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**SETMA's Response to the Robert Wood Johnson Foundation
Part III The Primary Care Team
Learning from Effective Ambulatory Practices
By James L. Holly, MD
Your Life Your Health
The Examiner
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(Editor's Note: This continues SETMA's Response to RWJF and addresses SETMA's performance, tracking and auditing of Preventive Care issues related to the ambulatory delivery of healthcare. The request for information had five sections. The first was how SETMA approaches preventive health care as a team.)

SETMA's Preventive Care Program involves the following:

1. Traditional preventive care such as cancer screening (breast, cervical, prostate, colon)
2. Diabetes prevention and diabetes screening
3. HIV screening for all patients between 13 & 64 years of age
4. Hypertension Prevention
5. Tobacco prevention
6. Obesity prevention
7. Sedentary life style
8. Immunizations (flu, pneumovax, tetanus/diphtheria/acellularpetrussis)
9. Glaucoma Screening
10. Renal Disease Screening

The first step in this preventive program is the following template which address almost all preventive and screening studies done. The first thing the nurse does after completing the patient's weight, blood pressure, body fat, etc., is to open the Pre-Visit/preventive Screening template. The measures which apply to the patient and have been done will appear in black. The measures which apply to the patient and have not been done will appear in red and the measures which do not apply to this patient will be in grey.

Any measures which apply and have not been completed can be fulfilled by clicking the "order" button which appears beside each element. When that button is clicked, three things happen:

1. The test or procedure is ordered.
2. The charge is sent to billing – but will not be sent to the payer until it has been done.
3. The test is placed on the patient's chart.
4. The metric is marked as done.

Pre-Visit/Preventive Screening

General Measures (Patients >18)

Has the patient had a tetanus vaccine within the last 10 years?
 Date of Last

Has the patient had a flu vaccine within the last year?
 Date of Last

Has the patient ever had a pneumonia shot? (Age>50)
 Date of Last

Does the patient have an elevated (>100 mg/dL) LDL?
 Last

Has the patient been screened at least once for HIV? (Age 13-64)
 Date of Last

Testing not required if patient refused, tested elsewhere or if diagnosis confirmed.
 Check If Patient Refuses Testing
 Check If Patient Tested Elsewhere

Elderly Patients (Patients >65)

Has the patient had an occult blood test within the last year? (Patients >50)
 Date of Last

Has the patient had a fall risk assessment completed within the last year?
 Date of Last

Has the patient had a functional assessment within the last year?
 Date of Last

Has the patient had a pain screening within the last year?
 Date of Last

Has the patient had a glaucoma screen (dilated exam) within the last year?
 Date of Last *Add Referral At Right*

Does the patient have advanced directives on file or have they been discussed with the patient?
 Discussed? Completed?

Is the patient on one or more medications which are considered high risk in the elderly?

Diabetes Screening
 Is Diabetes screening appropriate for this patient?

Pre-Diabetes Patients

If pre-diabetic, has the patient had a HgbA1c test within the last year?
 Date of Last

Diabetes Patients

Has the patient had a HgbA1c within the last year?
 Date of Last

Has the patient had a dilated eye exam within the last year?
 Date of Last *Add Referral Below*

Has the patient had a 10-gram monofilament exam within the last year?
 Date of Last

Has the patient had screening for nephropathy within the last year?
 Date of Last

Has the patient had a urinalysis within the last year?
 Date of Last

Has the patient ever been referred to DSME? *Has the patient been referred to DSME within the last two years?*
Add Referrals Below

Female Patients

Has the patient had a pap smear within the last two years? (Ages 21 to 64)
 Date of Last *Add Referral Below*

Has the patient had a mammogram within the last two years? (Ages 40 to 69)
 Date of Last *Add Referral Below*

Has the patient had a bone density within the last two years? (Age >50)
 Date of Last *Add Referral Below*

Male Patients

Has the patient had a PSA within the last year? (Age >40)
 Date of Last

Has the patient had a bone density within the last two years? (Age >65)
 Date of Last *Add Referral Below*

Referrals (Double-Click To Add/Edit)

Referral	Status	Referring

The second thing the nurse does is to complete the LESS Initiative by clicking the following:

1. Weight Management – this shows the disease risk of the patient’s weight, the patients BMI, BMR, Body Fat Percent and an explanation of energy metabolism and how to change the BMR.
2. Exercise – this explains to the patient how to get started and provides a personalized exercise program including a walking program. It is scaled to the Cooper Aerobic data. If the patient has exercise limits, i.e., CHF, Diabetes, etc., specialized exercise prescriptions can be completed.
3. Smoking Cessation – this addresses primary, secondary and tertiary tobacco use and strategies for stopping.

