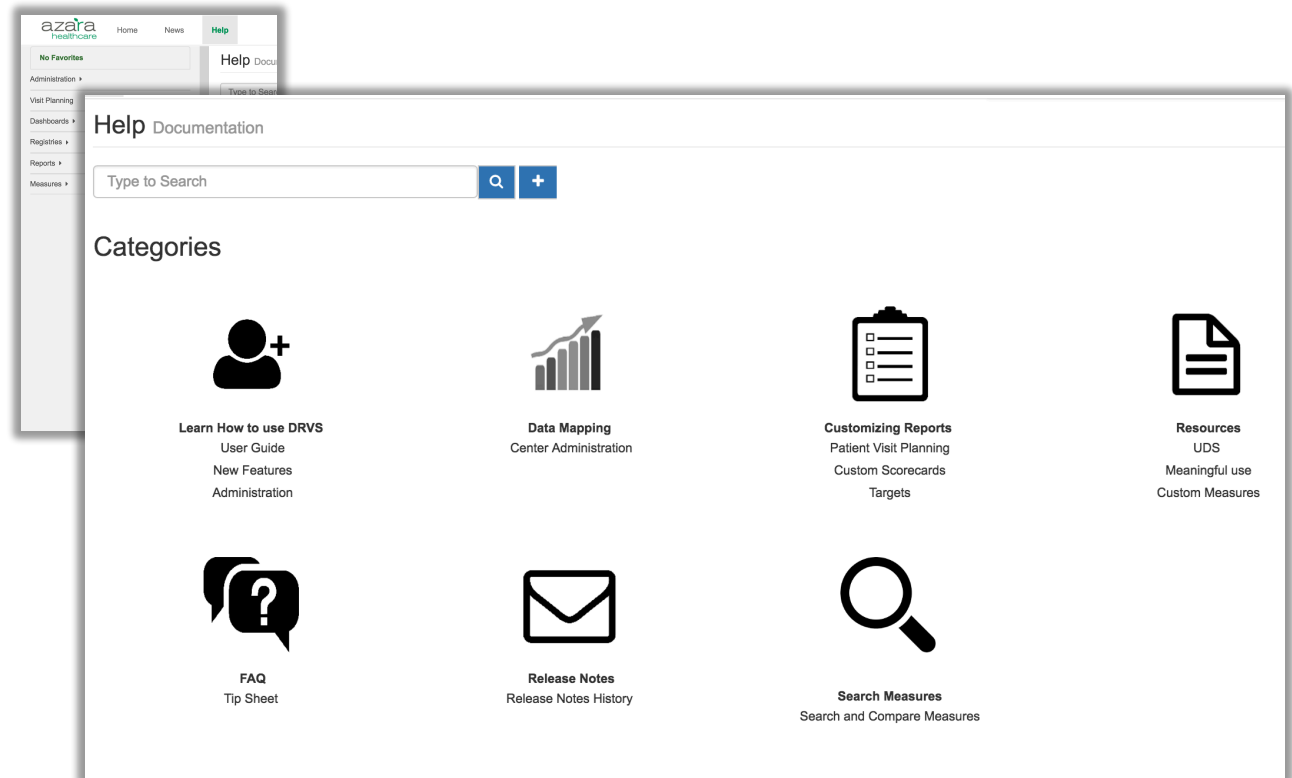
20

# Help

Azara's Help Screen is designed to make it easier for users to navigate available resources.

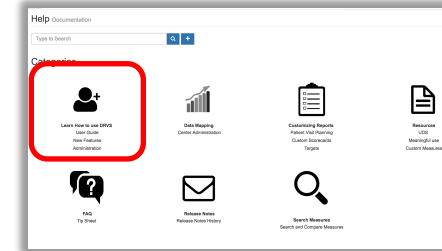
Information is grouped into the following categories:

- Learn How to use DRVS
- Data Mapping
- Customizing Reports
- Resources
- FAQ
- Release Notes
- Search Measures



# Help: Azara Video Series

Be sure to check out the 'How To' and 'Learning Series' videos available under the *Learn How to Use DRVS* category



