



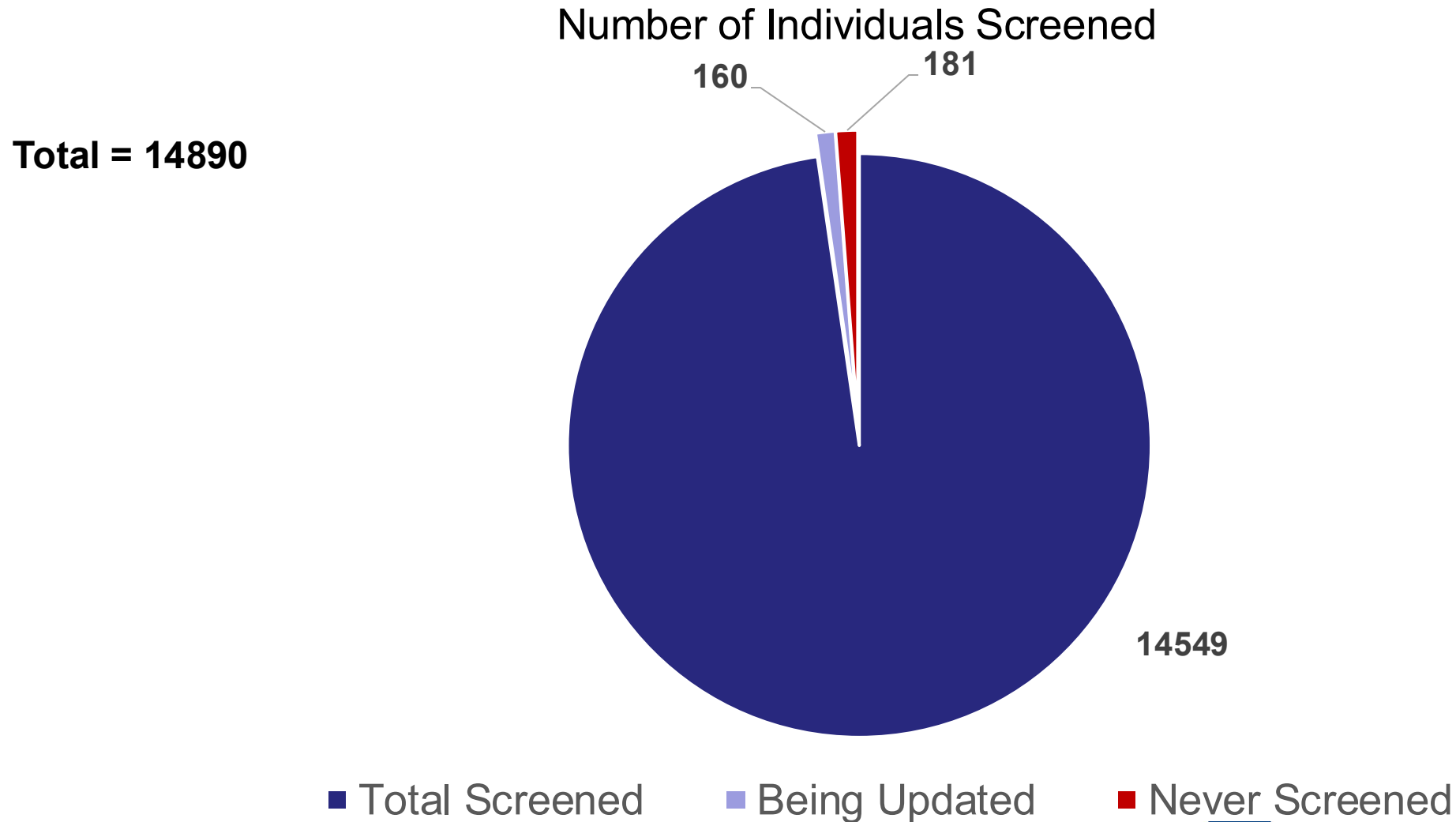
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# Provider Performance Review Subcommittee

