

Provider Medical Record HEDIS® Hybrid Training

Measure Year 2024







Thank you for attending!

Today's webinar is presented to you by the following three health plans.



















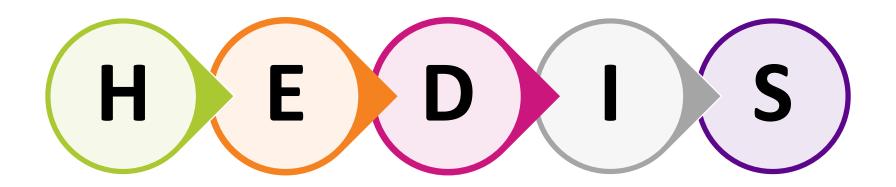






Introduction to HEDIS®





Healthcare Effectiveness Data and Information Set

HEDIS is a comprehensive set of standardized *performance measures* developed by the National Committee for Quality Assurance® (NCQA) to objectively measure, report, and compare quality across health plans.

HEDIS rates are used to evaluate quality of care and services of health insurance companies to improve preventive health outreach for members and to evaluate practitioner's preventive care efforts.





Value of HEDIS

HEDIS provides value in three specific areas:

The ability to understand how well organizations achieve results

Offers a way to make an "apples-to-apples" comparison of organizations

Is part of a larger system that requires accountability and quality improvement in healthcare





HEDIS Data Sources

Administrative

Administrative Data is calculated from a claim or encounter(s). This includes:

- CPT codes.
- ICD-10 codes.
- Approved supplemental data.
- Enrollment systems.
- Insurance claims (both paid and denied).

Measure denominators and reported rates are based on the entire eligible population.

Electronic Clinical Data Systems (ECDS)

Electronic Clinical Data Systems (ECDS) utilizes expansive information available in electronic clinical datasets for patient care and quality improvement

Network of data containing a plan member's personal health information and records of their experience within the health care system.

Hybrid

Hybrid Data is obtained from both administrative sources and abstracted from the patient's medical record (both paper and EMR).

- Reviews a collection of medical records for members who are part of a randomly selected sample population to improve the administrative rate.
- NCQA determines the hybrid measures allowed to be used for HEDIS data collection.
- Hybrid medical record collection methods include fax, EMR access, onsite retrieval, email, and mail.
 Fax is preferred.







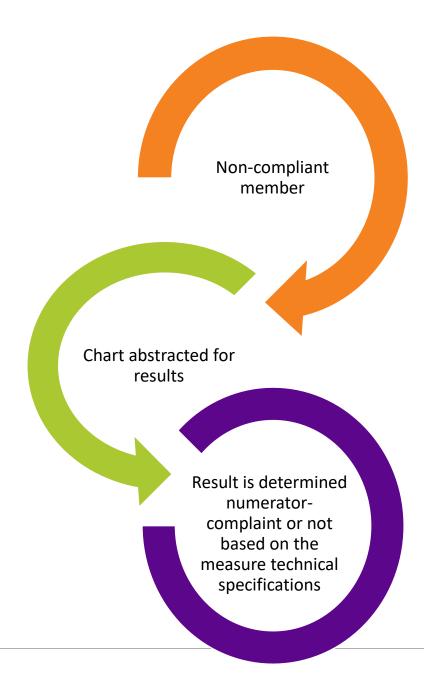
Hybrid Season

HEDIS Hybrid Chart Chase



HEDIS Hybrid

- The **Hybrid Method** requires a sample to be drawn from the eligible population based on measure specifications.
- **HEDIS Chart Chase** means that the health plan will collect records for patients that fall into the hybrid measure samples. All sampled patients are included in the denominator.
- The chart chase process supplements compliant administrative data and typically begins late January and wraps-up at the end of April.
- Health plans work to retrieve records as soon as possible during the season. The goal is to find the patient's compliant event to ensure the highest compliant rate possible.









