Aliados Health

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Reporting Updates

Data Workgroup, October 14, 2025

By Ben Fouts, Data Analyst

Aliados Data Workgroup Agenda

- Quality Measure Updates
- 2025 Value Sets
- Other Value Set Updates
- Discussion on Future Reports

Quality Measure Updates

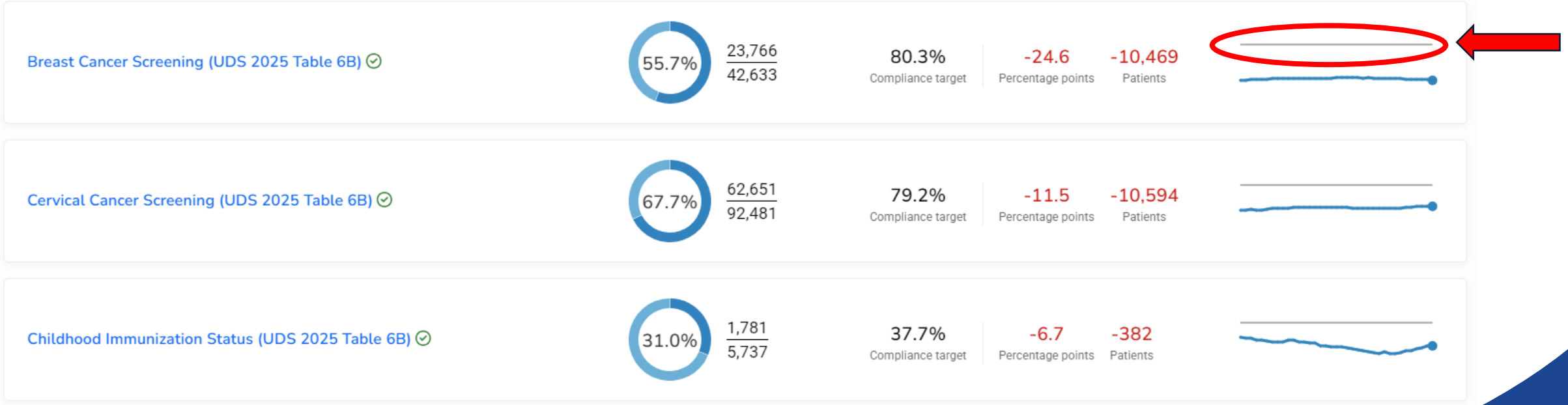
Quality Measure Targets

Targets have been added to the following 2025 measure groups in the Aliados Aggregate instance of Relevant:

- UDS
- QIP
- PIP
- DHCS

Targets in Relevant

To add targets, you must have editing permissions



Published Targets (QIP and PIP)

QIP Manual

2025 Primary Care Provider Quality Improvement Program Summary of Measures

Core Measurement Set – Family Medicine

To view the actual targets for Clinical measures, please refer to the QIP Specifications Manual via eReports

Download from eReports

Measure Name	Full Point Target 90th Percentile (unless otherwise indicated)	Partial Point Target 75th Percentile (unless otherwise indicated)	Full Points	Partial Points
CLINICAL DOMAIN: CLINICAL MEASURES				
Breast Cancer Screening			6	4
Cervical Cancer Screening			6	4
Child and Adolescent Well Care Visits			9	7
Childhood Immunization Status: Combo 10			6	4
Colorectal Cancer Screening	75th Percentile	50th Percentile	5	4
Comprehensive Diabetes Care: HbA1c Control			6	4
Comprehensive Diabetes Care - Retinal Eye Exams			5	4
Controlling High Blood Pressure			6	4
Lead Screening in Children			6	4
Immunizations for Adolescents – Combo 2			6	4
Well-Child Visits in the First 15 Months of Life			9	7

PIP Manual

Clinical Quality Measure Targets

Measure/ Results	Controlling High Blood Pressure	Blood Sugar Control Among Patients with Diabetes	Colorectal Cancer Screening	*NEW* Breast Cancer Screening (42-51yo)	Six Well Child Checks by 15 Months of Age	Adolescent Depression Screening and Follow-up
TARGETS						
FY 25-26 Targets	67% full points 64% ¾ points 60% half points	65% full points 63% ¾ points 60% half points	47% full points 44% ¾ points 35% half points	47% full points 44% ¾ points 40% half points	60% full points 55% ¾ points 50% half points	60% full points 55% ¾ points 45% half points