Help Learn How To Use DRVS

Help / Learn How To Use DRVS

Resource	Center	Category
<a href="#">New Filters (8.0 Release)</a>	All Centers	Features
<a href="#">New PVP (8.0 Release)</a>	All Centers	Features
<a href="#">DRVS Visit Planning Report Video Part 1 - An Overview</a>	All Centers	Azara Video Series
<a href="#">DRVS Visit Planning Report Video Part 2 - The Vision</a>	All Centers	Azara Video Series
<a href="#">DRVS Visit Planning Report Video Part 3 - Mastering the Report</a>	All Centers	Azara Video Series
<a href="#">DRVS Visit Planning Report Video Part 4 - Alert Administration</a>	All Centers	Azara Video Series
<a href="#">DRVS Features Video - Grouping and Crosstab</a>	All Centers	Azara Video Series
<a href="#">DRVS Learning Series - Measure Targets</a>	All Centers	Azara Video Series
<a href="#">DRVS Learning Series: DRVS Overview (Demo)</a>	All Centers	Azara Video Series
<a href="#">DRVS Learning Series: Reports and Measures Overview</a>	All Centers	Azara Video Series
<a href="#">DRVS Learning Series: Registries Overview</a>	All Centers	Azara Video Series
<a href="#">DRVS Admin Training: The Basics</a>	All Centers	Azara Video Series

1 of 2 pages (15 items)

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# Beyond Clinical Quality Measures

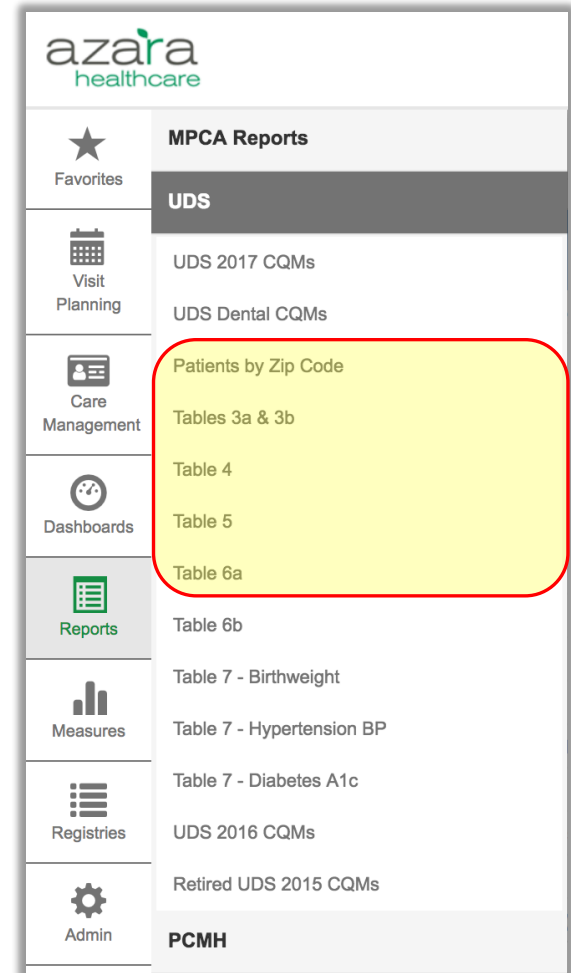
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# UDS Reporting and DRVS

## Current UDS Reports that exists in DRVS include:

- **Zip Code Data:** Patients by Zip Code
- **Table 3a:** Patients by Age and by Sex Assigned at Birth
- **Table 3b:** Demographic Characteristics
- **Table 4:** Selected Patient Characteristics
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- **Table 7:** Health Outcomes and Disparities



# Zip Code Table

## UDS - Patients by Zip Code



**Period Type**  **Period**  **Centers**  **Providers**

Zip Code	None/Uninsured	Medicaid/ CHIP/ Other/ Public	Medicare	Private	Unknown	Total Patients
64481	0	3	4	12	70	89
65285	4	4	2	8	5	23
44310	0	0	0	1	0	1
62864	1	0	0	1	1	3
64779	1	11	3	4	4	23
99999	0	1	0	0	1	2
84121	0	0	0	0	1	1
62379	0	7	0	0	5	12
63357	8	22	2	19	9	60
36353	0	0	0	1	0	1
64830	0	11	1	1	1	14
65778	0	6	0	1	52	59
66770	0	0	0	2	2	4
62324	0	10	1	0	1	12

