# **CPCI User Training**

Friday, February 27, 2015 Greg Augustine, Azara Healthcare



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# Agenda

- How to Log In
- The Home Screen
- General Navigation
- Reports vs. Measures
- Compliance Reports
- The Measures Analyzer
- Clinical Registry Reports
- Patient Visit Planning
- Help



# Logging In

• Launch a web browser and in the address field enter:

https://drvs.azarahealthcare.com/<ctr abbrev>

- At the Log In Screen enter the following
  - Company Code: CHCANYS
    - Defaults and is grayed out with respect to entry
  - User Name: <email address>
  - Password: <password>
    - The first time you login you will need to use the password supplied in your "Welcome email" and you will be required to change your password

azara	Modify Password Welcome !! For security reasons, kindly change your password and set your password security answer.Please choose a new password with a minimum of eight characters, one number, and one special character. Password are case sensitive and should not contain spaces
Log In	Your new password must be different from the old one.
Company Code : DEMO	Company Code :
User Name:	Old Password:
Password:	New Password:
LOG IN	Confirm Password: Security Question: -Select-
Forgot Password	Security Answer:
	(b)

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### Logging In – Welcome Email

#### You will receive an email with your login credentials

AzaraDRVSAdmin@azarahealthcare.com Sent: Saturday, May 5, 2012 11:01 AM To: Greg Augustine

#### Welcome to Azara DRVS

Your user credentials :

Company Code: CHCANYS UserName: <u>Greg.augustine@azarahealthcare.com</u> New Password Code: |![|LB5G

#### NOTE:

This is a temporary password. You are required to change your password once you log in.

Thanks, Azara Healthcare



### The Home Screen

### After logging into CPCI, the Home Screen is displayed. There are four (4) main sections on this page.



- 1. Stoplight Panel / Dashboard 3. Contact Information
- 2. Quick Links

- 4. Events and Announcements



### Home Screen Preferences

### Click on the 'Preferences' link below your login to change the Scorecard Widget on your home page

azara healthcare	CHCANYS CENTER FOR PRIMARY CARE INFORMATICS	DRVS Clinical a	nd Compliance Reporting	Welcome gr Change Pas	eg.augustine@azarahea sword   Preferences   Abo	Ithcare.com out   Sign Out
		Home	Dashboards	Reports	Measures	Help
Preferen	ces					
User Preference	S	DELET				
Security Prefere Security Question Security Answer	nces : Which was your first school? :	ver vou must re en	ter your password			
Re-enter passwo	rd:	, you must re-en	ar your password.			



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### Navigation within CPCI

### There are two (2) main tool bars found throughout CPCI



#### Main Navigation Bar

- Displayed near the top of all screens
- Useful in navigating through the screens and reports of the application
- Tabs on the main navigation bar give quick access to the Home screen, Reports menu, Measures menu, and Help screen



### <u>Utility Bar</u>

- Located below the main navigation bar
- Contains a set of common utility buttons found on most screens or reports
- May vary slightly depending on the type of screen/report
- Common utility buttons include: (Show/Hide) Filters, PDF (Export), Excel (Export), Report Issue, and Add to Favorites



### **Reports and Measures**

#### Data is presented in CPCI in either a *Report* or the *Measure Analyzer*

- > There are three (3) basic types of *Reports* in CPCI
  - Compliance Reports
    - Aggregated Data for Meaningful Use, UDS, PCMH
  - Clinical Registry Reports
    - Patient Level Detail for specific Chronic Conditions (e.g., Diabetes, Hypertension) or Preventive Care Segments (e.g., Adult Female, Adult Male)
  - Clinical Operations
    - Patient Visit Planning
- The Measure Analyzer allows users to complete ad-hoc analysis for specific measures (e.g., A1c > 9)
  - Review trends
  - Benchmark providers
  - Identify outliers and disparities in care



## **Compliance Reports**

#### **CHCANYS** centers currently have access to Compliance Reports for:

- CHCANYS Projects
- UDS
- Meaningful Use
  - Current (2014)
  - Legacy (2011-13)
- PCMH
  - Current (2014)
  - Legacy (2011)





