HEDIS 101 provider training
Content covered

• What is HEDIS®?
• What is your role in HEDIS?
• HEDIS calendar
• HIPAA
• Types of reviews
• HEDIS measures
• Frequently asked questions

HEDIS® is a registered trademark of the National Committee for Quality Assurance (NCQA).
What is HEDIS?

- HEDIS is a performance tool coordinated and administered by the National Committee for Quality Assurance (NCQA).
- It is used by more than 90% of America's health plans to measure performance on important dimensions of care and service.

What does it stand for?

**Health**

**Effectiveness**

**Data and**

**Information**

**Set**
What is your role in HEDIS?

• HEDIS assists providers in identifying and eliminating gaps in care for the patients assigned to their panel.
• You and your office staff can help facilitate the HEDIS process by:
  o Providing the appropriate care within the designated time frames.
  o Accurately documenting all care in the patient’s medical record.
  o Accurately coding all claims and submitting them in a timely manner.
  o Responding to our requests for medical records within five business days.
HEDIS Calendar

**JAN-MAY**
Clinical Quality staff collects HEDIS data from the prior measurement year (medical record reviews)

**JUNE**
Results are reported to NCQA and DHCS

**SEPTEMBER**
HEDIS measure report released

The HEDIS calendar and deadlines are subject to change each year.

HEDIS data is collected from the prior measurement year (i.e., 2020 HEDIS year is based upon a look-back period of the 2019 HEDIS year)
HIPAA

• HIPAA requires the protection and confidential handling of protected health information.
• Under the HIPAA privacy rule, data collection for HEDIS is permitted, and the release of this information requires no special consent or authorization per contract agreement.

What does it stand for?

Health Insurance Portability and Accountability Act
HIPAA and HEDIS data collection

• Please ensure our members’ personal health information is maintained in accordance with all federal and state laws.

• Data should be reported collectively without individual identifiers.

• All of the health plans’ contracted providers’ records are protected under this act.
Types of review
HEDIS data collection

HEDIS Data

Two ways data is collected

Administrative data

Obtained from our claims database

Examples: claims or encounters, labs, EMR, CAIR, Rx, and VSP

Hybrid data

Obtained from our medical record review (chart reviews) and administrative data
HEDIS data collection (cont.)

Data collection methods may include:

- Secure file transfer protocol (SFTP)
- Fax
- Mail
- Onsite
- Electronic medical record (remote access)

Initial medical record requests are faxed to provider offices. Requests include a member list identifying their assigned measures and information needed.