Once this is done, a document is completed which summaries all of the patient’s personal data which is given to the patient. SETMA audits nurse and provider performance on The LESS. There is a laser printer in every examination room and the document is printed and given to the patient at that time.

Last Updated 04/24/2012

SETMA's LESS Initiative

10-15 pounds of excess weight places a person at a higher risk for developing diabetes, but 10-15% decrease in weight, even if a person is obese, decreases that risk significantly. The bad news is that more people are at greater risk of developing diabetes than think they are, but the good news is that a person can help decrease their risk without attaining their ideal body weight.

You are 15 pounds overweight which places you at a higher risk for developing Diabetes.

If you lose 2 to 4 pounds, you will significantly reduce your risk of developing Diabetes.

[Limitations](#)

[Weight Management](#)

[Exercise](#)

[CHF Exercise](#)

[Diabetic Exercise](#)

[Smoking Cessation](#)

Elements of Preventing Diabetes

[Which Exercise Prescription?](#)

1. Family History

- Family History of Type II Diabetes? Yes No
Family History of Hypertension? Yes No
Family History of Hyperlipidemia? Yes No

2. Is the patient overweight or obese? Yes No

0.00 BMI 32.2 Body Fat %

- Is the adiposity in the abdominal area, as indicated by the waist circumference? Yes No
(Males > 38" or Females > 35")

34.50 inches

3. Did the patient have a low birth weight? Yes No

(< 5 lbs 5 oz)

6 lbs 2 oz

4. Is the patient's BP elevated? Yes No

(> 130/80 mmHg)

140 / 95 mmHg

5. Are the patient's lipids abnormal? Yes No

HDL 30

Triglycerides 111

Cholesterol 165

6. Non-Caucasian Ethnicity? Yes No

African-American

Calculate Conclusion

Based on your age, body composition indicators (BMI or body fat), and the risk factors listed above you have a risk of developing diabetes. You must lose weight, exercise, stop smoking and/or avoid inhaling other people's smoke, and you need to maintain your weight loss through continuing to exercise. We will continue to monitor your blood pressure, blood sugar and lipids on a regular basis.

- We will provide you with follow-up counseling to help you stay on track towards health lifestyles.
 We will monitor you annually for the development of diabetes.

At the time of the Less Initiative being completed the nurse completes the "Screening Recommendations" for diabetes and if the algorithm requires it and the patient is fasting the appropriate screening test is performed. Other tools as seen below are also available for the appropriate patients such as "reducing your risk," "could you have diabetes and not know it," "predicting diabetes," etc. We tell all of our patients who are at risk of developing diabetes, "The best way to treat diabetes is don't get it."

Preventing Diabetes

Patient

[Screening Recommendations](#)
[Predicting Diabetes](#)
[Screening Insulin Resistance](#)
[IFG and IGT](#)
[Current Strategies](#)
[Could You Have Diabetes and Not Even Know It?](#)
[Reducing Your Risk](#)
[LOW Risk of Developing Diabetes](#)

Prediabetics have an atherogenic pattern of CV risk factors which are predominantly observed in prediabetics with increased HOMA IR and fasting insulin, i.e, insulin resistance.