Health and Wellness

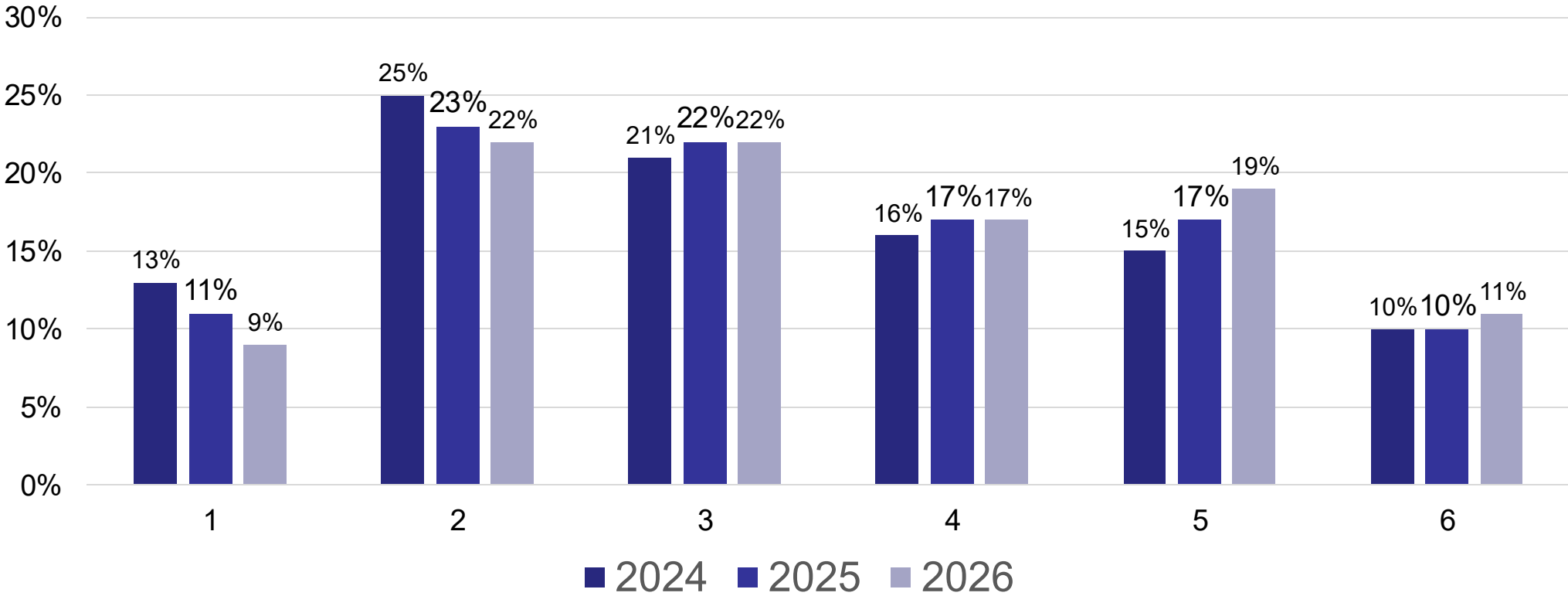
June 2026

# HRST Screening Compliance – April 2026



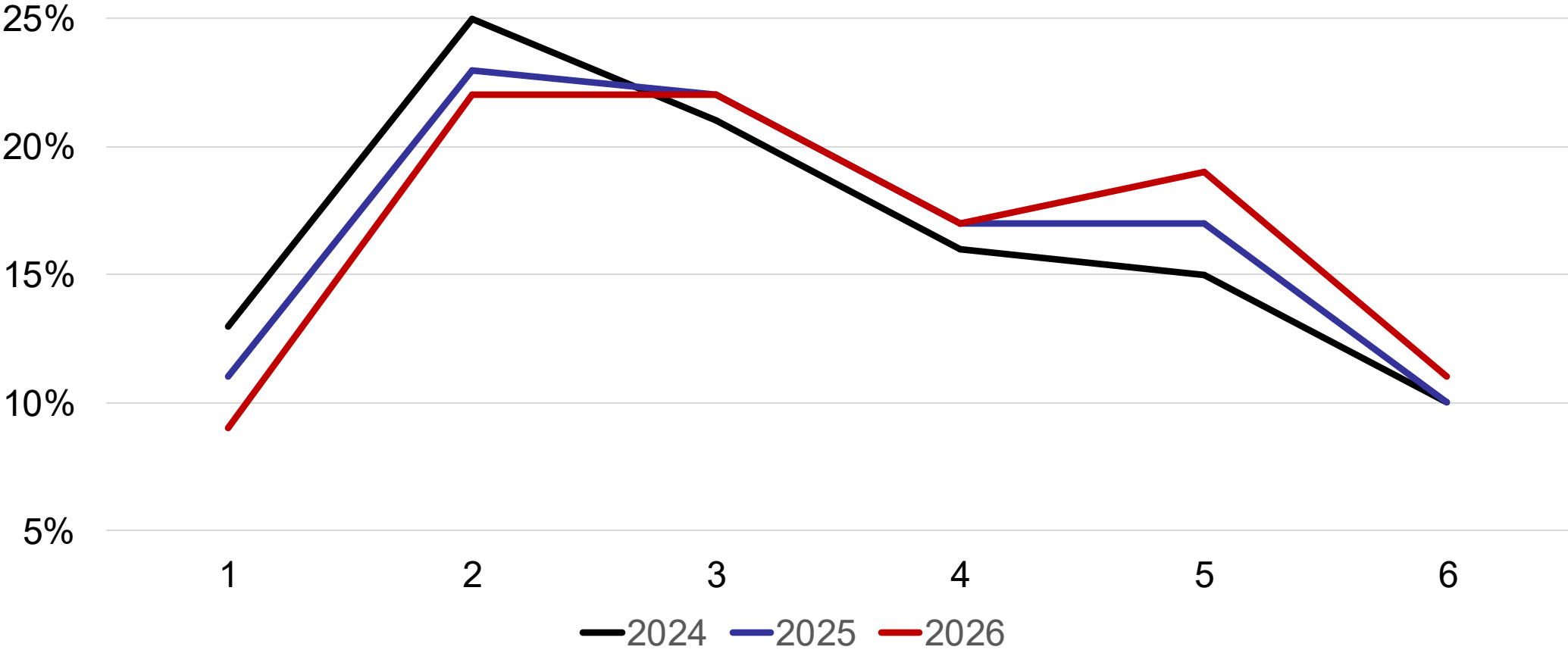
# Health Care Level Distribution

## Percent of Individuals in