HEDIS Technical Specifications





- Health plans following Technical Specification guidelines, set forth by NCQA annually, to ensure medical records meet necessary requirements for compliancy based on measure.
- Technical Specifications are commonly referred to as 'Tech Specs'.
- Tech Specs serve as a required resource for anyone collecting, calculating, or submitting data to Medicaid, Medicare and Commercial insurance.
- Reporting must follow the specifications and is heavily audited.

HEDIS Medical Record Process

- The health plan will begin requesting medical record information for HEDIS® Hybrid Season beginning late January 2025.
- Medical record fax requests will include a member list identifying the measure(s) and the minimum necessary information needed.
 - Always include the patient/member demographic information on the initial page. Information should include:
 - First and last name
 - Date of birth (DOB)
 - Insurance information (Insurance ID, etc)
- Submitting the requested medical records promptly is very important and is part of your provider agreement/ contract with the health plan.
 - Submit requested information within seven days of receipt of the request.
 - Medical records submitted via CD, USB drive, etc. are no longer accepted.
 - Do not staple medical records/charts.
 - Records provided during this process help validate and demonstrate the quality of care you provide to our patients/members.







HEDIS Medical Record Process

HIPAA:

- Under the Health Insurance Portability and Accountability Act (HIPAA) Privacy Rule, data collection for HEDIS is permitted, and the release of this information does not require special patient consent or authorization.
- Every patient/member personal health information is maintained in accordance with all federal and state laws.
- Only the minimum medical record information is necessary to satisfy the requested information.
 - Submission of a patient's/member's entire medical record is often unnecessary and is not recommended.







HEDIS Practitioner Copying Instructions for Medical Records

Please submit the requested supporting documentation within seven days of receipt of the request.

Include a copy of the patient's demographic page/face sheet (Name, Date of Birth, Insurance ID Number).

To submit documentation or for any questions pertaining to medical record collection options, please contact:

Iowa Total Care



Fax: 1-833-900-3871



ITC HEDIS@iowatotalcare.com

Attention: HEDIS® Operations

Sunflower Health Plan



Fax: 1-855-475-4399



SM HEDIS Ops@sunflowerhealthplan.com

Attention: HEDIS® Operations

Home State Health



Fax: 1-866-390-3581



QualityImprovement@homestatehealth.com

Attention: HEDIS® Operations

Providers using a copy service vendor should work directly with the vendor to ensure medical records are returned by the deadline indicated.







Medical Record Documentation



Applicable HEDIS Hybrid Measures

Acronym	Measure Description	Medicaid Medicare		Marketplace
BPD	Blood Pressure Control for Patients with Diabetes	\checkmark	✓	
СВР	Controlling High Blood Pressure	\checkmark	✓	\checkmark
ccs	Cervical Cancer Screening	\checkmark		✓
CIS	Childhood Immunization Status	\checkmark		\checkmark
COA	Care for Older Adults		\checkmark	
EED	Eye Exam for Patients with Diabetes	\checkmark	\checkmark	\checkmark
GSD	Glycemic Status Assessment for Patients with Diabetes	\checkmark	\checkmark	✓
IMA	Immunizations for Adolescents	\checkmark		\checkmark
LSC	Lead Screening in Children	\checkmark		
PPC	Timeliness of Prenatal and Postpartum Care	\checkmark		
TRC	Transitions of Care		\checkmark	
wcc	Weight Assessment & Counseling for Nutrition and Physical Activity for Children/Adolescents	✓		✓







HEDIS Measure for BPD

(Blood Pressure Control for Patients with Diabetes)

Medical Record Documentation for BPD

- Dates of Service: 2024
 - Office/encounter notes in measurement year.
 - Consult reports in measurement year.
 - Problem lists/medical history.
 - Outpatient blood pressure readings during the year.

Tips

Latest outpatient blood pressure of the measurement year is needed.

If multiple values are taken the same day, provide all blood pressure readings.

Flowsheets or office visit notes are acceptable.







HEDIS Measure for CBP

(Controlling High Blood Pressure)

Medical Record Documentation for CBP

- Dates of Service: 2024
 - Office/encounter notes in measurement year.
 - Consult reports in measurement year.
 - Problem lists/medical history.
 - Outpatient blood pressure readings during the year.

