Introduction to HEDIS 2018

Presented by:
Megan D. Wilson, *HEDIS Program Manager, PHC*
Becky Headley, *Director of Clinical Operations, KDJ*
To avoid echoes and feedback, we request that you use the telephone *instead* of your computer microphone for listening/talking during the webinar.
Webinar Instructions

- All participants have been muted to eliminate any possible noise interference/distraction.

- If you have a question or would like to share your comments during the webinar, please type your question in the “question” box or click on the “raised hand” icon.
Objectives

- Overview of HEDIS
- KDJ EMR Remote Retrieval
- Contacts & Resources
- Q&A
Overview

• What is HEDIS?
  • Healthcare Effectiveness Data Information Set
  • Administrative vs. Hybrid Measures

• Why is HEDIS Important?
  • Evaluates clinical quality in a standardized way
  • Identifies opportunities for improvement
  • Regional-level performance is publicly reported
  • Regional-level reporting is required by the State
  • HEDIS/CAHPS equates to 50% of NCQA Accreditation Score
Measure Reporting Methodology:

• Administrative Measures
  • Measures the entire eligible population
  • Data collected through transaction data or other administrative data used to identify the eligible population and numerator (i.e. Claims/encounter)

• Hybrid Measures
  • Measures a statistically significant *sample* of the eligible population
  • Data collected from transaction data or other administrative data and key data elements collected from the medical record chart
<table>
<thead>
<tr>
<th>Measure Type</th>
<th>Measure</th>
<th>Indicator</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hybrid</td>
<td>Cervical Cancer Screening (CCS)</td>
<td></td>
</tr>
<tr>
<td>Hybrid</td>
<td>Childhood Immunization Status (CIS-Combo 3)</td>
<td></td>
</tr>
<tr>
<td>Hybrid</td>
<td>Comprehensive Diabetes Care (CDC)</td>
<td>• Blood Pressure Control (&lt;140/90 mmHg)</td>
</tr>
<tr>
<td>Hybrid</td>
<td></td>
<td>• Eye Exam</td>
</tr>
<tr>
<td>Hybrid</td>
<td></td>
<td>• HbA1c Testing</td>
</tr>
<tr>
<td>Hybrid</td>
<td></td>
<td>• HbA1c Poor Control (&gt;9.0%)</td>
</tr>
<tr>
<td>Hybrid</td>
<td></td>
<td>• HbA1c Good Control (&lt;8.0%)</td>
</tr>
<tr>
<td>Hybrid</td>
<td></td>
<td>• Medical Attention for Nephropathy</td>
</tr>
<tr>
<td>Hybrid</td>
<td>Controlling High Blood Pressure (CBP)</td>
<td></td>
</tr>
<tr>
<td>Hybrid</td>
<td>Immunizations for Adolescents (Combo 2)</td>
<td></td>
</tr>
<tr>
<td>Hybrid</td>
<td>Prenatal and Postpartum Care (PPC)</td>
<td>• Timeliness of Prenatal Care</td>
</tr>
<tr>
<td>Hybrid</td>
<td>Weight Assessment &amp; Counseling for Nutrition &amp; Physical Activity for Children and Adolescents (WCC)</td>
<td>• Counseling for Nutrition</td>
</tr>
<tr>
<td>Hybrid</td>
<td>Well-Child Visits in the 3rd, 4th, 5th, &amp; 6th Years of Life (W34)</td>
<td>• Counseling for Physical Activity</td>
</tr>
</tbody>
</table>
Overview

Southeast: Solano, Yolo, Napa

Southwest: Sonoma, Marin, Mendocino, Lake

Northeast: Lassen, Modoc, Siskiyou, Trinity, Shasta

Northwest: Humboldt, Del Norte
Changes for HEDIS 2018

• Measures
  • IMA Combo-2: 2 dose HPV vaccine
  • Replaced the Behavioral Health CDF for DSF

• NCQA Timeline
  • MR project stops May 9th

• Retrieval Methods
  • On-site and Provider Methods: Health Data Vision, Inc. (HDVI)
  • EMR Remote Access: KDJ Consultants, Inc. (KDJ)
Remote EMR Access

Partnership HealthPlan of California Providers & KDJ
KDJ Consultants is certified as a Woman-Owned Business (WBE) by the North Central Texas Regional Credentialing Agency and HUB certified in Texas. A third-party assessment of policies, procedures and safeguards for HIPAA and HITECH has been completed and we are a SOC 2 Certified Corporation.

KDJ offers superior chart review and project management services. By utilizing registered nurses as our Contracted Nurse Reviewers (CNRs), we are able to consistently provide the highest quality abstraction services for our clients.

The company was created in 1995 for the purpose of providing consultative services and resources to healthcare providers and healthplans, specializing in clinical data abstraction and clinical site reviews.

KDJ has been conducting HEDIS reviews since 1997.

