

# UC Davis Medical Center

- **System Name: UC Davis Medical Center**
- **Contact info (name, email): Ed Fink, ejfink@ucdavis.edu**
- **Dashboard name: PRIME**
- **Dashboard target audience: Project Leads**
- **Dashboard use: Monthly trending, reporting, assessing impact of interventions**
- **Questions we have about this dashboard?**
  - **How are others displaying targets?**
  - **Are you including statistical process controls (SPC)?**

# Dashboard Attributes

- Source of data (EHR, decision support system, data warehouse, etc.): EHR
- Analysis and reporting platform/application: Tableau
- Drill down capability (e.g., facility, care team, provider, patient): Project, reporting period; supplemental reporting has information by clinic, care team, provider
- Stratification available (e.g., gender, age, race, etc.): None
- Self service for target audience (e.g., centrally produced and distributed): Yes
- Frequency of data refresh (e.g., monthly, daily, real time): Monthly

# Monthly Data View

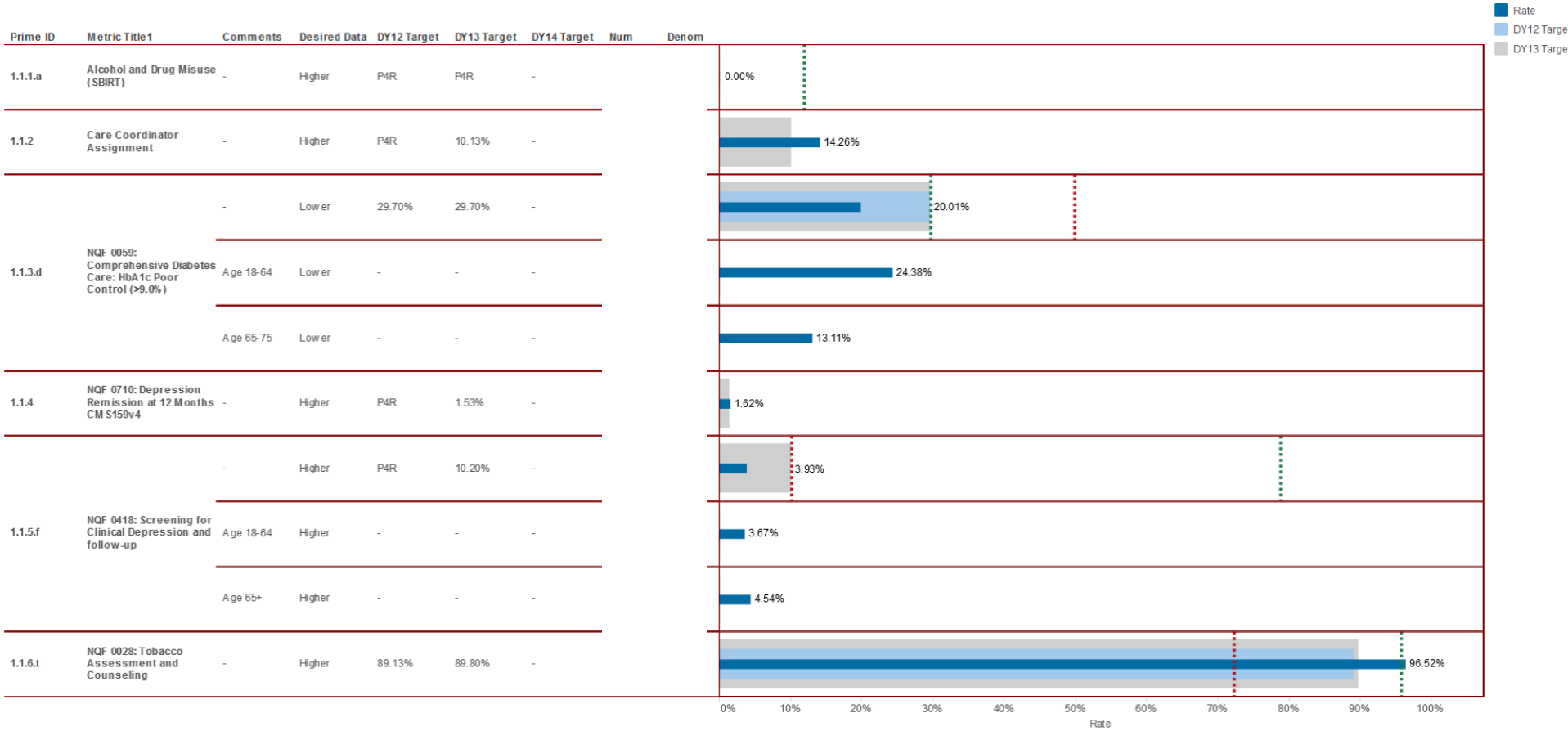
Monthly Data | Historical View | Raw Data View