# SOGI Components of Table 3B

The screenshot displays the Azara Healthcare interface with a sidebar on the left containing navigation options: Favorites, Visit Planning, Care Management, Dashboards, Reports, Measures, and Registries. The main content area shows several overlapping reports:

- 3A - Patients by Age and Gender:** A table with columns for Age, Male, Female, and Unknown/Other. Rows include Under age 1, Age 1, Age 2, Age 3, Age 4, Age 5, and Age 6.
- 3B - Patients by Race/Ethnicity/Language:** A table titled "PATIENTS BY HISPANIC OR LATINO ETHNICITY" with columns for Race, Hispanic/Latino, Needs Update, Non-Hispanic/Latino, and Unreported. Rows include American Indian/Alaska Native, Asian, and Black/African American.
- 3B - Patients by Sexual Orientation:** A table with columns for Patients by Sexual Orientation and Number. Rows include Lesbian or gay, Straight (not lesbian or gay), Bisexual, Something else, Don't know, Choose not to disclose, Ignore, Unmapped, and Total Patients (9,057).
- 3B - Patients by Gender Identity:** A table with columns for Patients by Gender Identity and Number. Rows include Male, Female, Transgender Male/ Female-to-Male, Transgender Female/ Male-to-Female, Other, Choose not to disclose, Ignore, Unmapped, and Total Patients (9,057).

Green arrows point from the text box below to the "Don't know" row in the Sexual Orientation table and the "Other" row in the Gender Identity table.

BPHC wants to respect the policies of each health center. If your policy indicates patients of a certain age group should not be queried, you may indicate “Don’t know” or “Other,” rather than “Chose not to disclose,” so that there’s clear differentiation between those who were not asked, and those who refused to identify.

# SOGI Data Mapping Elements

- **Gender**– sex assigned at birth
  - *DRVS uses this field to determine gender specific inclusion in measures for screenings such as cervical cancer*
- **Gender Identity\*** - A person's innate, deeply-felt psychological identification as a man, woman, or something else, which may or may not correspond to the person's external body or assigned sex at birth
- **Sexual Orientation\*** - A person's enduring physical, romantic, emotional, and/or spiritual attraction to another person.

\*Definitions courtesy of The Fenway Institute

# Natal Sex or Sex at Birth

- These new data points do not replace the “sex assigned at birth” documented in the EHR that informs decisions about the need for certain screenings.
  - By default- we map the standard Sex or Gender field in your EHR to “Sex at Birth.”
  - If you have been using this field for other things, and you happen to store sex at birth elsewhere- please let us know.



