

# azara2025

USER CONFERENCE APR 29-MAY 1 | BOSTON, MA

## The Road to UDS+

Leveraging DRVS for Data Accuracy  
& Compliance

**Presented By**

**Michael T. Edwards**

Director of Training and Quality,  
MS Health Safe Net



# Speaker



**Michael Edwards**

Director of Training and  
Quality, MS Health Safe  
Net



**SPEAKER**



**MAPPING**



Incorporated in 2011, Mississippi Health Safe Net (MHSN) is a HRSA funded Health Center Controlled Network (HCCN), with the goal of assisting all community health centers in Mississippi to become patient-centered medical homes, achieving Meaningful Use and acting as the centralized health information technology resource for Mississippi's Federally Qualified Health Centers.



MHSN ensures data security and privacy of patient and Participating Health Centers (PHC) confidential and protected information, while implementing data-sharing strategies with its PHCs and the Community Health Center Association of Mississippi (CHCAMS). MHSN is managed via a Management Services Agreement with CHCAMS.





**MS Health Safe Net has a membership of 17 health centers soon to be 20 pending grant approval**



# HCCN ENGAGEMENT OVERVIEW



**Knowledge of KEY  
Health Center Staff  
is crucial to a  
successful project.**



**Facilitate Monthly  
Super User calls.**



**Health Center  
staff trainings.  
(new/existing staff)**



**Participate at  
health center staff  
meetings, calls  
and/or trainings.**



# Pathway to Progress

**Learn how to document clinical measures for UDS+ submissions accurately, understanding data accuracy's significance in reporting outcomes, thus enhancing UDS+ data quality.**

**Learn and apply data hygiene promising practices to ensure compliance with UDS+ requirements, fostering collaboration for continuous improvement.**

**Create action plans for ongoing UDS+ readiness, integrating session insights to transition smoothly and stay updated on evolving reporting needs.**

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# The Road to Readiness

Origins of  
MS Health Safe Net's  
Data Hygiene Initiative



## UDS+ 2024 Reporting Year: Submission Requirements



2024 UDS+ Submissions  
Due by **May 30, 2025**

1

Submit data for your **medical** patients

2

Submit **all** the demographic tables data

- **Table:** Patients by ZIP Code
- **Table 3A:** Patients by Age and by Sex
- **Table 3B:** Demographic Characteristics
  - Updates to align to Executive Orders
- **Table 4:** Selected Patient Characteristics

*(Managed Care Utilization lines are NOT required for UDS+ CY 2024 reporting)*

3

Submit **1 eCQM** from the measures listed below:

- **Table 6B:** Quality of Care Measures
  - Breast Cancer Screening
  - Cervical Cancer Screening
  - Colorectal Cancer Screening
- **Table 7:** Health Outcomes and Disparities
  - **Controlling High Blood Pressure\***
  - Diabetes: Hemoglobin A1c (HbA1c) Poor Control (>9.0%)

*\* Recommended measure*





# UDS+ Testing (Cohort 1 and 2)



# Initial Data Hygiene / UDS+ Information Session



**November 2, 2022  
@ 10 AM**

**Keeping Data Clean and  
Proper Data Hygiene**

PICKED ALL MY  
*weeds*  
BUT KEPT  
THE FLOWERS.  
BUT I KNOW IT'S  
NEVER REALLY OVER...  
*kelly clarkson*



November 2, 2022  
PCA QI WORKGROUP and MS HEALTH SAFE NET  
Michael T. Edwards – Director of Training and Quality



## Keeping Data Clean and Proper Data Hygiene

PICKED ALL THE WEEDS  
BUT KEPT THE FLOWERS.

KELLY CLARKSON





# Initial Data Hygiene / UDS+ Information Session

Participants were polled during the session the following questions:



What frequency  
does your health  
center perform  
validation audits on  
data?



Have you heard of  
UDS+ prior to today's  
session?



Have you read or  
have knowledge of  
the UDS PAL 2023?

## UDS 2023 Clinical Updates Roundtable

CHCAMS ANNEX BUILDING  
6508 Dogwood View Pkwy, Suite D  
Jackson, Mississippi 39213

**Thursday, July 13, 2023**

**9:30 AM – 2:00 PM**

*(Lunch will be provided)*

### AGENDA

9:30 am – 10 am ----- Sign-in/Arrival

10 am – 11 am ----- July 2023 UTC Monthly Meeting *(watch/listen to Zoom)*

*Super User Call updates if UTC call is not full hour.*

11 am – 12 pm -----UDS+ reporting documentation / TABLE 6A (2023 UDS updates).

12 pm – 12:30 pm ----- LUNCH

12:30 pm – 2 pm ----- Table 6B and Table 7 (2023 UDS updates).

2 pm ----- Open Discussion / Evaluation / Adjourn

# Uniform Data System

## 2023 MANUAL

Health Center Data Reporting Requirements

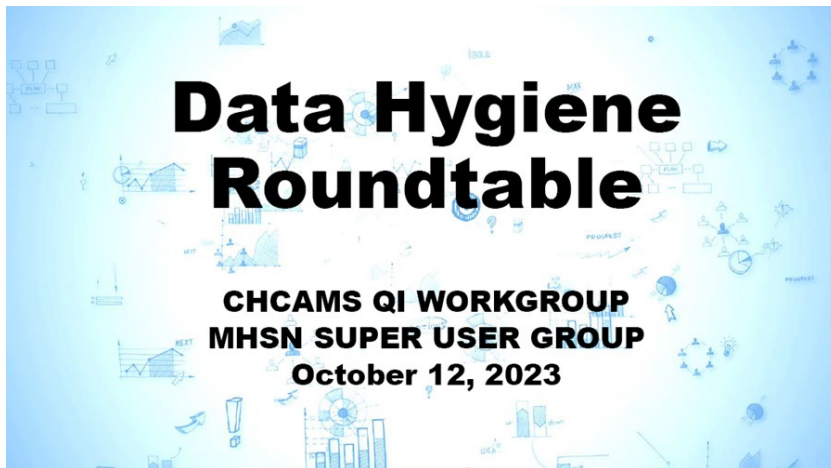


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## Data Hygiene Protocol Roundtable

CHCAMS ANNEX BUILDING  
6508 Dogwood View Pkwy, Suite D  
Jackson, Mississippi 39213

**Thursday, October 12, 2023**

**10:00 AM – 2:00 PM**

*(Lunch will be provided)*

### AGENDA

9:30 am – 10 am ----- Sign-in/Arrival

10 am – 10:30 am ----- HCCN Super User Updates

10:30 am – 11 am ----- UDS+ and Data Hygiene

11 am – 12 pm ----- Importance of Data Hygiene  
*Benefits/Obstacles/Training/Policy/Procedure*

12 pm – 1:00 pm ----- LUNCH and LEARN 

1 pm – 2 pm ----- Measure Matrix / Data Validation Calendar

2 pm ----- Evaluation / Adjourn

Optional

2pm – 3pm ----- UTC (UDS+) October Meeting via Zoom



# Data Hygiene Roundtable

**MHSN SUPER USER GROUP  
CHCAMS QI WORKGROUP  
January 11, 2024**



## Data Hygiene Roundtable (UDS Reporting)


CHCAMS ANNEX BUILDING  
6508 Dogwood View Pkwy, Suite D  
Jackson, Mississippi 39213

**Thursday, January 11, 2024**

**10:00 AM – 2:00 PM**

*(Lunch will be provided)*

### AGENDA

- 9:30 am – 10 am ----- Sign-in/Arrival
- 10 am – 10:30 am ----- HCCN Super User / QI Workgroup Report Outs
- 10:30 am – 11 am ----- 2024 UDS PAL OVERVIEW
- 11 am – 12:30pm ----- 2023 UDS REPORT (Clinical Tables) DEEP DIVE
- 12:30 pm – 1:15 pm ----- LUNCH sponsored by  PicassoMD
- 1:15 pm – 2 pm ----- HCCN and PCA updates
- 2 pm ----- Evaluation / Adjourn



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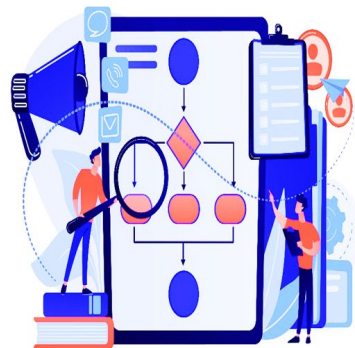
2

2

<b>DIABETIC PATIENTS WITH Hba1c &gt; 9% OR UNREPORTED</b>	<b>Individual CHC 2022 Performance</b>	<b>2022 MS CHC Average</b>	<b>Variation from Statewide Average</b>	<b>2022 National CHC Average</b>	<b>Variation from National Average</b>	<b>Healthy People 2030 Goal</b>	<b>Variation From HP2030 Goal</b>
Aaron E. Henry Community Health Services Center	33.4%	31.3%	2.1%	30.4%	3.0%	11.6%	-21.8%
Access Family Health Services	19.5%	31.3%	-11.8%	30.4%	-10.9%	11.6%	-7.9%
<b>Amite County Medical Services</b>	<b>15.8%</b>	<b>31.3%</b>	<b>-15.5%</b>	<b>30.4%</b>	<b>-14.6%</b>	<b>11.6%</b>	<b>-4.2%</b>
Central Mississippi Health Services	34.9%	31.3%	3.6%	30.4%	4.5%	11.6%	-23.3%
Claiborne County Family Health Center	31.7%	31.3%	0.4%	30.4%	1.3%	11.6%	-20.1%
Coastal Family Health Center	29.1%	31.3%	-2.2%	30.4%	-1.3%	11.6%	-17.5%
Delta Health Center	27.7%	31.3%	-3.6%	30.4%	-2.7%	11.6%	-16.1%
East Central Mississippi Health Care	25.5%	31.3%	-5.8%	30.4%	-4.9%	11.6%	-13.9%
Family Health Care Clinic	35.4%	31.3%	4.1%	30.4%	5.0%	11.6%	-23.8%
Family Health Center	40.4%	31.3%	9.1%	30.4%	10.0%	11.6%	-28.8%
G.A. Carmichael Family Health Center	47.3%	31.3%	16.0%	30.4%	16.9%	11.6%	-35.7%
Greater Meridian Health Clinic	42.5%	31.3%	11.2%	30.4%	12.1%	11.6%	-30.9%
Jackson-Hinds Comprehensive Health Center	34.1%	31.3%	2.8%	30.4%	3.7%	11.6%	-22.5%
Jefferson Comprehensive Health Center	40.9%	31.3%	9.6%	30.4%	10.5%	11.6%	-29.3%
Mallory Community Health Center	32.6%	31.3%	1.3%	30.4%	2.2%	11.6%	-21.0%
Mantachie Rural Health Care	22.4%	31.3%	-8.9%	30.4%	-8.0%	11.6%	-10.8%
North Mississippi Primary Health Care	17.3%	31.3%	-14.0%	30.4%	-13.1%	11.6%	-5.7%
Northeast Mississippi Health Care	35.3%	31.3%	4.0%	30.4%	4.9%	11.6%	-23.7%
Outreach Health Services	40.5%	31.3%	9.2%	30.4%	10.1%	11.6%	-28.9%
Southeast Mississippi Rural Health Initiative	31.3%	31.3%	0.0%	30.4%	0.9%	11.6%	-19.7%

