FY26 Native Hawaiian Health Care Improvement Act (NHHCIA) Non-Competing Continuation (NCC) Progress Report Native Hawaiian Health Care System (NHHCS) Optional Clinical Performance Measures Sample Progress Report

If optional clinical performance measures were included in the FY24 application, you must track progress over the 3-year period of performance. Starting with the Optional Clinical Performance Measures Forms submitted with the FY25 progress report, add two new rows to provide numeric data showing progress to date and a narrative explanation of progress toward the goal since you last reported optional clinical performance measures in FY25. Do not edit any information previously included in the FY25 forms. If Optional Clinical Performance Measures Forms were not included in your FY25 progress report, do not include any in this submission.

1. Focus Area: Screening for Depression and Follow-up Plan	
Performance Measure	Percentage of patients aged 12 years and older screened for depression on the date of the visit or up to 14 days prior to date of the visit using an age-appropriate standardized depression screening tool and, if positive, a follow-up plan is documented on the date of or up to two days after the date of the qualifying visit.
Target Goal Description	
Numerator Description	Patients who: • Were screened for depression on the date of the visit or up to 14 days prior to the date of the visit using an age-appropriate standardized tool and screened negative for depression. • Were screened for depression on the date of the visit or up to 14 days prior to the date of the visit using an age-appropriate tool and, if screened positive for depression, a follow-up plan is documented on the date of the visit or up to two days after the date of the qualifying visit. Note: Include in the numerator patients with a negative screening and those with a positive screening who had a follow-up plan documented.

1. Focus Area: Screening for Depression and Follow-up Plan	
Denominator Description	Patients aged 12 years and older at the beginning of the measurement period with at least one qualifying encounter during the measurement period, as specified in the measure criteria. Exclusions: • Patients who have been diagnosed with depression or bipolar disorder at any time prior to the qualifying encounter. Exceptions: • Patients who refuse to participate in or complete the depression screening. • Patients who are in urgent or emergent situations where time is of the essence and to delay treatment would jeopardize the patient's health status. • Patients with documentation of medical reasons for not screening the patient for depression (e.g., cognitive, functional, or motivational limitations) that may impact the accuracy of results.
Baseline Data	**Baseline Year:** **Measure Type**: **Numerator**: **Denominator**: **Calculated Baseline**:
Numeric Progress To Date	*Provide recent data to demonstrate ongoing progress toward goal.*
Narrative Progress Since August 1, 2025	*Provide narrative to explain recent data provided in the row above.*
Data Source & Methodology	**Data Source**: [_] EHR [_] Chart Audit [_] Other (If Other, please specify): _____ **Data Methodology Description**:

1. Focus Area: Screening for Depression and Follow-up Plan	
Key Factor and Major Planned Action #1	**Key Factor Type**: [_] Contributing [_] Restricting **Key Factor Description**: **Major Planned Action Description**:
Key Factor and Major Planned Action #2	**Key Factor Type**: [_] Contributing [_] Restricting **Key Factor Description**: **Major Planned Action Description**:
Key Factor and Major Planned Action #3	**Key Factor Type**: [_] Contributing [_] Restricting **Key Factor Description**: **Major Planned Action Description**:
Comments	

2. Focus Area: Depression Remission at 12 Months	
Performance Measure	Percentage of patients aged 12 years and older with major depression or dysthymia who reached remission 12 months (+/- 60 days) after an index event.
Target Goal Description	
Numerator Description	Patients who achieved remission at 12 months as demonstrated by a 12-month (+/- 60 days) PHQ-9 or PHQ-9M score of less than 5.

2. Focus Area: Depression Remission at 12 Months	

Denominator Description	Patients aged 12 years and older at the start of the measurement period with a diagnosis of major depression or dysthymia and an initial PHQ-9 or PHQ-9 modified for teens (PHQ-M) score greater than 9 during the index event between 11/01/2023 through 10/31/2024 and had at least one eligible countable visit during the measurement period.
	
