

HEDIS[®] MY2024/RY2025 Hybrid Reporting Measure Instruction Sheet

This document is designed to guide providers in gathering measure specific medical record documentation needed for the patients for whom HEDIS records are requested. Included in this package is an instruction sheet for each measure explaining in detail what documentation is required.

Please review the instructions carefully for each measure and return the requested records via your chosen retrieval method: ShareFile (use the link originally sent during scheduling) or fax to Partnership's secure fax line, 707-863-4314. Thank you.

Return the following:

- The measure instruction sheet(s)
- Copies of the patient records (as outlined on the measure instruction sheet)
 - For ARRA* compliance, DO NOT fax the entire chart
 - Partnership is not responsible for copy company charges
 - If you do not have the requested records, please note the reason in the designated section of the measure instruction sheet.

Definitions:

HEDIS[®] Hybrid Measure: Data collected from both Administrative sources (claims, lab data, etc.) and abstracted from patient medical charts (paper and EMR).

Health Plan Accreditation (HPA) Measure: Uses HEDIS data to effectively measure the Health Plan's care and service performance, which determines the Health Plan's Star Rating.

Medi-Cal Managed Care Accountability Set (MCAS): Uses HEDIS data to effectively measure the Health Plan's care and service performance.

HIPAA allows the release of patient information to health plans for treatment, payment, and health care operations, without specific signed consent or authorization. KDJ is covered under this provision as well. Your assistance in completing the data collection within the mandated time frame is very much appreciated.

*Healthcare Effectiveness Data & Information Set (HEDIS[®]) is an annual study required of Health Plans by the NCQA. HEDIS[®] is the most widely used set of performance measures in the managed care industry. HIPAA final privacy regulations eliminate the consent requirement when personal health information is used or disclosed for Treatment, Payment, and Health Care Operations (67 FR 53182). The final privacy regulations clarify that the definition of "Health Care Operations" includes quality improvement activities which includes HEDIS[®] (45 CFR 164.506). *The American Recovery and Reinvestment Act of 2009 (ARRA) also permits release of records.*

HEDIS[®] MY2024/RY2025 Hybrid Reporting Measure Instruction Sheet

Blood Pressure Control for Patients with Diabetes (BPD)¹

Percentage of members 18-75 years of age with diabetes (type 1 or 2) who had the following indicator during the measurement year: BP Control <140/90

- 1. Confirm that the patient names and dates of birth match the charts.**
- 2. Documentation Required:**
 - All blood pressure readings in 2024 on or before 12/31/2024. Include progress notes (including both telehealth and in-person office visits) and vital signs flow sheet, if available.
 - If no blood pressure found, all 2024 visit notes (including both telehealth and in-person office visits) and vital signs flow sheet.
- 3. If any of the following criteria apply, please provide supporting documentation (i.e., problem list, medical history, medication list, and all visit notes for 2023 & 2024):**
 - Evidence patient was admitted to hospice or palliative care in 2024
 - Evidence patient died anytime during 2024
- 4. If the requested documentation is unavailable, indicate the reason(s) below:**
 - Patient never seen here
 - Unable to retrieve patient chart from remote storage
 - No office visits during pertinent time frame. Member last seen on _____
- 5. Please send the following documents to Partnership. If you chose ShareFile retrieval, please upload records to the folder link provided to you during scheduling. If you chose Fax retrieval, send to Partnership's secure fax line at 707-863-4314.**
 - This instruction sheet
 - The patient's demographics page with at least 3 identifiers; i.e. Name, DOB, CIN/Medi-Cal #, Address, or Phone Number to ensure it is the correct patient.
 - The requested chart copies (with patient name clearly shown on each page)

Thank you!

¹ HPA Only, Hybrid Measure

HEDIS[®] MY2024/RY2025 Hybrid Reporting Measure Instruction Sheet

Controlling Blood Pressure (CBP)²

The percentage of members 18–85 years of age who had a diagnosis of hypertension (HTN) and whose blood pressure (BP) was adequately controlled (<140/90 mm Hg) during the measurement year.

Confirm that the patient names and dates of birth match the charts.

1. Documentation Required:

- All blood pressure readings in 2024 on or before 12/31/2024. Include progress notes (including both telehealth and in-person office visits) and vital signs flow sheet, if available.
- If no blood pressure found, all 2024 visit notes (including both telehealth and in-person office visits) and vital signs flow sheet.