QIP Targets

Decide to use the full or partial target (depending on your data)

Measure Name	2025	
	Full Target	Partial Target
Breast Cancer Screening	63.48%	59.51%
Cervical Cancer Screening	67.46%	61.56%
Child and Adolescent Well-Care Visits	64.74%	58.07%
Childhood Immunization Status - Combo 10	42.34%	34.79%
Colorectal Cancer Screening	43.71%	38.07%
Comprehensive Diabetes Management – HbA1c Good Control	63.50%	60.83%
Comprehensive Diabetes Management – Retinal Eye Exam	64.06%	59.41%
Controlling High Blood Pressure	72.75%	69.37%
Lead Screening in Children	79.51%	71.11%
Immunizations for Adolescents	48.80%	40.88%
Well-Child Visits in the First 15 Months of Life	69.67%	64.99%

QIP Target Changes

Yellow highlight = 2025 percentile definition change

Measure Name	2024 to 2025 Difference		
	Full Target	Partial Target	Change
Breast Cancer Screening	0.11%	7.31%	Partial: 50th to 75th percentile
Cervical Cancer Screening	0.98%	4.45%	Partial: 50th to 75th percentile
Child and Adolescent Well-Care Visits	3.59%	10.00%	Partial: 50th to 75th percentile
Childhood Immunization Status - Combo 10	-2.92%	3.89%	Partial: 50th to 75th percentile
Colorectal Cancer Screening	3.90%	6.39%	Full: 50th to 75th percentile Partial: 25th to 50th percentile
Comprehensive Diabetes Management – HbA1c Good Control	3.16%	8.52%	Partial: 50th to 75th percentile
Comprehensive Diabetes Management – Retinal Eye Exam	0.73%	7.10%	Partial: 50th to 75th percentile
Controlling High Blood Pressure	0.53%	8.06%	Partial: 50th to 75th percentile
Lead Screening in Children	16.72%	--	Full: 50th to 90th percentile Partial: No points in 2024
Immunizations for Adolescents	0.00%	6.57%	Partial: 50th to 75th percentile
Well-Child Visits in the First 15 Months of Life	1.58%	6.61%	Partial: 50th to 75th percentile

UDS Targets

- Not published the same way
- However, HRSA distributes Community Health Quality Recognition (CHQR) badges that recognize Health Center Program awardees that have “achieved quality improvements in clinical quality and health outcomes.”
- CHQR badges are awarded yearly based on the latest Uniform Data System (UDS) reporting year.
- Depending on the measure, the CHQR uses Healthy People 2030 targets, Million Heart Goals (2022), or the top national quartile limit (based on 2023 UDS data)

Badges That Have Measure Targets

- National Quality Leader (NQL) badges
  - NQL – Behavioral Health badge
  - NQL – Cancer Screening badge
  - NQL – Diabetes Health badge
  - NQL – Heart Health badge
- Health Center Quality Leader (HCQL) badges
- High Value Care Badge
- Preventive Health badge

Aliados Member Badges

- Of those badges with targets
- You can look-up your own health center here:

  https://data.hrsa.gov/topics/health-centers/chqr

Health Center Name	State	Health Center Quality Leader - Silver	Health Center Quality Leader - Bronze	High-Value Care
ALLIANCE MEDICAL CENTER, INC.	CA	✓		✓
INDIAN HEALTH CENTER OF SANTA CLARA VALLEY	CA		✓	✓
LONG VALLEY HEALTH CENTER, INC.	CA			✓
SONOMA VALLEY COMMUNITY HEALTH CENTER	CA	✓		
MARIN COMMUNITY CLINIC	CA		✓	✓
OLE HEALTH	CA		✓	
PETALUMA HEALTH CENTER, INC.	CA		✓	✓

Proposed UDS Aggregate Measure Target Priority List

Choose targets based on this priority order (if target exists)

1. HRSA Community Health Quality Recognition (CHQR) Program targets
2. Healthy People 2030 targets
3. The California top quartile limit (based on 2024 UDS data)

