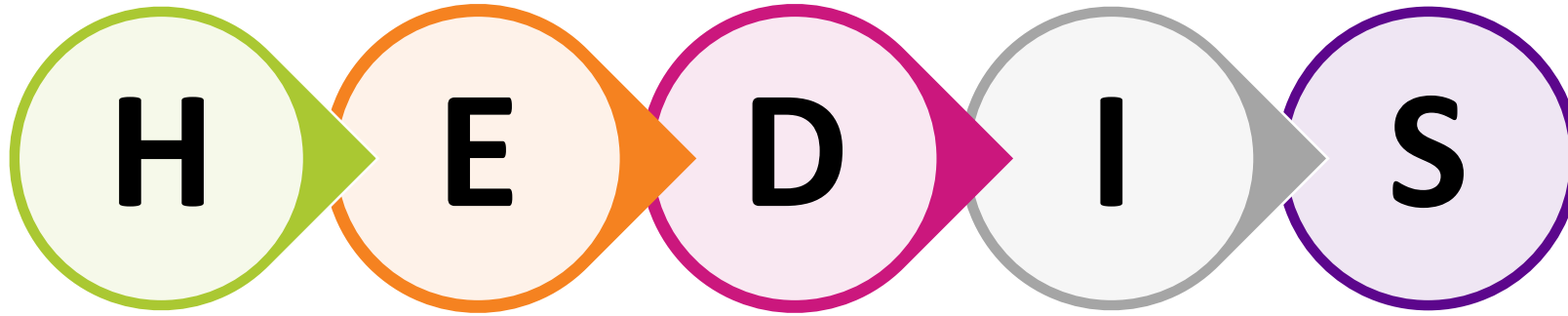




Provider Medical Record HEDIS[®] Hybrid Training

Measure Year 2024

Introduction to HEDIS®



HEDIS stands for:

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

ECDS is a 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).

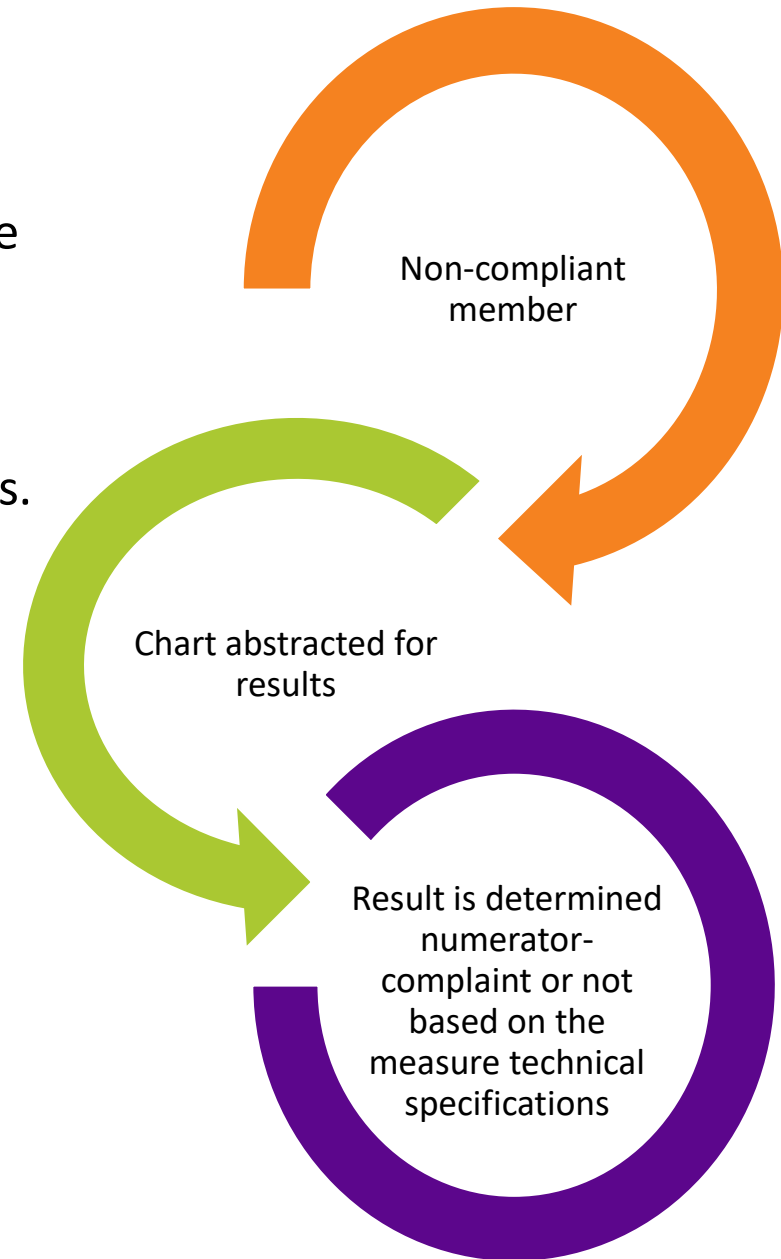
- Reviews a collection of medical records for members who are part of a randomly selected sample population to improve the administrative rate.
- NCQA determines the hybrid measures allowed to be used for HEDIS data collection.
- Hybrid medical record collection methods include fax, EMR access, onsite 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, other health plans 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 of 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 (7) 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, *continued*

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's 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/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 (7) 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 reach out to your health plan **via**:

- Fax: <1-833-900-3871> **OR**
- Email: <ITC_HEDIS@IowaTotalCare.com>
<Attention: HEDIS® Operations>

Providers utilizing 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

Measure Acronym	Measure Description	Medicaid
BPD	Blood Pressure Control for Patients with Diabetes	✓
CBP	Controlling High Blood Pressure	✓
CCS	Cervical Cancer Screening	✓
CIS	Childhood Immunization Status	✓
EED	Eye Exam for Patients with Diabetes	✓
GSD	Glycemic Status Assessment for Patients with Diabetes	✓
IMA	Immunizations for Adolescents	✓
LSC	Lead Screening in Children	✓
PPC	Timeliness of Prenatal and Postpartum Care	✓
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 at 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.

CIS Combo 10

DTaP (4)	HiB (3)	Hep B (3)	IPV (3)	MMR (1)	PCV (4)	VZV (1)	Hep A (1)	Flu (2)	RV (2 or 3)
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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.

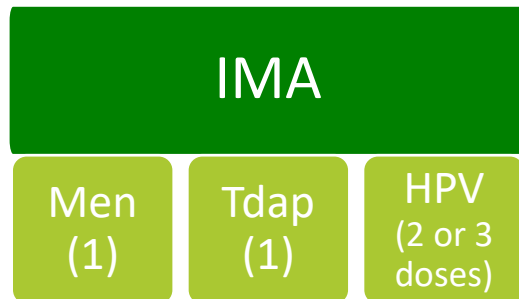
Flowsheets or office visit notes are acceptable.

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

(Timeliness of 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 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 (dietitians, 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 seven (7) days of receipt of request.

Reference slide <11> for your health plan's contact information.

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

Questions?