### **Compliance Reports**

#### **Compliance reports typically displayed as a Scorecard which includes:**

• Measure

- Target (%)
   Numerator
- Exclusions
- Stoplight Grade Result (%) Denominator

azara <b>Cre</b> i						Welcome greg. Change Passwo	augustine@aza ord   Preferences	rahealthcare.com s   About   Sign Out	
	healthcare PRIMARY CARE INFORMATICS		Home	Dash	boards R	leports	Measures	Help	
PCMH (MLCHC) - Adult Diabetes, TY .					y 2013				
					<b>Filters</b>	PDF EXCEL	🕑 Report Is	ssue 🛛 😘 A	dd to Favorites
		Measure		Target	Result	Numerator	Denor	minator	Exclusions
G	±:	A1c < 8 (NQF 0575)	۲	70%	48%	1,181		2,459	4
G	1	A1c > 9 (NQF 0059)	۲	28%	14%	332		2,459	4
G	1	A1c Tested	۲	89%	56%	1,368		2,459	13
3	1	BP < 130/80	۲	33%	62%	1,521		2,459	0
G	1	Depression Screening	۲	50%	0%	0		2,459	4
3	1	Eye Exam (NQF 0055)	۲	57%	44%	1,083		2,459	3
G	1	LDL-C < 100 (NQF 0064)	۲	46%	20%	486		2,459	4
G	1	LDL-C Tested (NQF 0064)	۲	85%	42%	1,036		2,459	4



### **Compliance Reports**

Consistent tabs, links, and graphics help you easily find the features, functions, and tools you need to easily navigate and use CPCI

- Measures highlighted in blue are clickable links that allow the ability to drill down into Measure Analyzer
- Information buttons found throughout the system give more specific information about the measure or data

CHC) - Adult Diabetes, TV January 2013

• Supporting detail behind each measure can be directly exported to Excel

		, -		,			
				Filters	PDF EXCEL	Report Issue	C Add to Favorites
	Measure		Target	Result	Numerator	Denominator	Exclusions
(i) = #	A1c < 8 (NQF 0575)	۲	70%	48%	1,181	2,459	4
(i) 🗎	A1c > 9 (NQF 0059)	۲	28%	14%	332	2,459	4
<li>(i)</li>	A1c Tested	۲	89%	56%	1,368	2,459	13
(i) = H	BP < 130/80	۲	33%	62%	1,521	2,459	0
(i) 🖽	Depression Screening	۲	50%	0%	0	2,459	4
(i) = 11	Eye Exam (NQF 0055)	۲	57%	44%	1,083	2,459	3
<li>1</li>	LDL-C < 100 (NQF 0064)	۲	46%	20%	486	2,459	4
(i) 🗎	LDL-C Tested (NQF 0064)	۲	85%	42%	1,036	2,459	4

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### **Filtering Results**

- Results can be filtered based on a period of time, specific providers or specific locations
- To customize your analysis, click Filters, choose the filters / parameters, and click the Update Report button

	Filters 🖻 PDF 🗐 E	EXCEL Seport Issue & Add to Favorites
Period	All Providers	All Locations
Trailing Year	ADAME, LATASHA	Test Group
TY December 2013	ADCOCK, FRANKIE	1017 RAVENS BLUFF
	ALBRECHT, KAYE	1036 WEST KNOLL ROAD
	ALLISON, LEONOR	10/9 KATTLESNAKE HILL KOAD
Report Format	ARNETT, ELINOR	1178 PATRIOT DRIVE
Default 💌	BACA, CLAUDETTE	1180 KENDALL STREET
	BARCLAY, IVY	154 OLD CAMPUS ROAD
Report Grouping	BARFIELD, KRYSTAL	215 STRAWBERRY HILL ROAD
No Grouping	Show Inactive	
	Provider Role: • Usual Rendering	
	UPDATE REPORT	



### **Measure Calculations**



### Measure Calculation: Numerator / (Denominator - Exclusions)

UDS removes exclusions prior to calculation; patient will not be displayed in patient detail reports.