UDS Measure Data Comparison

Table	Table Row	Measure name	June 2025 Aliados Average	2024 UDS National Average	2024 UDS California Average	2024 UDS California Top Quartile	Healthy People 2030 Target	Community Health Quality Recognition (CHQR)	
								Target	Data Source
6B	7	Early Entry into Prenatal Care	78.8%	70.6%	75.6%	82.2%	80.5%	–	–
6B	10	Childhood Immunization Status	29.9%	28.0%	28.1%	37.7%	–	–	–
6B	11	Cervical Cancer Screening	67.8%	55.4%	59.5%	65.7%	79.2%	79.2%	Healthy People 2030 Target
6B	11a	Breast Cancer Screening	56.1%	54.0%	57.1%	64.7%	80.3%	80.3%	Healthy People 2030 Target
6B	12	Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Ad	58.6%	72.6%	69.8%	85.5%	–	85.1%	Top quartile (2023 data)
6B	13	Preventive Care and Screening: Body Mass Index (BMI) Screening and Follow-Up Pl	50.6%	67.6%	65.3%	83.1%	–	86.0%	Top quartile (2023 data)
6B	14a	Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention	86.5%	84.2%	85.6%	92.5%	–	80.0%	Million Heart Goals (2022)
6B	17a	Statin Therapy for the Prevention and Treatment of Cardiovascular Disease	78.2%	78.2%	77.6%	82.2%	–	80.0%	Million Heart Goals (2022)
6B	18	Ischemic Vascular Disease (IVD): Use of Aspirin or Another Antiplatelet	68.9%	74.7%	70.4%	79.3%	–	80.0%	Million Heart Goals (2022)
6B	19	Colorectal Cancer Screening	41.8%	42.7%	42.6%	49.3%	72.8%	72.8%	Healthy People 2030 Target
6B	20	HIV Linkage to Care	30.0%	80.5%	81.1%	100.0%	95.0%	–	–
6B	20a	HIV Screening	64.6%	51.8%	60.9%	73.0%		–	–
6B	21	Preventive Care and Screening: Screening for Depression and Follow-Up Plan	65.3%	73.7%	70.0%	84.7%	13.5%	85.8%	Top quartile (2023 data)
6B	21a	Depression Remission at Twelve Months	10.9%	13.8%	17.5%	17.8%	–	18.0%	Top quartile (2023 data)
6B	22	Dental Sealants for Children between 6-9 Years	58.9%	59.6%	60.5%	75.2%	42.5%	76.9%	Top quartile (2023 data)
6B	23a	Initiation and Engagement of Substance Use Disorder (SUD) Treatment - Initiation Num	14.5%	–	–	–	–	–	–
6B	23b	Initiation and Engagement of Substance Use Disorder (SUD) Treatment - Engagement	2.3%	–	–	–	–	–	–
7	Section A	Low Birth Weight Delivery	7.2%	8.5%	7.6%	4.1%	–	–	–
7	Section B	Controlling High Blood Pressure	69.4%	67.4%	66.0%	70.5%	–	80.0%	Million Heart Goals (2022)
7	Section C	Glycemic Status Assessment Greater Than 9%	29.1%	28.1%	29.2%	24.5%	11.6%	11.6%	Healthy People 2030 Target

Proposed UDS Targets (Aliados Aggregate)

Table	Table Row	Measure name	Aliados Health Recommended Target	Aliados Health Recommended Target Source
6B	7	Early Entry into Prenatal Care	80.5%	Healthy People 2030 Target
6B	10	Childhood Immunization Status	37.7%	2024 UDS California Top Quartile
6B	11	Cervical Cancer Screening	79.2%	Healthy People 2030 Target
6B	11a	Breast Cancer Screening	80.3%	Healthy People 2030 Target
6B	12	Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents	85.1%	Top quartile (2023 data)
6B	13	Preventive Care and Screening: Body Mass Index (BMI) Screening and Follow-Up Plan	86.0%	Top quartile (2023 data)
6B	14a	Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention	80.0%	Million Heart Goals (2022)
6B	17a	Statin Therapy for the Prevention and Treatment of Cardiovascular Disease	80.0%	Million Heart Goals (2022)
6B	18	Ischemic Vascular Disease (IVD): Use of Aspirin or Another Antiplatelet	80.0%	Million Heart Goals (2022)
6B	19	Colorectal Cancer Screening	72.8%	Healthy People 2030 Target
6B	20	HIV Linkage to Care	95.0%	Healthy People 2030 Target
6B	20a	HIV Screening	73.0%	2024 UDS California Top Quartile
6B	21	Preventive Care and Screening: Screening for Depression and Follow-Up Plan	85.8%	Top quartile (2023 data)
6B	21a	Depression Remission at Twelve Months	18.0%	Top quartile (2023 data)
6B	22	Dental Sealants for Children between 6-9 Years	76.9%	Top quartile (2023 data)
6B	23a	Initiation and Engagement of Substance Use Disorder (SUD) Treatment - Initiation Numerator	--	--
6B	23b	Initiation and Engagement of Substance Use Disorder (SUD) Treatment - Engagement Numerator	--	--
7	Section A	Low Birth Weight Delivery	4.1%	2024 UDS California Top Quartile
7	Section B	Controlling High Blood Pressure	80.0%	Million Heart Goals (2022)
7	Section C	Glycemic Status Assessment Greater Than 9%	11.6%	Healthy People 2030 Target

