# UDS: UNIFORM DATA SYSTEM

## Table 7: Health Outcomes and Disparities

### PURPOSE:

Table 7 reports data on hypertension and diabetes quality measures by race and Hispanic/Latino ethnicity. These measures are commonly seen as indicators of community health. (birth outcome information, also on Table 7, is discussed on a separate fact sheet.)

### HOW DATA ARE USED:

These data are used to calculate compliance/non-compliance rates.

They can also be used to calculate:

- Disparities in health outcomes by race and ethnicity (national level).
- Prevalence rates for Hypertension (HTN) and Diabetes Mellitus (DM).

### CHANGES:

#### CLINICAL QUALITY MEASURES

To support department-wide standardization of data collection and reduce health center reporting burden, the specifications for the clinical measures on Table 7 continue to be revised to align with the Centers for Medicare & Medicaid Services (CMS) electronic-specified Clinical Quality Measures (e-CQMs).

For 2018, Table 7 has been updated to mirror the CMS e-CQM logic. Extensive information pertaining to e-CQMs can be found at the eCQI Resource Center: **https://ecqi.healthit.gov/ecqms**

**Measure Description**
- Describes the quantifiable indicator to be evaluated.

**Denominator or "Universe" (also referred to as Initial Patient Population in the e-CQM)**
- Number of patients who fit the detailed criteria for inclusion in the measure.

**Numerator**
- Number of patients (from the denominator) who meet the measurement standard.

**Exclusions / Exceptions**
- Patients who should not be included in the denominator, based on specified exclusion criteria.

**Specification Guidance**
- CMS measure guidance that assists with the understanding and implementation of the e-CQM.

**UDS Reporting Considerations**

Updated specifications (2017 Addendum) for the following measures can be found at: **https://ecqi.healthit.gov/eligible-professional-eligible-clinician-ecqms?field_year_value=2&keys=&=Apply**

- Section B: Controlling High Blood Pressure has been revised to align with **CMS165v6**
- Section C: Diabetes: Hemoglobin A1c Poor Control has been revised to align with **CMS122v6**

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## KEY TERMS:

**INTERMEDIATE OUTCOME MEASURES:**
Measurable outcomes of clinical intervention are used as a surrogate for good long-term health outcomes.

- **Controlling High Blood Pressure:** There will be less cardiovascular damage, fewer heart attacks, and less organ damage later in life, *if there is more controlled hypertension*.

- **Diabetes: Hemoglobin A1c Poor Control:** There will be fewer long-term complications such as amputations, blindness, and end-organ damage, *if there is less poorly-controlled diabetes*.

## TABLE TIPS:

In Section B (Controlling High Blood Pressure) and Section C (Diabetes: Hemoglobin A1c Poor Control), health centers will report on the findings of their reviews of services provided to targeted populations:

- **Column a: Number of Patients in the Universe (or denominator).** The number of patients who fit the detailed criteria for inclusion in the specific measure to be evaluated.

- **Column b: Number of Charts Reviewed.** Number of patients from the universe (column a) for whom data have been reviewed. Three options are available:

  1. All patients who fit the criteria for the measure (same as universe in column a); **OR**

  2. A number equal to or greater than 80%* of all patients who fit the criteria **OR**

  3. A random sample of 70 patients selected from the universe (column a).

     ***NOTE:** If you report based on Option 2 (80% of Column a), the universe cannot be restricted by any consistent variable (for example, cannot exclude only elderly patients).

- **Column c: Measurement Standard.** The number of charts (from column b) whose clinical record indicates that the measure rules and criteria have been met.

     **NOTE:** Age requirements for this table are as of January 1st of the reporting year.

## REPORTING RACE & ETHNICITY

- Patients who report their race but do not report their ethnicity are assumed to be non-Hispanic and are reported on lines 2a-2g.

- Patients for whom both race and ethnicity are not known are reported as "Unreported/ Refused to Report Race and Ethnicity" on line h.

- The data source used to report race and ethnicity data must be the same one used for both Tables 3B and 7.

## CONTROLLING HIGH BLOOD PRESSURE (COLUMNS 2A-2C), CMS165V6

**Measure Description**

- Percentage of patients 18-85 years of age who had a diagnosis of hypertension (HTN) and whose blood pressure (BP) was adequately controlled (less than 140/90 mmHg) during the measurement period.

**Denominator or "universe" (Columns 2a and 2b)**

- Patients 18 through 85 years of age* who had a diagnosis of essential hypertension within the first six months of the measurement period or any time prior to the measurement period with a *medical* visit during the measurement period.

  *\*Patients born on or after January 1, 1933 and on or before December 31, 1999*

**Numerator (Column 2c)**

- Patients whose blood pressure at the most recent visit was adequately controlled (systolic blood pressure <140 mmHg and diastolic blood pressure <90 mmHg).

**Exclusions/Exceptions**

Exclude from the **denominator,** patients with:

- Evidence of end-stage renal disease (ESRD), dialysis, or renal transplant before or during the measurement period.

- A diagnosis of pregnancy during the measurement period.