Health Care Level



# Health Care Level Distribution

## Percent of Individuals in Health Care Level



# HRST Screening Compliance

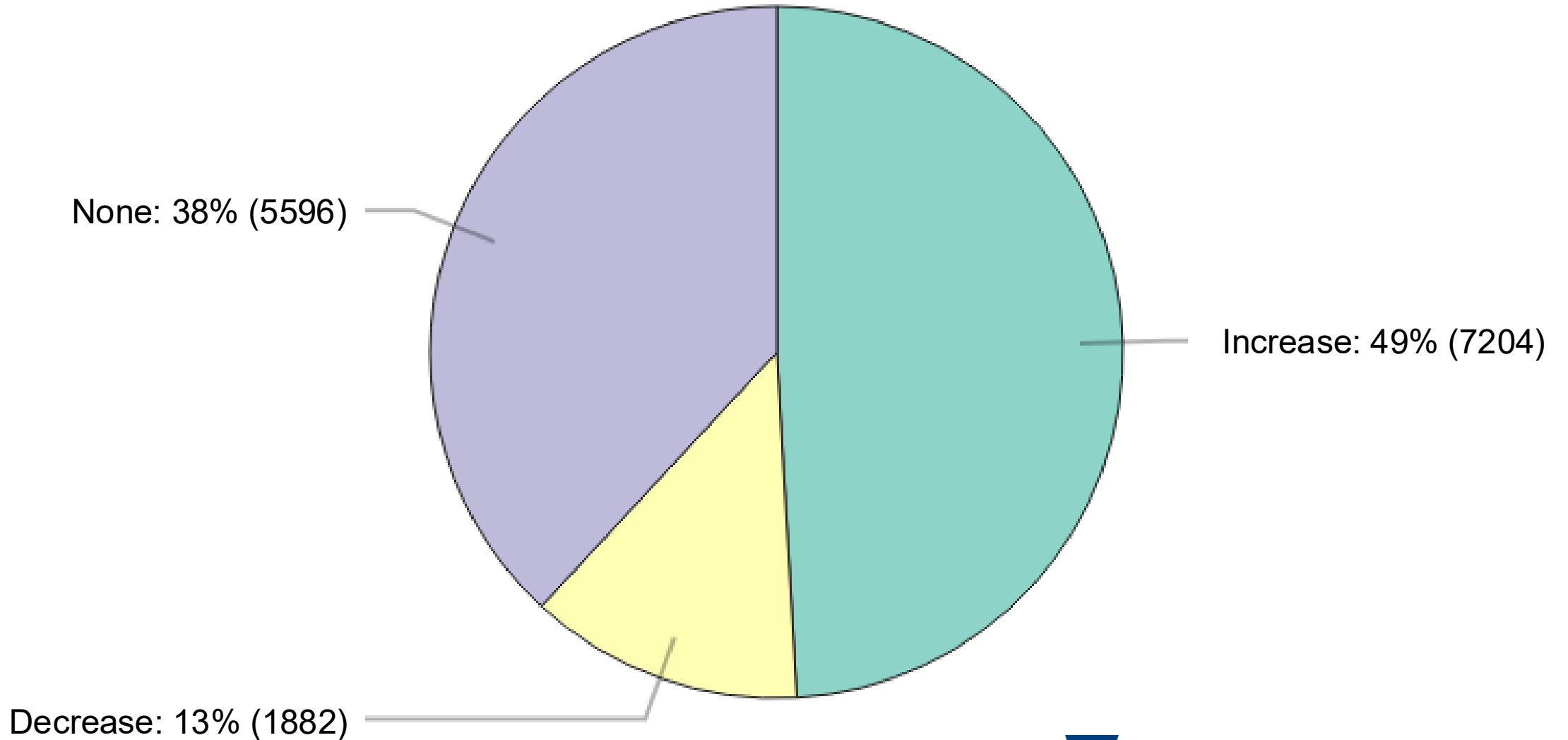
## Percent of Individuals with No Updates in 365 Days

2024	2025	2026