Quality Measures in the Aliados Aggregate Instance

- **Disable:** 2020 to 2024 UDS, QIP, HEDIS, PIP, CMS and PHMI measures that have a more recent version or are not used specifically for reporting
- **Enable**: 2025 UDS, QIP, PIP and PHMI measures

Not all health centers participate in all grant programs

Quality Measures in the Health Center Instances

- It is recommended that health centers also disable “old” (i.e., pre-2025) measures and replace them with “current” (i.e., 2025) versions of the measures, if they exist
- Health centers can copy (or request) aggregate Quality Measures even if they do not participate in the grant
- Some Quality Measures may not be reported to a funding agency but still might be monitored internally for performance improvement
- It is good to keep Relevant users focused on the priority measures and not have a lot of measures enabled but unobserved

Special Note on UDS Quality Measures

- Make sure all 2025 UDS QMs are enabled
- They should have a realistic denominator and numerator
- As mentioned in last Data Workgroup presentation… compare your health center numerator to others on the Aliados Aggregate to see if it seems unusually high or low
- Compare to UDS data reported last year to see if there has been a major change (and if that change can be explained)
- Does the denominator/numerator trend seem to be representative of true clinical quality?

2025 Value Sets

Value Set Lists for Quality Measures

- Covers Quality Measures reported to UDS, QIP, and PHMI
- Defines the recommended Value Sets for the associated Quality Measures
- Names CQM and HEDIS Value Sets
- Relevant is also looking at the lists and considering the design of their own reports

2025 Value Set Lists

- In Excel format
- You can request a copy from Ben Fouts or Aliados Health
- 2025 list design: one row is one Value Set for one Quality Measure
- All CQM Value Sets displayed for all UDS measures
- All HEDIS Value Sets displayed for QIP and PHMI measures for Data Elements that use the HEDIS Value Sets

CQM Value Set List

list_order	cqm_measure_name	cqm_measure_id	relevant_data_element	value_set_name_2025
1	Breast Cancer Screening	CMS125v13	Advanced Illness Cases	Advanced Illness
2	Breast Cancer Screening	CMS125v13	Dementia Medications	Dementia Medications
3	Breast Cancer Screening	CMS125v13	Frailty Cases	Frailty Diagnosis
4	Breast Cancer Screening	CMS125v13	Frailty Cases	Frailty Encounter
5	Breast Cancer Screening	CMS125v13	Frailty Cases	Frailty Symptom
6	Breast Cancer Screening	CMS125v13	Hospice Care Interventions	Hospice Care Ambulatory
7	Breast Cancer Screening	CMS125v13	Hospice Care Interventions	Hospice Encounter
8	Breast Cancer Screening	CMS125v13	Mastectomies	History of bilateral mastectomy

Rows across split into two images

value_set_name_2025	value_set_oid_2025	CDT	CPT	HCPCS Level II	ICD10CM	ICD9CM	CVX	LOINC	RXNORM
Advanced Illness	2.16.840.1.113883.3.464.1003.110.12.1082				234				
Dementia Medications	2.16.840.1.113883.3.464.1003.196.12.1510								33
Frailty Diagnosis	2.16.840.1.113883.3.464.1003.113.12.1074				271				
Frailty Encounter	2.16.840.1.113883.3.464.1003.101.12.1088		2	21					
Frailty Symptom	2.16.840.1.113883.3.464.1003.113.12.1075				10				
Hospice Care Ambulatory	2.16.840.1.113883.3.526.3.1584		2	1					
Hospice Encounter	2.16.840.1.113883.3.464.1003.1003			20					
History of bilateral mastectomy	2.16.840.1.113883.3.464.1003.198.12.1068				1				

