

# Native Hawaiian Health Care Systems Sample Required Service Projections

(Required for NHHCS)

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| **NAME OF NATIVE HAWAIIAN HEALTH CARE SYSTEM**  | - |
| **Application Number**  | - |

| **Required Service** | **Performance Measure** | **Projection** | **Goal for Three-Year Period of Performance Ending 7/31/27** |
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| **Outreach Services**  | Number of Native Hawaiians informed of the availability of health services  | NHHCS to propose a goal for the 3-year period of performance that indicates how many Native Hawaiians will be informed of the availability of services by 7/31/27.  | - |
| **Education and****Health****Promotion** | Number of formal education/healthpromotion sessions provided (e.g., planned and structured sessions with specificobjectives and outcomes), to include virtual care and face-to-face sessions, **and** number of people attending these sessions) | NHHCS to propose goals for the 3-year period of performance that indicate:* How many formal education/health promotion sessions will be provided by 7/31/27, **and**
* How many people will attend these sessions by 7/31/27
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| **Services of physicians, physicians’** **assistants, nurse** **practitioners,** **or other health professionals**  | Number of visits between patients and physicians, physicians’ assistants, nurse practitioners, or other health professionals, to include virtual care and face-to-face visits.  | NHHCS to propose goals for the 3-year period of performance that indicate:* How many virtual care visits will be conducted by the listed provider types by 7/31/27, **and**
* How many face-to-face visits will be conducted by the listed provider types by 7/31/27.
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