Diagnosis	Fasting Test	Casual Test
Diabetes	> 126 mg/dL	> 200 mg/dL
Pre-Diabetes	100 - 125 mg/dL	140 - 199 mg/dL
None	< 100 mg/dL	< 140 mg/dL

Vital Signs

Height	<input type="text" value="72.00"/>	Waist	<input type="text" value="34.50"/>
Weight	<input type="text"/>	Hips	<input type="text" value="37.50"/>
BMI	<input type="text" value="0.00"/>	Ratio	<input type="text" value="0.92"/>
Body Fat	<input type="text" value="32.2"/>	Blood Pressure	<input type="text" value="140"/> / <input type="text" value="95"/>
BMR	<input type="text"/>		
Protein Req	<input type="text"/>		

Fasting Lab Results

FPG	<input type="text" value="75"/>	<input type="text" value="01/09/2012"/>
2-Hr OGTT	<input type="text" value="126"/>	<input type="text" value="08/18/2010"/>
DM Prediction Rule	<input type="text" value="0"/>	> 4 doubles the risk of DM

Check for New Labs

Cholesterol	<input type="text" value="165"/>	<input type="text" value="09/21/2011"/>
HDL	<input type="text" value="30"/>	<input type="text" value="09/21/2011"/>
LDL	<input type="text" value="113"/>	<input type="text" value="09/21/2011"/>
Triglycerides	<input type="text" value="111"/>	<input type="text" value="09/21/2011"/>
Magnesium	<input type="text" value="1.0"/>	<input type="text" value="07/07/2011"/>

Treatment

<input type="checkbox"/> Insulin Resistance	<input type="checkbox"/> Homocysteine
<input type="checkbox"/> Impaired Fasting Glucose	<input type="checkbox"/> hsCRP
<input type="checkbox"/> Hypertriglyceridemia	<input type="checkbox"/> Endothelial Dysfunction

Diabetic Education Referral (Double-Click)

Priority	Referring First	Referring Last	Referral
Immediate	Jehanara	Ahmed	<input type="text"/>

Links

[Insulin Resistance](#)
[Hypertension Mgmt](#)
[Weight Mgmt](#)
[Exercise](#)
[Lipids Mgmt](#)
[Metabolic Syndrome](#)
[Smoking Cessation](#)

The Preventing Hypertension template is also completed at this time and the materials go on the patients chart. We particularly focus at this point on patients with pre-hypertension.

Preventing Hypertension

[Contributing Causes to Hypertension](#)

Pre-Hypertension

- Pre-hypertension is defined as systolic blood pressure between 121 and 139 or a diastolic between 80 and 89.
- Patients with pre-hypertension have a higher risk of hypertension in the future. Lifestyle modification is recommended for these patients. However, drug treatment for pre-hypertension is indicated only for those with diabetes mellitus or chronic renal disease.
- If you are 55 years of age and do not have hypertension, your lifetime risk of developing hypertension is 90% if you don't take steps to avoid it.

Is this patient pre-hypertensive?

Yes No

Today's Blood Pressure / mmHg

/

Risk Factors for Developing Hypertension

- Diabetes
- Emotional Stress
- Heavy Alcohol Consumption
- Family History of Hypertension
- High Fat or High Salt Diet
- Male
- Middle-Aged or Older
- Oral Contraceptives (Birth Control)
- Overweight
- Post-Menopausal Female
- Race (African American)
- Sedentary Lifestyle
- Smoking

How Can I Reduce My Risk?

- If you are overweight, lose weight.
- Avoid heavy alcohol consumption.
- If you smoke, stop.
- Eat a heart healthy diet.
- [DASH Diet](#) (Auto-Print)
DASH = Dietary Approaches to Stop Hypertension
- Decrease your use of salt. [Low Sodium Diet](#) (Auto-Print)
- Exercise regularly.
- Learn to manage and reduce stress.

Medications Causing HPT

Part of SETMA's Preventive Health/Wellness Program involves the following questionnaires which are completed once a year on each of our patients. The following is a link to a tutorial on how to use these materials:

<http://www.jameslhollymd.com/Patient-Centered-Medical-Home-Annual-Questionnaires.cfm>

Those questionnaires are found on the front page of our primary care suite of templates.

