



Mississippi Performance Profile

Table 1: State Profile: Healthy People 2020 Goals Met or Exceeded

Performance Measures	2015 (%)	2016 (%)	2017 (%)	% Change 2015-2017
A1. Clinical Performance Improvement Goals				
% of Health Center Program grantees in the state/region that met or exceeded performance on one or more Healthy People (HP) 2020 performance measure goal(s).	95.2	90.5	80.0	-16.0
<ul style="list-style-type: none"> Patients with Childhood Immunization is 80.0% or higher ¹ 	52.4	19.0	15.0	NA
<ul style="list-style-type: none"> Patients with Diabetes (HbA1c greater than 9%) is 16.2% or lower ² 	9.5	23.8	0.0	NA
<ul style="list-style-type: none"> Patients with Cervical Cancer Screening is 93.0% or higher ³ 	0.0	0.0	0.0	NA
<ul style="list-style-type: none"> Patients with Blood Pressure less than 140/90 is 61.2% or higher⁴ 	52.4	28.6	40.0	NA
<ul style="list-style-type: none"> Patients with Low Birth Weight is 7.8% or lower. 	31.6	42.1	36.8	16.5
<ul style="list-style-type: none"> Prenatal care patients during their first trimester is 77.9% or higher 	40.0	30.0	55.0	37.5
<ul style="list-style-type: none"> Patients with Colorectal Cancer Screening is 70.5% or higher⁵ 	0.0	0.0	0.0	NA
<ul style="list-style-type: none"> Patients with Dental Sealant is 28.1% or higher ⁶ 	57.9	80.0	55.6	-4.0
A2. Patient Centered Medical Home Recognition				
Health Center Program grantees with Patient Centered Medical Home (PCMH) recognition.	57.1	50.0	65.0	13.8
A3. Financial Performance Improvement Goals				
% of Health Center Program grantees with an annual % increase in cost per patient that is less than National average.	47.6	28.6	45.0	-5.5

NA: Not Applicable.

---: Data cannot be calculated.

1. The Childhood Immunizations measure was revised in 2016 to align with eCQM and is not comparable to Healthy People 2020 goal.

Change to the denominator in 2016 may affect 2015-2017 trends: Children 2 years of age (previously 3 years of age). Change to the exclusions criteria: No longer permits exclusion of patients not seen ever prior to turning 2. Change to the numerator: Adds 1 Hepatitis A (Hep A), 2 or 3 rotavirus (RV), and 2 influenza (flu) vaccines. Please see: <https://ecqi.healthit.gov/ecqm/measures/cms117v5>.

2. Diabetes: Hemoglobin A1c Poor Control: Change to the denominator in 2016 may affect 2015-2017 trends: Age 18 through 75 years (previously age 18 through 74), eligibility no longer limited to patients with at least 2 medical visits during the measurement year. Please see <https://ecqi.healthit.gov/ecqm/measures/cms122v5>

3. Cervical Cancer Screening: Change to the denominator in 2016 may affect 2015-2017 trends: Women age 23 through 64 years (previously age 24 through 64 years). Change to the numerator: Now includes concurrent human papillomavirus (HPV) and Pap test for those ages 30 and older. Please see: <https://ecqi.healthit.gov/ecqm/measures/cms124v5>

4. Controlling High Blood Pressure: Change to the denominator in 2016 may affect 2015-2017 trends: Age 18 through 85 years (previously age 18 through 84 years), eligibility no longer limited to patients with at least 2 medical visits during the measurement, must be essential diagnosis. Change to the exclusions criteria: Exclude patients with dialysis or renal transplant before or during the measurement period and chronic kidney disease, Stage 5 (in addition to evidence of end state renal disease), and patients with a diagnosis of pregnancy during the measurement period year. Please see: <https://ecqi.healthit.gov/ecqm/measures/cms165v5>

5. Colorectal Cancer Screening: Change to the denominator: Change to the denominator in 2016 in 2017 may affect 2012-2017 trends: Patients age 50 through 75 (previously 51 through 74). Please see: <https://ecqi.healthit.gov/ecqm/measures/cms130v5>