2. If any of the following criteria apply, please provide supporting documentation (2024 problem list, medical history, medication list, and all 2024 visit notes):

- Patient has end-stage renal disease
- Patient admitted to a skilled nursing or other non-acute facility in 2024
- Patient was pregnant during 2024
- Evidence patient was admitted to hospice or palliative care in 2024
- Evidence patient died anytime during 2024

3. If the requested documentation is unavailable, indicate the reason(s) below:

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² MCAS and HPA, Hybrid Measure

HEDIS[®] MY2024/RY2025 Hybrid Reporting Measure Instruction Sheet

Cervical Cancer Screening (CCS)³

Percentage of women 21-64 years of age (as of December 31 of the measurement year) who were screened for cervical cancer:

- 21-64 years: Cervical Cytology within the last 3 years
- 30-64 years: Cervical high-risk human papillomavirus (hrHPV) testing within the last 5 years
- 30-64 years: Cervical Cytology with hrHPV co-testing within the last 5 years
 - For hrHPV, the minimal age at the date of testing is 30 years.

1. Confirm that the patient names and dates of birth match the charts.

2. Documentation Required:

- Cytology (Pap Smear) note(s) indicating the date the test was done and the results in 2022, 2023, or 2024
- HPV test note(s) indicating the date the test was done and the results in 2020, 2021, 2022, 2023, or 2024.

3. If any of the following criteria apply, please provide supporting documentation:

- Evidence of absence of cervix or hysterectomy with no residual cervix on or before 12/31/2024
- Evidence patient was assigned male at birth
- Evidence patient was admitted to hospice or palliative care in 2024
- Evidence patient died anytime during 2024

4. If no reports or results found, please provide the following:

- 2024 problem list, medical/surgical history, medication list, all visits 2020 through 2024
- Check here to verify no visits found in 2020 through 2024

5. If the requested documentation is unavailable, indicate the reason(s) below:

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³ MCAS and HPA, Hybrid Measure

HEDIS[®] MY2024/RY2025 Hybrid Reporting Measure Instruction Sheet

Childhood Immunization Status (CIS)⁴

Percentage of children 2 years of age who receive a series of vaccines (# of injections) by their second birthday: DTaP (4), Hep B (3), PCV (4), VZV (1), IPV (3), HiB (3), MMR (1), Hep A (1), RV (2 or 3), and Flu (2)

1. Confirm that the patient names and dates of birth match the charts.

2. Documentation Required:

- Evidence of immunizations with date of immunization and specific antigen or certificate of immunization, i.e., State immunization form or registry printout, immunization log
- Progress notes with evidence of immunization
- Newborn records of first Hep B immunization
- History of any of the following diseases on or prior to the second (2nd) birthday: Measles, Mumps, Rubella, Hepatitis B, VZV, or Hepatitis A

3. If any of the following criteria apply, please provide supporting documentation:

- Evidence of contraindication for a specific vaccine on or prior to second (2nd) birthday
- Evidence patient was admitted to hospice in 2024
- Evidence patient died anytime during 2024

4. If no evidence of immunization found, please provide the following:

- 2024 problem list, medical history if present, and all visits in 2022, 2023, and 2024

5. If the requested documentation is unavailable, indicate the reason(s) below:

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⁴ MCAS and HPA, Hybrid Measure

HEDIS® MY2024/RY2025 Hybrid Reporting Measure Instruction Sheet

Eye Exam for Patients with Diabetes (EED)⁵

Percentage of members 18-75 years of age with diabetes (type 1 or 2) who had the following indicator during the measurement year:

- Retinal eye exam

1. Confirm that the patient names and dates of birth match the charts.

2. Documentation Required:

- Evidence of retinal and/or dilated eye exam and results in 2023 or 2024 (all eye exams, reports, or correspondence from Eye Care Specialist for 2023 & 2024)

3. If any of the following criteria apply, please provide supporting documentation (i.e., problem list, medical history, medication list, and all visit notes for 2023 & 2024):

- Evidence patient was admitted to hospice or palliative care in 2024
- Evidence patient died anytime during 2024

4. If the requested documentation is unavailable, indicate the reason(s) below:

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⁵ HPA Only, Hybrid Measure

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Glycemic Status Assessment for Patients with Diabetes (GSD) (Formerly Hemoglobin A1c Control for Patient with Diabetes)

Percentage of members 18-75 years of age with diabetes (type 1 or type 2), whose most recent status (hemoglobin A1c, [HbA1c] or glucose management indicator [GMI]) was at the following levels during 2024:

- Glycemic Status <8.0%⁶
- Glycemic Status >9.0%⁷

1. Confirm that the patient names and dates of birth match the charts.

2. Documentation Required:

- Most recent lab results for 2024: HbA1c or GMI
- Most recent visit note with lab date & result for HbA1c or GMI

3. If no evidence found for HbA1c, please send:

- All lab reports and visit notes for 2024

4. If any of the following criteria apply, please provide supporting documentation (i.e., problem list, medical history, medication list, and all visit notes for 2023 & 2024).