Tips

Latest outpatient blood pressure of the measurement year is needed

If multiple values are taken the same day, provide all blood pressure readings

Flowsheets or office visit notes are acceptable





HEDIS Measure for CCS

(Cervical Cancer Screening)

Medical Record Documentation for CCS

- Consult reports/documentation from 2020-2024.
- Notation of gender, if not female at birth.
- Documentation of hysterectomy and type any time in the member's history (if applicable).
- Dates of Service:
 - 2022-2024: Patients with cytology report (pap test) and results.

OR

2020-2024: Patients with HPV test alone OR a
 Pap and HPV co-testing and results.

Acceptable Documentation for CCS

- Cervical cytology test results are preferred.
- Documentation in the progress note of a pap test and/or HPV with results/findings AND the date of service will meet requirements.
- For members with a hysterectomy:
 Documentation of the TYPE of hysterectomy is required (ie: complete, total, simple, full) anytime in the members history.







HEDIS Measure for CIS

(Childhood Immunization Status)

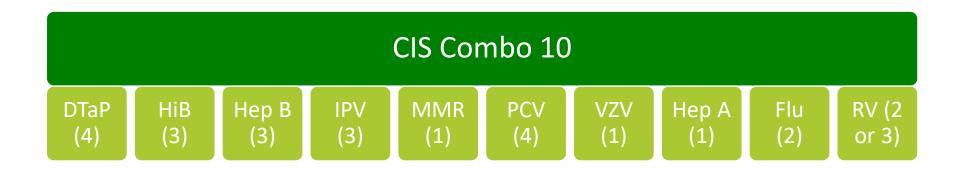
Medical Record Documentation for CIS

- Date of Service: Birth through 2nd Birthday
 - Office/encounters notes with evidence of immunizations given.
 - Immunization records/certificates/logs, state immunization forms or registry printouts.
 - Well-child checklists/allergy list.
 - Birth record/discharge summary.

Tips

Immunizations must clearly show evidence that they were given and not merely ordered.

Immunization records/logs are acceptable.









HEDIS Measure for COA

(Care for Older Adults)

Medical Record Documentation for COA

- Dates of Service: 2024
 - Office note of medication list
 - Office note of assessment of functional status (Activities of Daily Living)
 - Office note of pain assessment
 - Standardized pain/functional status assessments completed and scored

Tips

- Medication review must be completed by a prescribing practitioner.
- A free-standing medication list is acceptable if there is documentation to indicate the appropriate provider reviewed the medication list in the measurement year.
- Pain assessment can include positive and/or negative findings.







HEDIS Measure for EED

(Eye Exam for Patients with Diabetes)

Medical Record Documentation for EED

- Dates of Service: 2023-2024
 - Retinal or dilated eye exam results (conducted by an optometrist, ophthalmologist, or other eye care professional). Provider credentials must be included.
 - Chart/photograph of retina performed by an eye care professional and results.

Tips

Eye exams must be performed by an eye care professional.

Provider credentials must be present.





HEDIS Measure for GSD

(Glycemic Status Assessment for Patients with Diabetes)

Medical Record Documentation for GSD

- Dates of Service: 2024
 - Most recent (latest) HbA1c documented in medical record (dated and results).
 - Dated flow sheets: diabetic lab results.

Example of latest results needed

Test	Reference Range	11/5/MY	6/19/MY	2/11/MY	11/3/PY	8/27/PY
Hgb A1c	<5.7 (% of total Hgb)	6.8	5.9	7.4	6.8	6.6

Tips

Latest HbA1c of the measurement year is needed

Flowsheets or office visit notes are acceptable





HEDIS Measure for IMA

(Immunizations for Adolescents)

Medical Record Documentation for IMA

- Dates of Services: Immunizations between 9th and 13th birthdays
 - Immunization records/certificates/logs, state immunization forms or registry printouts for Meningococcal (Men), Tdap and HPV vaccines.
 - Office/encounters notes with evidence of immunizations given.
 - Well-child checklists/allergy list.