6. The Dental Sealants Screening measure was introduced in 2015 and is not comparable to prior years.



Table 2: State Trends: UDS Clinical Quality Measures

	2015 (%)	2016 (%)	2017 (%)	% Change ¹¹ 2015-2017
Childhood Immunizations ¹	77.8	40.5	40.4	NA
Diabetes: Hemoglobin A1c Poor Control (Diabetic Patients with HbA1c > 9%) ²	34.7	33.2	37.3	NA
Cervical Cancer Screening ³	52.7	50.9	48.0	NA
Controlling High Blood Pressure (Hypertensive Patients with Blood Pressure < 140/90) ⁴	58.7	57.4	56.5	NA
Low Birth Weight (Low birth <2500grams)	11.2	12.7	12.8	-14.3
Access to Prenatal Care (first prenatal visit in 1st trimester)	63.2	66.9	66.1	4.7
Colorectal Cancer Screening ⁵	31.5	35.5	39.4	NA
Dental Sealants for Children between 6-9 Years ^{7 6}	32.1	48.1	24.1	-24.7
Use of Appropriate Medications for Asthma ⁷	73.6	79.5	82.6	NA
Adult Weight Screening and Follow Up	65.1	68.4	69.1	6.2
Coronary Artery Disease (CAD): Lipid Therapy	83.6	77.2	85.3	2.1
Depression Screening and Follow Up ⁸	44.5	56.7	61.4	NA
Tobacco Use Screening and Cessation Intervention ⁹	80.6	81.5	76.0	NA
Ischemic Vascular Disease (IVD): Use of Aspirin or Another Antithrombotic	71.4	77.1	78.4	9.8
HIV Linkage to Care ¹⁰	90.6	92.6	87.5	-3.4
Weight Assessment and Counseling for Children and Adolescents	48.8	72.9	67.8	38.9

NA: Not Applicable.

"-": Data cannot be calculated.

NA until 2014: Data not collected until UDS 2014

NA until 2015: Data not collected until UDS 2015

1. The Childhood Immunizations measure was revised in 2016 to align with eCQM and is not comparable to Healthy People 2020 goal.

Childhood Immunization Status: Change to the denominator: Children 2 years of age (previously 3 years of age) Change to the exclusions criteria: No longer permits exclusion of patients not seen ever prior to turning 2. Change to the numerator: Adds 1 Hepatitis A (Hep A), 2 or 3 rotavirus (RV), and 2 influenza (flu) vaccines. Please see: <https://ecqi.healthit.gov/ecqm/measures/cms117v4>.

2. Diabetes: Hemoglobin A1c Poor Control: Change to the denominator: Age 18 through 75 years (previously age 18 through 74) eligibility no longer limited to patients with at least 2 medical visits during the measurement year. Please see <https://ecqi.healthit.gov/ecqm/measures/cms122v4>.

3. Cervical Cancer Screening: Change to the denominator: Women age 23 through 64 years (previously age 24 through 64 years). Change to the numerator: Now includes concurrent human papillomavirus (HPV) and Pap test for those ages 30 and older. Please see: <https://ecqi.healthit.gov/ecqm/measures/cms124v4>.

4. Controlling High Blood Pressure: Change to the denominator: Age 18 through 85 years (previously age 18 through 84 years), eligibility no longer limited to patients with at least 2 medical visits during the measurement, must be essential diagnosis. Change to the exclusions criteria: Exclude patients with dialysis or renal transplant before or during the measurement period and chronic kidney disease, Stage 5 (in addition to evidence of end state renal disease), and patients with a diagnosis of pregnancy during the measurement period year. Please see: <https://ecqi.healthit.gov/ecqm/measures/cms165v4>.

5. Colorectal Cancer Screening: Change to the denominator in 2016 and 2017: Patients age 50 through 75 (previously 51 through 74). Please see: <https://ecqi.healthit.gov/ecqm/measures/cms130v4>.

6. The Dental Sealants Screening measure was introduced in 2015 and is not comparable to prior years.

7. Use of Appropriate Medications for Asthma: Change to the denominator in 2016: Patients age 5 through 64 years (previously age 5 through 40 years), eligibility not limited to individuals with 2 medical visits ever. Change to the exclusions criteria: Patients with emphysema, chronic obstructive pulmonary disease, cystic fibrosis or acute respiratory failure during or prior to the measurement period, patients with allergic reactions to asthma medications are no longer excluded from the measure denominator. Please see: <https://ecqi.healthit.gov/ecqm/measures/cms126v4>.