# Table 4: Selected Patient Characteristics

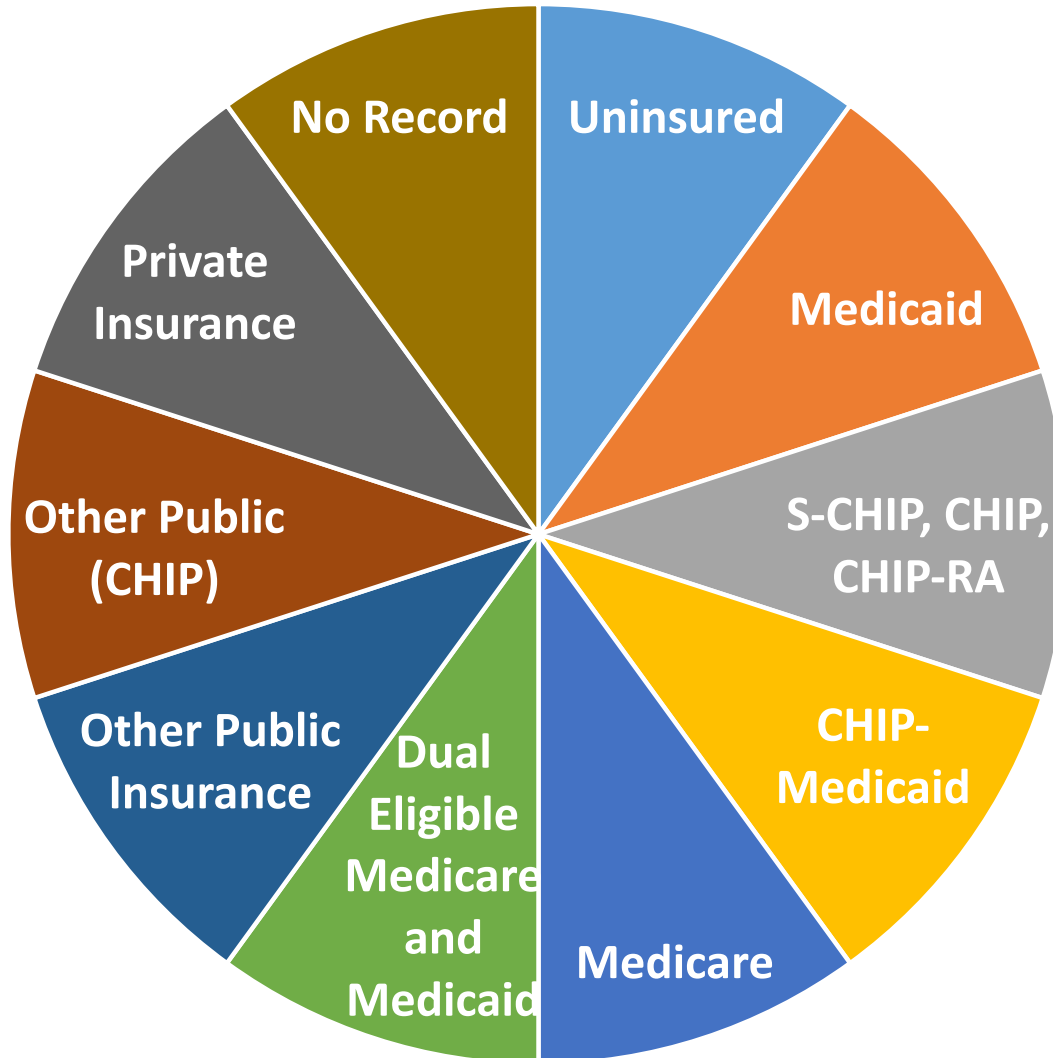
## Principal Third Party Medical Insurance Source

Each patient is assigned the most recent payer recorded in the source system. The payer names displayed reflect the payer names in the source EHR and should be manually assigned to the various UDS categories.

Principal Third Party Medical Insurance	0-17 years old	18 and older
<b>None/Uninsured</b>	0	0
Regular Medicaid	482	1,256
CHIP Medicaid	0	0
<b>Total Medicaid</b>	482	1,256
Dual Eligible (Medicare and Medicaid)	0	0
<b>Medicare</b>	475	1,313
Other Public Insurance Non-CHIP	0	0
Other Public Chip Insurance	0	0
<b>Total Public Insurance</b>	0	0
<b>Private Insurance</b>	1,533	3,857
Unmapped	0	0
Ignore	0	0
No Record	93	48
<b>TOTAL</b>	2,583	6,474

# UDS Financial Class Expansion & Mapping in DRVS

**UDS Financial Classes in DRVS (based on the UDS Table 4 definition):**



# Mapping Administration for Table 4

## Mapping Administration ⓘ

Data Element

Financial Class

Center

Community Health Center

Time Period

Last Year

### Mapping Summary

Below is a summary of DRVS standard values mapped from your EHR. Click on any value to see the EHR detailed mappings.

Mapped DRVS Values

[DRVS Values With 0 Count \(6\)](#)



Mapped Financial Class Value	Count
Unmapped	11
<b>Medicaid</b>	<b>3</b>
Medicare	3
Ignore	1
Private Insurance	1
Uninsured	1

1 of 1 pages (6 items)

20

### EHR Mapping Details

The table details all unmapped and mapped items from your EHR based on the selected row in the table to the left.