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EPIC	
NEXTGEN	

# Data Hygiene Roundtable



## UDS+ Preparation and Workflow Analysis Day

**MHSN SUPER USER GROUP  
CHCAMS QI WORKGROUP  
June 11, 2024**



## Data Hygiene Roundtable

**(UDS+ Preparation and Workflow Analysis Day)**


CHCAMS ANNEX BUILDING  
6508 Dogwood View Pkwy, Suite D  
Jackson, Mississippi 39213

**Tuesday, June 11, 2024**

**10:00 AM – 2:00 PM**

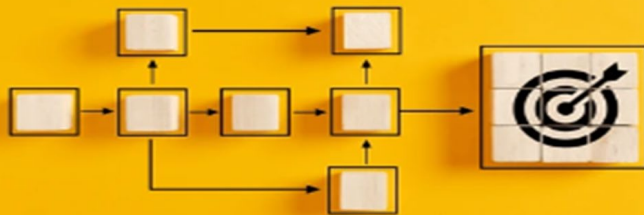
*(Lunch will be provided)*

### AGENDA

- 9:30 am – 10 am ----- Sign-in/Arrival
- 10 am – 10:15 am ----- 2024 UDS Updates / UDS+ Prep
- 10:15 am – 11:30 am ----- **Interactive Real-Time Workflow Analysis**  
*Preventative Cancer Screenings (Cervical, Colorectal, Breast)*
- 11:30 am – 12:00pm ----- LUNCH sponsored by 
- 12:00 pm – 1 pm ----- **Brain Health Webinar**  
*Advancing Brain Health by Strengthening Primary Care Frameworks in the African American and Latino Communities  
Presented by: Dr. Kina White, Dr. Stephanie Monroe, and Daphne Delgado*
- 1 pm – 2 pm ----- **Workflow Analysis Completion / Data Validation Procedure**
- 2 pm ----- **Evaluation / Adjourn**



# Data Hygiene Roundtable



**Workflow Analysis and  
UDS 2024 Performance Day  
August 29, 2024**



## Data Hygiene Roundtable

**(Workflow Analysis and UDS 2024 Performance Day)**

CHCAMS ANNEX BUILDING  
6508 Dogwood View Pkwy, Suite D  
Jackson, Mississippi 39213

**Thursday, August 29, 2024**

**10:00 AM – 2:00 PM**

*(Lunch will be provided)*

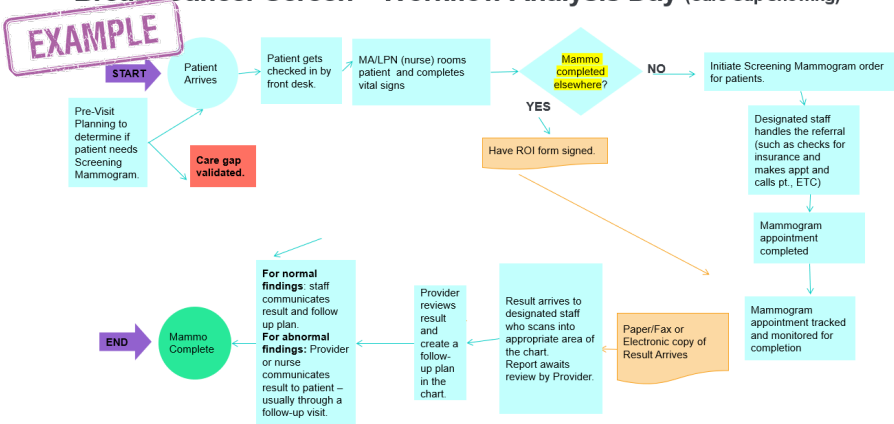
### AGENDA

- 9:30 am – 10 am ----- Sign-in/Arrival
- 10 am – 10:15 am ----- 2024 UDS+ Requirements
- 10:15 am – 10:30 am ----- 2023 Summary / 2024 Performance
- 10:30 am – 11:30 am ----- Interactive Real-Time Workflow Analysis  
*Preventative Cancer Screenings (Cervical, Colorectal, Breast)*
- 11:30 am – 12:15pm ----- Demo of Azara's EHR Plug-In (Lunch)
- 12:15 pm – 1:45 pm ----- Workflow Analysis Completion
- 1:45 pm – 2 pm ----- Data Validation Calendar/Matrix
- 2 pm ----- Evaluation / Adjourn

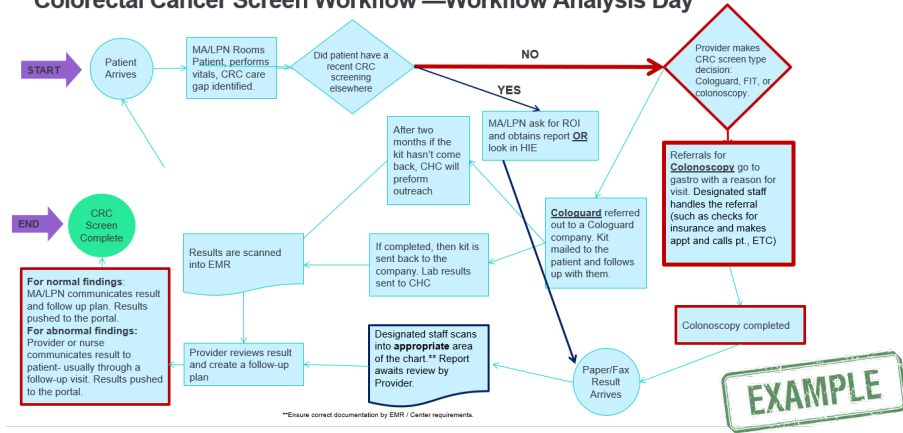




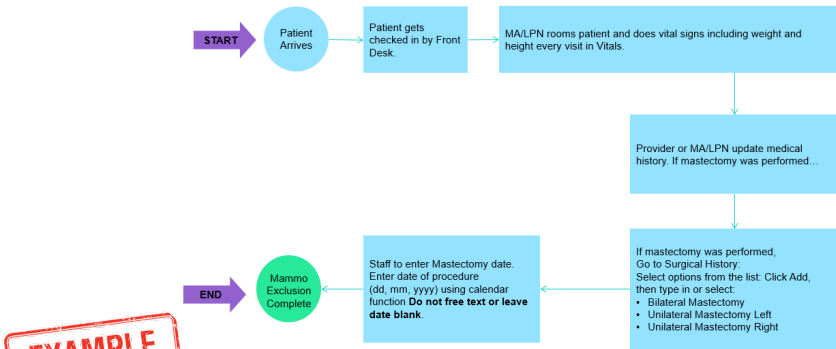
## Breast Cancer Screen—Workflow Analysis Day (Care Gap showing)



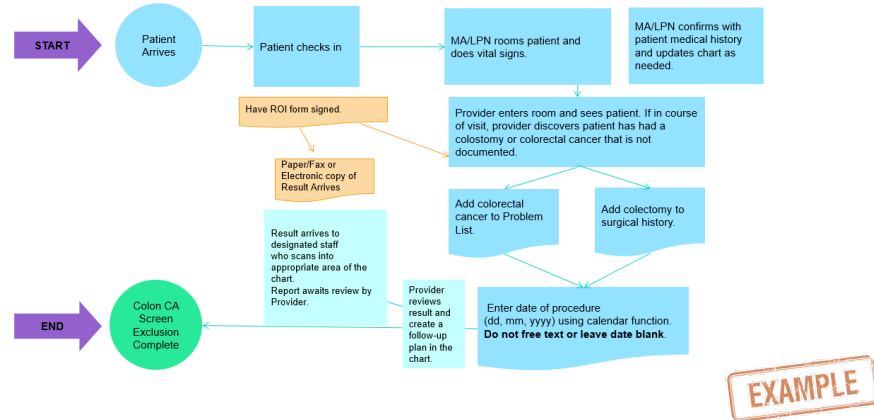
## Colorectal Cancer Screen Workflow —Workflow Analysis Day



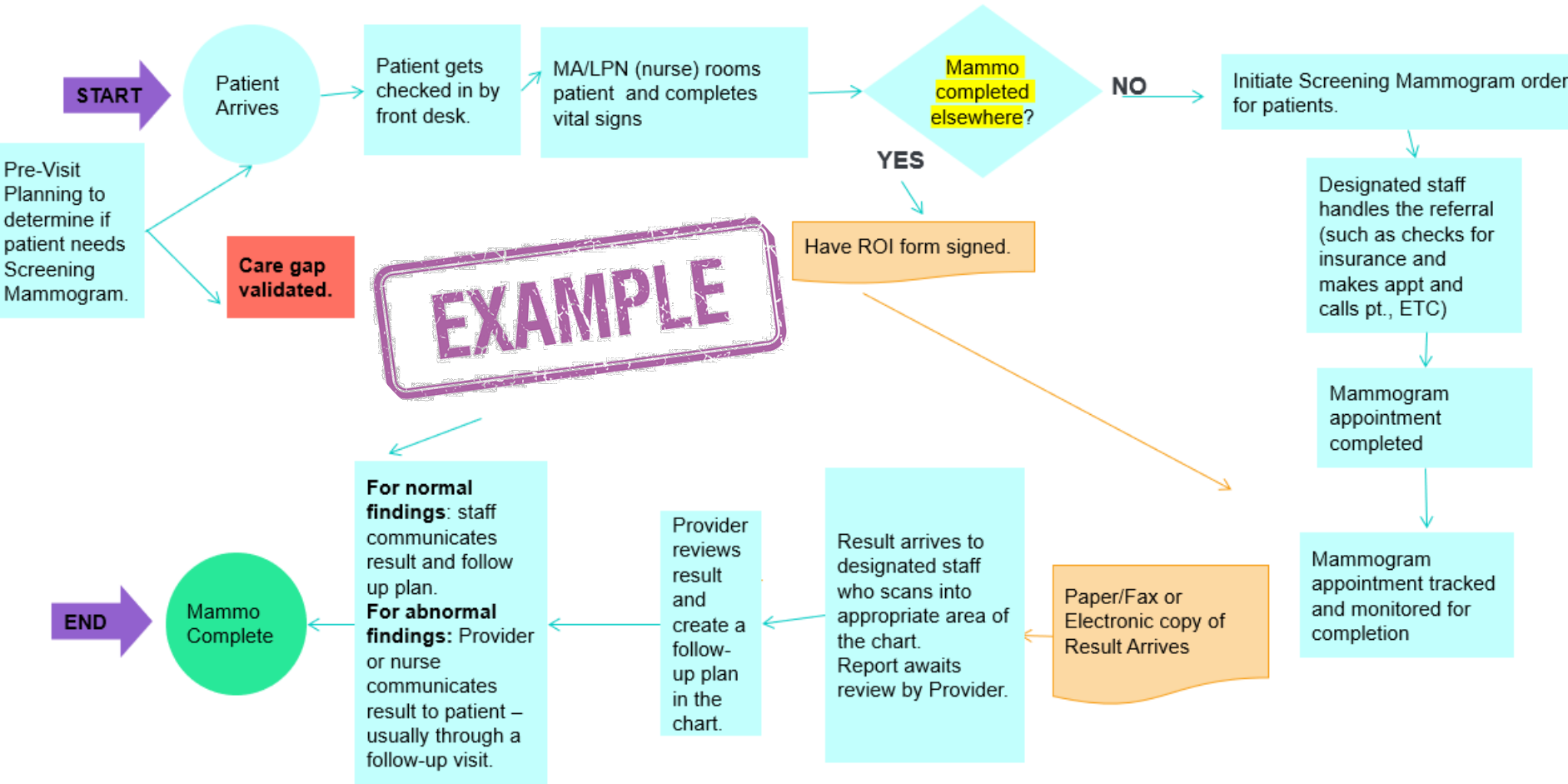
## Breast Cancer Screen Exclusion Workflow —Workflow Analysis Day