8. Screening for Clinical Depression and Follow Up Plan: Change to the denominator: Do not include patients who refuse to participate, urgent or emergent situations, or if the patient's functional capacity or motivation to improve impacts the accuracy of results. Please see: <https://ecqi.healthit.gov/ecqm/measures/cms002v5>

9. Tobacco Use: Screening and Cessation Intervention: Change to the denominator in 2016: Includes patients seen twice for medical care or at least once for a preventive visit. Change to the exclusions criteria: Documentation of medical reason(s) or not screening for tobacco use (e.g., limited life expectancy, other medical reason). Please see: <https://ecqi.healthit.gov/ecqm/measures/cms138v4>

10. The HIV Linkage to Care measure was introduced in 2015.

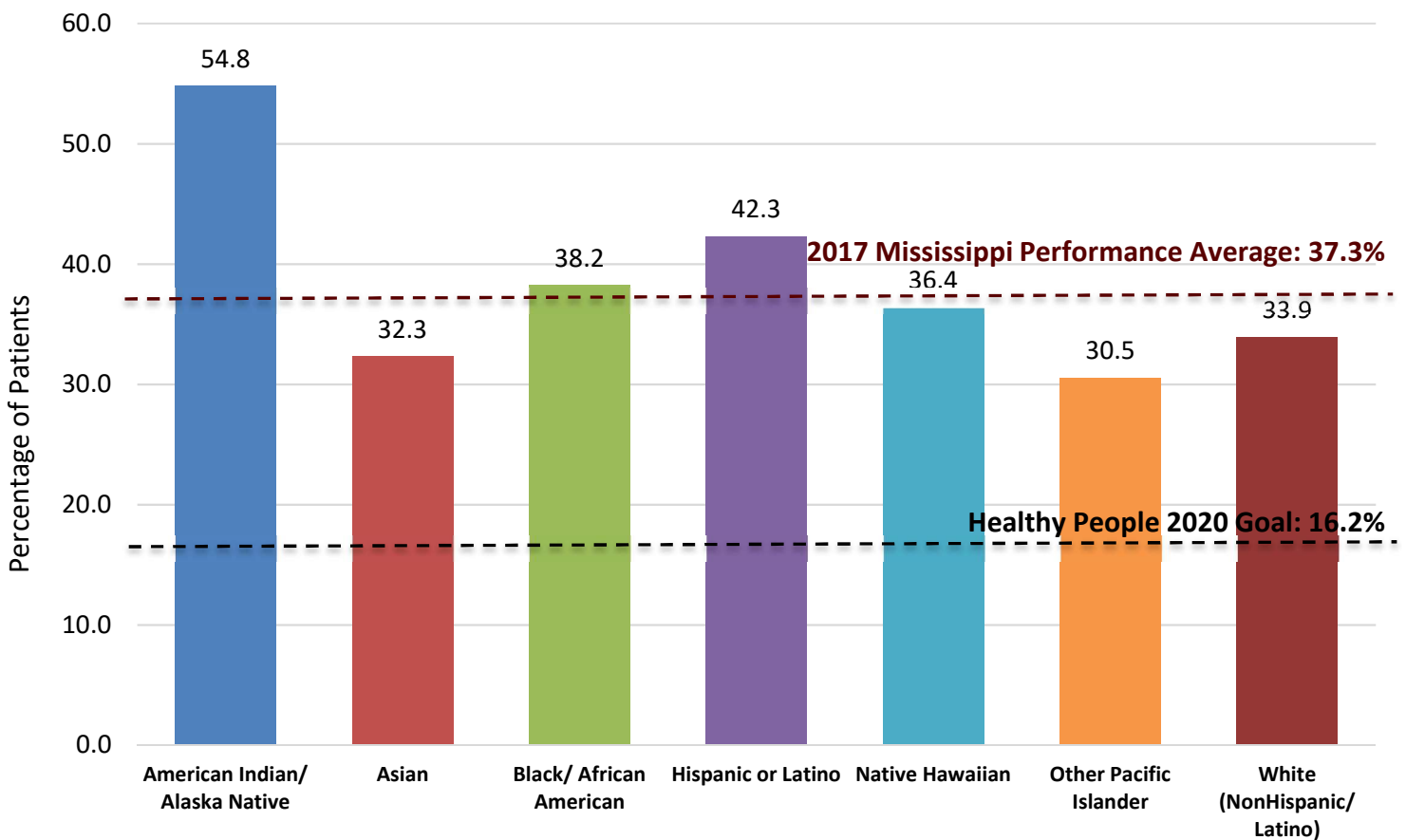
11. % Change 2015 - 2017 for Low Birth Weight and Poor Controlled Diabetes formula: (2015 - 2017)/2015