About KDJ
Background on Remote Retrieval

- Remote access is a secure method of allowing Nurse Abstractors access to your EMR to collect specific data to satisfy the NCQA requirements for HEDIS.
- Remote access frees your practice from gathering and delivering this data to the collection agent.
- Granting remote access to KDJ’s Nurse Abstractors provides an accurate means for collecting the required data for each measure, ensuring the highest rates possible.
- KDJ has extensive Remote Access expertise and have been reviewing remotely since 2010 with no security incidents.
KDJ is 100% committed to no PHI violations. To ensure your PHI is secure, KDJ:

- Attained SAS 70 security certification in 2008 with annual reviews until we became SOC 2 certified in 2011. The ANNUAL SOC 2 Review uses pre-defined controls related to:
  - 1) security
  - 2) availability
  - 3) processing integrity
  - 4) confidentiality
  - 5) privacy of a system and it’s information
- Last SOC 2 survey completed 10/2017

- Utilizes a Virtual Desktop environment for all abstractors
- Uses two factor authentication to access the VDI
- Strictly controls access to all data to “as needed” only
- Each Nurse Abstractor is fully vetted, has signed a BAA with KDJ and has multiple security searches performed monthly (OIG, OFAC, and LEIE) throughout the life of the project
Retrieval Commitment

- PHC will be engaging providers to select EMR Remote Retrieval till Monday, Nov. 27th.

- Providers have until Friday, Dec. 1\textsuperscript{st} to complete the EMR Remote Retrieval Form:
  - Name and type of EMR system used
  - URL to be used for access
  - Necessary forms for KDJ signatures
  - Point of Contact information, etc.
Retrieval Set-up

December/January: KDJ will contact the Primary Point of Contact to:

- Finalize all details including confirming information in the EMR Remote Retrieval form
- Establish and test the connection
- Set the timeframe access will be granted
- Set the EMR training for KDJ Nurse Reviewers

February: KDJ will send out the Provider Package including:

- Partnership’s Provider Letter
- Member Pull-list
Provider’s Role

- There should be no impact to your practice when the KDJ nurses are accessing your medical records as long as your EMR does not limit the number of users.
- If users are limited, please alert KDJ and we will work to make sure the abstractions for your practice are accessed outside of regular business hours.
- At time of testing, it is helpful if a staff member can provide a quick “tour” of your EMR and how your practice utilizes it, especially if your practice uses a less common EMR.
- Once access is established, KDJ should not require any more time from your staff unless issues with access arise.
- Many Providers place all charts to be reviewed in a separate work area and KDJ is granted access only to that area so that no other charts are opened in error.
KDJ Nurse Reviewers

KDJ utilizes Registered Nurses for their Abstraction services.

RNs assigned to this project have from one to 5 years of remote access experience.

KDJ has successfully performed Remote Access chart review since 2010.
Once HEDIS reviews begin, KDJ will

- Provide a list of the member’s charts they need to access
  - We ask that if there are members on the list that are not accessible in the EMR, that you notify us immediately so we can report it to PHC
- Set the start date for access
- On that start date, the assigned Nurse Abstractor(s) will log into the EMR system and review those charts to collect specific data
- Copies of only the pages that support the abstraction (for audit purposes) will be saved to KDJ’s VDI and will then be accessible to PHC
Remote Access De-Activation

KDJ’s preference is to maintain access through May 15 to ensure that PHC has all potentially required documentation for audit purposes.

If your practice has a required shorter time-frame for access, please make sure that is communicated to KDJ at time of initial set up. (We will ask you.)

Access is de-activated by your team through your electronic medical records by inactivating or removing KDJ nurses logins within your system.

KDJ IT will also “de-activate” the link to your EMR system within KDJ’s VDI at the end of the project.
Dec 1st Deadline for EMR Remote Retrieval Forms

Feb 15th KDJ will call providers to schedule retrieval

Primary Medical Record Retrieval & Review

May 9th Stop all retrieval and review

Final rates locked and reported to DHCS

Dec Jan Feb Mar Apr May Jun Jul Aug

EMR Remote Access Set up

Secondary Medical Record Collection

Medical Record Review Validation Audit May 11th - 15th

HEDIS 2018 Performance shared with Provider Network
Roles & Responsibilities

• Providers
  • Complete the Annual Provider Information form
  • Indicate your Primary and Secondary Contacts

• KDJ
  • First Point of Contact for EMR Remote Retrieval
    • Set-up
    • Testing
    • Questions

• PHC’s HEDIS Team
  • Support providers and KDJ to successfully retrieve medical records timely
Resources

**PHC’s HEDIS Website**

- [http://www.partnershiphp.org/Providers/Quality/Pages/HEDISLandingPage.aspx](http://www.partnershiphp.org/Providers/Quality/Pages/HEDISLandingPage.aspx)
- HEDIS 2017 Performance
- Link to Annual Provider Information Form
- HEDIS FAQs
- Upcoming Events and Activities
- Measure definitions and documentation requirements

**NCQA Website**

KDJ Provider Support Line
• Phone: (817) 329-1397
• Email: email@kdjconsultants.com

For all other questions please contact the PHC HEDIS Team:
• Phone: (866) 828-2302
• Fax: (707) 863-4314
• Email: HEDISMRA@partnershipphp.org
Questions?