

SERVICE AREA COMPETITION
Fiscal Year 2010
List of Performance Measures
for the
Health Care and Business Plans

Performance Measure	Measure Detail
HEALTH CARE PLAN	
Percentage of diabetic patients whose HbA1c levels are less than or equal to 9 percent	<p>Numerator: Number of adult patients age 18 to 75 years with a diagnosis of Type 1 or Type 2 diabetes whose most recent hemoglobin A1c level during the measurement year is $\leq 9\%$, among those patients included in the denominator.</p> <p>Denominator: Number of adult patients age 18 to 75 years as of December 31 of the measurement year with a diagnosis of Type 1 or Type 2 diabetes, who have been seen in the clinic at least twice during the reporting year and do not meet any of the exclusion criteria</p>
Percentage of adult patients with diagnosed hypertension whose most recent blood pressure was less than 140/90	<p>Numerator: Patients 18 to 85 years with a diagnosis of hypertension with most recent systolic blood pressure measurement < 140 mm Hg and diastolic blood pressure < 90 mm Hg.</p> <p>Denominator: All patients 18 to 85 years of age as of December 31 of the measurement year with diagnosis of hypertension and have been seen at least twice during the reporting year, and have a diagnosis of hypertension.</p>
Percentage of women age 21-64 who received one or more Pap tests during the measurement year or during the two years prior to the measurement year.	<p>Numerator: Number of female patients 24 – 64 years of age receiving one or more Pap tests during the measurement year or during the two years prior to the measurement year, among those women included in the denominator.</p>

	<p>Denominator: Number of female patients age 24-64 years of age during the measurement year who were seen for a medical encounter at least once during 2009 and were first seen by the grantee before their 65th birthday.</p>
<p>Percentage of pregnant women beginning prenatal care in first trimester</p>	<p>Numerator: All female patients who received perinatal care during the measurement year (regardless of when they began care) who initiated care in the first trimester either at the grantee's service delivery location or with another provider.</p> <p>Denominator: Number of female patients who received prenatal care during the measurement year (regardless of when they began care), either at the grantee's service delivery location or with another provider. Initiation of care means the first visit with a clinical provider (MD, NP, CNM) where the initial physical exam was done and does not include a visit at which pregnancy was diagnosed or one where initial tests were done or vitamins were prescribed.</p>
<p>Percentage of births less than 2,500 grams to health center patients.</p>	<p>Numerator: Women in the "Universe" whose child weighed less than 2,500 grams during the measurement year, regardless of who did the delivery.</p> <p>Denominator: Total births for all women who were seen for prenatal care during the measurement year regardless of who did the delivery.</p>
<p>Percentage of children with 2nd birthday during the measurement year with appropriate immunizations.</p>	<p>Numerator: Number of children in the "universe" who received all of the following: 4 DTP/DTaP, 3 IPV, 1 MMR, 3 Hib, 3 HepB, 1VZV (Varicella) and 4 Pneumococcal conjugate, prior to or on their 2nd birthday whose second birthday occurred during the measurement year (prior to 31 December), among those children included in the denominator.</p> <p>Denominator: Number of children with at least one medical encounter during the reporting period, who had their second birthday during the reporting period, who did not have a contraindication for a specific vaccine, who were seen for the first time in the clinic prior to their second birthday, regardless of whether or not they came to the clinic for vaccinations or well child care.</p>
<p>Behavioral Health</p>	<p>Applicant may determine the information/data provided</p>

Oral Health	Applicant may determine the information/data provided
BUSINESS PLAN	
Total cost per patient	Numerator: Total accrued cost before donations and after allocation of overhead Denominator: Total number of patients
Medical Cost per Medical Visit	Numerator: Total accrued medical staff and medical other cost after allocation of overhead (excludes lab and x-ray cost) Denominator: Non-nursing medical visits (excludes nursing (RN) and psychiatrist visits)
Change in Net Assets to Expense Ratio	Numerator: Ending Net Assets - Beginning Net Assets Denominator: Total Expense
Working Capital to Monthly Expense Ratio	Numerator: Current Assets - Current Liabilities Denominator: Total Expense / Number of Months in Audit
Long Term Debt to Equity Ratio	Numerator: Long Term Liabilities Denominator: Net Assets