**PRIME**  
Public Hospital Redesign & Incentives in Medi-Cal Program

Report Period  
Jul 2016 - Jun 2017

Select Project	Report Period	Total PRIME Patients	74,436
1.1 Integration of Behavioral Health and Primary Care	2017-06. (Annual Report)	PRIME Patients with Specialty Appointments	51,143



# Historical View – trending over time

Monthly Data | **Historical View** | Raw Data View



**PRIME**  
Public Hospital Redesign & Incentives in Medi-Cal Program

Select Project

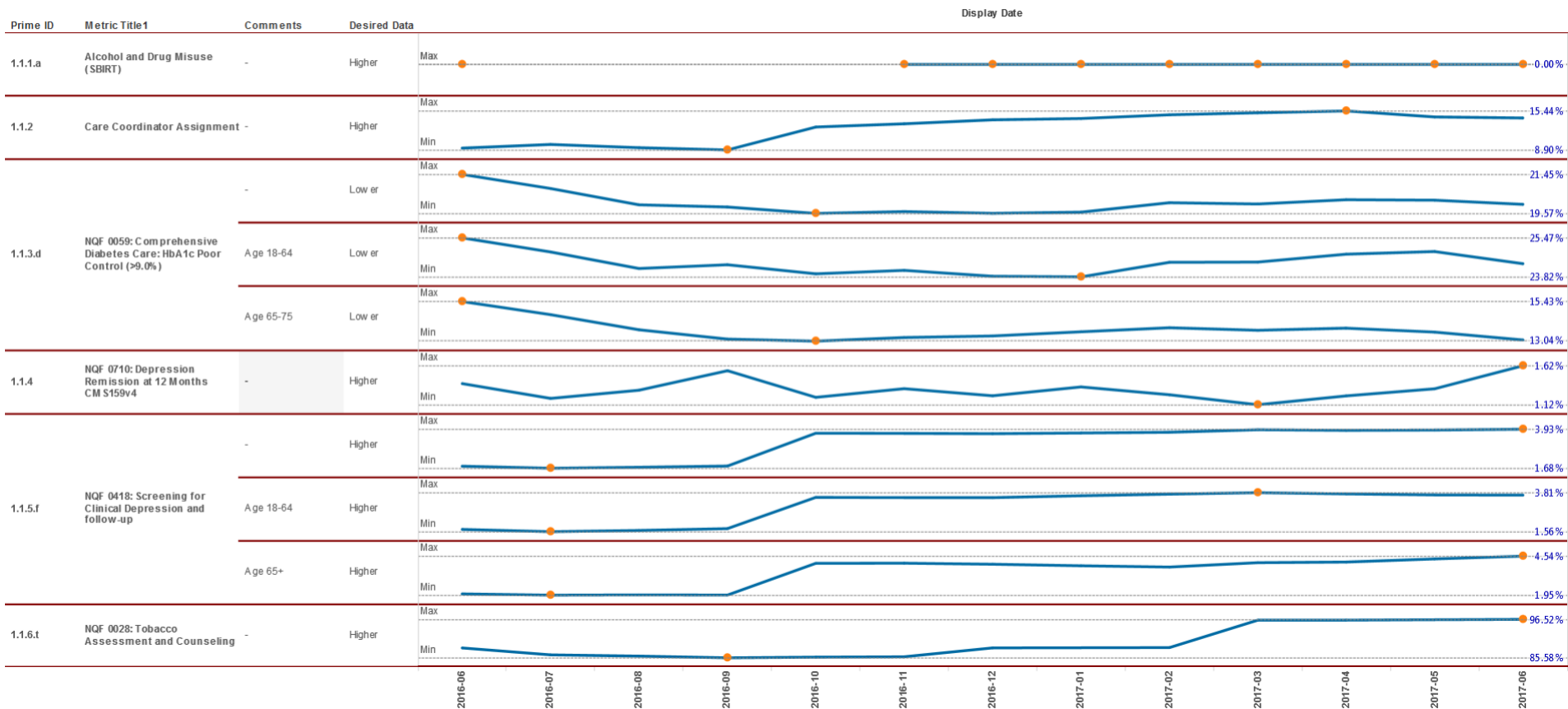
1.1 Integration of Behavioral Health and Primary Care