Due to the shortened data collection time frame, a five-day turnaround is required.
Types of measures
<table>
<thead>
<tr>
<th>Measure acronym</th>
<th>Measure</th>
<th>Measure type methodology</th>
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</thead>
<tbody>
<tr>
<td>PCR</td>
<td>Plan All-Cause Readmissions</td>
<td>Administrative</td>
</tr>
<tr>
<td>AWC</td>
<td>Adolescent Well-Care Visits</td>
<td>Hybrid</td>
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<tr>
<td>ABA</td>
<td>Adult Body Mass Index Assessment</td>
<td>Hybrid</td>
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<tr>
<td>AMM-Acute</td>
<td>Antidepressant Medication Management – Acute Phase Treatment</td>
<td>Administrative</td>
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<tr>
<td>AMM-Cont</td>
<td>Antidepressant Medication Management – Continuation Phase Treatment</td>
<td>Administrative</td>
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<tr>
<td>AMR</td>
<td>Asthma Medication Ratio</td>
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<tr>
<td>BCS</td>
<td>Breast Cancer Screening</td>
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<tr>
<td>CCS</td>
<td>Cervical Cancer Screening</td>
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<tr>
<td>CIS-10</td>
<td>Childhood Immunization Status – Combo 10</td>
<td>Hybrid</td>
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<tr>
<td>CHL</td>
<td>Chlamydia Screening in Women Ages 16 – 24</td>
<td>Administrative</td>
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<tr>
<td>Measure acronym</td>
<td>Measure</td>
<td>Measure type methodology</td>
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<tr>
<td>CDC-HT</td>
<td>Comprehensive Diabetes Care HbA1c Testing</td>
<td>Hybrid</td>
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<tr>
<td>CDC-H9</td>
<td>HbA1c Poor Control (&gt; 9.0%)</td>
<td>Hybrid</td>
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<tr>
<td>CBP</td>
<td>Controlling High Blood Pressure &lt;140/90 mm Hg</td>
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<tr>
<td>IMA-2</td>
<td>Immunizations for Adolescents – Combo 2 (meningococcal, Tdap, HPV)</td>
<td>Hybrid</td>
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<tr>
<td>PPC-Pre</td>
<td>Prenatal &amp; Postpartum Care – Timeliness of Prenatal Care</td>
<td>Hybrid</td>
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<tr>
<td>PPC-Pst</td>
<td>Prenatal &amp; Postpartum Care – Postpartum Care</td>
<td>Hybrid</td>
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<tr>
<td>WCC-BMI</td>
<td>Weight Assessment &amp; Counseling for Nutrition &amp; Physical Activity for Children &amp; Adolescents: Body Mass Index Assessment for Children/Adolescents</td>
<td>Hybrid</td>
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<tr>
<td>W15</td>
<td>Well-Child Visits in the First 15 Months of Life – Six or More Well-Child Visits</td>
<td>Hybrid</td>
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<tr>
<td>W34</td>
<td>Well-Child Visits in the 3rd, 4th, 5th, &amp; 6th Years of Life</td>
<td>Hybrid</td>
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<tr>
<td>Measure acronym</td>
<td>Measure</td>
<td>Measure type methodology</td>
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<tr>
<td>AMB-ED</td>
<td>Ambulatory Care: Emergency Department (ED) Visits</td>
<td>Administrative</td>
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<tr>
<td>ADD-Init</td>
<td>Follow-Up Care for Children Prescribed Attention-Deficit/Hyperactivity Disorder (ADHD) Medications – Initiation Phase</td>
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<tr>
<td>ADD-C/M</td>
<td>Follow-Up Care for Children Prescribed Attention-Deficit/Hyperactivity Disorder (ADHD) Medications – Continuation and Maintenance Phase</td>
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<td>CAP</td>
<td>Children &amp; Adolescents’ Access to Primary Care Practitioners: 12-24 Months</td>
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<tr>
<td>CAP</td>
<td>Children &amp; Adolescents’ Access to Primary Care Practitioners: 25 Months – 6 Years</td>
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<td>CAP</td>
<td>Children &amp; Adolescents’ Access to Primary Care Practitioners: 7-11 Years</td>
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<tr>
<td>CAP</td>
<td>Children &amp; Adolescents’ Access to Primary Care Practitioners: 12-19 Years</td>
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<td>CCW</td>
<td>Contraceptive Care: All Women Ages 15-44:</td>
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<tr>
<td></td>
<td>• Most or moderately effective contraception</td>
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<td></td>
<td>• Long-Acting Reversible Contraception (LARC)</td>
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## 2020 required measures (cont.)

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<th>Measure type methodology</th>
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<td>CCP</td>
<td>Contraceptive Care: Postpartum Women Ages 15-44:</td>
<td>Administrative</td>
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<tr>
<td></td>
<td>• Most or moderately effective contraception – 3 days</td>
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<tr>
<td></td>
<td>• Most or moderately effective contraception – 60 days</td>
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<tr>
<td></td>
<td>• LARC – 3 days</td>
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<tr>
<td></td>
<td>• LARC – 60 days</td>
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<tr>
<td>DEV</td>
<td>Developmental Screening</td>
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<tr>
<td>HIV</td>
<td>HIV Viral Load Suppression</td>
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<tr>
<td>MPM-Ace/Arb</td>
<td>Annual Monitoring for Patients on Persistent Medications: ACE inhibitors or ARBs</td>
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<tr>
<td>MPM-Diu</td>
<td>Annual Monitoring for Patients on Persistent Medications: Diuretics</td>
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<tr>
<td>COB</td>
<td>Concurrent Use of Opioids and Benzodiazepines</td>
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<tr>
<td>OHD</td>
<td>Use of Opioids at High Dosage in Persons Without Cancer</td>
<td>Administrative</td>
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<tr>
<td>CDF</td>
<td>Screening for Depression and Follow-Up Plan: Age 12 and Older</td>
<td>Administrative</td>
</tr>
</tbody>
</table>

Note: Additional NCQA measures are required but not indicated on this list.
Frequently asked questions
How do I improve my HEDIS scores?

• Use correct diagnosis and procedure codes.
• Submit claims and encounter data timely.
• Ensure all components are presented in the medical record documentation.
How can I view my performance in HEDIS?

- Gap in care reports showing which patients have not received care are printed.
- Those reports are disseminated to individual providers and clinics.
Whom do I contact if I have questions about HEDIS medical record requests?

- Each medical record request includes contact information for Quality Management personnel at Anthem Blue Cross (Anthem).
- You may also contact your Anthem Provider Relations personnel.
- To find out more information about NCQA and HEDIS, visit: www.ncqa.org.
Sources

www.ncqa.org/hedis-quality-measurement/hedis-measures

https://mediproviders.anthem.com/ca
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ACAPEC-1905-19 September 2019
Thank you for participating in the annual HEDIS data collection.

You play a central role in promoting the health of our members.