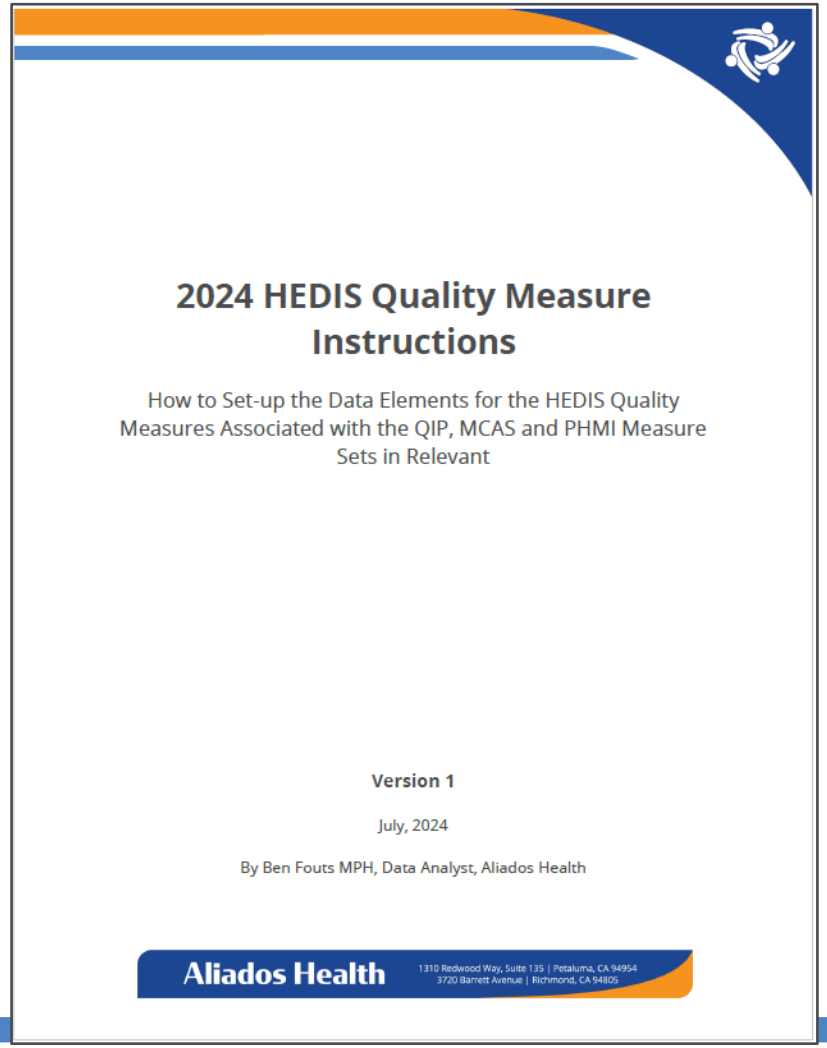
HEDIS Value Set List

list_order	measure_name	value_set_authority	relevant_data_element	value_set_name_2025
1	Adult Access to Preventive/Ambulatory Health Services (Aligns with 2024 HEDIS Measure AAP)	HEDIS	In SQL of QM	Ambulatory Visits
2	Breast Cancer Screening (QIP 2025)	HEDIS	In SQL of QM	Frailty Device
3	Breast Cancer Screening (QIP 2025)	HEDIS	In SQL of QM	Frailty Diagnosis
4	Breast Cancer Screening (QIP 2025)	HEDIS	In SQL of QM	Frailty Encounter
5	Breast Cancer Screening (QIP 2025)	HEDIS	In SQL of QM	Frailty Symptom
6	Child and Adolescent Well-Care Visits (QIP 2025)	HEDIS	Well Child Interventions	Encounter for Well Care
7	Child and Adolescent Well-Care Visits (QIP 2025)	HEDIS	Well Child Interventions	Well Care Visit
8	Childhood Immunization Status (QIP 2025)	HEDIS	In SQL of QM	Contraindications to Childho
9	Chlamydia Screening for Ages 16 to 24 Years (QIP 2025)	HEDIS	Chlamydia Labs	Chlamydia Tests
10	Chlamydia Screening in Women (Aligns with 2024 HEDIS Measure CHL)	HEDIS	Chlamydia Labs	Chlamydia Tests
11	Chlamydia Screening in Women (Aligns with 2024 HEDIS Measure CHL)	HEDIS	In SQL of QM	Contraceptive Medications