[JHM](#) [NURSE](#) [HISTORIES](#) [HEALTH](#) [QUIZES](#) [HPI](#) [ROS](#) [P.E.](#) [X-RAY](#) [ASSESS](#) [PLAN](#) [PROCS](#)

Visit Type: Jonny Facility: ZTest Payor: 31 Years M Medicare

PCP: Larry Holly

BP: 140 / 95
 Pulse Pressure: 45
 Temp:
 Pulse: 6.00
 Resp:
 Weight (lb):
 BMI: 0.00
 Body Fat: 32.2
 BMR:

Chronic Conditions [Re-Order](#) HCC Rx Last Evaluated

		HCC	Rx	Last Evaluated	
1	COPD (chronic obstructive pulmonar	Y	Y	//	HPI-1,2
2	COPD (chronic obstructive pulmonar	Y	Y	//	
3	CHF (congestive heart failure)	Y	Y	//	HPI-3,4
4	Hyperlipidemia		Y	//	
5	Allergic rhinitis with asthma without		Y	//	HPI-5,6
6	Asthma		Y	//	
7	Pre-diabetes			//	HPI-7,8
8	Diabetes mellitus associated with re	Y	Y	//	
9	Rheumatoid aortitis	Y	Y	//	HPI-9,10
10				//	
11				//	HPI-11,12
12				//	
13				//	HPI-13,14
14				//	
15				//	HPI-15,16
16				//	
17				//	HPI-17,18
18				//	
19				//	HPI-19,20
20				//	
21				//	
22				//	
23				//	
24				//	
25				//	

Fall Risk Assessment: 03/30/2012
 Functional Assessment: 04/01/2011
 Pain Assessment: 04/01/2011
 Stress Assessment: 04/09/2012
 Wellness Assessment: 04/24/2012
 Sleep Questionnaire: 03/19/2012
 Karnofsky/Lansky: 04/10/2012
 Palliative Perf Scale: 04/10/2012
 Braden Scale: 04/11/2012
 FAST Assessment: 04/11/2012

Clinic Performance Measures
 Alert
 Allergies
 Comments
 E-Mail Note
 Telephone
 Vitals/Time
 Nursing Home Patient

HCC Reviewed Today
 Last Reviewed: 08/26/2009

HIPAA

Chronic Condition HCC Score: 1.962
 Chronic Condition RxHCC Score: 1.7670
 Total Chronic HCC/RxHCC Score: 3.7290

Home
 Nursing
 Histories
 Health
 Lab Results
 Questionnaires
 HPI Chief
 System Review
 Physical Exam
 Radiology
 Assessment
 Hydration
 Nutrition
 Exercise
 Plan
 Procedures
 Chart Note

Each of these were addressed in recent Your Life Your Health articles, which can be found at www.jameslhollymd.com:

- [Hospice Palliative Scales Part II](#)
- [Hospice Palliative Scales Part I](#)
- [STARs Program and SETMA's Solution Part II](#)
- [STARs Program and SETMA's Solution](#)
- [Patient-Centered Medical Home Annual Questionnaires](#)

The following are our audits for preventive services. SETMA Mid County is a brand new clinic and the providers there are new. Their performance will improve quickly. We are only giving you the data for 2011, but on our website at www.jameslhollymd.com under **Public Reporting**, all of the data for 2009, 2010, 2011 and the first quarter of 2012 are posted. Each month, SETMA's providers and nurses have a training meeting in which the use of the disease management tools,

clinical decision support tools and provider performance audits are reviewed. Opportunities and plans for improvement of our performance on the Triple Aim are discussed.