16.27%	5.67%	3.32%

# Provider Ability to Screen

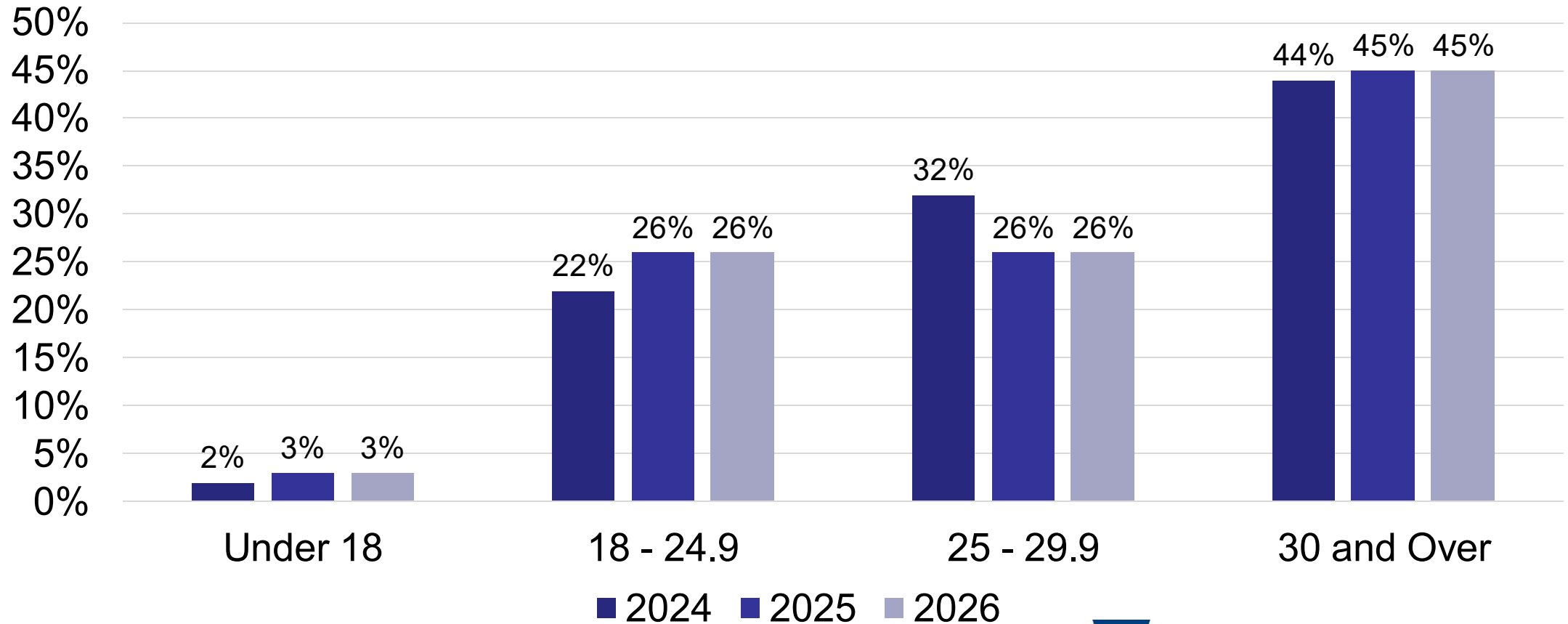
Year	No Reviewer	No Rater	No Review or Rater
April 2024	47	27	23
April 2025	31	16	13
April 2026	27	3	3