*\*Please refer to the UDS Manual for detailed Specification Guidance and UDS Reporting Considerations.*

## DIABETES: HEMOGLOBIN A1C (HBA1C) POOR CONTROL (>9%) (COLUMNS 3A-3F), CMS122V6

**Measure Description**

- Percentage of patients 18-75 years of age with diabetes who had hemoglobin A1c (HbA1c) greater than 9.0 percent during the measurement period.

**Denominator or "universe" (Columns 3a and 3b)**

- Patients 18 through 75 years of age* with diabetes with a *medical* visit during the measurement period.

  *\*Patients born on or after January 1, 1943 and on or before December 31,1999*

**Numerator (Column 3f)**

- Patients whose most recent HbA1c level during the measurement year was greater than 9.0 percent or who had no test conducted during the measurement period.

**Exclusions/Exceptions**

- Exclude from the **denominator,** patients with a diagnosis of secondary diabetes due to another condition.

*\*Please refer to the UDS Manual for detailed Specification Guidance and UDS Reporting Considerations.*

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### SELECTED CALCULATIONS (SHOWN ON FOLLOWING PAGES)

- **Compliance rate** is calculated by dividing Table 7, Column (2c) by Column (2b)

  Example: HTN for White/Non-Hispanic 93/176 = 52% patients with controlled HTN

- **Percent medical patients with diagnosis** is calculated by dividing total patients by diagnosis by total medical patients.

  Example: 8,651 medical patients with HTN [Table 7, Line i, Column (2a)] / 67,919 total medical patients [Table 5, Line 15, Column c] = 13%

- **Total White/Non-Hispanic patients with HTN** ages 18 – 85 with two or more medical visits = 4,494 [Universe on Table 7, Line 2e, Column 2a].

**NOTE:**

- Must not exceed total patients ages 18 – 75 on Table 3A. (Lines 19-35)

- Must not exceed total medical patients on Table 5.

- Must not exceed total White/Non-Hispanic patients on Table 3B.

Comparison of patients in universe on Table 7 with estimated total patients who meet reporting criteria:

- Total White/Non-Hispanic patients with Hypertension (HTN) ages 18-75 with two or more medical visits = 4,494 [Universe on Table 7, Line 2e, Column 2a].

- Cannot exceed total medical patients on Table 5 = 67,919.

- Cannot exceed total White/Non-Hispanic patients on Table 3B = 27,364.

Assuming an equal distribution of medical patients by race, ethnicity and age the following calculations can be done to check for reasonableness:

- Estimated maximum number of patients in universe for White/Non-Hispanic HTN patients = Total patients ages 18-84 (31,900) x 0.91 (percentage of patients who are medical) x 0.37 (percentage of patients who are White / Not Hispanic) = 10,741. Note: Example not shown but data is drawn from Tables 3A and 5.

- **CHECK:** Universe of medical patients on Table 7 (4,494) does not exceed estimated maximum number of patients meeting criteria (10,741).

These estimates may be distorted if there are large numbers of non-medical patients served at your health center or services are not distributed equally across age groups.

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**SECTION B: CONTROLLING HIGH BLOOD PRESSURE**

| Line | Race and Ethnicity | Total Patients 18 through 85 Years of Age with Hypertension (2a) | Charts Sampled or EHR Total (2b) | Patients with HTN Controlled (2c) |
|---|---|---|---|---|
| **HISPANIC/LATINO** | | | | |
| **1a** | Asian | 2 | 2 | 1 |
| **1b1** | Native Hawaiian | 1 | 1 | 0 |
| **1b2** | Other Pacific Islander | 0 | 0 | 0 |
| **1c** | Black/African American | 9 | 9 | 5 |
| **1d** | American Indian/Alaska Native | 0 | 0 | 0 |
| **1e** | White | 15 | 15 | 11 |
| **1f** | More than One Race | 3 | 3 | 2 |
| **1g** | Unreported/Refused to Report Race | 3,397 | 3,397 | 2,380 |
| | *Subtotal Hispanic/Latino* | 3,427 | 3,427 | 2,399 |
| **NON-HISPANIC/LATINO** | | | | |
| **2a** | Asian | 61 | 61 | 35 |
| **2b1** | Native Hawaiian | 9 | 9 | 5 |
| **2b2** | Other Pacific Islander | 137 | 137 | 83 |
| **2c** | Black/African American | 176 | 176 | 93 |
| **2d** | American Indian/Alaska Native | 16 | 16 | 10 |
| **2e** | White | 4,494 | 4,494 | 2,845 |
| **2f** | More than One Race | 11 | 11 | 8 |
| **2g** | Unreported/Refused to Report Race | 85 | 85 | 54 |
| | *Subtotal Non-Hispanic/Latino* | 4,989 | 4,989 | 3,133 |
| **UNREPORTED/REFUSED TO REPORT** | | | | |
| **h** | Unreported/Refused to Report Race and Ethnicity | 235 | 235 | 146 |
| **i** | *Total* | 8,651 | 8,651 | 5,678 |

| TABLE 5: STAFFING AND UTILIZATION | | | |
|---|---|---|---|
| Line | **Personnel by Major Service Category** | FTEs (a) | Clinic Visits (b) | Patients (c) |
| **15** | Total Medical (Lines 8+10a through 14) | 172.35 | 250,064 | 67,919 |

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