Rows across split into two images

value_set_name_2025	value_set_oid_2025	CDT	CPT	HCPCS	ICD10CM	CVX	LOINC	RxNorm	NDC
Ambulatory Visits	2.16.840.1.113883.3.464.1004.1022		89	13					
Frailty Device	2.16.840.1.113883.3.464.1004.1530			81					
Frailty Diagnosis	2.16.840.1.113883.3.464.1004.1531				272				
Frailty Encounter	2.16.840.1.113883.3.464.1004.1532		2	21					
Frailty Symptom	2.16.840.1.113883.3.464.1004.1533				10				
Encounter for Well Care	2.16.840.1.113883.3.464.1004.2480				14				
Well Care Visit	2.16.840.1.113883.3.464.1004.2479		11	6					
Contraindications to Childho	2.16.840.1.113883.3.464.1004.2464				595				
Chlamydia Tests	2.16.840.1.113883.3.464.1004.1060		7				51		
Chlamydia Tests	2.16.840.1.113883.3.464.1004.1060		7				51		
Contraceptive Medications	2.16.840.1.113883.3.464.1004.2048							387	1195

Dissemination of Lists in 2024



2024 HEDIS Quality Measure Instructions

How to Set-up the Data Elements for the HEDIS Quality Measures Associated with the QIP, MCAS and PHMI Measure Sets in Relevant

Version 1

July, 2024

By Ben Fouts MPH, Data Analyst, Aliados Health

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Appendix A: Value Set References

The following table shows the Value Set references needed to properly code the Data Elements for the HEDIS, QIP and PHMI Quality Measures.

General Measure Name	Value Set Source	Relevant Data Element	Value Set Name	Value Set OID	Code System Name(s)
Adults' Access to Preventive / Ambulatory Health Services	HEDIS	In SQL	Ambulatory Visits	2.16.840.1.113883.3.464.1004.1022	ICD10CM, CPT
Breast Cancer Screening	EHR Structured Data	Mammograms			
Breast Cancer Screening	CQM	Mastectomies	History of bilateral mastectomy	2.16.840.1.113883.3.464.1003.198.12.1068	ICD10CM
Breast Cancer Screening	CQM	Mastectomies	Status Post Left Mastectomy	2.16.840.1.113883.3.464.1003.198.12.1069	ICD10CM
Breast Cancer Screening	CQM	Mastectomies	Status Post Right Mastectomy	2.16.840.1.113883.3.464.1003.198.12.1070	ICD10CM
Breast Cancer Screening	CQM	Mastectomies	Unilateral Mastectomy, Unspecified Laterality	2.16.840.1.113883.3.464.1003.198.12.1071	ICD9CM, ICD10CM
Cervical Cancer Screening	CQM	Pap Tests	Pap Test	2.16.840.1.113883.3.464.1003.108.12.1017	LOINC
Cervical Cancer Screening	CQM	HPV Tests	HPV Test	2.16.840.1.113883.3.464.1003.110.12.1059	LOINC
Cervical Cancer Screening	CQM	Hysterectomies	Hysterectomy with No Residual Cervix	2.16.840.1.113883.3.464.1003.198.12.1014	ICD9CM, ICD10CM

- HEDIS measures only
- Value Sets can come from CQM or HEDIS
- Unduplicated Value Sets in rows

Value Set Reports (2024 Edition)

Lists all the individual codes in the Value Set

Lists all the individual codes from the Value Set that were used in your EHR within a period of time

Questions for the Group Today

- Did anybody use the 2024 Value Set reports?
- Are these kind of reports useful?
- What would be more useful to you?
- Relevant creating their own report(s) versus Aliados updating to 2025 value set reports?

