

Welcome

Thank you all for joining our Webex meeting!

You have been muted upon entry. If you have questions, please utilize the chat box within your Webex screen.

This meeting will begin promptly.



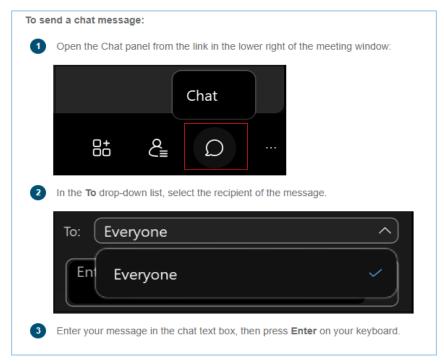


Welcome

How to unmute yourself

To mute or unmute yourself, select Mute or Unmute

How to utilize the chat feature









Agenda

- Overview of HEDIS and medical record review
- Medical record retrieval options
- Partnership retrieval
- KDJ EMR remote retrieval
- HEDIS timeline
- Roles and responsibilities
- Resources and contacts





Overview

- What is HEDIS?
 - Healthcare Effectiveness Data and Information Set
- Why is HEDIS Important?
 - Evaluates clinical quality in a standardized way
 - Identifies opportunities for improvement
 - Regional-level performance reporting is required by the State and is publicly reported.
 - Plan-wide reporting is a Health Plan Accreditation (HPA)
 Audit requirement and is part of our overall HPA Star
 Rating.
 - HEDIS/CAHPS combined represents a significant portion of overall NCQA Accreditation Score



Reporting Populations - Regions

NCQA DHCS Reporting	
Populations	
Southeast	Solano, Yolo, Napa
Southwest	Sonoma, Marin, Mendocino, Lake
Northeast	Lassen, Modoc, Siskiyou, Trinity, Shasta
Northwest	Humboldt, Del Norte

NCQA HEDIS Accreditation Reporting Population Partnership Total • All 14 counties • Plan-wide reported rates







Measurement Year vs. Reporting Year

 Measurement Year (MY) – The previous calendar year, but could include a longer lookback period depending on the measure specifications.

 Reporting Year (RY) – The year the data is collected and reported to DHCS and NCQA.





Hybrid vs. Administrative Measures

Measure Reporting Methodology:

- Administrative Measures
 - Measures the entire population
 - Data is collected through transaction data or other administrative data used to identify the eligible population and numerator (i.e. claims/encounter data).
- Hybrid Measures
 - Measures a statistically significant sample of the eligible population.
 - Data collected from transaction data or other administrative data and key data elements are collected from the medical record chart.



Hybrid Measure Overview

Hybrid Measure Names

BPD* – Blood Pressure Control (<140/90) for Patients with Diabetes

CBP – Controlling High Blood Pressure

CCS – Cervical Cancer Screening

CIS-10 - Childhood Immunization Status Combo 10

EED* – Eye Exam for Patients with Diabetes

HBD: Hemoglobin A1c Control for Patients with Diabetes

- MCAS/DHCS Reporting
 - HbA1c Poor Control (>9.0%)
- HPA/Accreditation Reporting
 - HbA1c Control (<8.0%)

IMA-2 – Immunizations for Adolescents Combo 2

LSC** – Lead Screening for Children

PPC – Prenatal and Postpartum Care

WCC-BMI* – Weight Assessment & Counseling for Nutrition and Physical Activity for Children & Adolescents – BMI Percentile – Total



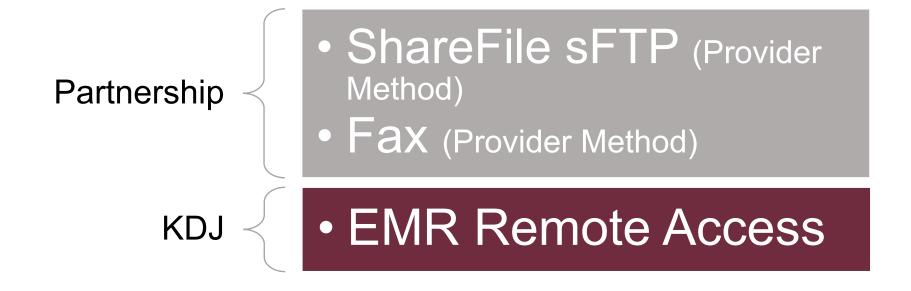
^{*}HPA/Accreditation Reporting only

^{**}MCAS/DHCS Reporting only





Medical Record Retrieval Options







Provider Method Retrieval

Retrieval Option Overview:

ShareFile sFTP (preferred)

- Secure file sharing, direct upload of records.
- Enables real time view of records submitted for validation
- Reduces re-requests due to illegible records, failed faxes
- Recommended for submitting electronic records (PDF)

Fax

Limited to providers with 15 charts or less





ShareFile

- Secure sFTP server owned by Partnership
- Email address is required
- Only those with permission can view/edit the folder
- Click "<u>Learn More about HEDIS Medical Record</u> Retrieval" to find the ShareFile tutorial.

