2024 Community Health Quality Recognition (CHQR) Badge Criteria

Community Health Quality Recognition (CHQR) badges recognize Health Center Program awardees and look-alikes (LALs) that have made notable achievements in the areas of access, quality, health equity, health information technology, and social risk factors screening using Uniform Data System (UDS) data from the most recent reporting period.

Detailed criteria for CHQR badges awarded in 2024 for the 2023 UDS reporting period are included below.

CHQR Badge Eligibility Criteria and Benchmarks

To be eligible for CHQR badges, health centers must:
- Submit complete and annual UDS data on time
- Use electronic health records (EHRs) to report on clinical quality measures and entire patient populations
- Resolve any progressive action conditions as of June of the CHQR release year
- Be an active Health Center Program awardee or look-alike at time of CHQR release

National Quality Leader (NQL)

NQL badges are awarded to health center awardees and look-alikes that meet or exceed national benchmarks for one or more of the clinical quality measure (CQM) groups that promote behavioral health, cancer screening, diabetes health, heart health, HIV prevention and care, and maternal and child health.

The following are descriptions of CQM criteria that were used to award NQL badges for the 2023 UDS reporting period and provide health centers with clear targets to help shape quality improvement strategies. CQM criteria for NQL badges were determined using various benchmarks from Healthy People 2030, other nationally recognized benchmarks, and 2020 UDS data when a comparable national benchmark was not available.

In addition to meeting the benchmark criteria outlined below, health centers must report a minimum number of patients in a clinical quality measure's (CQM) denominator to be eligible for a National Quality Leader badge. Health centers must report at least 70 patients in each CQM denominator *and* meet/exceed the benchmark threshold for all CQMs in a given National Quality Leader category. Exceptions are the HIV linkage to care CQM for the HIV Prevention and Care badge and the low birthweight CQM for the Maternal and Child Health badge, both of which require a minimum of 30 patients in the CQM denominator. Additionally, health centers must meet at least two Healthy People 2030 targets to receive the Cancer Screening badge.

NQL - Behavioral Health

Criteria	2024 Badge Criteria Threshold
Depression remission at 12 months	**18.2%** (Top Quintile of 2020 UDS Data)
Depression screening and follow-up plan	**80.5%** (Top Quartile of 2020 UDS Data)
Proportion of all patients receiving Screening, Brief Intervention and Referral to Treatment (SBIRT)	**At least 5%**
Relative percent increase in patients receiving medication-assisted treatment between consecutive UDS reporting	**At least 10%**

NQL – Cancer Screening

Health centers qualify for the NQL – Cancer Screening badge by meeting at least two of the three cancer screening Healthy People 2030 targets.

Criteria	2024 Badge Criteria Threshold
Breast Cancer Screening	**80.3%** ([Healthy People 2030 Target](#))
Cervical Cancer Screening	**79.2%** ([Healthy People 2030 Target](#))
Colorectal Cancer Screening	**68.3%** ([Healthy People 2030 Target](#))

NQL – Diabetes Health

Criteria	2024 Badge Criteria Threshold
Adult BMI screening and follow-up plan	**83.1%** (Top Quartile of 2020 UDS Data)
Weight assessment and counseling for nutrition and physical activity for children and adolescents	**77.4%** (Top Quartile of 2020 UDS Data)
Uncontrolled diabetes – *Inverse Measure*	**11.6%** ([Healthy People 2030 Target](#))

NQL - Heart Health

Criteria	2024 Badge Criteria Threshold
Tobacco use screening and cessation intervention	**80%** ([Million Hearts Goals](#))
Use of aspirin or antiplatelet for ischemic vascular disease	**80%** ([Million Hearts Goals](#))
Statin therapy	**80%** ([Million Hearts Goals](#))
Hypertension control	**80%** ([Million Hearts Goals](#))

NQL - HIV Prevention and Care

Criteria	2024 Badge Criteria Threshold
HIV linkage to care within 30 days of diagnosis	**95%** ([Healthy People 2030 Target](#))
Patients on PrEP: Any absolute increase in the number of patients receiving PrEP between consecutive UDS reporting years	**Any increase greater than 0**
HIV testing: At least a 10% relative increase in the number of HIV diagnostic tests performed between consecutive years as reported in Table 6A	**At least 10%**