- Evidence patient was admitted to hospice or palliative care in 2024
- Evidence patient died anytime during 2024

5. If the requested documentation is unavailable, indicate the reason(s) below:

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⁶ Good Control <8%, HPA Only, Hybrid Measure

⁷ Poor Control >9%, MCAS Only, Hybrid Measure

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Immunization for Adolescents – Combination 2 (IMA)⁸

Percentage of adolescents 13 years of age during the measurement year who had the following:

- 1 Meningococcal vaccine between 11-13 years old
- 1 Tetanus, diphtheria toxoids and acellular pertussis vaccine (Tdap/Td) between 10-13 years old
- 2 or 3 human papillomavirus (HPV) vaccines between 9-13 years old

1. Confirm that the patient names and dates of birth match the charts.

2. Documentation Required:

- Evidence of HPV, meningococcal, and Tdap antigen or combination vaccine, e.g., State immunization form, immunization log, progress notes
- Progress notes with evidence of immunizations including antigen name and date administered

3. If any of the following criteria apply, please provide supporting documentation:

- Evidence of contraindication for a specific vaccine on or prior to thirteenth (13th) birthday
- Evidence of encephalopathy on or prior to thirteenth (13th) birthday
- Evidence patient was admitted to hospice in 2024
- Evidence patient died anytime during 2024

4. If no evidence of Immunizations found, please provide the following:

- 2024 problem list and medical history, all visits in 2024

5. If the requested documentation is unavailable, indicate the reason(s) below:

- Patient never seen here
- Unable to retrieve patient chart from remote storage
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Thank you!

⁸ MCAS and HPA, Hybrid Measure

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Lead Screening in Children (LSC)⁹

Percentage of children 2 years of age who had the following:

- One or more capillary or venous lead blood test for lead poisoning by their second birthday
1. **Confirm that the patient names and dates of birth match the charts.**
 2. **Documentation Required:**
 - Progress notes or lab notes indicating the date of a venous or capillary blood test and the result of the test on or prior to the child's second (2nd) birthday.
 - If no lead screening completed, please send progress notes from child's birth to second (2nd) birthday.
 3. **If any of the following criteria apply, please provide supporting documentation:**
 - Evidence patient was admitted to hospice or palliative care in 2024
 - Evidence patient died anytime during 2024
 4. **If the requested documentation is unavailable, indicate the reason(s) below:**
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 - This instruction sheet
 - The patient's face sheet (for confirmation of date of birth), preferably with insurance information.
 - The requested chart copies (with patient name clearly shown on each page)

Thank you!

⁹ (MCAS Only, Hybrid Measure)

HEDIS[®] MY2024/RY2025 Hybrid Reporting Measure Instruction Sheet

Prenatal and Postpartum Care (PPC)¹⁰

Percentage of deliveries of live births on or between October 8, 2023 and October 7, 2024. The measure assesses the following indicators:

- Timeliness of Prenatal Care: The percentage of deliveries that received a prenatal visit in the first trimester, on or before the enrollment start date or within 42 days of enrollment to PHC
- Postpartum Care: The percentage of deliveries that had a postpartum visit on or between 7 and 84 days after delivery

1. Confirm that the patient names and dates of birth match the charts.

2. Documentation Required:

- Complete Prenatal flow sheet (ACOG, EMR, or other)
- All visit notes (including both telehealth and in-person office visits) for duration of pregnancy if prenatal flow sheet not available or complete
- Prenatal lab reports (OB panel, TORCH antibody panel, Rubella antibody test, ABO, & Rh)
- Ultrasound reports or results used to confirm most recently recorded EDD if not documented on prenatal flow sheet
- Documentation of delivery date (copy of hospital delivery record or notation on prenatal flow sheet or postpartum visit note)
- All Postpartum visit notes (including both telehealth and in-person office visits) within three (3) months after delivery

3. If any of the following criteria apply, please provide supporting documentation (all evidence and complete prenatal flow sheet if available):

- Evidence member was not pregnant
- Evidence pregnancy did not result in live birth
- Evidence patient did not deliver between Oct. 8, 2023 and Oct. 7, 2024
- Evidence patient was admitted to hospice in 2024
- Evidence patient died anytime during 2024

4. If the requested documentation is unavailable, indicate the reason(s) below:

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¹⁰ MCAS and HPA, Hybrid Measure

HEDIS[®] MY2024/RY2025 Hybrid Reporting Measure Instruction Sheet

Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents (WCC)¹¹

Percentage of members 3-17 years of age who had an outpatient visit with a PCP or OB/GYN and who had evidence of the following during the measurement year:

- BMI percentile documentation

1. Confirm that the patient names and dates of birth match the charts.

2. Documentation Required:

- Documentation of height, weight, and BMI percentile
- BMI percentile in note or documented on BMI-for-age growth chart in 2024
- Height and weight documented in 2024

3. If well visits are not available, please provide the following:

- Sick visits (including both telehealth and in-person office visits) for the year 2024.

4. If any of the following criteria apply, please provide supporting documentation:

- Evidence of a diagnosis of pregnancy in 2024
- Evidence patient was admitted to hospice in 2024
- Evidence patient died anytime during 2024

5. If the requested documentation is unavailable, indicate the reason(s) below:

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