**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 for hypertension and non-compliance for diabetes.

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 2019 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](https://ecqi.healthit.gov/ecqms)

**Measure Description**

- The quantifiable indicator to be evaluated.

**Denominator or “Universe” (also referred to as Initial Patient Population in the e-CQM).**

- Patients who fit the detailed criteria described for inclusion in the specific measure to be evaluated.

**Numerator**

- Records (from the denominator) that meet the measurement standard for the specified measure.

**Exclusions/Exceptions**

- Patients who should not be considered and removed from the denominator.

**Specification Guidance**

- CMS measure guidance that assists with the understanding and implementing eCQMs.

**UDS Reporting Considerations**

- BPHC requirements and guidance to be applied to the specific measure and may differ from or expand on the eCQM specifications.

The clinical quality measures (CQMs) described in this manual must be reported by all health centers using specifications detailed in the measure definitions described below. The majority of the UDS clinical measures are aligned with CMS 2019 Performance Period Eligible Professional/Eligible Clinical eCQMs. Use the most current CMS-issued eCQM specifications for the version numbers referenced in the UDS Manual for 2019 reporting and measurement period. Although there are other updates available from CMS, they are not to be used for 2019 reporting.
Table 7: Health Outcomes and Disparities

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**

- **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: All age requirements for this table are as of January 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 whose 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.

For more detailed information see UDS Reporting Instructions for the 2019 Health Center Data, pages 70-73 and 96-104.
### CONTROLLING HIGH BLOOD PRESSURE
(COLUMNS 2A-2C), CMS165V7

**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, 1934 and on or before December 31, 2000

**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) during the measurement period.

**Exclusions/Exceptions**

**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.

- Patients who were in hospice care 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), CMS122V7

**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, 1944 and on or before December 31, 2000

**Numerator (Column 3f)**
- Patients whose most recent HbA1c level performed during the measurement year is greater than 9.0 percent and patients who had no test conducted during the measurement period.

**Exclusions/Exceptions**

**Denominator**
- Patients who were in hospice care during the measurement period.

**Numerator**
- Not applicable.

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

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For more detailed information see UDS Reporting Instructions for the 2019 Health Center Data, pages 70-73 and 96-104.

Revised October 2019
Table 7: Health Outcomes and Disparities

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 18–85 on Table 3A. (Lines 19–37)
- 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 18–85 with at least one medical visit = 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 18–85 (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.
## SECTION B: CONTROLLING HIGH BLOOD PRESSURE

### Table 7: Health Outcomes and Disparities

<table>
<thead>
<tr>
<th>Line</th>
<th>Race and Ethnicity</th>
<th>Total Patients 18 through 85 Years of Age with Hypertension (2a)</th>
<th>Charts Sampled or EHR Total (2b)</th>
<th>Patients with HTN Controlled (2c)</th>
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<tbody>
<tr>
<td></td>
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<td></td>
</tr>
<tr>
<td><strong>HISPANIC/LATINO</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1a</td>
<td>Asian</td>
<td>2</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>1b1</td>
<td>Native Hawaiian</td>
<td>1</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>1b2</td>
<td>Other Pacific Islander</td>
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<td>0</td>
<td>0</td>
</tr>
<tr>
<td>1c</td>
<td>Black/African American</td>
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<td>9</td>
<td>5</td>
</tr>
<tr>
<td>1d</td>
<td>American Indian/Alaska Native</td>
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<td>0</td>
<td>0</td>
</tr>
<tr>
<td>1e</td>
<td>White</td>
<td>15</td>
<td>15</td>
<td>11</td>
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<td>1f</td>
<td>More than One Race</td>
<td>3</td>
<td>3</td>
<td>2</td>
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<tr>
<td>1g</td>
<td>Unreported/Refused to Report Race</td>
<td>3,397</td>
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<td>Subtotal Hispanic/Latino</td>
<td>3,427</td>
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<td><strong>NON-HISPANIC/LATINO</strong></td>
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<td>2a</td>
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<td>35</td>
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<td>93</td>
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<td>Subtotal Non-Hispanic/Latino</td>
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<td><strong>UNREPORTED/REFUSED TO REPORT</strong></td>
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<tr>
<td>h</td>
<td>Unreported/Refused to Report Race and Ethnicity</td>
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<td>235</td>
<td>146</td>
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<tr>
<td>i</td>
<td>Total</td>
<td>8,651</td>
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<td>5,678</td>
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</table>

### TABLE 5: STAFFING AND UTILIZATION

<table>
<thead>
<tr>
<th>Line</th>
<th>Personnel by Major Service Category</th>
<th>FTEs (a)</th>
<th>Clinic Visits (b)</th>
<th>Patients (c)</th>
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</thead>
<tbody>
<tr>
<td>15</td>
<td>Total Medical (Lines 8+10a through 14)</td>
<td>172.35</td>
<td>250,064</td>
<td>67,919</td>
</tr>
</tbody>
</table>

For more detailed information see UDS Reporting Instructions for the 2019 Health Center Data, pages 70-73 and 96-104.