Other Value Set Updates

Measure is Diabetes: Retinal Eye Exam (QIP 2025)

- Data Element: Retinal Eye Exams
- Old Value Set: Diabetic Retinal Screening (2.16.840.1.113883.3.464.1004.1078)
- New Value Sets:
  - Retinal Eye Exams (2.16.840.1.113883.3.464.1004.2550)
  - Retinal Imaging (2.16.840.1.113883.3.464.1004.2584)
- Study: for all billed visits since 1/1/2024, there was no difference in the number of retinal eye exams when the Value Sets were changed

Topical Fluoride for Children (QIP Monitoring Measure)

Add HEDIS value sets to Data Element “Topical Fluoride Applications”

relevant_data_element	value_set_name_2025	value_set_oid_2025	CDT	CPT
Topical Fluoride Applications	Application of Fluoride Varnish	2.16.840.1.113883.3.464.1004.2403	1	1

Flu Vaccines

Measures that use flu vaccines

- ✓ Childhood immunizations (UDS and QIP)
- ✓ Prenatal Immunization Status (QIP)

- Other uses, like Care Gaps or case management lists
- Issues:
  - ✓ Should all child and adult flu vaccines be added to the same Data Element?
  - ✓ Are there other (current) flu CVX codes?

Comparison of 2025 Flu Vaccine Codes (CQM vs HEDIS)

HEDIS (adult)

Adult Influenza Immunization	2.16.840.1.113883.3.464.1004.1913
Adult Influenza Vaccine Procedure	2.16.840.1.113883.3.464.1004.1914

CQM (child)

Child Influenza Vaccine	2.16.840.1.113883.3.464.1003.196.12.1218
Child Influenza Vaccine Administered	2.16.840.1.113883.3.464.1003.110.12.1044
Influenza Virus LAIV Vaccine	2.16.840.1.113883.3.464.1003.110.12.1087
Influenza Virus LAIV Vaccine Administered	2.16.840.1.113883.3.464.1003.110.12.1088

CVX Codes	
CQM (child)	HEDIS (adult)
88	88
	135
140	140
141	141
	144
150	150
153	153
155	155
158	158
161	
	166
	168
171	171
	185
186	186
	197
	205
	320

Flu Vaccine Value Set Study on Aggregate Data

- It seems like both child and adult flu vaccines already appear on the Data Element
- It seems like no adult or child flu vaccines (by name) are being missed by health centers. Also, it seems like all flu CVX codes are recognized (i.e., no unique or late codes this year)
- More flu vaccines appear on the flu vaccine Data Element than would be expected if only Value Sets were used. This is mostly due to Care Everywhere data (which are brought in by name without codes)
- Adding adult flu vaccine Value Sets to the flu vaccine Data Element would not impact the Childhood Immunization measure

Discussion on Potential Future Reports

Older Child Case Management Report

- Basic design could be similar to the infant case management report we have been discussing
- Measures for general screening or preventive services
- Lower age limit would be 2 years of age (when the infant report ends)
- Upper age limit would depend on the measures chosen. For example, the list on the next slide would include all patients older than 2 years but younger than 18 years
- Or (for example) there could be separate reports for school-age children (2 to 12 years) and teenagers (13 to 17 years)

Example Childhood Measures

- Developmental Screening in the First Three Years of Life (patients turning 3 years of age)
- Topical Fluoride for Children (age 2 to 4 years)
- Dental Sealants for Children (age 6 to 9 years)
- Immunizations for Adolescents (patients turning 13 years of age)
- Weight Assessment and Counseling for Children (age 3 to 17 years)
- Adolescent Screening for Depression and Follow-Up Plan (age 12 to 17 years)
- Child and Adolescent Well-Care Visits (age 3 to 17 years)
- Chlamydia Screening (16 to 17 years)

Partnership (PHP) Membership Reports

- Brainstorming basic design ideas
- A model could be developed for health centers with monthly membership patients uploaded to Relevant and integrated
- In this model, we would know:
  - ✓ Which patients match to EHR patients (and thus their MRN and patient_id link to other Relevant data)
  - ✓ Which patients do not match because they are new or never have been seen
  - ✓ Which month(s) the patient had PHP insurance

How Can This Data be Used? (Stats)

- **Statistical summaries,** by month
- Number of PHP patients
- Break-down by age group, gender, race/ethnicity, etc.
- Number of patients seen or never seen at the health center
- Number of patients seen at the health center in the past year
- Patients assigned by health center locations
- EHR PCP of assigned patients

How Can This Data be Used?

- **Case management**
- List of patients this month who have never been seen
  - Which patients have new PHP insurance this month
  - Which patients are not new this month but have not been seen before
- List of patients this month who have not been seen at the health center this year and are in at least one QIP denominator (and not the numerator)
- List of patients with different names, DOB, address or phone in EHR versus Partnership

Questions?