	Note: Patients may be screened using PHQ-9 and PHQ-9M on the same date or up to 7 days prior to the visit (index event).
	
	Exclusions:
	
	• Patients with a diagnosis of bipolar disorder, personality disorder emotionally labile, schizophrenia, psychotic disorder, or pervasive developmental disorder.
	• Patients:
	    o Who died.
	    o Who received hospice or palliative care services.

Baseline Data	**Baseline Year:** **Measure Type**: **Numerator**: **Denominator**: **Calculated Baseline**:
Numeric Progress To Date	*Provide recent data to demonstrate ongoing progress toward goal.*
Narrative Progress Since August 1, 2025	*Provide narrative to explain recent data provided in the row above.*
Data Source & Methodology	**Data Source**: [_] EHR [_] Chart Audit [_] Other (If Other, please specify): _____ **Data Methodology Description**:
Key Factor and Major Planned Action #1	**Key Factor Type**: [_] Contributing [_] Restricting **Key Factor Description**: **Major Planned Action Description**:

2. Focus Area: Depression Remission at 12 Months	
Key Factor and Major Planned Action #2	**Key Factor Type**: [_] Contributing [_] Restricting **Key Factor Description**: **Major Planned Action Description**:
Key Factor and Major Planned Action #3	**Key Factor Type**: [_] Contributing [_] Restricting **Key Factor Description**: **Major Planned Action Description**:
Comments	

3. Focus Area: Low Birth Weight	
Performance Measure	Percentage of babies of health center prenatal care patients born whose birth weight was below normal (less than 2,500 grams).
Target Goal Description	
Numerator Description	Babies born with a birth weight below normal (under 2,500 grams).
Denominator Description	Babies born during measurement period to prenatal care patients. Exclusions: • Still-births or miscarriages
Baseline Data	**Baseline Year:** **Measure Type**: **Numerator**: **Denominator**: **Calculated Baseline**:
Numeric Progress To Date	*Provide recent data to demonstrate ongoing progress toward goal.*
Narrative Progress Since August 1, 2025	*Provide narrative to explain recent data provided in the row above.*

3. Focus Area: Low Birth Weight	
Data Source & Methodology	**Data Source**: [_] EHR [_] Chart Audit [_] Other (If Other, please specify): _____ **Data Methodology Description**:
Key Factor and Major Planned Action #1	**Key Factor Type**: [_] Contributing [_] Restricting **Key Factor Description**: **Major Planned Action Description**:
Key Factor and Major Planned Action #2	**Key Factor Type**: [_] Contributing [_] Restricting **Key Factor Description**: **Major Planned Action Description**:
Key Factor and Major Planned Action #3	**Key Factor Type**: [_] Contributing [_] Restricting **Key Factor Description**: **Major Planned Action Description**:
Comments	

4. Focus Area: Cervical Cancer Screening	
Performance Measure	Percentage of women 21*–64 years of age who were screened for cervical cancer using either of the following criteria: • Women age 21*–64 who had cervical cytology performed within the last 3 years. • Women age 30–64 who had human papillomavirus (HPV) testing performed within the last 5 years. Note: *Use 24 (as of December 31), as the initial age to include in assessment.
Target Goal Description	

4. Focus Area: Cervical Cancer Screening	
Numerator Description	Women with one or more screenings for cervical cancer. Appropriate screenings are defined by any one of the following criteria: • Cervical cytology performed during the measurement period or the 2 years prior to the measurement period for women who are at least 21 years old at the time of the test. • Cervical HPV testing performed during the measurement period or the 4 years prior to the measurement period for women who are 30 years or older at the time of the test.
Denominator Description	Women 24 through 64 years of age by the end of the measurement period with an eligible countable visit during the measurement period. Exclusions: • Women who had a hysterectomy with no residual cervix or a congenital absence of cervix. • Patients who were in hospice care during the measurement period. • Patients who received palliative care for any part of the measurement period.
Baseline Data	**Baseline Year**: **Measure Type**: **Numerator**: **Denominator**: **Calculated Baseline**:
Numeric Progress To Date	*Provide recent data to demonstrate ongoing progress toward goal.*
Narrative Progress Since August 1, 2025	*Provide narrative to explain recent data provided in the row above.*
Data Source & Methodology	**Data Source**: [_] EHR [_] Chart Audit [_] Other (If Other, please specify): _____ **Data Methodology Description**:
Key Factor and Major Planned Action #1	**Key Factor Type**: [_] Contributing [_] Restricting **Key Factor Description**: **Major Planned Action Description**:

4. Focus Area: Cervical Cancer Screening	
Key Factor and Major Planned Action #2	**Key Factor Type**: [_] Contributing [_] Restricting **Key Factor Description**: **Major Planned Action Description**:
Key Factor and Major Planned Action #3	**Key Factor Type**: [_] Contributing [_] Restricting **Key Factor Description**: **Major Planned Action Description**:
Comments	

5. Focus Area: Tobacco Use Screening and Cessation Intervention	
Performance Measure	Percentage of patients aged 12 years and older who were screened for tobacco use one or more times during the measurement period and who received tobacco cessation intervention during the measurement period or in the 6 months prior to the measurement period if identified as a tobacco user.
Target Goal Description	
Numerator Description	• Patients who were screened for tobacco use at least once during the measurement period and NOT identified as a tobacco user, **and** • Patients who were screened for tobacco use at least once during the measurement period and if identified as a tobacco user, received tobacco cessation intervention during the measurement period or during the 6 months prior to the measurement period. Note: Include in the numerator patients with a negative screening **and** those with a positive screening who had cessation intervention if a tobacco user.
Denominator Description	Patients aged 12 years and older at the start of the measurement period seen for at least two qualifying encounters in the measurement period or at least one preventive care qualifying encounter during the measurement period, as specified in the measure criteria Include patients with birthdate on or before January 1, 2013. Exclusions: • Patients who were in hospice care for any part of the measurement period
Baseline Data	**Baseline Year**: **Measure Type**: **Numerator**: **Denominator**: **Calculated Baseline**:
Numeric Progress To Date	*Provide recent data to demonstrate ongoing progress toward goal.*
Narrative Progress Since August 1, 2025	*Provide narrative to explain recent data provided in the row above.*

5. Focus Area: Tobacco Use Screening and Cessation Intervention	
Data Source & Methodology	**Data Source**: [_] EHR [_] Chart Audit [_] Other (If Other, please specify): _____ **Data Methodology Description**:
Key Factor and Major Planned Action #1	**Key Factor Type**: [_] Contributing [_] Restricting **Key Factor Description**: **Major Planned Action Description**:
Key Factor and Major Planned Action #2	**Key Factor Type**: [_] Contributing [_] Restricting **Key Factor Description**: **Major Planned Action Description**:
Key Factor and Major Planned Action #3	**Key Factor Type**: [_] Contributing [_] Restricting **Key Factor Description**: **Major Planned Action Description**:
Comments	

6. Focus Area: Statin Therapy for the Prevention and Treatment of Cardiovascular Disease	
Performance Measure	Percentage of the following patients – all considered at high risk of cardiovascular events-- who were prescribed or were on statin therapy during the measurement period: • All patients who have an active diagnosis of clinical atherosclerotic cardiovascular disease (ASCVD) or have ever had an ASCVD procedure, or • Patients 20 years of age or older who have ever had a low-density lipoprotein cholesterol (LDL-C) laboratory result level greater than or equal to 190 mg/dL or were previously diagnosed with or currently have an active diagnosis of familial hypercholesterolemia, or • Patients 40 through 75 years of age with a diagnosis of diabetes, or • Patients 40 through 75 years of age with a 10-year ASCVD risk score greater than or equal to 20 percent
Target Goal Description	
Numerator Description	Patients who are actively using or who received an order (prescription) for statin therapy at any point during the measurement period.