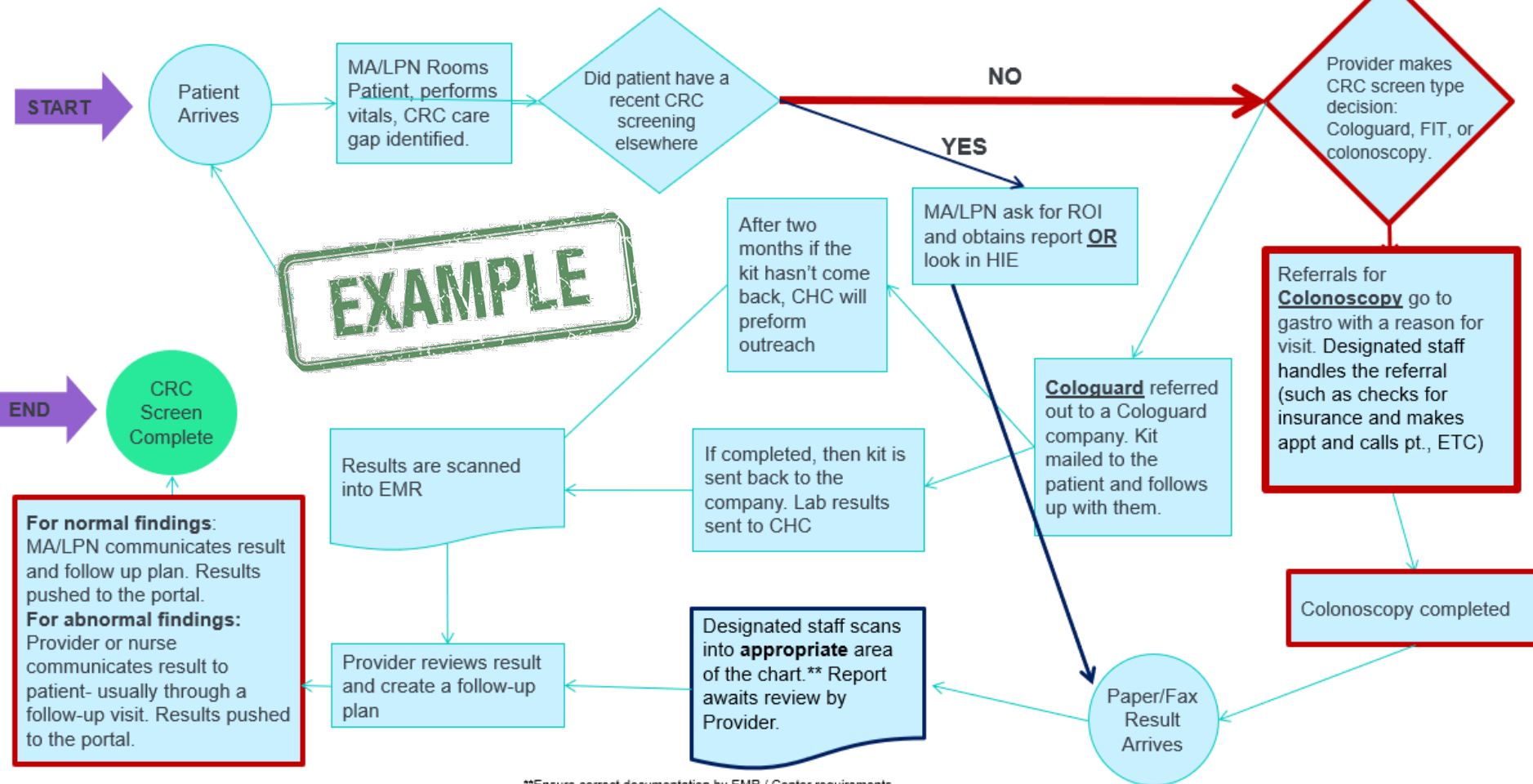
## Colon Cancer Screen Exclusion Workflow —Workflow Analysis Day



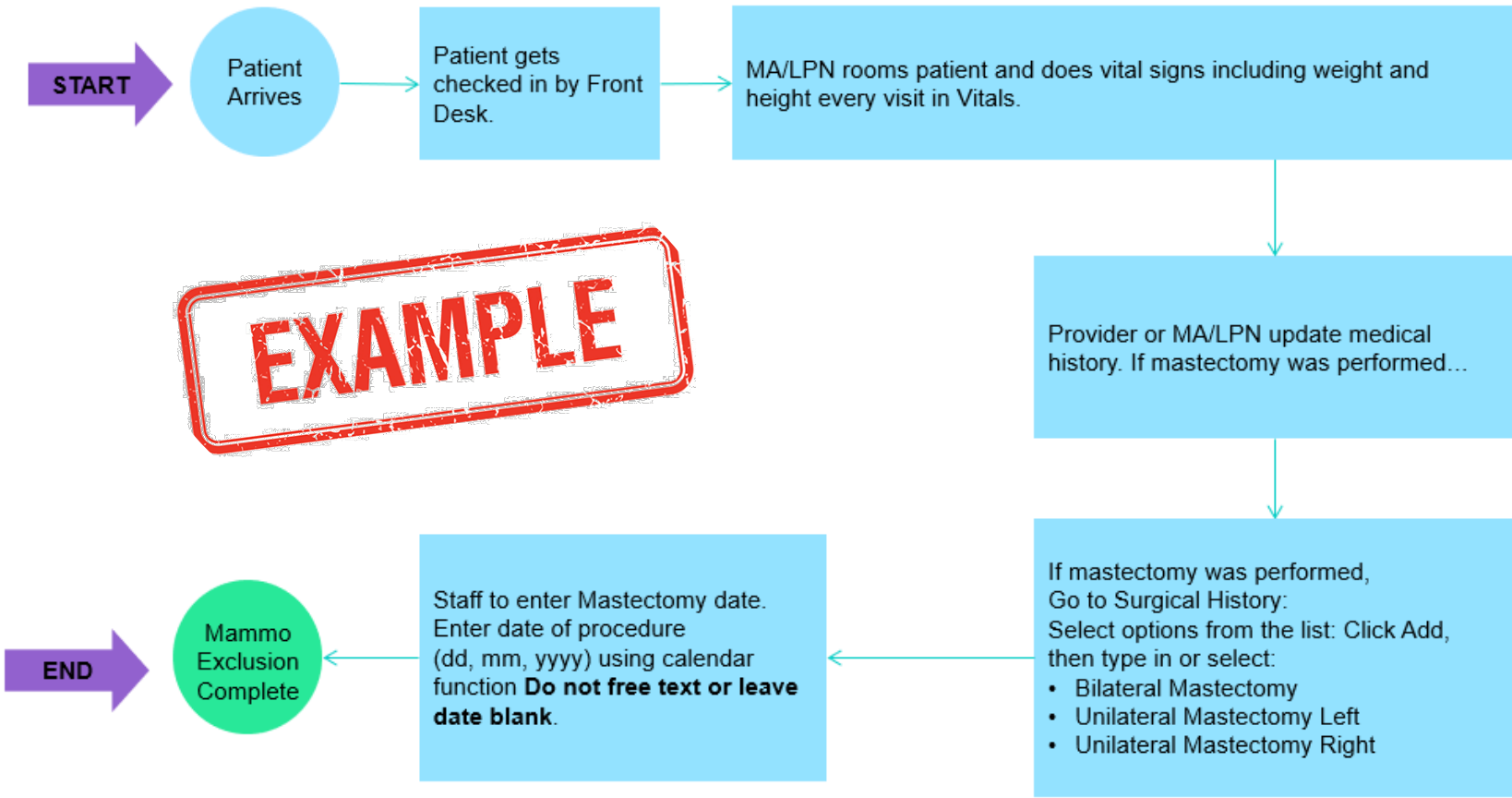
# Breast Cancer Screen—Workflow Analysis Day (Care Gap showing)



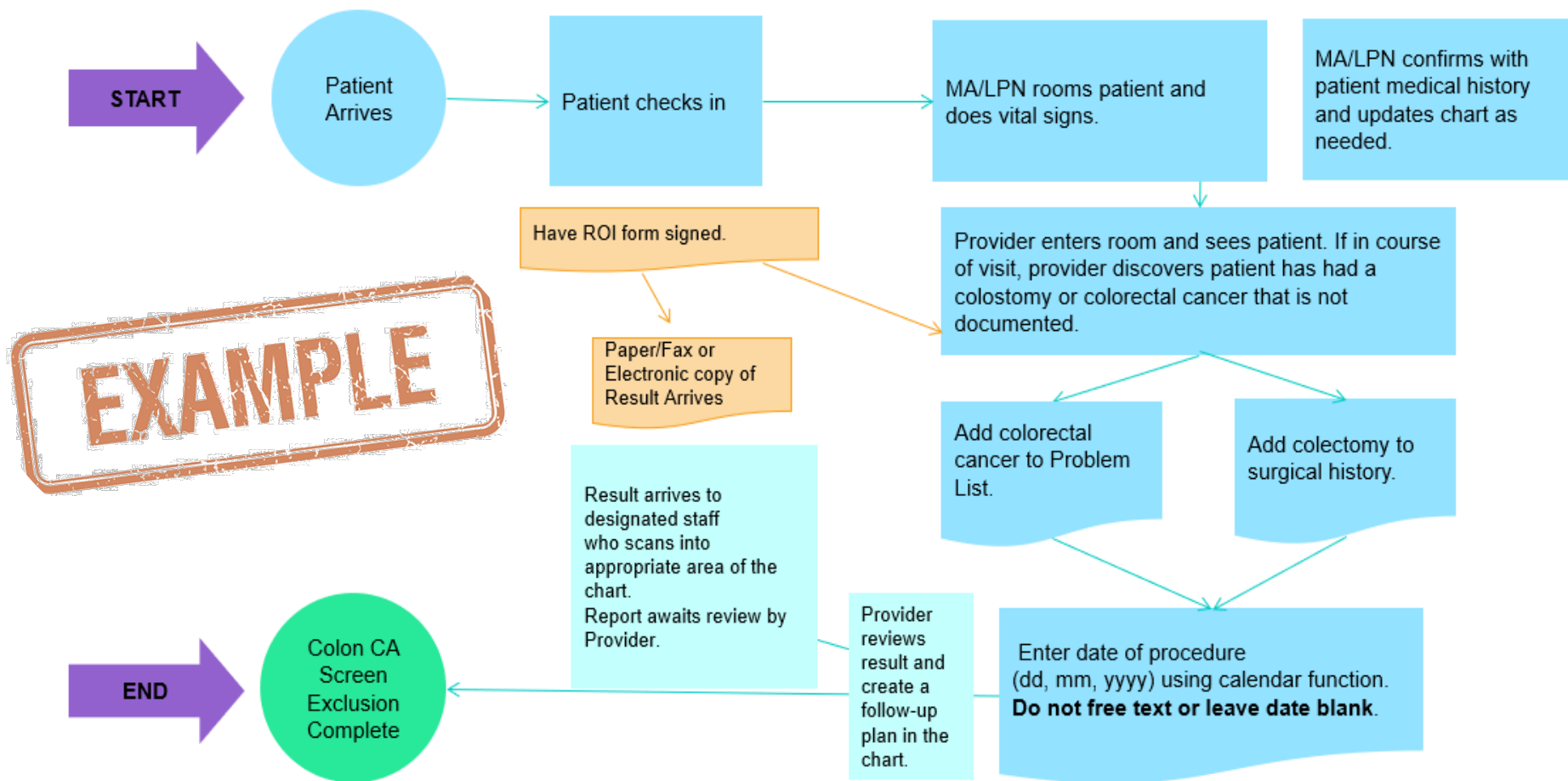
# Colorectal Cancer Screen Workflow —Workflow Analysis Day