# ▶ Current Health Care Level Compared to Baseline



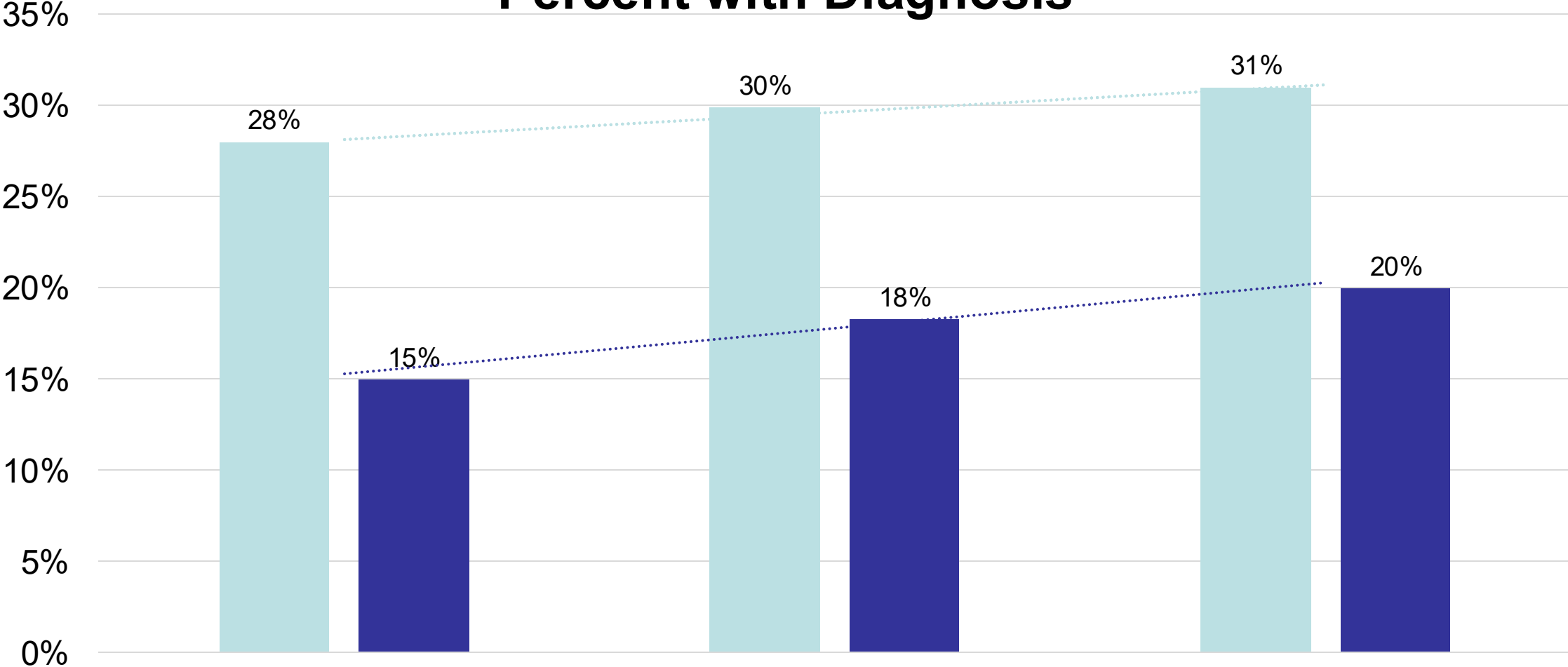
# Body Mass Index Ranges Recorded in HRST