6. Focus Area: Statin Therapy for the Prevention and Treatment of Cardiovascular Disease	
Denominator Description	• All patients who have an active diagnosis of ASCVD or have ever had an ASCVD procedure, or • Patients 20 years of age and older at the start of the measurement period who: ○ Ever had a laboratory result of LDL-C greater than or equal to 190 mg/dL, or ○ Were previously diagnosed with or currently have an active diagnosis of familial hypercholesterolemia, or • Patients 40 through 75 years of age at the start of the measurement period with type 1 or type 2 diabetes with an eligible countable visit during the measurement period. Include patients: ○ of any age for the ASCVD determination. ○ patients with birthdate on or before January 1, 2005 for LDL-C or familial hypercholesterolemia determination; and ○ patients with birthdate on or after January 2, 1949, and birthdate on or before January 1, 1985 for diabetes determination; and ○ with birthdate on or after January 2, 1949, and birthdate on or before January 1, 1985 for high 10-year ASCVD risk score. Exclusions: • Patients who are breastfeeding at any time during the measurement period. • Patients who have a diagnosis of rhabdomyolysis at any time during the measurement period. Exceptions: • Patients with statin-associated muscle symptoms or an allergy to statin medication. • Patients who are receiving palliative or hospice care. • Patients with active liver disease or hepatic disease or insufficiency. • Patients with end-stage renal disease (ESRD). • Patients with documentation of a medical reason for not being prescribed statin therapy.
Baseline Data	**Baseline Year**: **Measure Type**: **Numerator**: **Denominator**: **Calculated Baseline**:

6. Focus Area: Statin Therapy for the Prevention and Treatment of Cardiovascular Disease	
Numeric Progress To Date	*Provide recent data to demonstrate ongoing progress toward goal.*
Narrative Progress Since August 1, 2025	*Provide narrative to explain recent data provided in the row above.*
Data Source & Methodology	**Data Source**: [_] EHR [_] Chart Audit [_] Other (If Other, please specify): _____ **Data Methodology Description**:
Key Factor and Major Planned Action #1	**Key Factor Type**: [_] Contributing [_] Restricting **Key Factor Description**: **Major Planned Action Description**:
Key Factor and Major Planned Action #2	**Key Factor Type**: [_] Contributing [_] Restricting **Key Factor Description**: **Major Planned Action Description**:
Key Factor and Major Planned Action #3	**Key Factor Type**: [_] Contributing [_] Restricting **Key Factor Description**: **Major Planned Action Description**:
Comments	

7. Focus Area: Ischemic Vascular Disease (IVD) and Use of Aspirin or Another Antiplatelet	
Performance Measure	Percentage of patients 18 years of age and older who were diagnosed with acute myocardial infarction (AMI), or who had a coronary artery bypass graft (CABG) or percutaneous coronary interventions (PCIs) in the 12 months prior to the measurement period, or who had an active diagnosis of IVD during the measurement period and had documented use of aspirin or another antiplatelet during the measurement period.
Target Goal Description	
Numerator Description	Patients who had an active medication of aspirin or another antiplatelet during the measurement period.
Denominator Description	Patients 18 years of age and older with a qualifying encounter during the measurement period who had an AMI, CABG, or PCI during the 12 months prior to the measurement period or who had a diagnosis of IVD overlapping the measurement period, as specified in the measure criteria. o Include patients with birthdate on or before January 1, 2007. Exclusions: • Patients who had documentation of use of anticoagulant medications overlapping the measurement period. • Patients who were in hospice care during the measurement period.
Baseline Data	**Baseline Year**: **Measure Type**: **Numerator**: **Denominator**: **Calculated Baseline**:
Numeric Progress To Date	*Provide recent data to demonstrate ongoing progress toward goal.*
Narrative Progress Since August 1, 2025	*Provide narrative to explain recent data provided in the row above.*