Medicaid

All



Mapped Financial Class Value	Count	Source EHR Text
Medicaid	1	AMIDA CARE
Medicaid	1	WELLCARE OF NEW YORK INC (WC)
Medicaid	1	zzMedicaid Family Planning

1 of 1 pages (3 items)

20



# Table 5 Columns (b) and (c)

Line	Personnel by Major Service Category	FTEs (a)	Clinic Visits (b)	Patients (c)
1	Family Physicians			
2	General Practitioners			
3	Internists			
4	Obstetrician/Gynecologists			
5	Pediatricians			
7	Other Specialty Physicians			
8	<b>Total Physicians (Lines 1–7)</b>			
9a	Nurse Practitioners			
9b	Physician Assistants			
10	Certified Nurse Midwives			
10a	<b>Total NPs, PAs, and CNMs (Lines 9a–10)</b>			
11	Nurses			
12	Other Medical Personnel			
13	Laboratory Personnel			
14	X-ray Personnel			
15	<b>Total Medical (Lines 8 + 10a through 14)</b>			
16	Dentists			
17	Dental Hygienists			
17a	Dental Therapists			
18	Other Dental Personnel			
19	<b>Total Dental Services (Lines 16–18)</b>			

# Table 5: Staffing and Utilization

is a profile of health center staff, the number of  
 and the number of patients they serve

azara healthcare

UDS - Table 5 ⓘ

Period Type: Year | Period: 2016 | Centers: Centers | Providers: Providers | Update

**Table 5 - Staffing and Utilization**

Personnel by Major Service Category	Clinic Visits	Patients
Family Physicians	47,152	
General Practitioners	3,523	
Internists	25,246	
Obstetrician/Gynecologists	18,561	
Pediatricians	18,654	
Other Specialty Physicians	7,166	
<b>Total Physicians</b>	<b>120,302</b>	
Nurse Practitioners	82,373	
Physician Assistants	7,762	
Certified Nurse Midwives	1,982	
<b>Total NPs, PAs, and CNMs</b>	<b>92,117</b>	
Nurses	4,752	
Other Medical Personnel		
Laboratory Personnel		
X-ray Personnel		
<b>Total Medical</b>	<b>217,171</b>	<b>85,159</b>

# Mapping Administration for Table 5

## Mapping Administration i

Data Element

UDS Service Categories

Center

Swope

Time Period

Last Year

### Mapping Summary

Below is a summary of DRVS standard values mapped from your EHR. Click on any value to see the EHR detailed mappings.

Mapped DRVS Values

[DRVS Values With 0 Count \(14\)](#)



Mapped UDS Service Categories Value	Count
Unmapped	252
Licensed Clinical Social Workers	73
Internists	30
Pediatricians	22
Nurse Practitioners	17
Nurses	16
Dentists	15
Other Specialty Physicians	14
Family Physicians	13
Psychiatrists	13
Substance Abuse Services	13
Obstetrician/Gynecologists	7

### EHR Mapping Details

The table details all unmapped and mapped items from your EHR based on the selected row in the table to the left.

Pediatricians

All



Mapped UDS Service Categories Value	Count	Source EHR Text
Pediatricians	3	Pediatrics
Pediatricians	1	DO   Pediatrics
Pediatricians	2	MBBS   Pediatrics
Pediatricians	15	MD   Pediatrics
Pediatricians	1	NP-C   Pediatrics

1 of 1 pages (5 items)

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# Table 6A- Services (limited to billing data)

**Azara DRVS currently limits table 6A for CY 2015 to billing data / 'dummy' codes because this is the best way to ensure accuracy rather than duplication.**

- Unless a health center is using dummy codes or another method, to document these services they are paying for but not billing for, it's impossible to reflect it in the center's data.
- It's best practice to document referrals/orders that are made outside your organization in certain cases (Pap smears, Mammograms, and Colonoscopies) for structured quality reporting data. Naturally, these should not be reported on 6A because the center neither ordered, nor paid for these services, so the health center's methodology also needs a way to exclude these from being counted.

# Table 6A- Diagnoses

**Prevalence vs. Outcomes-** The goal of the Diagnoses section of UDS Table 6A is to help HRSA understand the prevalence of certain diseases and conditions in the health center population, rather than outcomes. This means Table 6A and 6B denominators will not match since the inclusion and exclusion criteria are different.

**Selected Diagnoses-** Azara does not limit the scope to just billing data, using assessments and diagnoses from the problem list.

- Because ICD-10 and SNOMED codes are used here, they may also impact numbers in the Services section for Mammograms and Pap smears where practices use ICD-10 or SNOMED codes as assessment or problem list entries to document these procedures.