# Breast Cancer Screen Exclusion Workflow —Workflow Analysis Day



# Colon Cancer Screen Exclusion Workflow —Workflow Analysis Day





DIABETIC PATIENTS WITH Hba1c > 9% OR UNREPORTED	Individual CHC 2023 Performance	2022 Performance	Variation from 2022 Performance	2023 MS CHC Average (2022- 31.3%)	Variation from Statewide Average	2023 National CHC Average (2022-30.4)	Variation from National Average	Healthy People 2030 Goal	Variation From HP2030 Goal		
Aaron E. Henry Community Health Services Center	32.70%	33.4%	-0.70%	35.36%	-2.66%	28.81%	3.89%	11.6%	-0.2%		
Access Family Health Services	15.09%	19.5%	-4.41%	35.36%	-20.27%	28.81%	-13.72%	11.6%	-0.2%		
Amite County Medical Services	14.81%	15.8%	-0.99%	35.36%	-20.55%	28.81%	-14.00%	11.6%	-0.2%		
Central Mississippi Health Services	32.83%	34.9%	-2.07%	35.36%	-2.53%	28.81%	4.02%	11.6%	-0.2%		
Claiborne County Family Health Center	28.68%	31.7%	-3.02%	35.36%	-6.68%	28.81%	-0.13%	11.6%	-0.2%		
Coastal Family Health Center	28.00%	29.1%	-1.10%	35.36%	-7.36%	28.81%	-0.81%	11.6%	-0.2%		
Delta Health Center	28.13%	27.7%	0.43%	35.36%	-7.23%	28.81%	-0.68%	11.6%	-0.2%		
East Central Mississippi Health Care	24.16%	25.5%	-1.34%	35.36%	-11.20%	28.81%	-4.65%	11.6%	-0.2%		
Family Health Care Clinic	57.70%	35.4%	22.30%	35.36%	22.34%	28.81%	28.89%	11.6%	-0.2%		
Family Health Center	39.42%	40.4%	-0.98%	35.36%	4.06%	28.81%	10.61%	11.6%	-0.2%		
G.A. Carmichael Family Health Center	57.44%	47.3%	10.14%	35.36%	22.08%	28.81%	28.63%	11.6%	-0.2%		
Greater Meridian Health Clinic	27.36%	42.5%	-15.14%	35.36%	-8.00%	28.81%	-1.45%	11.6%	-0.2%		
Jackson-Hinds Comprehensive Health Center	29.44%	34.1%	-4.66%	35.36%	-5.92%	28.81%	0.63%	11.6%	-0.2%		
Jefferson Comprehensive Health Center	72.91%	40.9%	32.01%	35.36%	37.55%	28.81%	44.10%	11.6%	-0.2%		
Mallory Community Health Center	29.27%	32.6%	-3.33%	35.36%	-6.09%	28.81%	0.46%	11.6%	-0.2%		
Mantachie Rural Health Care	14.34%	22.4%	-8.06%	35.36%	-21.02%	28.81%	-14.47%	11.6%	-0.2%		
North Mississippi Primary Health Care	28.08%	17.3%	10.78%	35.36%	-7.28%	28.81%	-0.73%	11.6%	-0.2%		
Northeast Mississippi Health Care	28.60%	35.3%	-6.70%	35.36%	-6.76%	28.81%	-0.21%	11.6%	-0.2%		
Outreach Health Services	41.49%	40.5%	0.99%	35.36%	6.13%	28.81%	12.68%	11.6%	-0.2%		
Southeast Mississippi Rural Health Initiative	28.54%	31.3%	-2.76%	35.36%	-6.82%	28.81%	-0.27%	11.6%	-0.2%		

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## Data Hygiene Roundtable

(Final UDS/UDS+ 2024 Reporting Preparation Day)

CHCAMS ANNEX BUILDING  
6508 Dogwood View Pkwy, Suite D  
Jackson, Mississippi 39213

**Thursday, November 14, 2024**

**9:30 AM – 2:30 PM**

*(Lunch will be provided)*

### AGENDA

- 9:00 am – 9:30 am ----- Sign-in/Arrival
- 9:30 am – 10:00 am ----- Activities / PRIZES
- 10:00 am – 10:15 am ----- MSDH MIIX Update
- 10:15 am – 11:30 am ----- Care Gap Review (Interactive)
- 11:30 am – 12:00pm ----- UDS Q&A with Jillian Maccini
- 12:00 pm – 12:30 pm ----- LUNCH
- 12:30 pm – 2:30 pm ----- Data Validations (Interactive)
- 2:30 pm ----- Evaluation / Adjourn





## Data Hygiene Roundtable

### 2025 KICKOFF MEETING

CHCAMS ANNEX BUILDING  
6508 Dogwood View Pkwy, Suite D  
Jackson, Mississippi 39213


**Thursday, February 20, 2025**

**10:00 AM – 2:00 PM**

*(Lunch will be provided)*

### AGENDA

*(order of events subject to change)*

9:30 am – 10:00 am	-----	Sign-in/Arrival
10:00 am – 10:15 am	-----	MSDH MIIX Update
10:15 am – 11:30 am	-----	2024 UDS Reporting Outcomes
11:30 am – 12:00pm	-----	2025 UDS Program Assistance Letter (PAL)
12:00 pm – 12:30 pm	-----	Lunch Sponsored by 
12:30 pm – 1:30pm	-----	2025 eCQM Encounter Codes and Clinical Quality Measure Updates
1:30 pm – 2:00pm	-----	2025 Data Hygiene Awareness Calendar
2:00 pm	-----	Evaluation / Adjourn



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**Only 10% people get this**

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Schedule a report to be emailed to a custom list of recipients. Only scorecards and dashboards may be emailed as they contain no PHI. All schedules are set to your Local Time Zone.

CENTER ▾	SUBSCRIPTION NAME ▾	REPORT NAME	FREQUENCY	NEXT SEND (LOCAL)	LAST SENT (LOCAL)	LAST STATUS
MS - PCA	2024 UDS CROSSTAB CENTER COMPARED		Weekly	03/10/2025 08:00 AM	03/03/2025 08:00 AM	Successful
MS - PCA	UDS CROSSTAB CENTER COMPARED		Weekly			Successful

# GETTING STARTED

## UDS 2023 CQMs

Run on 2/19/2024 2:00:39 PM

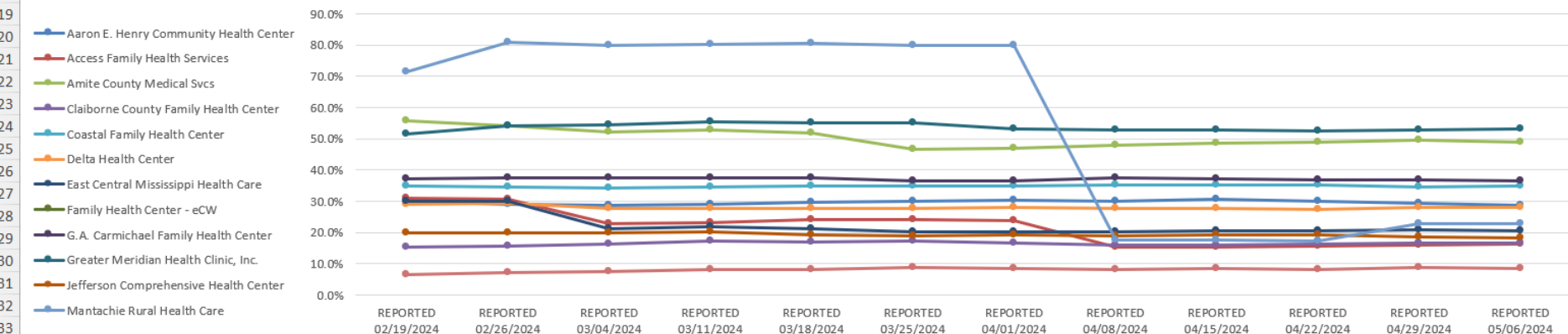
CENTER	CHILDHOOD IMMUNIZATION STATUS (CMS 117V11)	CHILD WEIGHT ASSESSMENT / COUNSELING FOR NUTRITION / PHYSICAL ACTIVITY (CMS 155V11)	BMI SCREENING AND FOLLOW- UP 18+ YEARS (CMS 69V11)	DEPRESSION REMISSION AT TWELVE MONTHS (CMS 159V11)	SCREENING FOR DEPRESSION AND FOLLOW-UP PLAN (CMS 2V12)	TOBACCO USE: SCREENING AND CESSATION (CMS 138V11)	COLORECTAL CANCER SCREENING (CMS 130V11)	CERVICAL CANCER SCREENING (CMS 124V11)	BREAST CANCER SCREENING AGES 50-74 (CMS 125V11)	HYPERTENSION CONTROLLING HIGH BLOOD PRESSURE (CMS165V11)	DIABETES A1C > 9 OR UNTESTED (CMS 122V11)	STATIN THERAPY FOR THE PREVENTION AND TREATMENT OF CARDIOVASCULAR DISEASE (CMS347V6)	IVD ASPIRIN USE (CMS 164V7)	HIV SCREENING (CMS 349V5)	HIV AND PREGNANT	HIV LINKAGE TO CARE	DENTAL SEALANTS FOR CHILDREN BETWEEN 6-9 YEARS (CMS 277V0)
Aaron E. Henry Community Health Center	1.9%	21.4%	34.9%	0.0%	66.7%	74.5%	7.5%	30.0%	32.0%	62.7%	62.6%	84.7%	89.0%	39.3%	0.0%	91.7%	0.0%
Access Family Health Services	8.3%	55.6%	82.3%	6.7%	75.8%	92.1%	59.6%	31.1%	50.7%	72.2%	46.1%	91.3%	91.3%	34.8%	0.0%	0.0%	0.0%
Amite County Medical Svcs	0.0%	79.1%	97.5%	8.8%	62.9%	96.7%	69.7%	55.9%	55.2%	87.5%	42.3%	96.0%	88.2%	59.6%	0.0%	0.0%	0.0%
Claiborne County Family Health Center	0.0%	51.2%	89.3%	0.0%	92.2%	67.7%	23.3%	15.2%	27.5%	62.0%	66.9%	77.5%	94.4%	36.3%	0.0%	0.0%	0.0%
Coastal Family Health Center	26.9%	74.9%	82.4%	8.5%	86.9%	87.5%	20.2%	34.8%	40.7%	57.4%	77.8%	81.2%	81.2%	47.0%	0.5%	83.3%	0.0%
Delta Health Center	2.3%	87.1%	89.2%	0.0%	87.7%	71.2%	11.1%	29.1%	4.6%	39.7%	52.5%	80.6%	78.8%	24.4%	0.0%	0.0%	0.0%
East Central Mississippi Health Care	8.7%	25.7%	41.0%	3.0%	42.3%	62.8%	21.3%	30.0%	36.5%	62.6%	50.8%	80.6%	84.0%	24.6%	0.0%	0.0%	0.0%
Family Health Center	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
G.A. Carmichael Family Health Center	0.0%	80.4%	87.7%	9.1%	86.0%	83.4%	27.1%	37.1%	33.6%	53.5%	80.2%	79.7%	69.6%	21.7%	0.0%	100.0%	0.0%
Greater Meridian Health Clinic, Inc.	0.0%	58.0%	60.7%	6.5%	72.9%	79.7%	34.2%	51.5%	1.8%	69.9%	61.5%	86.7%	90.2%	44.1%	0.0%	50.0%	0.0%
Jefferson Comprehensive Health Center	0.0%	59.9%	54.0%	0.0%	80.7%	88.4%	32.7%	20.0%	22.2%	64.3%	68.9%	76.8%	68.2%	29.1%	0.0%	0.0%	0.0%
Mantachie Rural Health Care	0.0%	98.7%	88.8%	3.6%	86.4%	99.6%	48.3%	71.3%	75.2%	82.9%	45.9%	88.7%	87.8%	48.9%	0.0%	0.0%	0.0%
Outreach Health Services	0.0%	45.7%	77.3%	15.0%	87.7%	81.6%	8.8%	6.6%	16.5%	50.6%	72.2%	85.7%	76.0%	7.3%	0.0%	0.0%	0.0%



