

**FY25 Native Hawaiian Health Care Improvement Act**

**Non-Competing Continuation (NCC) Progress Report**

# Native Hawaiian Health Care System (NHHCS)Required Clinical Performance MeasuresSample Progress Report

You must track progress over the 3-year period of performance. Starting with the Required Clinical Performance Measures Forms submitted with the FY 24 application, add two new rows (as seen in red in the table below) to provide numeric data to date and a narrative explanation of progress toward the goal. Do not edit any information previously included in the FY 24 forms.

OMB No.: 0915-0285. Expiration Date: 4/30/2026

## 1. Focus Area: Diabetes Hemoglobin A1c (HbA1c) Poor Control (> 9 percent)

| **1. Focus Area: Diabetes Hemoglobin A1c (HbA1c) Poor Control** **(> 9 percent)**  |  |
| --- | --- |
| Performance Measure  | Percentage of patients 18–75 years of age with diabetes who had hemoglobin A1c (HbA1c) greater than 9.0 percent during the measurement period. |
| Target Goal Description  |  |
| Numerator Description  | Patients whose most recent HbA1c level performed during the measurement period was greater than 9.0 percent, or patients who had no HbA1c test conducted during the measurement period, or patients for whom information on HbA1c is missing. |
| Denominator Description | Patients 18 through 74 years of age by the end of the measurement period with diabetes with an eligible countable visit during the measurement period. Exclusions:* Patients who were in hospice care during the measurement period
* Patients aged 66 or older 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 with advanced illness and frailty.
* Patients who received palliative care for any part of the measurement period.
 |
| Baseline Data  | **Baseline Year**: **Measure Type**: **Numerator**: **Denominator**: **Calculated Baseline**:  |
| **Numeric Progress Since August 1, 2024** | ***Provide recent data to demonstrate ongoing progress toward goal.*** |
| **Narrative Progress Since August 1, 2024** | ***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 |  |

## 2. Focus Area: Controlling High Blood Pressure

| **2. Focus Area: Controlling High Blood Pressure**  |  |
| --- | --- |
| Performance Measure  | Percentage of patients 18–85 years of age who had a diagnosis of essential hypertension overlapping the measurement period or the year prior and whose most recent blood pressure (BP) was adequately controlled (less than 140/90 mmHg) during the measurement period. |
| Target Goal Description  |  |
| Numerator Description  | Patients whose most recent blood pressure is adequately controlled (systolic blood pressure less than 140 mmHg and diastolic blood pressure less than 90 mmHg) during the measurement period. |
| Denominator Description  | Patients 18 through 84 years of age who had a diagnosis of essential hypertension overlapping the measurement period or the year prior to the measurement period with a countable visit during the measurement period.Exclusions:* Patients with evidence of ESRD, dialysis, or renal transplant before or during the measurement period.
* Patients with a diagnosis of pregnancy during the measurement period
* Patients who were in hospice care for any part of the measurement period.
* Patients aged 66 or older who were living long-term in a nursing home any time on or before the end of the measurement period.
* Patients aged 66–80 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 or taking dementia medications during the measurement period or the year prior.
* Patients aged 81 or older by the end of the measurement period with an indication of frailty for any part of 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 Since August 1, 2024** | ***Provide recent data to demonstrate ongoing progress toward goal.*** |
| **Narrative Progress Since August 1, 2024** | ***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 |  |

## 3. Focus Area: Early Entry Into Prenatal Care

| **3. Focus Area: Early Entry Into Prenatal Care** |  |
| --- | --- |
| Performance Measure  | Percentage of prenatal care patients who entered prenatal care during their first trimester. |
| Target Goal Description  |  |
| Numerator Description  | Patients who began prenatal care at the health center or with a referral provider or who began care with another prenatal provider, during their first trimester. |
| Denominator Description  | Patients seen for prenatal care during the year. |
| Baseline Data  | **Baseline Year**: **Measure Type**: **Numerator**: **Denominator**: **Calculated Baseline**:  |
| **Numeric Progress Since August 1, 2024** | *Provide recent data to demonstrate ongoing progress toward goal.* |
| **Narrative Progress Since August 1, 2024** | *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 |  |