### **Reporting Periods**

### There are four (4) main "Period Types" to run a Scorecard Report or individual measure in the Measure Analyzer

- Year (Calendar)
- Trailing Year
- Quarter
- Month

Specifications, however, are typically written for a calendar year period.



## **Reporting Period Types**

# All period types follow and adhere to the same specification with regards to

- The length of the measurement period
- Patient age / gender criteria
- Lookback period for a specific lab, diagnostic image or screening

# Azara applies the specifications the <u>same</u> across all period types within CPCI with the following key differences:

- Trailing Year
  - The measurement period start and end dates are shifted
    - The period for TY September 2014 is 10/1/13 thru 9/30/14
- Quarter and Month
  - The measurement period start and end dates are shifted
    - The period for Q3 2014 is 7/1/14 thru 9/30/14
  - The patient must have a visit in the quarter (or month) between 7/1/14 and 9/30/14



## Example: Breast Cancer Screening (MU 2014)

#### Denominator:

- Patients at least 42 and no more than 69 years at the end of the measurement period who had an outpatient encounter within the year prior to the end of the measurement period
  - AND who have not had either a bilateral mastectomy or two (2) unilateral mastectomies

#### Numerator:

• Pts with a breast cancer screening within 2 years prior to the end of the measurement period

#### Application of the specification within DRVS for each period type:

	Year (2015)	Trailing Year (TY Feb 15)	Month (Feb 15)	Quarter (Q1 15)
<u>Period:</u>	Jan 1, 2015 – Dec 31, 2015	Mar 1, 2014 – Feb 28, 2015	Feb 1, 2015 – Feb 28, 2015	Apr 1, 2014 – Mar 31, 2015
<u>Denominator:</u>	OP Encounter w/in the year	OP Encounter w/in the year	OP Encounter w/in the year	OP Encounter w/in the year
	prior to 12/31/15	prior to 2/28/15	prior to 2/28/15	prior to 3/31/15
	<b>AND</b>	<b>AND</b>	<i>AND</i>	<i>AND</i>
	Pt at least 42 and not more	Pt at least 42 and not more	Pt at least 42 and not more	Pt at least 42 and not more
	than 69 as of Dec 31	than 69 as of Feb 28	than 69 as of Feb 28	than 69 as of Mar 31
	<b>AND</b>	<b>AND</b>	<i>AND</i>	<i>AND</i>
	OP Encounter between	OP Encounter between	OP Encounter between	OP Encounter between
	1/1/15 and 12/31/15	3/1/14 and 2/28/15	2/1/15 and 2/28/15	1/1/15 and 3/31/15
<u>Exceptions:</u>	Bilateral Mastectomy or 2	Bilateral Mastectomy or 2	Bilateral Mastectomy or 2	Bilateral Mastectomy or 2
	Unilateral Mastectomies at	Unilateral Mastectomies at	Unilateral Mastectomies at	Unilateral Mastectomies at
	any time prior to 12/31/15	any time prior to 2/28/15	any time prior to 2/28/15	any time prior to 3/31/15
<u>Numerator:</u>	Screening (Mammography)	Screening (Mammography)	Screening (Mammography)	Screening (Mammography)
	w/in 2 years prior to 12/31/15	w/in 2 years prior to 2/28/15	w/in 2 years prior to 2/28/15	w/in 2 years prior to 3/31/15

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### Measure Analyzer

### CHCANYS centers currently have access to a large number of measures across multiple categories

- CHCANYS Projects
- UDS
- Meaningful Use
  - Current (2014)
  - Legacy (2011-13)
- PCMH

The Measure Analyzer can be accessed directly from the Main Navigation Bar or by 'drilling' into Measures from Scorecard Reports

#### Measures

MU Stage 1 Core Objectives	•
MU Stage 1 Menu Set Objectives	•
MU 2014 Core CQMs	•
MU 2014 Dental CQMs	•
MU 2014 Diabetes CQMs	•
MU 2014 General Practice CQMs	•
MU 2014 Heart CQMs	•
MU 2014 HIV CQMs	•
UDS 2013 Table 6b	•
UDS 2013 Table 7 Birthweight	•
UDS 2013 Table 7 Diabetes	•
UDS 2013 Table 7 Hypertension	•
PCMH Adult Diabetes	•
PCMH Adult Preventive	•
PCMH Pediatric Preventive	•
PCMH Pediatric Asthma	•
CDC Cancer Grant	•
NYS-HCCN Grant	•