# Tracking of Trends Spreadsheet

	A	B	C	D	E	F	G	H	I	J	K	L	M
	Cervical Cancer Screening (CMS 124v11)	REPORTED 02/19/2024	REPORTED 02/26/2024	REPORTED 03/04/2024	REPORTED 03/11/2024	REPORTED 03/18/2024	REPORTED 03/25/2024	REPORTED 04/01/2024	REPORTED 04/08/2024	REPORTED 04/15/2024	REPORTED 04/22/2024	REPORTED 04/29/2024	REPORTED 05/06/2024
1													
2	Aaron E. Henry Community Health Center	30.0%	29.20%	28.70%	29.10%	29.60%	30.00%	30.5%	30.1%	30.7%	30.0%	29.5%	28.7%
3	Access Family Health Services	31.1%	30.80%	23.00%	23.30%	24.20%	24.10%	23.9%	15.4%	15.5%	15.7%	16.0%	16.4%
4	Amite County Medical Svcs	55.9%	54.20%	52.10%	52.90%	52.00%	46.80%	47.1%	48.1%	48.7%	48.9%	49.7%	48.9%
5	Claiborne County Family Health Center	15.2%	15.60%	16.30%	17.40%	16.90%	17.20%	16.7%	16.0%	16.1%	16.4%	16.8%	16.7%
6	Coastal Family Health Center	34.8%	34.70%	34.30%	34.50%	34.90%	35.00%	34.9%	35.1%	35.2%	35.1%	34.6%	35.0%
7	Delta Health Center	29.1%	29.40%	27.70%	27.90%	27.70%	27.60%	28.1%	27.7%	27.7%	27.5%	28.1%	28.0%
8	East Central Mississippi Health Care	30.0%	30.10%	21.20%	21.90%	21.20%	20.20%	20.4%	20.3%	20.5%	20.7%	20.9%	20.6%
9	Family Health Center - eCW												
10	G.A. Carmichael Family Health Center	37.1%	37.40%	37.60%	37.50%	37.40%	36.60%	36.7%	37.4%	37.1%	36.9%	36.8%	36.7%
11	Greater Meridian Health Clinic, Inc.	51.5%	54.30%	54.60%	55.40%	55.10%	55.00%	53.2%	53.0%	52.8%	52.5%	53.0%	53.2%
12	Jefferson Comprehensive Health Center	20.0%	20.00%	19.80%	20.10%	19.20%	18.90%	19.3%	19.1%	19.3%	19.2%	18.7%	18.4%
13	Mantachie Rural Health Care	71.3%	81.00%	79.80%	80.20%	80.70%	80.00%	79.9%	17.7%	17.5%	17.3%	22.7%	23.0%
14	Outreach Health Services	6.6%	7.30%	7.60%	8.10%	8.30%	8.70%	8.5%	8.2%	8.6%	8.3%	8.8%	8.5%

Cervical Cancer Screening YTD (week to week) 2024



# Inform the Health Center



## UDS measures that might need attention



Michael Edwards

To JAREN EARNEST (jearnest@mantachieclinic.org); Morgan Windham; Kimetta Hardges  
Cc Joseph Grice

You replied to this message on 4/24/2024 8:42 AM.

Reply Reply All Forward

Mon 4/22/2024 10:29 AM

Good Morning,  
As we discussed last week and in more detail Friday the cervical cancer screening measure should start improving after this week. Hopefully the LOINC code Azara applies to "pap smear specialist" will resolve the issue. But I wanted to send this notice just like I am sending to other centers about their trends.

I have been tracking the UDS year to date report in Azara week to week since submission. The color coding is for change from previous week green for an increase of 0.1% or more and red is lower than the previous week. I noticed today that this measure has been in red for 3+ weeks in a row. This measure could stabilize and improve by next week's report, but I wanted to ensure that you were aware of the downward trend.

Cervical Cancer Screening (CMS 124v11)	REPORTED 02/19/2024	REPORTED 02/26/2024	REPORTED 03/04/2024	REPORTED 03/11/2024	REPORTED 03/18/2024	REPORTED 03/25/2024	REPORTED 04/01/2024	REPORTED 04/08/2024	REPORTED 04/15/2024	REPORTED 04/22/2024
Mantachie Rural Health Care	71.3%	81.0%	79.8%	80.2%	80.2%	80.0%	79.9%	17.7%	17.5%	17.3%

Happy to answer any questions or help with data validations if needed.

Thanks,

Michael T. Edwards

Director of Training and Quality



Pronouns: he / him / his (why pronouns matter)

Mississippi Health Safe Net

REPORTED 03/25/2024	REPORTED 04/01/2024	REPORTED 04/08/2024
80.0%	79.9%	17.7%

# Example #2

UDS measures that might need attention

 Michael Edwards  
To  Olugboyega Ransome-Kuti, MD;  Yolanda Hill  
Cc  Joseph Grice  
Bcc  Ashlee McFarland

Good Morning,

I have been tracking the UDS year to date report in Azara week to week since submission. The color coding is for change from previous week--green for an increase of 0.1% or more and red is lower than the previous week. I noticed today that these measures have been in red for 3 weeks or more in a row. The measures could stabilize and improve by next week's report, but I wanted to ensure that you were aware of the downward trend.

Tobacco Use: Screening and Cessation (CMS 138v11)	REPORTED 02/19/2024	REPORTED 02/26/2024	REPORTED 03/04/2024	REPORTED 03/11/2024	REPORTED 03/18/2024	REPORTED 03/25/2024	REPORTED 04/01/2024	REPORTED 04/08/2024	REPORTED 04/15/2024	REPORTED 04/22/2024
Greater Meridian Health Clinic, Inc.	79.7%	79.6%	78.9%	79.3%	80.0%	80.2%	79.8%	79.3%	77.8%	76.1%

HIV Screening (CMS 349v5)	REPORTED 02/19/2024	REPORTED 02/26/2024	REPORTED 03/04/2024	REPORTED 03/11/2024	REPORTED 03/18/2024	REPORTED 03/25/2024	REPORTED 04/01/2024	REPORTED 04/08/2024	REPORTED 04/15/2024	REPORTED 04/22/2024
Greater Meridian Health Clinic, Inc.	44.1%	43.4%	43.7%	43.9%	44.3%	44.3%	44.5%	44.2%	44.0%	43.8%

Cervical Cancer Screening (CMS 124v11)	REPORTED 02/19/2024	REPORTED 02/26/2024	REPORTED 03/04/2024	REPORTED 03/11/2024	REPORTED 03/18/2024	REPORTED 03/25/2024	REPORTED 04/01/2024	REPORTED 04/08/2024	REPORTED 04/15/2024	REPORTED 04/22/2024
Greater Meridian Health Clinic, Inc.	51.5%	54.3%	54.6%	55.4%	55.1%	55.0%	53.2%	53.0%	52.8%	52.5%

Happy to answer any questions or help with data validations if needed.

Thanks,

Michael T. Edwards  
Director of Training and Quality  
Pronouns: [he / him / his](#) ([why pronouns matter](#))

# UPDATE

## UDS 2024 CQMs

Run on 5/6/2024 2:11:12 PM

CENTER	BMI SCREENING AND FOLLOW-UP 18+ YEARS (CMS 69V12)	BREAST CANCER SCREENING AGES 50-74 (CMS 125V12)	CERVICAL CANCER SCREENING (CMS 124V12)	CHILDHOOD IMMUNIZATION STATUS (CMS 117V12)	COLORECTAL CANCER SCREENING (CMS 130V12)	DEPRESSION REMISSION AT TWELVE MONTHS (CMS 159V12)	DIABETES A1C > 9 OR UNTESTED (CMS 122V12)	HIV SCREENING (CMS 349V6)	HYPERTENSION CONTROLLING HIGH BLOOD PRESSURE (CMS165V12)	SCREENING FOR DEPRESSION AND FOLLOW-UP PLAN (CMS 2V13)	STATIN THERAPY FOR THE PREVENTION AND TREATMENT OF CARDIOVASCULAR DISEASE (CMS 347V7)	TOBACCO USE: SCREENING AND CESSATION (CMS 138V12C)	CHILD WEIGHT ASSESSMENT / COUNSELING FOR NUTRITION / PHYSICAL ACTIVITY (CMS 155V12)	IVD ASPIRIN USE (CMS 164V7)	DENTAL SEALANTS FOR CHILDREN BETWEEN 6-9 YEARS (CMS 277V0)	HIV LINKAGE TO CARE	HIV AND PREGNANT
Aaron E. Henry Community Health Center	43.4%	30.8%	28.7%	2.1%	9.2%	0.0%	45.3%	39.5%	62.9%	73.5%	82.2%	70.0%	22.7%	86.1%	0.0%	95.7%	0.0%
Access Family Health Services	88.1%	55.3%	16.4%	4.8%	60.9%	11.3%	27.2%	33.5%	74.8%	83.7%	88.2%	96.3%	58.1%	89.9%	50.0%	0.0%	0.0%
Amite County Medical Svcs	99.0%	64.0%	48.9%	0.0%	73.6%	14.3%	23.7%	61.5%	87.3%	64.7%	93.2%	97.9%	89.2%	89.2%	0.0%	0.0%	0.0%
Claiborne County Family Health Center	87.6%	35.7%	16.7%	0.0%	26.1%	0.0%	40.8%	35.0%	70.1%	93.7%	76.5%	77.6%	64.7%	81.1%	0.0%	0.0%	0.0%
Coastal Family Health Center	85.9%	43.6%	35.0%	30.5%	21.9%	14.2%	32.6%	46.5%	60.4%	88.9%	79.7%	89.8%	80.7%	82.0%	0.0%	92.9%	0.3%
Delta Health Center	90.4%	4.5%	28.0%	11.5%	10.1%	2.9%	38.8%	24.7%	42.7%	88.3%	78.0%	76.0%	89.0%	73.2%	37.5%	100.0%	0.0%
East Central Mississippi Health Care	45.7%	41.3%	20.6%	9.6%	21.1%	3.7%	37.6%	27.0%	64.4%	52.4%	81.9%	74.3%	36.3%	85.9%	0.0%	0.0%	0.0%
Family Health Center	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
G.A. Carmichael Family Health Center	88.7%	36.2%	36.7%	2.2%	26.4%	15.2%	65.6%	21.8%	58.5%	89.3%	76.7%	85.8%	86.0%	71.6%	0.0%	100.0%	0.0%
Greater Meridian Health Clinic, Inc.	63.1%	2.3%	53.2%	7.7%	31.6%	13.1%	44.9%	44.0%	69.8%	79.9%	86.5%	73.0%	71.5%	90.1%	0.0%	100.0%	0.0%
Jefferson Comprehensive Health Center	63.7%	20.8%	18.4%	0.0%	30.8%	0.0%	51.6%	25.6%	64.4%	89.5%	72.1%	93.9%	72.9%	76.3%	0.0%	0.0%	0.0%
Mantachie Rural Health Care	88.2%	80.2%	23.0%	7.7%	49.4%	7.6%	28.5%	48.8%	85.9%	90.9%	89.7%	98.1%	98.5%	86.5%	0.0%	0.0%	0.0%
Outreach Health Services	80.7%	19.4%	8.5%	0.0%	8.3%	25.0%	57.9%	8.6%	49.4%	89.1%	84.8%	80.4%	46.8%	77.3%	0.0%	0.0%	0.0%