NQL - Maternal and Child Health

CQM	2024 Badge Criteria Threshold
Low birth weight – *Inverse Measure*	**7.7%** ([National Vital Statistics System](#))
Early entry into prenatal care	**80.5%** ([Healthy People 2030 Target](#))
Weight assessment and counseling for nutrition and physical activity for children and adolescents	**77.4%** (Top Quartile of 2020 H80 UDS)
Full childhood immunization by age two	**38.9%** ([National Committee for Quality Assurance (NCQA) Healthcare Effectiveness Data and Information Set (HEDIS)](#))
Well-child visits: An absolute increase in the number of well-child ("health supervision") visits between consecutive UDS reporting years	**Any increase greater than 0**

Health Center Quality Leader

The Health Center Quality Leader (HCQL) badges are awarded to awardees and look-alikes that achieve the best overall clinical quality measure (CQM) performance among all health centers and are calculated using the average of the [Adjusted Quartile Rankings](#) (AQR) for the most recent reporting year for all CQMs reported by a health center.

Health centers with AQR averages in the top three deciles (top 30%) are awarded the following HCQL badges:

Decile of AQR Average	HCQL Badge Sub-Category
Top decile (top 10%)	Gold
2nd decile (top 11-20%)	Silver
3rd decile (top 21-30%)	Bronze

HRSA calculates AQRs each year using the most currently available UDS data, so the thresholds between adjusted quartiles may not be consistent year-to-year. HRSA is unable to calculate these values in advance. Accordingly, thresholds for the top three deciles of AQR averages used to determine Health Center Quality Leader eligibility change each year.

Access Enhancer

The Access Enhancer badge recognizes health centers that have increased the total number of patients and the number of patients who receive at least one comprehensive service (mental health, substance use disorder, vision, dental, and/or enabling) by at least 5% between the two most recent UDS reporting periods.

To be eligible, a health center must achieve at least one HCQL or NQL badge, or demonstrate at least a 15-percentage point improvement in one or more CQMs between consecutive reporting periods

Eligibility is calculated using data from the two most recent UDS reporting periods ([Table 5: Staffing and Utilization](#) (PDF - 171 KB)).

Health Disparities Reducer

The Health Disparities Reducer badge recognizes health centers that qualify for the Access Enhancer badge and meet at least one of the following two criteria:

- Demonstrate at least a 10-percentage point improvement in low birth weight, hypertension control, and/or uncontrolled diabetes CQMs during the two most recent consecutive UDS reporting years) for at least one racial/ethnic group, while maintaining or improving the health center's overall CQM performance from the previous reporting year; and/or
- Meet the following benchmarks for all racial/ethnic groups served within the most recent UDS reporting year.

Clinical Quality Measure	Benchmark
Low birth weight – *Inverse Measure*	**7.7%** (Adjusted National Vital Statistics System Average)
Hypertension control	**60.8%** (Former Healthy People 2030 Target*)
Uncontrolled diabetes – *Inverse Measure*	**11.6%** (Healthy People 2030 Target)

*The Hypertension Control Healthy People 2030 Objective was updated in 2022. The new objective has a different hypertension control threshold (<130/80 mmHg) than the UDS eCQM (<140/90 mmHg). The earlier HP2030 objective target (60.8%) has been retained for consistency.

Eligibility is calculated using data from the two most recent UDS reporting periods (UDS Table 7: Health Outcomes and Disparities (PDF - 292 KB)).

Advancing Health Information Technology (HIT) for Quality

Recognizes health centers that meet all criteria to optimize HIT services. Eligibility is calculated using UDS data from the most recent reporting year (Appendix D: Health Center Information Technology Capabilities and Appendix E: Other Data Elements (PDF - 171 KB)). Health centers must meet the following five criteria:

1. Adopted an electronic health record (EHR) system
2. Offers telehealth services
3. Exchanges clinical information electronically with key providers health care settings
4. Engages patients through health IT
5. Collects data on patient social risk factors

Addressing Social Risk Factors

The Addressing Social Risk Factors badge recognizes health centers that are screening for social risk factors impacting patient health and are increasing access to enabling services. Health centers must meet the following two criteria:

- Collect data on patient social risk factors
- Increase the proportion of patients receiving enabling services between consecutive UDS reporting years

Eligibility is calculated using data from the two most recent UDS reporting periods (Table 5: Staffing and Utilization (PDF - 271 KB); Appendix D: Health Center Information Technology Capabilities (PDF - 171 KB)).

Questions

For questions about CHQR badge eligibility, contact us via the [BPHC Contact Form](#), by selecting Uniform Data System (UDS), Community Health Quality Recognition (CHQR) Badges, and verifying CHQR badge eligibility or criteria.