Table 3: Diabetes Focus: Performance Across Mississippi

Diabetes: Hemoglobin A1c Poor Control (Diabetic Patients with HbA1c > 9) ¹	2015 (%)	2016 (%)	2017 (%)	% Change ² 2015-2017
American Indian/ Alaska Native	28.0	32.4	54.8	NA
Asian	10.5	18.6	32.3	NA
Black/ African American	36.2	33.3	38.2	NA
Hispanic or Latino	52.9	35.9	42.3	NA
Native Hawaiian	53.8	53.8	36.4	NA
Other Pacific Islander	26.9	22.0	30.5	NA
White (Non-Hispanic/ Latino)	30.3	31.3	33.9	NA

Chart 1: Percent of Uncontrolled Diabetes¹ Patients by Race/Ethnicity for 2017



NA: Not Applicable.

- Diabetes: Hemoglobin A1c Poor Control: Change to the denominator: Age 18 through 75 years (previously age 18 through 74) eligibility no longer limited to patients with at least 2 medical visits during the measurement year. Please see <https://ecqi.healthit.gov/ecqm/measures/cms122v4>
- % Change 2015 - 2017 for Poor Controlled Diabetes formula: (2015 - 2017)/2015



Chart 2: Variance of Uncontrolled Diabetes¹ Patients, 2015 - 2017

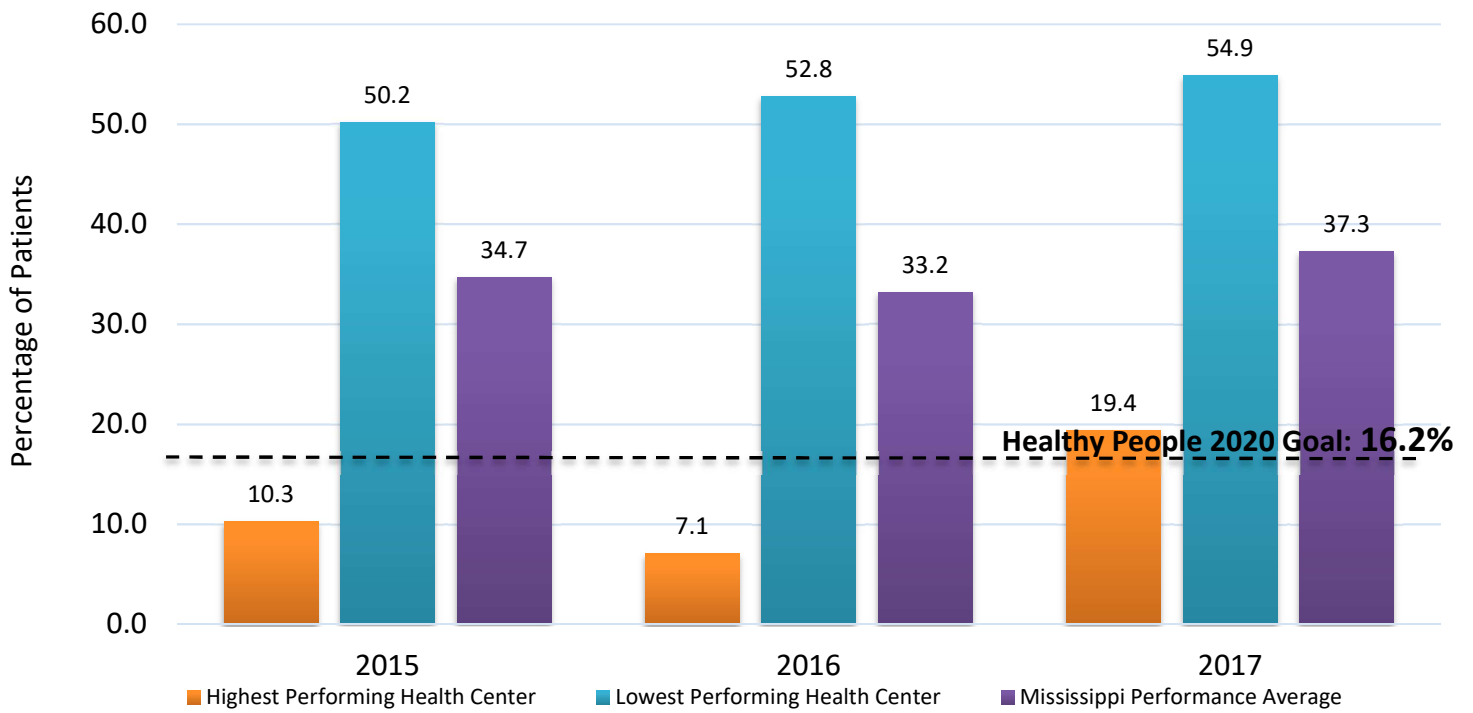
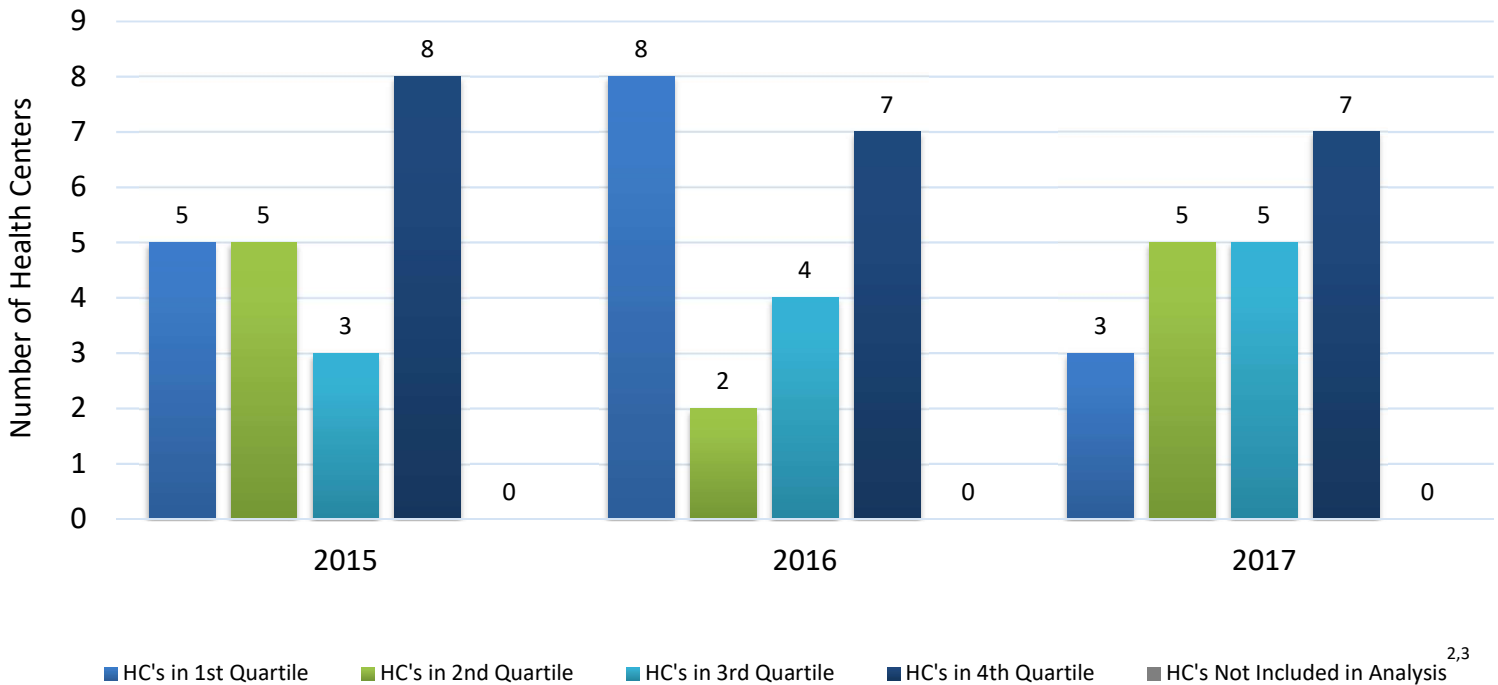


Chart 3: Variance of Uncontrolled Diabetes¹ Adjusted Quartiles, 2015 - 2017



NA: Not Applicable.

1. Diabetes: Hemoglobin A1c Poor Control: Change to the denominator: Age 18 through 75 years (previously age 18 through 74) eligibility no longer limited to patients with at least 2 medical visits during the measurement year. Please see <https://ecqi.healthit.gov/ecqm/measures/cms122v4>

2. Health Centers with missing clinical performance measures are excluded from the analysis.

3. Health Centers with number of observations (i.e., EHR or sampled charts) less than 30 on a clinical performance measure are excluded from the analysis.