# Health Center Performance Summary: First 6 Months of 2024

Overview: *Based on the data from AZARA DRVS for the first half of 2024, three health centers have shown notable performance across 15 UDS (Uniform Data System) measures. The performance metrics are categorized into top performer, top 3, and top 5 statuses.*

## Health Centers Performance

### 1. Amite County Medical Services

- Top Performer: 7 out of 15 measures
- Top 3 Performance: 12 out of 15 measures
- Top 5 Performance: 13 out of 15 measures

### 2. Mantachie Rural Health Clinic

- Top Performer: 2 out of 15 measures
- Top 3 Performance: 9 out of 15 measures
- Top 5 Performance: 10 out of 15 measures

### 3. Access Family Health Services

- Top Performer: 2 out of 15 measures
- Top 3 Performance: 7 out of 15 measures
- Top 5 Performance: 9 out of 15 measures



## Health Center Performance Summary: First NINE Months of 2024

Overview: Based on the data from AZARA DRVS for the ***first nine months of 2024***, three health centers have shown notable performance across 15 UDS (Uniform Data System) measures. The performance metrics are categorized into top performer, top 3, and top 5 statuses.

### Health Centers Performance

#### 1. Amite County Medical Services

- Top Performer: 6 out of 15 measures
- Top 3 Performance: 10 out of 15 measures
- Top 5 Performance: 13 out of 15 measures

#### 2. Access Family Health Services (*previously 3<sup>rd</sup> overall*)

- Top Performer: 3 out of 15 measures
- Top 3 Performance: 9 out of 15 measures
- Top 5 Performance: 11 out of 15 measures

#### 3. Mantachie Rural Health Clinic (*previously 2<sup>nd</sup> overall*)

- Top Performer: 1 out of 15 measures
- Top 3 Performance: 9 out of 15 measures
- Top 5 Performance: 10 out of 15 measures





# UDS 2024 CHC TRENDS

Monitoring UDS measures YTD weekly and comparing to previous week(s) for downward trends and/or low performance overall.

Breast Cancer Screening Ages 50-74 (CMS 125v11)	REPORTED 05/20/2024	REPORTED 05/27/2024
Greater Meridian Health Clinic, Inc.	2.2%	46.3%

Colorectal Cancer Screening (CMS 130v11)	REPORTED 07/08/2024	REPORTED 07/15/2024
Delta Health Center	9.6%	15.1%

Child Weight Assessment / Counseling for Nutrition / Physical Activity (CMS 155v11)	REPORTED 07/29/2024	REPORTED 08/05/2024
East Central Mississippi Health Care	44.2%	77.9%

# Validation Findings

Things that needed to be addressed before health centers could even begin to prepare for UDS+ testing or submission.



## Childhood Immunizations

- Interface Connection
- Historical Documentation

## Repeat Blood Pressure

- Vital Sign entry
- Discontinue note box entries

## Pap vs HPV record capture (performed outside of health center)

- Separate documentation method for HPV to capture the 5-year lookback correctly

## Lab results (medical records or in house)

- Workflow for capturing lab results that impact clinical measures
- Ensure in house labs correct setup



## Adult BMI

- Countable visit encompasses more than medical.
- Update workflow to included patients seen dental, BH, etc.

## Exclusion Criteria

- Proper documentation
- Discontinue note box entries

# Child Weight Measure Scorecard

 Child Weight Assessment / Counseling for Nutrition / Physical Activity Scorecard 

REPORT

PERIOD

CENTERS

RENDERING PROVIDERS

2025

All Centers

All Rendering Provid...

GROUPING

No Grouping






TARGETS

Primary

Secondary

Not Met

REPORT

MEASURE	RESULT	TARGET	NUMERATOR	DENOMINATOR
 Child Weight Assessment / Counseling for Nutrition / Physical Activity (CMS 155v12)	58.9%	77.4%	9,935	16,864
 Child Weight Screening / BMI (CMS 155v12 Breakout)	97.7%	Not Set	16,471	16,864
 Child Weight Screening / Nutritional Counseling (CMS 155v12 Breakout)	62.6%	Not Set	10,549	16,864
 Child Weight Screening / Physical Activity (CMS 155v12 Breakout)	64.3%	Not Set	10,847	16,864
 BMI Percentile - Questionable	2.2%	Not Set	741	33,923

# Description Of The Child Weight Scorecard

## Child Weight Assessment / Counseling for Nutrition / Physical Activity Scorecard

---

**Created By:** michael@mshsn.org

**Created On:** 2/11/2025 4:26:30 PM

**Modified By:** Azara

**Modified On:** 3/30/2025 4:38:36 PM

Child Weight Assessment / Counseling for Nutrition / Physical Activity Scorecard

Compares the current UDS eCQM version of all 3 components (BMI, Nutr. Counseling, and Phy. Activity)  
to

BMI (Height, weight, and body mass index (BMI) percentile recording in the last 12 months)

and

Nutritional Counseling (Patients who had counseling for nutrition performed during the measurement period)

and

Physical Activity (Patients who had counseling for physical activity performed during the measurement period)

BMI PERCENTILE- QUESTIONABLE: Pediatric patients with a 'questionable' BMI Percentile entry.

Centers can use this scorecard to monitor which component of the measure is being missed the most and work to improve that area.

# Tobacco Measure Scorecard



## Tobacco Measure Scorecard ⓘ

REPORT

PERIOD

2025



CENTERS

All Centers



RENDERING PROVIDERS

All Rendering Provid...



GROUPING

No Grouping



TARGETS

Primary

Secondary

Not Met

MEASURE

RESULT

TARGET

NUMERATOR

DENOMINATOR

ⓘ Tobacco Use: Screening and Cessation (CMS 138v12)

85.9%

80.0%

21,131

24,612

ⓘ Tobacco Use: Screening (CMS 138v12 Breakout Pop 1)

89.6%

Not Set

22,045

24,612

ⓘ Tobacco Users (CMS 138v12 Modified)

19.1%

Not Set

4,713

24,612

ⓘ Tobacco Use: Cessation (CMS 138v12 Breakout Pop 2)

80.7%

Not Set

3,802

4,713

ⓘ Tobacco and Smoking Status - Questionable

0.0%

Not Set

28

217,895

# Description of the TOBACCO SCORECARD

## Tobacco Measure Scorecard

---

Tobacco UDS measure and its components comparison.

UDS MEASURE: Patients aged 12 years and older who were screened for tobacco use or use of electronic nicotine delivery system (ENDS) one or more times during the measurement period AND who received cessation intervention during the measurement period or in the six months prior to the measurement period if identified as a tobacco or ENDS user.

TOBACCO USE: SCREENING--Tobacco or nicotine screen during the measurement period

TOBACCO USERS: Most recent screen is tobacco or nicotine user.

TOBACCO USE: CESSATION--

Tobacco screen in the last 12 months OR ENDS Status in the last 12 months

AND Most recent screen is tobacco user

AND Tobacco cessation during the measurement period or in the six months prior to the measurement period

- Cessation counseling
- Pharmacotherapy ordered
- Active pharmacotherapy

OR - ENDS Status is user

AND

- Nicotine cessation during the measurement period or in the six months prior to the measurement period
- Cessation counseling
- Pharmacotherapy ordered
- Active pharmacotherapy

TOBACCO AND SMOKING STATUS- QUESTIONABLE: Status is null OR Status is not identified as "N", "Y", or "R/Reformed/Former"

Centers can use this scorecard to monitor which component of the measure is missing the most and work to improve that area.



# Statin Therapy Scorecard



## Statin Therapy Scorecard ⓘ

REPORT

PERIOD

2025

CENTERS

All Centers

RENDERING PROVIDERS

All Rendering Provid...

GROUPING

No Grouping

TARGETS

Primary

Secondary

Not Met

REPC

MEASURE	RESULT	TARGET	NUMERATOR	DENOMINATOR
ⓘ Statin Therapy for the Prevention and Treatment of Cardiovascular Disease (CMS 347v7)	82.7%	80.0%	16,645	20,124
ⓘ Statin Therapy ASCVD (CMS 347v7 Breakout)	89.5%	Not Set	5,156	5,763
ⓘ Statin Therapy Diabetes Ages 40-75 (CMS 347v7 Breakout)	84.4%	Not Set	11,562	13,702
ⓘ Statin Therapy - Elevated LDL Ages 20-75 (CMS 347v7 Breakout)	85.3%	Not Set	1,964	2,302
ⓘ Adult LDL < 100	14.9%	Not Set	9,714	65,107
ⓘ LDL - Questionable	1.3%	Not Set	280	21,930

# Description Of The Statin Therapy Scorecard

## STATIN THERAPY Scorecard

**Created By:** michael@mshsn.org

**Created On:** 2/12/2025 3:07:17 PM

**Modified By:** Azara

**Modified On:** 2/19/2025 10:31:32 AM

STATIN THERAPY - -UDS Measure: Patients considered at high risk of cardiovascular events who were prescribed or were on statin therapy during the measurement period.

STATIN THERAPY ASCVD : Patients with ASCVD and on Statin Therapy.

DM AGE 40-75--Patients age 40-75 with Diabetes and on Statin Therapy

ELEVATED LDL 20-75: Patients age 20-75 with LDL>190 and on Statin Therapy.

ADULT LDL<100: Percentage of patients 18 and older who's most recent LDL in the past year was < 100.

LDL-QUESTIONABLE: LDL lab records with a result that is questionable or potentially invalid.

# Depression Scorecard



## Depression Scorecard ⓘ

REPORT

PERIOD

2025

CENTERS

All Centers

RENDERING PROVIDERS

All Rendering Provid...