### Measure Analyzer

# The Measure Analyzer screens contain three (3) graphical components

- Multi-Period Trend
- Current Period Benchmarks
- Current Period Comparisons





### Measure Analyzer – Multi-Period Trend

- The graph of the Multi-Period Trend allows you to look at the filtered measure value as a trend line over a period of time.
- For those measures where a threshold has been established, the primary and secondary targets are displayed as a green and yellow lines for comparison.





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### Measure Analyzer – Benchmarks

This chart shows the selected measure results for the most recent time period against Best and Average benchmarks.

- **Selected:** Result for filters (e.g., providers) selected
- **Best Center:** Result for the center in the PCA with the best results
- **PCA Average:** Average result for all centers in the PCA
- Center Average: Average result for all providers at your center

TY January 2013 Result										
Sele	cted	۵.								
Best	Center									
PCA	Averag	je 🔅								
Cen	ter Aver	age	D.							
-		-	- -	4	L.	با	1	L.		.4.
	10	20	30	60	- 30	60	70	- 30	30	100



### Measure Analyzer – Comparisons

- Displays Comparison data in chart or table form.
- The table form color codes whether the results have met the threshold (green) or not (red)
- Clicking on the bars in the bar chart or the highlighted links in the dable 'drills' down into the measure for more detail and a new Measure Analyzer is displayed





### Measure Analyzer – Filtering

- As in the Scorecard Reports, results can be filtered based on a period of time, specific providers or specific locations
- To customize your analysis, click Filters, choose the filters, and click the Update Report button

Period Type Trailing Year 💌 Start TY January 2012 🛫 End TY January 2013 🛫	Display Options Y Filters POF Deta All Providers BOLLINGER, LYNNE BURNETTE, MADELYN CAMP, SUMMER CEJA, ELVA CHASTAIN, MARGO CHILDERS, JOY CLIFFORD, ASHLEE CLIFFORD, BERTHA	Add to Favorites
	CLIFFORD, ASHLEE CLIFFORD, BERTHA CONNORS, AUTUMN Show Inactive Usual Rendering UPDATE REPORT	



### Measure Analyzer - Patient Detail

 The Measure Analyzer supports access to the patient data behind the Numerator and Denominator values. This is done by clicking the **Patient Detail** button from the utility bar.

Display Options 🕎 Filters 📄 PDF 📑 Detail List 🛇 Report Issue 🌑 Add to Favorites
---

 The resulting Patient Detail List is sortable and may be exported as either a PDF or an Excel spreadsheet

Page 1 of 67 🕨 💓							
Name	Numerator <b>V</b>	Denominator	Cancer Screen Data Type	Cancer Screen	Completed Date	Inactive	
ADKINS, JUDY	1	1	Observation	PAP	5/17/2012	N	
ADKINS, JUDY	1	1	Lab	PAP	5/17/2012	N	
ALLEY, MARGRET	1	1	Lab	PAP	1/9/2013	N	
ANDREWS, CHRISTINA	1	1	Lab	PAP	10/10/2012	N	
ARRIAGA, MISTY	1	1	Lab	PAP	12/19/2012	N	
AUSTIN, KATHLEEN	1	1	Lab	PAP	11/19/2012	N	



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### **Clinical Registry & Operations Reports**

### **Current Clinical Registry Reports include:**

- Adult Female Primary Care
- Adult Male Primary Care
- Pediatric Primary Care
- Immunizations (Childhood)
- Diabetes Labs & Services
- Asthma Status & Management
- Hypertension
- HIV
- Depression

### **Clinical Operations**

• Patient Visit Planning Report

Reports	
CHCANYS Projects	
UDS 2014	
PCMH (2014)	
Meaningful Use	
Custom Scorecards	
PCMH (2011)	
Meaningful Use Legacy	y 🕨
Clinical Registries	
Clinical Operations	