NQF - Care for Older Adults

E & M Codes: Clinic Only
 Encounter Date(s): Jan 1, 2011 Through Dec 30, 2011

Location	Provider	Counseling for Physical Activity	Colorectal Cancer Screening	Fall Risk Assessment	Urinary Incontinence Assessment
SETMA 1	Aziz	52.6%	63.7%	98.0%	95.1%
	Duncan	80.8%	68.2%	94.8%	99.2%
	Henderson	53.1%	65.3%	99.8%	99.7%
	Murphy	69.6%	60.6%	98.6%	95.4%
	Paling	40.3%	37.0%	98.0%	97.3%
	Thomas	31.0%	39.8%	90.6%	98.2%
SETMA 1 Totals:		58.5%	59.2%	98.0%	97.8%
SETMA 2	Anthony	99.2%	69.5%	99.4%	98.9%
	Anwar	88.6%	78.5%	98.6%	97.2%
	Colbert	--	--	--	--
	Holly	99.1%	77.4%	100.0%	99.0%
	LeFebvre	88.9%	81.8%	97.7%	98.3%
	Wheeler	88.9%	74.5%	97.3%	98.7%
	SETMA 2 Totals:		95.8%	76.7%	99.4%
SETMA Mid County	Aziz	0.0%	0.0%	50.0%	0.0%
	George	15.3%	20.8%	85.2%	79.0%
	Halbert	--	0.0%	--	--
	Shepherd	0.0%	15.0%	28.6%	97.8%
	Thomas	34.0%	22.7%	87.3%	95.8%
SETMA Mid County Totals:		25.3%	21.9%	84.0%	89.2%
SETMA West	Curry	66.1%	64.2%	98.8%	89.0%
	Deppenne	52.0%	52.8%	98.8%	98.7%
	Halbert	73.2%	52.4%	98.0%	98.3%
	Horn	94.0%	65.0%	98.7%	99.1%
	Quirelli	47.0%	61.4%	99.8%	97.4%
	Satterwhite	88.1%	56.2%	99.8%	89.9%
	Vardeman	77.1%	56.1%	99.1%	94.1%

We have a major effort going forward to decrease the use of potentially high risk medications.



HEDIS - Effectiveness of Preventive Care - Older Adults

E & M Codes: Clinic Only
 Encounter Date(s): Jan 1, 2011 through Dec 31, 2011
 Report Criteria: Patients 65 And Older

Location	Provider	Advance Care Planning	Medication Review	Functional Assessment	Pain Screening	At Least 1 High Risk Medication	At Least 2 High Risk Medications	Glaucoma Screening
SETMA 1	Aziz	29.7%	93.3%	99.1%	98.8%	35.8%	38.8%	99.1%
	Duncan	13.4%	100.0%	94.8%	96.5%	48.5%	38.0%	98.8%
	Henderson	23.7%	100.0%	99.0%	99.0%	35.9%	14.0%	99.5%
	Murphy	12.8%	99.8%	98.9%	99.2%	36.1%	11.9%	99.9%
	Paling	16.1%	98.7%	96.5%	98.3%	35.4%	12.2%	99.6%
	Thomas	20.0%	93.3%	94.0%	100.0%	43.3%	17.2%	97.6%
SETMA 1 Totals:		18.8%	98.1%	98.0%	98.7%	38.7%	15.2%	98.4%
SETMA 2	Anthony	38.7%	100.0%	99.0%	99.7%	32.7%	8.8%	99.5%
	Anwar	71.1%	100.0%	98.8%	98.0%	26.0%	9.7%	99.5%
	Holly	34.5%	100.0%	100.0%	100.0%	20.3%	6.1%	100.0%
	LeFebvre	14.8%	100.0%	97.7%	98.0%	29.8%	11.0%	98.7%
	Wheeler	35.2%	94.5%	97.5%	97.5%	42.4%	16.3%	99.4%
	SETMA 2 Totals:		45.7%	99.2%	98.8%	98.8%	31.7%	10.9%
SETMA Mid County	George	11.0%	100.0%	95.9%	95.0%	20.5%	0.0%	100.0%
	Thomas	22.9%	94.3%	94.9%	98.3%	38.8%	9.3%	97.3%
SETMA Mid County Totals:		16.3%	96.3%	95.3%	97.4%	32.5%	5.8%	98.4%
SETMA West	Curry	0.6%	99.8%	99.9%	99.0%	34.4%	14.2%	99.8%
	Deppenne	11.0%	99.5%	98.9%	98.0%	35.5%	13.0%	100.0%
	Halbert	0.9%	100.0%	99.2%	99.2%	32.4%	13.2%	99.4%
	Horn	17.2%	100.0%	96.0%	99.0%	37.4%	13.1%	98.8%
	Quirelli	13.4%	100.0%	100.0%	100.0%	43.6%	16.0%	97.1%
	Satterwhite	17.7%	100.0%	100.0%	100.0%	41.3%	16.0%	98.5%
	Vardeman	11.2%	99.6%	98.4%	99.4%	37.8%	15.4%	94.1%
SETMA West Totals:		11.5%	99.8%	99.5%	99.5%	36.3%	14.2%	97.4%
SETMA Totals:		25.6%	98.0%	98.0%	98.9%	35.7%	13.3%	98.8%