## 4. Focus Area: Childhood Immunization Status

| **4. Focus Area: Childhood Immunization** **Status**  |  |
| --- | --- |
| Performance Measure  | Percentage of children 2 years of age who had four diphtheria, tetanus and acellular pertussis (DTaP); three polio (IPV), one measles, mumps and rubella (MMR); three or four H influenza type B (HiB); three Hepatitis B (Hep B); one chicken pox (VZV); four pneumococcal conjugate (PCV); one Hepatitis A (Hep A); two or three rotavirus (RV); and two influenza (flu) vaccines by their second birthday. |
| Target Goal Description  |  |
| Numerator Description  | Children who have evidence showing they received recommended vaccines, had documented history of the illness, had a seropositive test result, or had an allergic reaction to the vaccine by their second birthday. |
| Denominator Description  | Children who turn 2 years of age during the measurement period and who had a eligible countable visit during the measurement period.Exclusions:* Children with any of the following on or before their second birthday:
	+ Severe combined immunodeficiency
	+ Immunodeficiency
	+ HIV
	+ Lymphoreticular cancer, multiple myeloma, or leukemia
	+ Intussusception
* Children who were in hospice care during the measurement period
 |
| Baseline Data  | **Baseline Year**: **Measure Type**: **Numerator**: **Denominator**: **Calculated Baseline**:  |
| **Numeric Progress Since August 1, 2024** | *Provide recent data to demonstrate ongoing progress toward goal.* |
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| Key Factor and Major Planned Action #3  | **Key Factor Type**: [\_] Contributing [\_] Restricting **Key Factor Description**: **Major Planned Action Description**:  |
| Comments  |  |

## 5. Focus Area: Weight Assessment and Counseling for Nutrition and Physical Activity for Children and Adolescents

| **5. Focus Area: Weight Assessment and Counseling for Nutrition and Physical Activity for Children and Adolescents**  |  |
| --- | --- |
| Performance Measure  | Percentage of patients 3–17 years of age who had an outpatient medical visit and who had evidence of height, weight, and body mass index (BMI) percentile documentation and who had documentation of counseling for nutrition and who had documentation of counseling for physical activity during the measurement period. |
| Target Goal Description  |  |
| Numerator Description  | Children and adolescents who have had:* Their height, weight, and BMI percentile recorded during the measurement period, and
* Counseling for nutrition during the measurement period, and
* Counseling for physical activity during the measurement period.
 |
| Denominator Description  | Patients 3 through 17 years of age with at least one outpatient medical visit during the measurement period.Exclusions:* Patients who have a diagnosis of pregnancy during 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 Since August 1, 2024** | *Provide recent data to demonstrate ongoing progress toward goal.* |
| **Narrative Progress Since August 1, 2024** | *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**:  |
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| 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: Body Mass Index (BMI) Screening and Follow-Up Plan

| **6. Focus Area: Body Mass Index (BMI) Screening and Follow-Up Plan**  |  |
| --- | --- |
| Performance Measure  | Percentage of patients aged 18 years and older with BMI documented during the most recent visit or during the measurement period and who had a follow-up plan documented if the most recent BMI was outside of normal parameters. Normal Parameters: Age 18 years and older with a BMI greater than or equal to 18.5 and less than 25 kg/m2. |
| Target Goal Description  |  |
| Numerator Description  | * Patients with a documented BMI during the most recent visit or during the measurement period, and BMI is within normal parameters, AND
* Patients with a documented BMI during the most recent visit or during the measurement period, and when the BMI is outside of normal parameters, a follow-up plan is documented during the most recent visit or during the measurement period.
 |
| Denominator Description  | Patients 18 years of age or older on the date of their last visit with at least one medical visit during the measurement period.Exclusions:* Patients who are pregnant during the measurement period.
* Patients receiving palliative or hospice care at any time during the measurement period.

Exceptions:* Patients who refuse measurement of height and/or weight.
* Patients with a documented medical reason for not documenting BMI or for not documenting a follow up plan for BMI outside the normal parameters.
 |
| Baseline Data  | **Baseline Year**:**Measure Type**: **Numerator**: **Denominator**: **Calculated Baseline**:  |
| **Numeric Progress Since August 1, 2024** | *Provide recent data to demonstrate ongoing progress toward goal.* |
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| Key Factor and Major Planned Action #3  | **Key Factor Type**: [\_] Contributing [\_] Restricting **Key Factor Description**: **Major Planned Action Description**:  |
| Comments |  |

## 7. Focus Area: Prevention and Control of Otitis Media

| **7. Focus Area: Prevention and Control of Otitis Media** |  |
| --- | --- |
| Performance Measure  | Number of patients under age 18 years with diagnosis of otitis media during the measurement period. |
| Target Goal Description  |  |
| Numerator Description  | Number of visits by patients under age 18 years with diagnosis of otitis media (any mention of ICD-9-CM codes 3810-3814, 382) during the measurement period.  |
| Denominator Description  | Number of visits by patients under age 18 years who received medical care during the measurement period.  |
| Baseline Data  | **Baseline Year**: **Measure Type**: **Numerator**: **Denominator**: **Calculated Baseline**:  |
| **Numeric Progress Since August 1, 2024** | *Provide recent data to demonstrate ongoing progress toward goal.* |
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| Key Factor and Major Planned Action #3  | **Key Factor Type**: [\_] Contributing [\_] Restricting**Key Factor Description**: **Major Planned Action Description**:  |
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Public Burden Statement: The OMB control number for this information collection is 0915-0285 and it is valid until 4/30/2026. Public reporting burden for this collection of information is estimated to average 1 hour per response, including the time for reviewing instructions, searching existing data sources, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to HRSA Reports Clearance Officer, 5600 Fishers Lane, Room 14N136B, Rockville, Maryland, 20857 or paperwork@hrsa.gov.