## Percent of Individuals in BMI Range



# Percent of Individuals in HSRT with Hypertension or Diabetes

## Percent with Diagnosis



2024

Hypertension

2025

Diabetes

2026



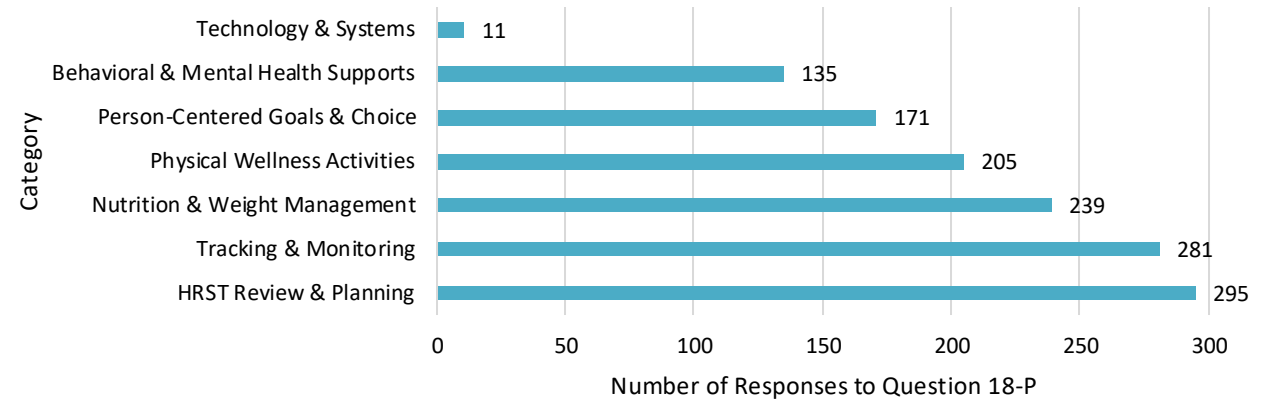
**pennsylvania**  
DEPARTMENT OF HUMAN SERVICES