7. Focus Area: Ischemic Vascular Disease (IVD) and Use of Aspirin or Another Antiplatelet	
Data Source & Methodology	**Data Source**: [_] EHR [_] Chart Audit [_] Other (If Other, please specify): _____ **Data Methodology Description**:
Key Factor and Major Planned Action #1	**Key Factor Type**: [_] Contributing [_] Restricting **Key Factor Description**: **Major Planned Action Description**:
Key Factor and Major Planned Action #2	**Key Factor Type**: [_] Contributing [_] Restricting **Key Factor Description**: **Major Planned Action Description**:
Key Factor and Major Planned Action #3	**Key Factor Type**: [_] Contributing [_] Restricting **Key Factor Description**: **Major Planned Action Description**:
Comments	

8. Focus Area: Colorectal Cancer Screening	
Performance Measure	Percentage of adults 45*–75 years of age who had appropriate screening for colorectal cancer. *Use 46 on or after December 31 as the initial age to include in the assessment.
Target Goal Description	

8. Focus Area: Colorectal Cancer Screening	
Numerator Description	Patients with one or more screenings for colorectal cancer. Appropriate screenings are defined by any one of the following criteria: • Fecal occult blood test (FOBT) during the measurement period. • Fecal immunochemical test (FIT)-deoxyribonucleic acid (DNA) during the measurement period or the 2 years prior to the measurement period. • Flexible sigmoidoscopy during the measurement period or the 4 years prior to the measurement period. • Computerized tomography (CT) colonography during the measurement period or the 4 years prior to the measurement period. • Colonoscopy during the measurement period or the 9 years prior to the measurement period.

Denominator Description	Patients 46 through 75 years of age by the end of the measurement period with an eligible countable visit during the measurement period.
	
	Include patients with birthdate on or after January 1, 1948, and birthdate on or before December 31, 1977.
	
	Exclusions:
	• Patients with a diagnosis of colorectal cancer or a past history of total colectomy.
	• Patients who were receiving palliative or hospice care during the measurement period.
	• Patients aged 66 or older who were living long-term in an institution for more than 90 consecutive days during the measurement period.
	• Patients aged 66 and older by the end of the measurement period with an indication of frailty for any part of the measurement period who also meet any of the following advanced illness criteria:
	   ○ advanced illness with one inpatient visit or two outpatient visits during the measurement period or the year prior; or
	   ○ taking dementia medications during the measurement period or the year prior.

Baseline Data	**Baseline Year**: **Measure Type**: **Numerator**: **Denominator**: **Calculated Baseline**:
Numeric Progress To Date	*Provide recent data to demonstrate ongoing progress toward goal.*

8. Focus Area: Colorectal Cancer Screening	
Narrative Progress Since August 1, 2025	*Provide narrative to explain recent data provided in the row above.*
Data Source & Methodology	**Data Source**: [_] EHR [_] Chart Audit [_] Other (If Other, please specify): _____ **Data Methodology Description**:
Key Factor and Major Planned Action #1	**Key Factor Type**: [_] Contributing [_] Restricting **Key Factor Description**: **Major Planned Action Description**:
Key Factor and Major Planned Action #2	**Key Factor Type**: [_] Contributing [_] Restricting **Key Factor Description**: **Major Planned Action Description:**
Key Factor and Major Planned Action #3	**Key Factor Type**: [_] Contributing [_] Restricting **Key Factor Description**: **Major Planned Action Description**:
Comments	

9. Focus Area: Breast Cancer Screening	
Performance Measure	Percentage of women 50*–74 years of age who had a mammogram to screen for breast cancer in the 27 months prior to the end of the measurement period. Note: *Use 52 on or after December 31 as the initial age to include in assessment. See Specification Guidance for further details.
Target Goal Description	