GROUPING

No Grouping

TARGETS

Primary

Secondary

Not Met

MEASURE	RESULT	TARGET	NUMERATOR	DENOMINATOR
ⓘ Screening for Depression and Follow-Up Plan (CMS 2v13)	77.6%	80.5%	50,588	65,203
ⓘ Depression Screen Positive w/Follow-up (CMS 2v12 Breakout)	50.1%	Not Set	748	1,493
ⓘ Depression Utilization of the PHQ-9 Tool (CMS 160v6, NQF 0712)	66.6%	Not Set	4,424	6,643
ⓘ Depression Screen - Adolescents with Depression	72.4%	Not Set	415	573
ⓘ Depression Screen - Adults with Depression	68.0%	Not Set	7,410	10,902
ⓘ PHQ-2 Depression Screen - Questionable	0.3%	Not Set	340	107,974
ⓘ PHQ-9 Depression Screen - Questionable	0.0%	Not Set	0	117,564
ⓘ Depression Remission at Twelve Months (CMS 159v12)	8.6%	18.2%	301	3,513
ⓘ Depression Remission at Six Months (CMS 159v12 Modified)	18.2%	Not Set	645	3,543

# Description Of The Depression Scorecard

## Depression Scorecard

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**Modified By:** Azara

**Modified On:** 2/19/2025 11:20:17 AM

### DEPRESSION SCORECARD

Screening for Depression and Follow-Up: Percentage of patients aged 12 years and older screened for depression on the date of the encounter or up to 14 days prior to the date of the encounter 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 encounter.

Depression Screen Positive w/Follow-Up: Patients aged 12 years and older with a positive screening for depression on the date of the qualifying encounter or 14 days prior to the date of the encounter using an age appropriate standardized depression screening tool and a follow up plan documented on the date of the qualifying encounter.

Depression Utilization of the PHQ-9 Tool: The percentage of patients age 18 and older with the diagnosis of major depression or dysthymia who have a completed PHQ-9 during each applicable 4 month period in which there was a qualifying visit.

Dep Screen-Adolescents with Depression: Patients 12-17 years of age who have a diagnosis of depression and have completed a depression screening within the last 12 months

Dep Screen-Adults with Depression: Patients 18 years of age or older who have a diagnosis of depression and have completed a depression screening within the last 12 months.

PHQ-2 Questionable: PHQ-2 Depression Screens with a result that is 'questionable' or potentially invalid.

PHQ-9 Questionable: PHQ-9 Depression Screens with a result that is 'questionable' or potentially invalid.

Depression Remission at 12 months: Patients 12 years of age and older with major depression or dysthymia who reached remission 12 months (+/- 60 days) after an index event.

Depression Remission at 6 months: Patients 12 years of age and older with major depression or dysthymia who reached remission 6 months (+/- 60 days) after an index event.

Centers can use this scorecard to monitor which component of the measure is being missed the most and work to improve that area.

# Childhood Immunization Scorecard

*Unpublished*

HCCN Childhood Immunization Scorecard

REPORT

JUST MICHAEL@MSHSN.ORG

PERIOD

2025

CENTERS

All Centers

RENDERING PROVIDERS

All Rendering Provid...

GROUPING

No Grouping

TARGETS

Primary

Secondary

Not Met

MEASURE	RESULT	TARGET
<div></div> Childhood Immunization Status (CMS 117v12)	12.8%	38.9%
<div></div> Childhood Immunization Status - DTP (CMS 117v11 Breakout)	56.3%	Not Set
<div></div> Childhood Immunization Status - IPV (CMS 117v10 Breakout)	73.2%	Not Set
<div></div> Childhood Immunization Status - MMR (CMS 117v10 Breakout)	78.2%	Not Set
<div></div> Childhood Immunization Status - HIB (CMS 117v11 Breakout)	68.4%	Not Set
<div></div> Childhood Immunization Status - HEPB (CMS 117v10 Breakout)	51.4%	Not Set
<div></div> Childhood Immunization Status - VZV (CMS 117v11 Breakout)	77.7%	Not Set
<div></div> Childhood Immunization Status - PCV (CMS 117v10 Breakout)	54.5%	Not Set
<div></div> Childhood Immunization Status - HEPA (CMS 117v10 Breakout)	74.6%	Not Set
<div></div> Childhood Immunization Status - ROT (CMS 117v11 Breakout)	59.9%	Not Set
<div></div> Childhood Immunization Status - FLU (CMS 117v11 Breakout)	27.6%	Not Set

# Areas of Improvement (Front Office)



# Areas of Improvement (Front Office)

## *Description of widgets*

### Areas of Improvement



**Created By:** michael@mshsn.org

**Created On:** 2/11/2025 10:16:00 PM

**Modified By:** michael@mshsn.org

**Modified On:** 2/19/2025 7:03:10 PM

Areas of Improvement--this will aide with front desk validation of data collection.

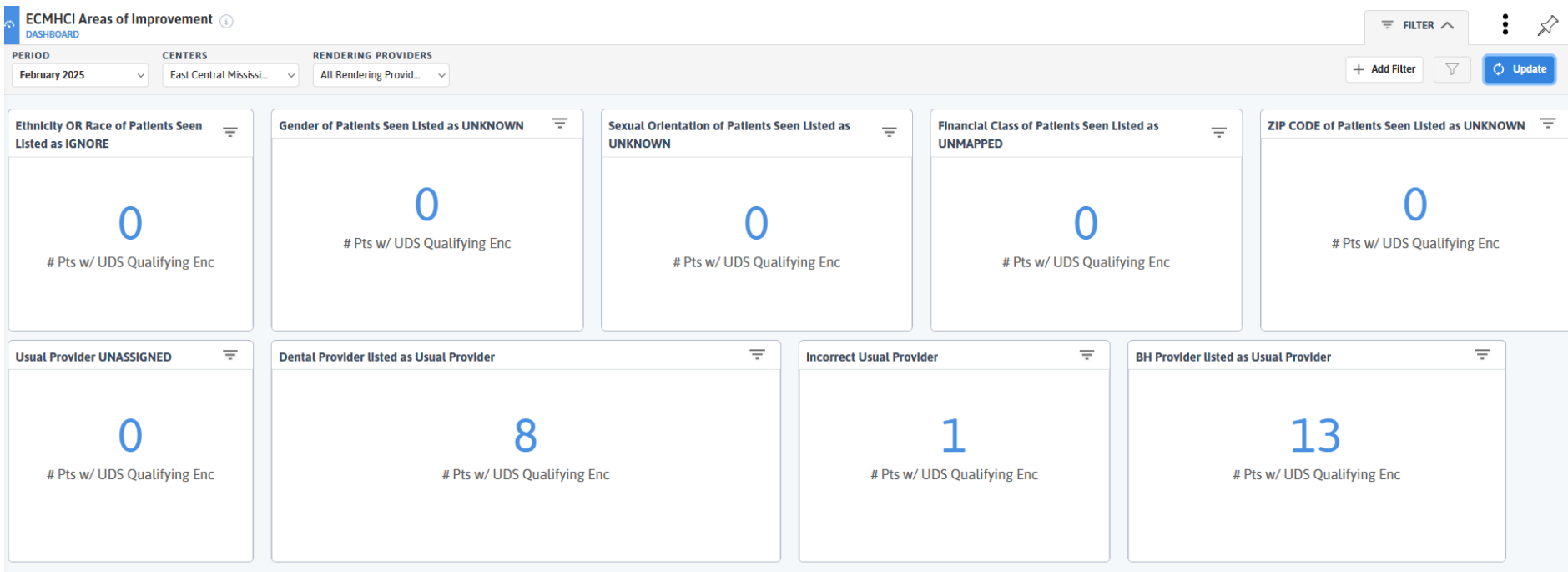
Patients who had a encounter identified as qualifying during the reporting period--Most recent encounter in the last 12 months identified as an encounter between a patient and a licensed or credentialed provider who exercises independent professional judgment in providing services.

Each widget is filtered to IGNORE, UNKNOWN, etc.





# Health Center Specific Utilization Of Areas of Improvement Dashboard



# Health Center Specific Utilization Of Areas of Improvement Dashboard

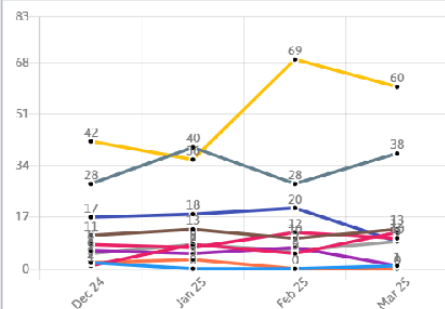
Explanation of the last row of widgets

- **Usual Provider UNASSIGNED:** looks at encounters for the time period and if Usual Provider is listed as “unassigned”
- **Dental Provider listed as Usual Provider:** looks at encounters for the time period and if Usual Provider is listed as “Dental Provider”(each center selects dental providers in a filter) and filters by rendering provider as medical providers (easier to create a medical provider group for this)
  - This shows patients who see both medical and dental and determine which provider should be true PCP.
- **Incorrect Usual Provider:** looks at encounters for the time period and if Usual Provider is listed as “any non-provider” such as nurse etc. that is used for scheduling purposes only not for qualifying encounters for UDS.
- **BH Provider Listed as Usual Provider:** looks at encounters for the time period and if Usual Provider is listed as “Behavior Health Provider”(each center selects BH providers in a filter) and filters by rendering provider as medical providers (easier to create a medical provider group for this)
  - This shows patients who see both medical and BH and determine which provider should be true PCPC.

# HCCN Data Health - Lab Volume

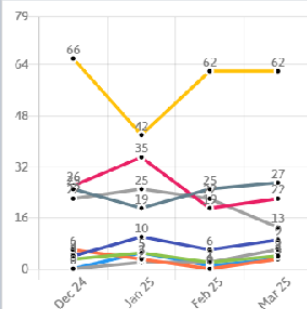


## Colorectal Cancer-FOE



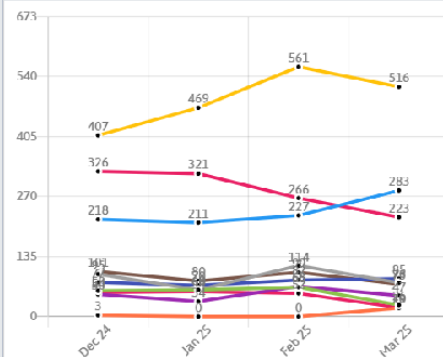
- Family Health Center
- Access Family Health Services
- Outreach Health Services
- Coastal Family Health Center
- Jefferson Comprehensive Health Center
- Clalborne County Family Health Center
- Greater Meridian Health Clinic, Inc.
- Aaron E. Henry Community Health Center
- Southeast Mississippi Rural Health Initiative
- North Mississippi Primary Health Care
- East Central Mississippi Health Care

## Colorectal Cancer-FIT-DN



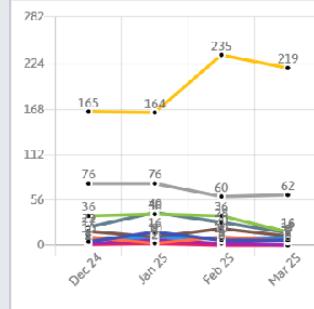
- Family Health Center
- Access Family Health Services
- Outreach Health Services
- Coastal Family Health Center
- Jefferson Comprehensive Health Center
- Clalborne County Family Health Center
- Greater Meridian Health Clinic, Inc.
- Aaron E. Henry Community Health Center
- Southeast Mississippi Rural Health Initiative
- North Mississippi Primary Health Care
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## Cervical Cancer-PA



