

## NC DHHS - Office of Rural Health

## **Key Performance Measures Reported by Program**

## **State Fiscal Year 2023**

(7/1/2022 - 6/30/2023)

|   | NC Health Center  | ORH Programs   |   |                                       |                                   |                                       |
|---|-------------------|--|---|---------------------------------------|-----------------------------------|---------------------------------------|
| Performance Measure or Output:                                  | Data (UDS 2022) 1 | Office of Rural<br>Health (Total of<br>Four Programs) <sup>2</sup> | Community<br>Health Grants <sup>3</sup> | Rural<br>Health Centers<br>Operations | Farmworker<br>Health <sup>4</sup> | Medication<br>Assistance <sup>5</sup> |
| Number of Grantees Reporting Data                               | 39                | 235  | 104                                     | 16                                    | 10                                | 105                                   |
| Patients Served   | 696,072           | 426,175  | 292,602                                 | 96,965                                | 11,033                            | 25,575                                |
| Total Patient Encounters  | -                 | 1,432,315  | 1,145,202                               | 287,113                               | n/a                               | n/a                                   |
| Telemedicine Encounters <sup>6</sup>                            | -                 | 98,078   | 88,619                                  | 9,459                                 | n/a                               | n/a                                   |
| Controlled Diabetes <sup>7</sup>                                | 71.9%             | 71.1%  | 69.2%                                   | 75.1%                                 | 65.7%                             | \$104,081,008 <del>1</del>            |
| Controlled Hypertension <sup>8</sup>                            | 62.3%             | 66.1%  | 65.4%                                   | 67.9%                                 | 51.5%                             | \$15,201,072 <del>1</del>             |
| BMI Screenings and Follow-up <sup>9</sup>                       | 55.2%             | 59.9%  | 58.2%                                   | 64.4%                                 | 70.0%                             | n/a                                   |
| Tobacco Screenings and Intervention <sup>10</sup>               | 81.0%             | 70.1%  | 71.7%                                   | 64.0%                                 | 84.3%                             | n/a                                   |
| Screening for Depression and Follow-Up Plan <sup>11</sup>       | 61.2%             | 74.2%  | 74.2%                                   | n/a                                   | n/a                               | n/a                                   |
| Early Entry into Prenatal Care (first visit in first trimester) | 73.3%             | 57.2%  | 57.2%                                   | n/a                                   | n/a                               | n/a                                   |

revised 2/25/2025

<sup>†</sup> Reporting Total Wholesale Price of the Diabetic, Hypertension, and Mental Health Medications received through the program.

<sup>1</sup> HRSA's UDS 2022 Health Center Program Grantee Data, North Carolina Program Data reports on a calendar year (https://data.hrsa.gov/tools/data-reporting/program-data/state/NC)

Totals for the Office of Rural Health may not equal the sum of the programs represented here as there are grantees that have contracts with muliple programs and some programs are not represented.

<sup>&</sup>lt;sup>3</sup> Community Health Grants program includes sites that deliver General, Dental, and Maternal Care and some School-Based Health Centers. Patients served and encounters reported here are totalled from all of these grantees, while the clinical measures related to Diabetes, Hypertension, BMI and Tobacco are reported only from General Care Sites.

<sup>&</sup>lt;sup>4</sup> The NC Farmworker Health Program reports data on a Calendar Year 1/1/2023- 12/31/2023 and reports clinical screening measures using a sample of 70 random patients.

 $<sup>^{5}</sup>$  Medication Assistance has 60 grantees with a total of 105 TPC sites.

 $<sup>^{\</sup>rm 6}\,$  Telemedicine encounters are included in the Total Patient Encounters number reported.

<sup>&</sup>lt;sup>7</sup> Grantee's reporting patients with well controlled Diabetes as evidenced by HbA1c levels of <=9. Data were collected as uncontrolled diabetes (HbA1c level >9 or no test) and inverted for reporting purposes.

 $<sup>^{8}</sup>$  Grantee's reporting patients with well controlled Hypertension as evidenced by blood pressure levels  $\leq$  140/90.

<sup>&</sup>lt;sup>9</sup> Grantee's reporting patients screened for obesity using Body Mass Index (BMI) and provided follow-up if BMI was outside of normal parameters.

<sup>&</sup>lt;sup>10</sup> Grantee's reporting adult patients screened for tobacco use and, if a tobacco user, received cessation intervention.

<sup>&</sup>lt;sup>11</sup> Screening for Depression and Follow-Up are reported by the Community Health Grant School-Based Health Center Grantees.