Date Granularity

Year-Month

Max-Min Rates

Rate



**PRIME**  
Public Hospital Redesign & Incentives in Medi-Cal Program

Prime ID	Metric Title1	Comment	PRIME Patients with Specialty A	Total PRIME Patients
1.1.1.a	Alcohol and Drug Misuse (SBIRT)	-	2016-12	
1.1.2	Care Coordinator Assignment	-		
1.1.3.d	NQF 0059: Comprehensive Diabetes Care: HbA1c Poor Control (>9.0%)	-		
1.1.4	NQF 0710: Depression Remission at 12 Months CMS159v4	-		
1.1.5.f	NQF 0418: Screening for Clinical Depression	-		

Select Report Period

(Multiple values)

- 2016-06. (Annual Report)
- 2016-07.
- 2016-08.
- 2016-09.
- 2016-10.
- 2016-11.
- 2016-12. (Mid-Year Report)
- 2017-01.
- 2017-02.
- 2017-03.
- 2017-04.
- 2017-05.
- 2017-06. (Annual Report)

Ability to select multiple time periods.

# Raw Data View – useful comparing reporting periods at a glance and for verification

Monthly Data | Historical View | Raw Data View

**UC DAVIS MEDICAL CENTER**  
**PRIME**  
 Public Hospital Redesign & Incentives in Medi-Cal Program

**Report Periods**  
 Jan 2016 - Dec 2016  
 Jul 2015 - Jun 2016

Project Name (All)	Select Report Period (Multiple values)	<b>PRIME Patients with Specialty Appointments</b>	<b>2016-06</b>	<b>2016-12</b>
			49,876	51,565
		<b>Total PRIME Patients</b>	<b>74,163</b>	<b>76,037</b>

Project	Prime ID	Metric Title1	Comments	DY12 Target	DY13 Target	Report End Date					
						2016-12			2017-06		
						Num	Denom	Rate	Num	Denom	Rate
PROJECT 1.1: Integration of Behavioral Health and Primary Care	1.1.1.a	Alcohol and Drug Misuse (SBIRT)	-	P4R	P4R			0.00%			0.00%
	1.1.2	Care Coordinator Assignment	-	P4R	10.13%			13.95%			14.26%
	1.1.3.d	NQF 0059: Comprehensive Diabetes Care: HbA 1c Poor Control (>9.0%)	-	29.70%	29.70%			19.57%			20.01%
	1.1.4	NQF 0710: Depression Remission at 12 Months CMS159v4	-	P4R	1.53%			1.24%			1.62%
	1.1.5.f	NQF 0418: Screening for Clinical Depression and follow-up	-	P4R	10.20%			3.67%			3.93%
	1.1.6.t	NQF 0028: Tobacco Assessment and Counseling	-	89.13%	89.80%			88.41%			96.52%
PROJECT 1.2: Ambulatory Care Redesign: Primary Care	1.2.1.a	Alcohol and Drug Misuse (SBIRT)	-	P4R	P4R			0.00%			0.00%
	1.2.2	NQF 0005: CG-CA HPS: Provider Rating	-	70.30%	70.30%			83.90%			
	1.2.3.c	NQF 0034: Colorectal Cancer Screening	-	65.70%	70.20%			70.11%			72.49%
	1.2.4.d	NQF 0059: Comprehensive Diabetes Care: HbA 1c Poor Control (>9.0%)	-	29.70%	29.70%			19.57%			20.01%
	1.2.5.b	NQF 0018: Controlling Blood Pressure	-	69.30%	69.40%			74.88%			79.95%
	1.2.6	Documented REAL and/or SOGI disparity reduction plan	-	P4R	NA						
	1.2.7.i	NQF 0068 : Ischemic V ascular Disease (I V D): Use of Aspirin or Another Antithrombotic	-	91.80%	91.94%			84.15%			90.86%
	1.2.8	Prevention Quality Overall Composite #90 (AHRQ PQI #90)	-	P4R	0.84%			0.78%			0.70%
	1.2.9	Primary Care Redesign metrics stratified by REAL categories and SOGI	-	P4R	NA						
	1.2.10	REAL and/or SO/GI disparity reduction	-	NA	P4P						
	1.2.11	REAL data completeness	-	20.00%	40.00%			97.75%			98.40%