# Residential - Wellness and Inclusion Activities

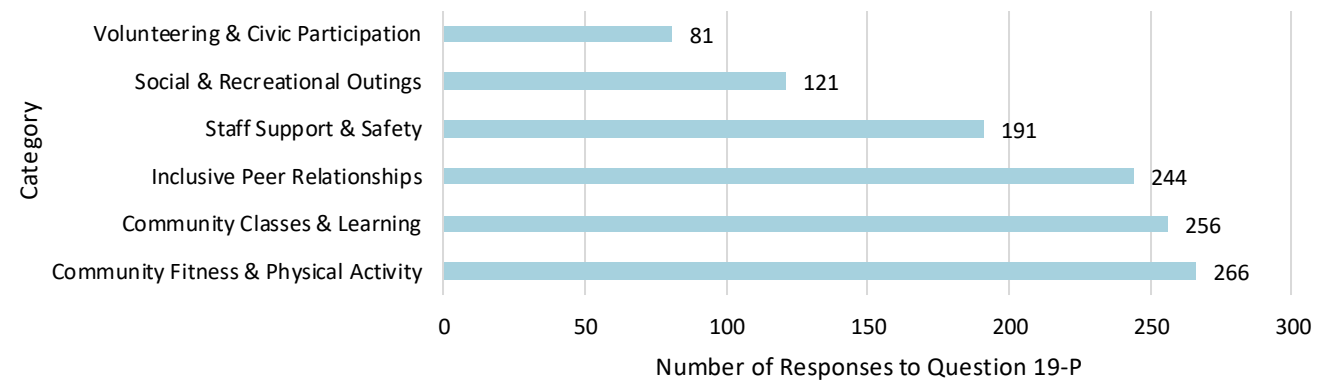


- 317 Primary submissions
- 295 responses (93%) mentioned specifically reviewing HRST data, ISPs, and/or team planning
- 239 responses (75%) noted a focus on BMI, diets, or meal planning based on HRST results
- 266 responses (84%) mentioned either physical activities such as the gym, YMCA, walking, parks, swimming, and more
- 244 responses (77%) explicitly mentioned participating in activities alongside non-disabled peers

How Wellness Activities are Determined



How Individual Inclusion is Promoted

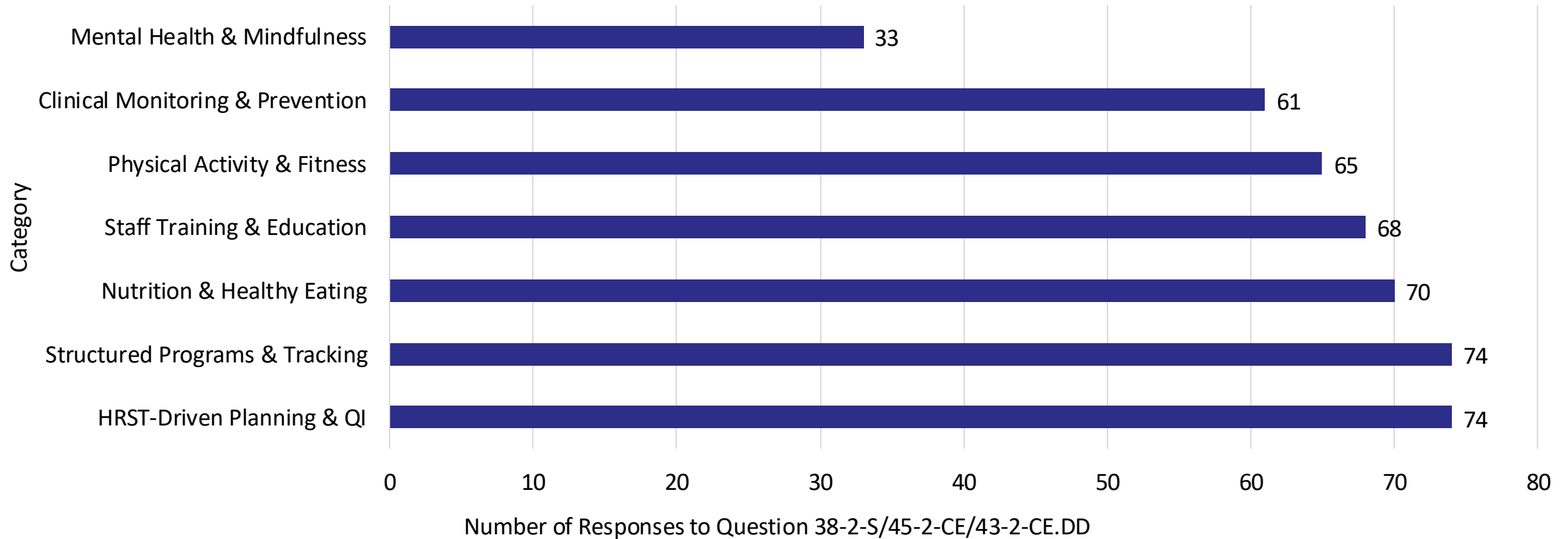


# Residential - Wellness & Inclusion Activities



- 92 Select/CE submissions

How Wellness Activities are Implemented





- From the Select/CE submissions:
  - Most of the responses included information pertaining to HRST analysis, or clinical risk focus (i.e., chronic, Fatal Five) for creating a plan for wellness activities
  - Top responses for monitoring wellness activities included using tools such as participation tracking and logs to monitor individual progress. Surveys and feedback were the next most common responses.
  - Responses regarding modification of wellness activities/programs most commonly included information on quality improvement and specific program adjustments.