### **Clinical Registry Reports**

- Provide a method to manage chronic conditions, measure preventive clinical parameters, and analyze improvement
- Clinical Registries allow you to create reports with patient level detail that can used to either
  - Retrospectively analyze data based on their most recent encounter
  - Prospectively analyze data based on their next appointment.
- There is a common set of data elements in each report (e.g., Patient Name, MRN) and a set of data element specific to the Chronic Disease or Preventive Care category

Clinical Registries - Diabetes Labs & Services												
ADVANCED MODE Y Show/Hide Filters Export: De POF Excel O Report Issue 6 Add to Favoriles												
Page 1 of 36	Page 1 of 369 🕨 👀											
II Name	II MRN	II Age	:: Last Encounter	II Next Appointment	II A1c Test Date	HA1c Result	II LDL Test Date	E LDL Result	II UACR Test Date	II UACR Result	II BP Date	ii Blood Pressu
Florence	Florence Avenue Community Health Centers											
JENKINS, ANDRE	0004733001BA	55	2/14/2012		1/11/2012	7.4	3/11/2011	99	3/11/2011	0	2/11/2012	182 / 92
WILLIAMSON, ADELINE	00004605801S	62	1/11/2012		10/17/2011	6.4	10/25/2011	106	1/11/2012	8	1/7/2012	114 / 66
BATES, GUS	00003269801S	77	12/12/2011	6/6/2012	12/5/2011	6.4	12/5/2011	73	12/21/2009	223	11/29/2011	124 / 66
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### **Clinical Registry Reports**

- The result set can be sorted on any column by clicking on the highlighted heading
  - Columns may also be moved around by dragging and dropping to put in a different order
- Reports may be exported as either an Excel spreadsheet or PDF tearsheet
- Results can also be grouped

∷ Name	II MRN	II Age	Encounter	II Next Appointment	Self # Management Goal	Last Symptom Free Days	Symptom II Free Days	Last ∷ Tobacco Exposure	Severity Assessment	Severity Assessment	E Contre Meds
Florence	e Avenue Com	nunity	Health Cen	ters							
Aline Ho	orton		Grouped by	/ Provider							
Name	MRN	Age	Last Encounter	Next Appointment	Self Management Goal	Last Symptom Free Days	Symptom Free Days	Last Tobacco Exposure	Severity Assessment	Severity Assessment	Control Meds
DAY, TAYLOR	0004152201BA	57	12/1/2011								
Angelita	Mejia										
Name	MRN	Age	Last Encounter	Next Appointment	Self Management Goal	Last Symptom Free Days	Symptom Free Days	Last Tobacco Exposure	Severity Assessment	Severity Assessment	Control Meds
BENTLEY, ILA	00006204702A	31	2/22/2012								



### **Clinical Registry – Filtering**

- Results can be filtered based on a period of time, specific providers or specific locations
- To customize your analysis, click Filters, choose the filters, and click the Update Report button
  - Pressing the **More Filters** button from within the filters screen opens an additional popup screen of filtering options

	<b>Filters</b>	PDF 🖩 EXCEL STREPORT ISSUE & Contract Stress Add to Favorites
Period Most Recent Encounter Future Appointment Start Date 5/12/2013 End Date 5/22/2013	All Providers ACEVEDO, ESMERALDA ADAM, AMPARO ARREOLA, MARLA ASHTON, YVONNE BEATTY, KIM BEAVER, ALYSSA BECERRA, ILENE BERMUDEZ, DEANNA BEYER, JEWELL	All Locations 1034 POST OFFICE AVENUE 1079 LOWELL JUNCTION ROAD 1117 PRINCETON AVENUE 1132 GOULD ROAD 117 HIDDEN ROAD 250 COTTAGE ROAD 308 RED SPRING ROAD 330 LANDAU LANE 383 SLEEPY HOLLOW LANE
Grouping  None  Provider  Location	Usual   Rendering	
MORE FILTERS ->		
	UPDATE REPORT	



## What does the Pt Visit Planning Report Do?

- Performs an *electronic chart audit* for chronic and preventative care action items for each scheduled patient.
- Facilitates more efficient pre-visit planning by allowing care teams to review patients' preventative and chronic care alerts, in one report.
- Displays *only actionable items* to keep the team focused.
- Displays patients' chronic illnesses and risk factors to help staff identify high need patients who need additional care coordination.