HEDIS - Effectiveness of Preventive Care

E & M Codes: Clinic Only

Encounter Date(s): Jan 1, 2011 through Dec 31, 2011

Location	Provider	Adult BMI	Breast Cancer Screening	Cervical Cancer Screening	Chlamydia Screening	Childhood Immunizations	Colorectal Cancer Screening	Lead Screening in Children	Child BMI
SETMA 1	Aziz	94.5%	34.6%	75.2%	--	--	94.3%	--	--
	Duncan	97.3%	39.7%	78.9%	--	--	96.8%	--	--
	Henderson	98.9%	60.2%	75.5%	--	--	95.5%	--	--
	Murphy	97.6%	38.7%	71.6%	--	--	96.9%	--	--
	Palang	97.7%	50.0%	63.5%	--	--	98.1%	--	--
	Thomas	100.0%	60.7%	58.8%	--	--	95.2%	--	--
SETMA 1 Totals:		97.4%	45.1%	75.0%	--	--	96.1%	--	--
SETMA 2	Anthony	98.6%	49.4%	66.3%	--	--	98.1%	--	--
	Anwar	99.6%	71.7%	82.5%	--	--	98.2%	--	--
	Cricchio, A	97.4%	43.2%	59.5%	--	--	98.7%	--	--
	Cricchio, M	99.7%	52.2%	65.5%	--	--	98.6%	--	--
	Holly	100.0%	50.0%	72.7%	--	--	100.0%	--	--
	Leffeste	100.0%	74.2%	75.2%	--	--	100.0%	--	--
	Wheeler	98.9%	50.9%	81.9%	--	--	98.2%	--	--
SETMA 2 Totals:		99.4%	59.7%	74.4%	--	--	98.6%	--	--
SETMA West	Curry	100.0%	55.3%	77.3%	--	--	99.0%	--	--
	Deiparine	98.5%	40.7%	59.2%	--	--	97.3%	--	--
	Halbert	99.0%	31.6%	38.8%	--	--	98.1%	--	--
	Horn	99.9%	39.9%	57.3%	--	--	96.9%	--	--
	Qureshi	99.6%	44.8%	57.5%	--	--	97.0%	--	--
	Batterwhite	99.1%	36.8%	50.0%	--	--	97.4%	--	--
	Vardaman	100.0%	44.0%	59.6%	--	--	93.7%	--	--
SETMA West Totals:		99.6%	41.2%	56.8%	--	--	96.9%	--	--
SETMA Totals:		99.0%	48.0%	66.5%	--	--	97.2%	--	--

The following are the auditing results for screening of our Medicare Advantage patients which represent 32% of our patients and 50% of our visits. This data is for January-March, 2012

Provider	Breast Cancer Screening	Colorectal Cancer Screening	Cholesterol Management In Patients w/Cardiovascular Disease	Glaucoma Screening In Older Adults	Adult Body Mass Index	Osteoporosis Management In Women w/Fracture	Diabetes Dilated Eye Exam
	>=80%	>=66%	>=91%	>=78%	>=73%	>=67%	>=73%
Anthony	77.8	73.3	84.1	100.0	100.0	50.0	79.2
Anwar	65.1	80.5	78.1	100.0	100.0	0.0	69.9
Aziz	33.3	71.7	86.0	100.0	100.0	--	56.6
Curry	56.0	55.4	87.9	100.0	97.1	0.0	70.3
Darden	0.0	72.7	100.0	100.0	100.0	--	100.0
Deiparine	57.1	61.2	76.7	100.0	100.0	--	42.1
Duncan	56.2	72.5	84.8	99.3	98.0	--	67.2
Halbert	66.7	49.3	73.9	98.9	100.0	--	34.3
Henderson	60.0	74.7	77.5	100.0	92.9	100.0	61.0
Holly	66.7	80.4	89.3	100.0	100.0	--	80.5
Horn	45.0	73.5	84.1	96.2	100.0	50.0	41.1
Leffeste	90.9	80.0	88.5	99.0	98.0	--	83.5
Murphy	33.3	69.8	88.9	100.0	95.0	--	47.5
Palang	100.0	66.3	84.6	100.0	90.0	66.7	41.4
Qureshi	56.2	71.6	92.1	96.3	100.0	--	50.6
Read	100.0	82.4	75.0	91.7	100.0	--	75.0
Thomas	0.0	63.4	57.5	100.0	100.0	--	100.0
Vardaman	60.0	66.3	68.8	92.3	100.0	0.0	58.1
Wheeler	81.2	81.6	78.0	98.6	100.0	--	71.3