## Dashboards

# Dashboards

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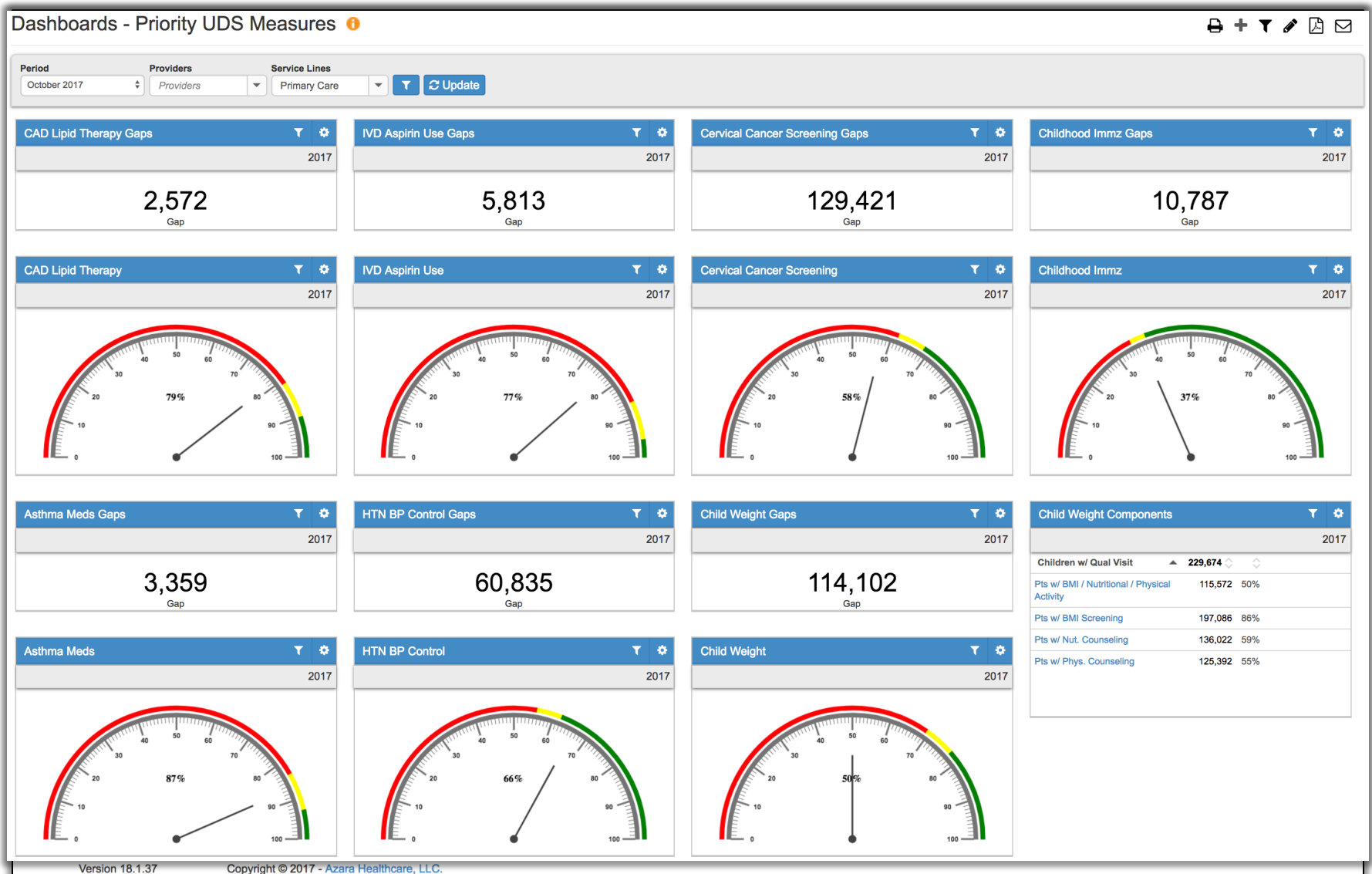
**Dashboards can be helpful in your center's efforts to manage and monitor UDS. These include both standard / stock dashboard**

- Cancer Screening Gaps
- UDS 2016 vs Current

**And custom created dashboards**

- Priority UDS Measures

# UDS and Dashboards





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# Questions ?

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# Contact Information

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