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### **Clinical Operations - Patient Visit Planning**

Facilitates more efficient pre-visit planning sessions by allowing care teams to review alerts for patients with upcoming appointments

- Displays only relevant and actionable items to help teams prepare for visits
- Displays active diagnoses and relevant risk factors
- Alerts indicate whether particular clinical parameters, labs or screenings are (a) missing, (b) overdue or (C) not in "good" control
- Alerts are *configurable*

Diagnoses Risk Factors		Alerts					
<ul> <li>◇ Diabetes</li> <li>◇ Hypertension</li> <li>◇ Asthma</li> <li>◇ Depression</li> <li>◇ HIV</li> <li>◇ CHF</li> <li>◇ CAD</li> <li>◇ IVD</li> </ul>	<ul> <li>♦ Tobacco User</li> <li>♦ Pregnant</li> <li>♦ Obesity (OBS)</li> <li>♦ Severe Mental Illness or Psychoses (SMIP)</li> <li>♦ Substance Abuse or Dependence (SAD)</li> </ul>	<ul> <li>◇ A1c</li> <li>◇ LDL</li> <li>◇ Eye Exam</li> <li>◇ Monofilament Exam</li> <li>◇ Nephropathy Screen</li> <li>◇ Flu</li> <li>◇ PCV</li> <li>◇ Blood Pressure</li> <li>◇ Tobacco Status</li> <li>◇ Tobacco Cessation</li> <li>◇ Dental Visit</li> </ul>	<ul> <li>BMI</li> <li>BMI Percentile</li> <li>Mammogram</li> <li>Pap Smear</li> <li>Asthma Severity</li> <li>Depression Screening</li> <li>Nutritional Counseling</li> <li>Physical Activity Counseling</li> <li>Colorectal Cancer Screening</li> <li>BMI and Follow-Up</li> </ul>				

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### **Patient Visit Planning**

- Like the Clinical Registries, the Patient Visit Planning report can be run:
  - Prospectively to prepare and plan for patients' upcoming appointments
  - Retrospectively (based on patients' most recent encounter) to review the success of care teams planning, preparation and execution
- The report is organized by provider and appointment time and may be filtered by provider or location
- Reports may be exported and printed as a PDF tearsheet

Patient Visit Plann	ng	_	Filters PD	DF 🖤 Report Issue 🕷 Add to Favorites
KAPLAN, SHARLENE				
Vonday, November 18, 2013 9:30 AM NOLAN GAMBOA MRN: 001990198981 Alert Type A1c BP Eye Exam Monofilament Exe Nephropathy Screen	Low Risk Diabetes Message Overdue Result out of range Missing m Missing en Missing	M, 35 <u>Most Recent Date</u> 8/20/2012 4/26/2013	Spanish Most Recent Result 1 131/82	PCP: MCCARTY, LYNNETTE Risk Factors:
THOMPSON, CONCETTA Monday, November 18, 2013				



### Customizing the Pt Visit Planning Report

- Clicking the "i" button allows you to see current settings for your center
- Alerts can be configured to meet the needs of your center
  - Alerts can be turned on / off
  - Alerts can be associated with specific diagnoses
  - Lookbacks can be varied and modified
  - Min and Max values for labs and blood pressure can be changed