Provider Method Retrieval



For HEDIS MY2023, Partnership staff will request medical records from provider offices to be submitted via ShareFile or fax.

Click here to view ShareFile for Providers

Click here to view ShareFile Tutorial





Provider Method Retrieval

Outreach and Scheduling Provider Method:

1. Partnership Staff will outreach to identify appropriate retrieval method and establish a commitment date in February.

- 2. Partnership Staff will send the Provider Package via one of the following methods:
- ShareFile (email link to provider)
- Secure Email or Fax
 - 3. Providers will submit medical record documentation using the agreed upon timeline and method:
 - ShareFile Upload records directly
 - Fax Fax to Partnership's HEDIS Fax line





KDJ Retrieval

Contracted
with
Partnership
to perform
remote
retrieval

Partnership and KDJ are partnering for a 7th HEDIS Season Certified
WomenOwned
Business
(WBE) and
SOC 2
Certified
Corporation

Established in 1995 and have been conducting HEDIS retrieval since 1997





KDJ Retrieval

What to Expect:

KDJ reaches out to existing remote retrieval providers for testing in November

Partnership sends any new remote providers to KDJ for set-up and testing in November

KDJ conducts testing of provider's EMR from December to early February

KDJ begins HEDIS retrieval in mid-February and sends out the provider package







HEDIS Roles and Responsibilities

Partnership's HEDIS Team Responsibilities

- The HEDIS Team partners with providers to select the best retrieval method and establish a due date.
- Follow-up with providers, as needed, for any retrieval or scheduling requests.
- Support providers and KDJ to successfully retrieve medical records timely.
- Provide support to resolve challenges, should any arise.





HEDIS Roles and Responsibilities

KDJ Responsibilities

- First point of contact for EMR Remote Retrieval and coordination of remote access testing.
- Provides a list of member's charts they need to access. (If the member chart is not available, please notify KDJ immediately.)
- Assigned nurse logs into EHR to review specified charts and collect HEDIS data.
- Copies only medical record data to support HEDIS Measures.





HEDIS Roles and Responsibilities

Provider Responsibilities

- Respond timely to Partnership and KDJ outreach calls/emails or technical issues.
 - Partnership has less than 12 weeks to retrieve approximately 20,000 medical records.
- Complete any testing/certification requested by KDJ.
- Submit requested records to Partnership by the agreed upon date for provider method. Note any members whose chart is not available.
- Inform Partnership of any delays or issues as they occur.







HEDIS MY2023 Timeline

Nov

- November 30, 2023 Deadline for EMR Remote Access Forms
- KDJ Outreach for EMR Remote Access set-up and/or testing begins

Jan

KDJ Outreach for EMR Remote Access set-up and/or testing ends

Feb

- Partnership begins outreach for provider method retrieval
- KDJ starts sending out provider packages
- Primary Medical Record Retrieval and Abstraction begins

Apr

- Primary Medical Record Retrieval and Abstraction ends
- Secondary Medical Record Retrieval begins

May

- Secondary Medical Record Retrieval ends
- May 5, 2024 All retrieval and review stops
- Medical Record Review Audit (MRRV)

June

- Final rates locked and reported to NCQA and DHCS
- June 14, 2024 KDJ will de-activate credentials from EMR

Aug

 HEDIS 2024 Annual Summary of Performance shared with our Provider Network





Resources

Partnership HEDIS Website

- http://www.partnershiphp.org/Providers/Quality/Pages/HEDISLandingPage.aspx
- Medi-Cal HEDIS MY2022 Performance
- HEDIS FAQs
- Technical Guideline for Remote Access
- HEDIS Newsletter
- Upcoming Webinars and Trainings
- Measure definitions and documentation requirements

NCQA Website

http://www.ncqa.org/HEDISQualityMeasurement.aspx





Contact Information

Partnership HEDIS Team Contact:

- Phone: (866) 828-2302
- Fax: (707) 863-4314
- Email: HEDISMRA@partnershiphp.org

KDJ Provider Support Line:

• Phone: (817) 329-1397





Questions

