**Issues for the RCHC Data Standards and Integrity Council**

**May 2, 2022 Meeting**

Version 1, By Ben Fouts MPH, RCHC Data Analyst

1. **2022 UDS Measures**

Reports: Relevant UDS Report Screens and Associated Quality Measures

Issue: Identify changes to the 2022 instructions

Description: After a first pass over the instruction manual and PAL (2021-05), the following changes were identified:

1. New. Table 6A, Line 4d: Post COVID-19 condition, unspecified (ICD-10-CM, U09.9)
2. Change in denominator. Table 6B, Section H: Statin Therapy for the Prevention and Treatment of Cardiovascular Disease. ASCVD diagnosis for any age group (previously, it was 21 years and over); high LDL or hypercholesterolemia diagnosis for patients 20 years and over (previously, it was 21 years and over). Verified with the eCQM (CMS347v5).
3. Change in denominator and exclusion. Table 7, Columns 2a-2c: Controlling High Blood Pressure. Diagnosis of essential hypertension starting before and continuing into, or starting during the first 6 months of the measurement period (previously, a diagnosis of essential hypertension overlapping the measurement period or the year prior to the measurement period). Also, exclusion for palliative care during the measurement period added. Verified with the eCQM (CMS165v10).
4. Change in exclusion. Table 7, Columns 3a-3f: Hemoglobin A1c (HbA1c) Poor Control. Exclusion for palliative care during the measurement period added. Verified with the eCQM (CMS122v10).

It is unlikely that any RCHC heath center is sampling charts to report on the UDS quality measures, especially when we have access to Relevant. Just note that sampling is being phased out in 2022.

A data question has been added to the Health Center Health Information Technology (HIT) Capabilities Form in the appendix. Health centers will be asked to provide the total number of patients that were screened for social risk factors during the calendar year.

11a. How many health center patients were screened for social risk factors using a standardized screener during the calendar year?

This data is used in conjunction with data from Question 12a (which existed last year). This question reads: Of the total patients screened for social risk factors (Question 11a), please provide the total number of patients that screened positive for any of the following at any point during the calendar year.

1. Food insecurity
2. Housing insecurity
3. Financial strain
4. Lack of transportation/access to public transportation

In Relevant, this data should come from the PRAPARE reports developed by RCHC.

Additional Information: The 2022 Manual can be found at https://bphc.hrsa.gov/data-reporting/uds-training-and-technical-assistance. The 2022 UDS Changes Webinar will be held on May 11, 2022 at 10:00am Pacific Time. On the same website, click on “2022 UDS Changes Technical Assistance Webinar” to register.

1. **National Association of Community Health Centers (NACHC) Women’s Health Data Project**

Reports: New Relevant Reports and Quality Measures to be Developed

Issue: This is just an update. Specific data standardization issues may be brought up in a future DSIC meeting depending on the quality measure definitions.

Description: Santa Rosa, Petaluma and CommuniCare are participating in the portion of the project that involves a data submission. However, new Relevant Quality Measures are also being planned, which can be used by any health center that collects the appropriate data.

Right now, only the Data Dictionary for the data submission exists. RCHC will be developing the reports that will be used by the three health centers for data submission. We do not yet have an official list of measures, but they appear to be measures regarding depression screening and postpartum contraceptive use among patients who gave birth in a measurement period.

Additional Information: The Data Dictionary for this project uses codes (CPT, ICD, etc.) to identify services given to the patient. However, there may need to be some proposals brought to the DSIC in the future that would impact the actual measures.

To prepare for such a conversation, all health centers should look at their structured data (HPI, Social History, Preventive Medicine and prenatal forms) so see if there are questions on contraception already being used. These can be questions regarding sexual activity and use or intended use of contraceptives, or even fields where contraceptive counseling is entered.

One standard question mentioned in the Data Dictionary is the Self-Identified Need for Contraception (SINC). Check to see if this question exists (or something similar):

*Do you want to talk about contraception or pregnancy prevention during your visit today?*

* + Yes - Wish to discuss contraception
	+ No - I do not want to talk about contraception today because I am here for something else
	+ No - This question does not apply to me/I prefer not to answer
	+ No - I am unsure or don't want to use contraception
	+ No - I am hoping to become pregnant in the near future
	+ No - I am already using contraception

The Data Dictionary also mentions certain depression and anxiety screenings that may or may not be used at our health centers. It is recommended that health centers look to see if they are using any of these tools so that we can discuss them in the future:

* + Edinburgh Postnatal Depression Scale (EPDS)
	+ Beck Depression Inventory (BDI)
	+ Postpartum Depression Screening Scale (PDSS)
	+ Postpartum specific anxiety scale (PSAS)
	+ Perinatal Anxiety Screening Scale (PASS)
	+ Depression Anxiety Stress Scales (DASS)
1. **2022 Partnership EDCS Measures**

Reports: New Relevant Reports and Quality Measures to be Developed

Issue: This is just an update

Description: In the Fall of 2022 and at the beginning of 2023, health centers will be asked to securely submit electronic files of Partnership HealthPlan of California (PHC) patients from their Electronic Health Records (EHR) so that Partnership HealthPlan of California (PHC) can evaluate a number of HEDIS clinical measures. These measures are:

1. Follow-Up Care for Children Prescribed ADHD Medication (ADD-E)
2. Breast Cancer Screening (BCS-E)
3. Unhealthy Alcohol Use Screening and Follow-Up (ASF-E)
4. Five depression measures (submitted as one file)

The Relevant reports will extract data on individual Partnership patients. Health Centers will run the reports and place the data into templates, they will then be uploaded to the Partnership website. A full schedule and details have yet to be finalized. The specifications, Value Sets and templates are being finalized over the next couple of months.

The reports and associated Transformers and Data Elements will be designed and validated in the Summer of 2022. Partnership will probably request an initial submission in the Fall of 2022 so they can test their own system of data integration. A final submission for 2022 will be due in January or February of 2023.

Additional Information: RCHC will keep health centers up-to-date with the progress of the report and Quality Measure development. More detail will be provided in the next DSIC meeting.