Provider	Diabetes Nephropathy Screening >=89%	Diabetes HbA1c Control (<= 9.0%) >=88%	Diabetes LDL Control (< 100 mg/dL) >=66	Controlling High Blood Pressure >=71%	Drug Therapy for Rheumatoid Arthritis >=84%	Annual Flu Vaccine >=76%	Pneumonia Vaccine >=78%
Anthony	98.9	94.0	74.3	82.0	50.0	82.3	86.4
Anwar	94.2	92.7	62.6	94.8	35.3	76.8	96.8
Aziz	94.7	89.5	69.7	76.9	28.6	49.8	86.0
Curry	87.8	95.9	70.3	76.7	50.0	77.6	85.2
Darden	100.0	100.0	100.0	75.0	--	78.6	92.3
Deiparine	81.6	97.4	63.2	84.8	25.0	62.1	81.5
Duncan	90.5	94.8	69.0	93.1	55.6	79.9	90.3
Halbert	90.5	96.1	71.3	72.3	42.1	37.5	57.2
Henderson	94.3	96.2	66.7	91.2	18.2	74.3	89.7
Holly	96.1	93.5	64.9	95.0	16.7	94.6	98.3
Horn	93.2	98.6	63.0	96.4	60.0	55.6	74.4
Leifeste	94.2	97.5	77.7	85.0	80.0	84.4	94.4
Murphy	86.3	96.3	76.7	82.0	45.5	78.3	92.1
Palang	77.6	89.7	67.2	76.8	0.0	60.1	75.8
Qureshi	82.0	87.6	65.2	87.8	20.0	55.0	76.1
Read	100.0	100.0	75.0	61.5	--	73.7	84.2
Thomas	100.0	100.0	66.7	89.4	33.3	30.2	40.7
Vardiman	71.0	96.8	64.5	69.0	--	44.5	76.3
Wheeler	92.0	95.4	66.7	83.7	25.0	75.3	96.1

Provider	Advice for Physical Activity >=80%	Fall Risk Intervention >=76%	High Risk Medications <=9.3%
Anthony	99.7	99.7	20.5
Anwar	99.4	99.6	16.0
Aziz	54.8	99.2	20.7
Curry	44.4	99.4	12.8
Darden	46.2	100.0	28.3
Deiparine	55.5	96.0	11.9
Duncan	84.7	97.2	31.1
Halbert	13.1	88.9	20.5
Henderson	39.0	100.0	19.2
Holly	99.1	100.0	9.5
Horn	81.4	100.0	17.0
Leifeste	92.8	100.0	19.7
Murphy	57.3	98.9	20.1
Palang	21.9	96.9	18.9
Qureshi	31.4	98.1	18.5
Read	89.5	94.7	11.7
Thomas	63.4	95.4	18.2
Vardiman	77.3	99.9	18.5
Wheeler	99.1	100.0	25.9

The following is the 2011 audit for performance on the LESS (Lose Weight, Exercise Stop Smoking) Initiative. We consider anything above 95% as being acceptable.

LESS Initiative
Compliance (%)

Provider	Compliance (%)
Anthony	95.1
Anwar	96.0
Aziz	95.5
Cricchio, A	98.3
Cricchio, M	87.9
Curry	92.1
Oeiparine	90.9
Duncan	90.9
Halbert	83.1
Henderson	89.2
Holly	99.0
Hom	96.7
Leifeste	84.2
Murphy	93.4
Palang	76.2
Qureshi	92.1
Sattewhite	89.7
Thomas	78.2
Vardiman	95.8
Wheeler	94.9