Tips

Immunizations must clearly show evidence that they were given and not merely ordered.

Immunization records/logs are acceptable.





HEDIS Measure for LSC

(Lead Screening in Children)

Medical Record Documentation for LSC

- Dates of Services: 2023-2024
 - Office/encounter notes
 - Well-child exams
 - Lab results
 - Lab flowsheets

Tips

Lab test results are preferred.

Lab must be drawn on or before the second birthday.

Flowsheets or office visit notes are acceptable if the lab, collection date, and results are included.





HEDIS Measure for PPC

(Prenatal and Postpartum Care)

Medical Record Documentation for PPC

- Dates of Service: Deliveries in 2023-2024
 - Prenatal flow sheets (ACOG, EMR, or other) and/or prenatal history, prenatal risk assessment and counseling/education.
 - All progress/office visit notes for duration of pregnancy.
 - All lab reports/results related to and during pregnancy.
 - Ultrasound reports.
 - Hospital/delivery records.
 - All consult reports for duration of pregnancy.
 - Postpartum visits following delivery.

Tips

ACOG/Prenatal Flow Sheets must include provider credentials.

A separate list of providers and credentials may be included with the medical records if needed.







HEDIS Measure for TRC (Transitions of Care)

Dates of Service: Discharged in 2024

- **1. Notification of Inpatient Admission:** Receipt of notification of inpatient admission on the day of admission through 2 days after the admission (3 total days).
 - Outpatient documentation must include proof that the notification was received within 3 days.
 - For shared EMRs, documentation must show the admission notification occurred within 3 days AND evidence the PCP had access.
 - Examples of acceptable documentation include:
 - Dated communication note or copy of the original fax with received date.
 - Communication between PCP and emergency department or inpatient staff via phone, email, or fax.
- 2. Receipt of Discharge Information: Receipt of discharge information on the day of discharge through 2 days after the discharge (3 total days).
 - Include a copy of the discharge summary (with proof that the record was received ≤3 days) within the outpatient record.
 - At minimum, the discharge information must include ALL of the following:
 - > Practitioner responsible for the members care during the inpatient stay.
 - Procedures or treatment provided.
 - Diagnosis at discharge.
 - Current medication list.
 - Testing results, documentation of pending tests, or no tests pending.
 -) Instructions for patient care post-discharge.
 - For shared EMRs, documentation must show the discharge summary was posted within 3 days **AND** evidence the PCP had access.

Medical records are REQUIRED for Notification of Inpatient Admission and Receipt of Discharge Information compliance. Administrative reporting is *not* available.



HEDIS Measure for TRC (Transitions of Care: Sub-Measures)

- **3. Patient Engagement After Inpatient Discharge:** Patient engagement (e.g., office visits, visits to the home, telehealth, phone, etc) provided within 30 days after discharge.
- **4. Medication Reconciliation Post-Discharge:** Medication reconciliation on the date of discharge through 30 days after discharge (31 total days).

Medical Record Documentation for TRC

- Dates of Service: Discharged in 2024
 - Office Notes/Service Visit Notes/Progress Notes
 - Medication List
 - Hospital Notes (H&P)/Records/ER Notes

Tips

Medication Reconciliation may be completed without the member present.

Patient Engagement can take place with any staff.







HEDIS Measure for WCC

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

Medical Record Documentation for WCC

- Dates of Service: 2024
 - Progress notes/office visit notes/telephonic or telehealth notes.
 - Well-child check forms.
 - Daycare exam, state, sport or camp physicals.
 - Consult notes.
 - Height/weight/BMI growth charts graph and flowsheets.
 - All referrals (dieticians, obesity/eating disorders, WIC).

Tips

Weight, Height, and BMI Percentile must be documented in measurement year.

Different dates of service are acceptable.

BMI value alone does not count, percentile must be included.





Before we close...

A few reminders and tips:

Health Plans will begin requesting medical records late January 2025.

Return the requested medical records within 7 days of receipt of request

Reference slide 12 above for your specific Health Plan's fax number and email address

Include a demographic sheet/face sheet with each patient's medical record request





Questions?