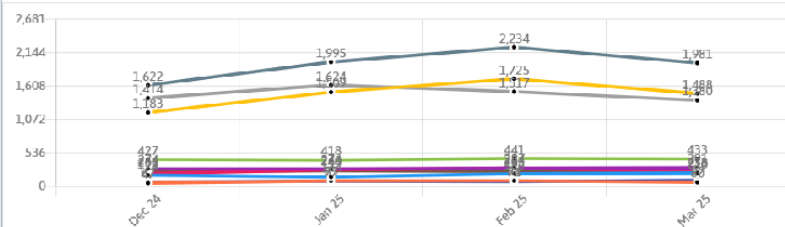
- Family Health Center
- Access Family Health Services
- Outreach Health Services
- Coastal Family Health Center
- Jefferson Comprehensive Health Center
- Clalborne County Family Health Center
- Greater Meridian Health Clinic, Inc.
- Aaron E. Henry Community Health Center
- Southeast Mississippi Rural Health Initiative
- North Mississippi Primary Health Care
- East Central Mississippi Health Care

## Cervical Cancer-HP



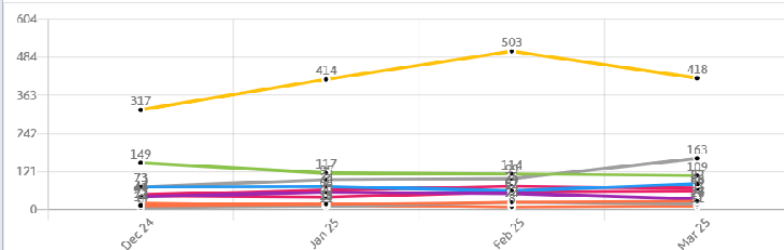
- Family Health Center
- Access Family Health Services
- Outreach Health Services
- Coastal Family Health Center
- Jefferson Comprehensive Health Center
- Clalborne County Family Health Center
- Greater Meridian Health Clinic, Inc.
- Aaron E. Henry Community Health Center
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## A1c



- Family Health Center
- Access Family Health Services
- Outreach Health Services
- Coastal Family Health Center
- Jefferson Comprehensive Health Center
- Clalborne County Family Health Center
- Greater Meridian Health Clinic, Inc.
- Aaron E. Henry Community Health Center
- Southeast Mississippi Rural Health Initiative
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## HIV Screen



- Family Health Center
- Access Family Health Services
- Outreach Health Services
- Coastal Family Health Center
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- Aaron E. Henry Community Health Center
- Southeast Mississippi Rural Health Initiative
- North Mississippi Primary Health Care
- East Central Mississippi Health Care

# HCCN PHC Utilization vs UDS Measures YTD

## Health Center Utilization Report

CENTERS	REPORTS
Amite County Medical Svcs	20,609
Access Family Health Services	7,669
Coastal Family Health Center	7,205
Claiborne County Family Health Center	5,812

## PATIENT VISIT PLANNING (PVP)

CENTERS	REPORTS
Coastal Family Health Center	2,996
Access Family Health Services	2,391
Amite County Medical Svcs	1,679
Jefferson Comprehensive Health Center	1,536

## CARE MANAGEMENT

CENTERS	REPORTS
Amite County Medical Svcs	15,243
Claiborne County Family Health Center	3,740
Outreach Health Services	1,459
Access Family Health Services	466

## 2024 Prenatal by Centi

CENTERS	RESULT
Access Family Health Services	94%
Amite County Medical Svcs	88%
Southeast Mississippi Rural Health Initiative	70%

## 2024 Childhood Immunization by Center

CENTERS	RESULT
Coastal Family Health Center	27.4%
Delta Health Center	27.3%
Amite County Medical Svcs	25.0%

## 2024 Cervical Screening by Cen

CENTERS	RESULT
Amite County Medical Svcs	63.0%
Greater Meridian Health Clinic, Inc.	49.8%
Southeast Mississippi Rural Health Initiative	46.4%

## 2024 Breast Cancer Screening by Center

CENTERS	RESULT
Mantachie Rural Health Care	84.4%
Amite County Medical Svcs	73.1%
Access Family Health Services	61.2%

## 2024 Child Weight by Cent

CENTERS	RESULT
Mantachie Rural Health Care	99.1%
Amite County Medical Svcs	97.9%
G.A. Carmichael	

## 2024 Adult Weight by Cent

CENTERS	RESULT
Amite County Medical Svcs	99.6%
Delta Health Center	91.5%
Access Family Health Services	89.7%
North Mississippi Primary Health	80.1%

## 2024 Tobacco by Cent

CENTERS	RESULT
Access Family Health Services	99.5%
Amite County Medical Svcs	99.1%
North Mississippi Primary Health Care	97.8%

## 2024 Statin Therapy by Cent

CENTERS	RESULT
Amite County Medical Svcs	93.6%
Access Family Health Services	88.7%
Mantachie Rural Health Care	87.7%
North Mississippi Primary Health	87.7%

## 2024 IVD by Cente

CENTERS	RESULT
Access Family Health Services	92.3%
Greater Meridian Health Clinic, Inc.	89.1%
Claiborne County Family Health Center	88.0%

## 2024 Colorectal Screening t Center

CENTERS	RESULT
Access Family Health Services	60.8%
Amite County Medical Svcs	59.2%

## 2024 HIV Linkage by Cent

CENTERS	RESULT
G.A. Carmichael Family Health Center	100%
Delta Health Center	100%
Coastal Family Health Center	97%

## 2024 HIV Screening by Cent

CENTERS	RESULT
Amite County Medical Svcs	59.3%
Coastal Family Health Center	47.2%
Mantachie Rural Health Care	45.6%
Aaron E. Henry Community	42.6%

## 2024 Depression Screening/FU Plan by Center

CENTERS	RESULT
Jefferson Comprehensive Health Center	97.0%
Claiborne County Family Health Center	94.1%

## 2024 Depression Remission by

CENTERS	RESULT
G.A. Carmichael Family Health Center	31.8%
Outreach Health Services	30.0%
North Mississippi Primary Health Care	22.7%

## 2024 Dental Sealant by Cent

CENTERS	RESULT
Access Family Health Services	75.0%
Delta Health Center	60.0%
East Central	

## 2024 Low Birth Weight by Cent

CENTERS	RESULT
Mantachie Rural Health Care	0.0%
Family Health Center	0.0%
Delta Health Center	7.5%
Southeast Mississippi Rural	10.6%

## 2024 Hypertension by Cent

CENTERS	RESULT
Amite County Medical Svcs	90.7%
Mantachie Rural Health Care	86.8%
Access Family Health Services	79.9%
North Mississippi Primary Health	76.0%

## 2024 Diabetes by Centi

CENTERS	RESULT
Mantachie Rural Health Care	15.0%
Access Family Health Services	17.1%
Amite County	



Denotes only measure not showing a top utilization center

**NAME THE  
CELEBRITY**

**NAME THE  
CELEBRITY**

**NAME THE  
CELEBRITY**

**NAME THE  
CELEBRITY**



# Data Hygiene Project

(MS Health Safe Net)

If you focus on **results**,  
*you will never* **change**.

If you focus on **change**,  
*you will get* **results**.

~**Jack Dixon**

# MEASURE MATRIX

**The Building Blocks  
of Data Validation**





# DATA VALIDATION CALENDAR



File Home Insert Draw Page Layout Formulas Data Review View Automate Developer Help

Paste

Clipboard

Calibri 11

B I U

Font

Alignment

General

\$ %

Number

Conditional Formatting

Format as Table

Cell Styles

Styles

Insert

Delete

Format

Cells

B48 Athena

	A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P
1	Measure Name	System	Occurrence	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	
2	Data Hygiene															
3	CERVICAL CANCER SCREENING	Azara UDS CQMs														
4	DENTAL SEALANTS	Dentrix														
5	COLORECTAL CANCER SCREENING	Azara UDS CQMs														
6	TOBACCO USE + CESSATION	Azara UDS CQMs														
7	IVD ASPIRIN USE	Azara UDS CQMs														
8	CONTROLLED HTN	Azara UDS CQMs														
9	DEPRESSION SCREENING + REMISSION TRACKING	Azara UDS CQMs														
10	STATIN THERAPY	Azara UDS CQMs														
11	CHILDHOOD IMMUNIZATION STATUS	Azara UDS CQMs														
12	CHILD AND ADULT BMI COUNSELING	Azara UDS CQMs														
13	BREAST CANCER SCREENING	Azara UDS CQMs														
14	DIABETES A1C UNCONTROLLED + DIABETIC EYE EXAMS	Azara UDS CQMs														
15	HIV SCREENING + HIV LINKAGE TO CARE	Diabetes: Eye Exam Measure														
16	UDS Targets	Azara - Target Admin	Annually													
17	Alerts	Azara - Alerts Admin	Quarterly													
18	Clean Up Test Patients	Azara	Quarterly													
19	Provider Groups	Azara - Provider Admin	Monthly													
20	Mapping	Azara - Mapping Admin	Monthly													
21	Questionable Values Dashboard	Azara	Monthly													
22	Audits															
23	Aledade Risk Coding	Aledade	Daily													
24	Care Gap List	Aledade	Daily													
25	APO Campaigns Responses	Azara	Weekly													
26	Oustanding Referral Outreach & Dashboard	Azara - Open Referrals Report	Bi-Weekly													



QI and Data Hygiene Calendar – CHC example

# Questions?



## Contact Me





**BRAIN**

**TEASERS**





1

2

3

A

SLIGHTLY  

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CAST

**B** MY1111LIFE

HOUSE

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PRAIRIE

C



D	ROWHENME		

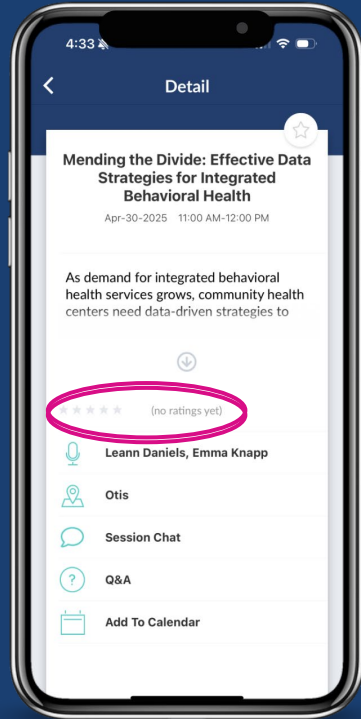
# Questions?



# We want to hear from you!

Click on the session from your agenda in the conference app.

Click the stars in the center of your screen to rate and provide feedback.



Quick and Easy



Rate the session  
and the  
speaker(s)



Provide brief  
feedback or ideas



Help us continue  
to improve

# Achieve, Celebrate, Engage!



## ACE'd it? Share your DRVS success story and become an Azara ACE!

Show your organization has used DRVS to **A**chieve measurable results, **C**elebrate improvement in patient health outcomes, and effectively **E**ngage care teams and/or patients. Stories should showcase how DRVS helped your organization overcome a challenge, the tools and solutions used to drive improvement and details of the successes that resulted from your initiatives. ACEs should be able to provide examples that quantify quality improvement, cost savings, operational efficiency or patient health improvement.

### Benefits:

- Azara will help tell your story and provide a client-branded version for your use
- Potential to create a 2-4 minute video or hour-long Azara-hosted webinar
- Potential to be featured at next year's Azara User Conference
- Win Azara swag!

Submit your success story by completing the form [at this link](#).

azara  
healthcare  
**ACE Program**



# azara2025

USER CONFERENCE

APR 29-MAY 1 | BOSTON, MA

# Thanks for attending!