Center	Alert	Target Min	Target Max	Target 2 Min	Target 2 Max	Lookback Days	Diabetes	нιν	Asthma	HTN	Depression	COPD	CHF	CAD	IVD	Tobacco User	Pregnancy	Age Min	Age Max	Sex
Lawn Court CHC	Mammogram					730	0	0	0	0	0	0	0	0	0	0	0	40	70	F
Lawn Court CHC	Pap Smear					1095	0	0	0	0	0	0	0	0	0	0	0	24	65	F
Lawn Court CHC	Asthma Severity					36500	0	0	1	0	0	0	0	0	0	0	0	0	85	в
Lawn Court CHC	A1c	1	7			180	1	0	0	0	0	0	0	0	0	0	0	0	85	в
Lawn Court CHC	BP	1	130	1	80	365	1	0	0	0	0	0	0	0	0	0	0	0	85	в
Lawn Court CHC	Eye Exam					365	1	0	0	0	0	0	0	0	0	0	0	0	85	в
Lawn Court CHC	LDL	1	100			365	1	0	0	0	0	0	0	0	0	0	0	0	150	в
Lawn Court CHC	Monofilament Exam					180	1	0	0	0	0	0	0	0	0	0	0	0	85	в
Lawn Court CHC	Nephropathy Screen					365	1	0	0	0	0	0	0	0	0	0	0	0	85	в
Lawn Court CHC	Flu					365	0	0	0	0	0	0	0	0	0	0	0	1	85	в
Lawn Court CHC	BP	1	140	1	90	365	0	0	0	1	0	0	0	0	0	0	0	0	85	в
Lawn Court CHC	LDL	1	100			365	0	0	0	1	0	0	0	0	0	0	0	0	85	в
Lawn Court CHC	BP	1	140	1	90	365	0	0	0	0	0	0	0	0	1	0	0	0	85	в
Lawn Court CHC	PCV					36500	1	0	0	0	0	0	0	0	0	0	0	65	85	в



# Help

#### The Help Screen includes links to:

- The User Guide
- A mapping document detailing where data has been pulled from the CHCANYS source systems for inclusion in CPCI
- Websites of compliance organizations (CMS)

		Home	Reports	Measures	Help
Help Documentation					
	_	_	_	_	_
Name	Туре				
User Guide	User Guide				
Mapping Document	Mapping Document				
Meaningful Use Stage 1 Report Definition	Report Definition				
Meaningful Use Core and Menu Set Objective Specifications	Link				
Meaningful Use Clinical Quality Measure Specifications	Link				
UDS Website	Link				
UDS 2011 Manual	External Document				
	Copyright	(c) Azara Healthcare			
		sion 2.1.0343			



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### What's Coming ...

- Azara deploys new releases on about an eight (8) week cycle
  - Releases consist of new functionality and application improvements
- Release Notes are published and emailed following all major releases

#### DRVS Release Notes

#### October 30, 2014

#### What's New in DRVS Release 3.13

Release 3.13 is the culmination of much work by the Azara team. Once again UDS season is upon us and this release contains tons of updates that make our UDS reports even smarter. The 2014 UDS manual has not yet been released, but as soon as it is out we'll be adjusting the HIV follow-up and Depression Screening measures. Also included are new PCMH reports using more current 2014 measures. We are excited to make this release available and look forward to putting forth new and exciting functionality in future releases.

As always, contact us at support@azarahealthcare.com if you have any questions or concerns.

#### UDS 2014

Our August release featured many changes in support of UDS 2014 reporting based on HRSA's Program Assistance Letter (PAL). This release sees some additional changes being rolled out. These changes are outlined below. Note that all measures developed or updated per the PAL are subject to change based on publication of the official specifications in the forthcoming UDS 2014 manual. Details for the PAL can be found <u>here</u>.

Prenatal Care (Table 6b) and the Measure Analyzer

Enhanced

Modified the Prenatal Care measure to show groupings by trimester/location in the comparison chart of the Measure Analyzer as opposed to the timeline chart.



### **Key Contact Information**

• For assistance with use of CPCI data and reports for Quality Improvement, contact CHCANYS Quality Improvement Program

<u>qiteam@chcanys.org</u>

 To access CPCI, contact your health center's CPCI Administrator, or Natalya Malamud, Health IT Project Manager, CHCANYS at

Nmalamud@chcanys.org

- For technical support or to report data quality concerns, contact Azara Technical Support <u>support@azarahealthcare.com</u>
- CPCI URL

https://drvs.azarahealthcare.com/ryan

- When you report an issue ... be specific !
  - What Report / Measure were you running ?
  - What Filters were you using ?
  - Provide examples (e.g., MRN) ?
  - What were you expecting ?