9. Focus Area: Breast Cancer Screening	
Numerator Description	Women with one or more mammograms any time on or between October 1 two years prior to the measurement period and the end of the measurement period.
Denominator Description	Women 52 through 74 years of age by the end of the measurement period with a qualifying encounter during the measurement period, as specified in the measure criteria. Denominator Exclusions • Women who had a bilateral mastectomy or who have a history of a bilateral mastectomy or for whom there is evidence of a right and a left unilateral mastectomy on or before the end of the measurement period. • Patients who were in hospice care during the measurement period. • Patients aged 66 or older by the end of the measurement period who were living long-term in a nursing home any time on or before the end of the measurement period. • Patients aged 66 and older by the end of the measurement period with an indication of frailty for any part of the measurement period who also meet any of the following advanced illness criteria: advanced illness diagnosis during the measurement period or the year prior; or taking dementia medications during the measurement period or the year prior. • Patients who received palliative care during the measurement period.
Baseline Data	**Baseline Year**: **Measure Type**: **Numerator**: **Denominator**: **Calculated Baseline**:
Numeric Progress To Date	*Provide recent data to demonstrate ongoing progress toward goal.*
Narrative Progress Since August 1, 2025	*Provide narrative to explain recent data provided in the row above.*
Data Source & Methodology	**Data Source**: [_] EHR [_] Chart Audit [_] Other (If Other, please specify): _____ **Data Methodology Description**:

9. Focus Area: Breast Cancer Screening	
Key Factor and Major Planned Action #1	**Key Factor Type**: [_] Contributing [_] Restricting **Key Factor Description**: **Major Planned Action Description**:
Key Factor and Major Planned Action #2	**Key Factor Type**: [_] Contributing [_] Restricting **Key Factor Description**: **Major Planned Action Description**:
Key Factor and Major Planned Action #3	**Key Factor Type**: [_] Contributing [_] Restricting **Key Factor Description**: **Major Planned Action Description**:
Comments	

10. Focus Area: HIV Screening	
Performance Measure	Percentage of patients aged 15–65 at the start of the measurement period who were between 15–65 years old when tested for HIV.
Target Goal Description	
Numerator Description	Patients with documentation of an HIV test performed on or after their 15th birthday and before their 66th birthday.
Denominator Description	Patients aged 15 through 65 years of age at the start of the measurement period and with at least one outpatient eligible countable visit during the measurement period. Include patients with birthdate on or after January 2, 1959, and birthdate on or before January 1, 2010. Exclusions: • Patients diagnosed with HIV prior to the start of the measurement period

10. Focus Area: HIV Screening	
Baseline Data	**Baseline Year**: **Measure Type**: **Numerator**: **Denominator**: **Calculated Baseline**:
Numeric Progress To Date	*Provide recent data to demonstrate ongoing progress toward goal.*
Narrative Progress Since August 1, 2025	*Provide narrative to explain recent data provided in the row above.*
Data Source & Methodology	**Data Source**: [_] EHR [_] Chart Audit [_] Other (If Other, please specify): _____ **Data Methodology Description**:
Key Factor and Major Planned Action #1	**Key Factor Type**: [_] Contributing [_] Restricting **Key Factor Description**: **Major Planned Action Description**:
Key Factor and Major Planned Action #2	**Key Factor Type**: [_] Contributing [_] Restricting **Key Factor Description**: **Major Planned Action Description**:
Key Factor and Major Planned Action #3	**Key Factor Type**: [_] Contributing [_] Restricting **Key Factor Description**: **Major Planned Action Description**:
Comments	

11. Focus Area: HIV Linkage to Care	
Performance Measure	Percentage of patients newly diagnosed with HIV who were seen for follow-up treatment within 30 days of diagnosis.
Target Goal Description	
Numerator Description	Newly diagnosed HIV patients that received treatment within 30 days of diagnosis. Include patients who were newly diagnosed by your health center providers and: • Had a medical visit with your health center provider who initiates treatment for HIV, or • Had a visit with a referral resource who initiates treatment for HIV.
Denominator Description	Patients first diagnosed with HIV by the health center between December 1 of the prior year through November 30 of the current measurement period and who had at least one qualifying encounter during the measurement period, as specified in the measure criteria. Include patients who were diagnosed with HIV for the first time ever by the health center between December 1, 2024, and November 30, 2025, and had at least one medical visit during the measurement period.
Baseline Data	**Baseline Year**: **Measure Type**: **Numerator**: **Denominator**: **Calculated Baseline**:
Numeric Progress To Date	*Provide recent data to demonstrate ongoing progress toward goal.*
Narrative Progress Since August 1, 2025	*Provide narrative to explain recent data provided in the row above.*
Data Source & Methodology	**Data Source**: [_] EHR [_] Chart Audit [_] Other (If Other, please specify): _____ **Data Methodology Description**:

11. Focus Area: HIV Linkage to Care	
Key Factor and Major Planned Action #1	**Key Factor Type**: [_] Contributing [_] Restricting **Key Factor Description**: **Major Planned Action Description**:
Key Factor and Major Planned Action #2	**Key Factor Type**: [_] Contributing [_] Restricting **Key Factor Description**: **Major Planned Action Description**:
Key Factor and Major Planned Action #3	**Key Factor Type**: [_] Contributing [_] Restricting **Key Factor Description**: **Major Planned Action Description**:
Comments	

12. Focus Area: Dental Sealants for Children between 6-9 Years	
Performance Measure	Percentage of children, age 6–9 years, at moderate to high risk for caries who received a sealant on a first permanent molar during the measurement period.
Target Goal Description	
Numerator Description	Children who received a sealant on a permanent first molar tooth during the measurement period.

12. Focus Area: Dental Sealants for Children between 6-9 Years	
Denominator Description	Children 6 through 9 years of age with an eligible oral assessment or comprehensive or periodic oral evaluation qualifying encounter who are at moderate to high risk for caries in the measurement period, as specified in the measurement criteria. o Include children with birthdate on or after January 2, 2015, and birthdate on or before January 1, 2019. Exclusions: • Not applicable. Exceptions: • Children for whom all first permanent molars are non-sealable (i.e., molars are either decayed, filled, currently sealed, or un-erupted/missing)
Baseline Data	**Baseline Year**: **Measure Type**: **Numerator**: **Denominator**: **Calculated Baseline**:
Numeric Progress To Date	*Provide recent data to demonstrate ongoing progress toward goal.*
Narrative Progress Since August 1, 2025	*Provide narrative to explain recent data provided in the row above.*
Data Source & Methodology	**Data Source**: [_] EHR [_] Chart Audit [_] Other (If Other, please specify): _____ **Data Methodology Description**:
Key Factor and Major Planned Action #1	**Key Factor Type**: [_] Contributing [_] Restricting **Key Factor Description**: **Major Planned Action Description**:

12. Focus Area: Dental Sealants for Children between 6-9 Years	
Key Factor and Major Planned Action #2	**Key Factor Type**: [_] Contributing [_] Restricting **Key Factor Description**: **Major Planned Action Description**:
Key Factor and Major Planned Action #3	**Key Factor Type**: [_] Contributing [_] Restricting **Key Factor Description**: **Major Planned Action Description**:
Comments	

13. Focus Area: Traditional Healing	
Performance Measure	Health System determines the performance measure.
Target Goal Description	Health System determines the information/data provided.
Numerator Description	Health System determines the information/data provided.
Denominator Description	Health System determines the information/data provide.
Baseline Data	**Baseline Year**: **Measure Type**: **Numerator**: **Denominator**: **Calculated Baseline**:
Numeric Progress To Date	*Provide recent data to demonstrate ongoing progress toward goal.*

13. Focus Area: Traditional Healing	
Narrative Progress Since August 1, 2025	*Provide narrative to explain recent data provided in the row above.*
Data Source & Methodology	**Data Source**: [_] EHR [_] Chart Audit [_] Other (If Other, please specify): _____ **Data Methodology Description**:
Key Factor and Major Planned Action #1	**Key Factor Type**: [_] Contributing [_] Restricting **Key Factor Description**: **Major Planned Action Description**:
Key Factor and Major Planned Action #2	**Key Factor Type**: [_] Contributing [_] Restricting **Key Factor Description**: **Major Planned Action Description**:
Key Factor and Major Planned Action #3	**Key Factor Type**: [_] Contributing [_] Restricting **Key Factor Description**: **Major Planned Action Description**:
Comments	