How to Maximize Incentives While Improving Outcome Measures
~What is HEDIS?
~A New World – Incentives for All
~How Do We Work Together

What is HEDIS??

*Healthcare Effectiveness Data and Information Set*

• HEDIS was designed to allow consumers to compare health plan performance across plans and against benchmarks
• Health Plans first reported HEDIS in 1991
• HEDIS is one component of the NCQA accreditation process for health plans

• Measures focus largely on processes of care
• Measures reflect care that patients actually receive and coded, not ordered for them
• Measures are directly actionable for quality improvement activities

Typical Measures:
- **Childhood** – Immunizations, Lead Screening, Well Child Visits
- **Adult Preventive** – Breast & Cervical Cancer Screening
- **Respiratory Management** – Pharyngitis Testing, Asthma Management
- **Comprehensive Diabetes Care** – HbA1c, Retinopathy Screening, LDL Screening, Nephropathy Screening
- **Behavioral Health Measures** – Follow Up After Hospitalization
- **Prenatal Care** – Frequency, Pre/Post Visit
- **Access to Care** – Ambulatory Services
How are the measures calculated:

**Administrative** – Claims based data (CPTs, ICD-9s, etc.)

**Hybrid** – Claims data supplemented with Medical Records Data

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Calculating Administrative Compliance

1. ATC Membership
2. Identify Measure for Calculation
3. Apply Continuous Enrollment Criteria
4. Apply Demographics Criteria
5. Apply Claims Data Criteria
6. Calculate Rate (Compliance Level)

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So why is HEDIS important to Absolute Total Care?

**Accreditation:**
- Standards: 54.14 points
- CAHPS (Member Satisfaction Survey): 13.00 points
- HEDIS (Clinical measures): 32.86 points
- Total: 100.00

Additionally, the Medicaid plans are graded by the State on their performance. NCQA will also publish annual rankings based upon HEDIS and accreditation scores.

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NCQA defines date criteria for each measure, for example:

Some measures require the event to occur by December 31st of the measurement year (MY)

- **Anchor Date = December 31st of MY**
  - **Breast Cancer Screening**
  - **Cervical Cancer Screening**

Hemoglobin A1c Test for Diabetics

Other measures require the service to occur **ON OR BEFORE** the member’s birthday

- **Anchor Date = Member Birthday in MY**
  - Childhood Immunizations – 24 months, 0 days
  - Lead Screening in Children – 24 months, 0 days
  - Well Child Visits in the First 15 Months of Life – 15 months, 0 days
Some Measures Use Other Dates:

**Pharyngitis**
- **Age Group:** Children, 2 to 18 years old
- **Time Period:** July 1st of the year prior to June 30th of the measurement year.
- **Continuous Enrollment (CE):** 30 days prior to the Episode Date through 3 days after the Episode Date (inclusive).
- **Episode Date (EPD):** Date of Service for any outpatient or ED visit during the Intake Period with only a diagnosis of pharyngitis

**Criteria / Requirements:**
- Child not on antibiotic for 30 days prior to visit
- Diagnosis of pharyngitis only
- Child receives strep test
- Antibiotic dispensed in 3 days

So what does a practice do to improve?
- Understand the MEASURE REQUIREMENTS
- Understand the TIMELINE applicable
- CODE! CODE! CODE CORRECTLY!
- Know before the patient arrives, what CARE GAPS do they have?
- Understand your incentive program with your health plans if you have one

Give Good Care but **MAKE IT COUNT!**

New World – Overview

- **Goal**
  - Improve HEDIS Scores. This will be done through Partners, such as SCPHCA. (It used to be only for NCQA accreditation)
- **Why**
  - Low scores in SC compared to national rates. SCDHHS wants to improve rates through the MCOs and MHNs.
- **IOM Definition of Quality**
  - The extent to which health services increase the likelihood of desired outcomes and are consistent with current professional knowledge (evidence based)
- **Value Purchasing – A Key Element**
  - Quality Management: to drive continuous improvement in the process of health care purchasing and in the delivery of health care services

New Incentive Program from SCDHHS—(Not Final)

- Preliminary list of 10 performance measures grouped into domains with requirements for improvement
- Prevention and Screening (choose 3) – Lead screening in children, Breast Cancer Screening, Well Child Visits in first 15 months of life, Well Child Visits in year 3, 4, 5 and 6, and Adolescent Well Care Visit (required)
- Chronic Disease and Behavioral Health (choose 2) – Use of Appropriate Medications for People with Asthma, Appropriate Testing for Children with Upper Respiratory Infection, Appropriate Testing for Children with Pharyngitis, Follow up Care for Children Prescribed ADHD Medication (Initiation and Continuation), Follow-up Care after Hospitalization for Mental Illness
Incentives, continued

- **Access and Availability** (choose 3) – Adult access to preventive/ambulatory health services age 20-44, 44-64; Children and adolescent access to primary care practitioners age 7-11, 12-19; Prenatal Care, Postpartum Care

- **Consumer Satisfaction Survey** (choose 1 from Adult and Child or 2 from either) – Rating of Health Care Plan, Rating of Personal Doctor, Rating of Specialist, Getting Needed Care (access issue)

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Proposed Metrics – What are they again?

<table>
<thead>
<tr>
<th>HEDIS Measurement</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>W-15</td>
<td>Well-Child Visits in the First 15 Months of Life</td>
</tr>
<tr>
<td>W-34</td>
<td>Well-Child Visits in the Third to Sixth Years of Life</td>
</tr>
<tr>
<td>W-AS</td>
<td>Well-Child Adolescent Visits in the Twelfth to Twenty-First Years of Life</td>
</tr>
<tr>
<td>ASM</td>
<td>Use of Appropriate Medications for Asthma</td>
</tr>
<tr>
<td>URI</td>
<td>Appropriate Treatment for Children with Upper Respiratory Infections</td>
</tr>
</tbody>
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P4P Proposed Metrics

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<tbody>
<tr>
<td>ADD</td>
<td>Follow up for ADHD Medication age 6-12 years</td>
</tr>
<tr>
<td>BCS</td>
<td>Breast Cancer Screening</td>
</tr>
</tbody>
</table>

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Tools to Improve Results – CentAccount

- Incorporate new patient intake questionnaire – Paper or EMR
- Ensure link between member and PCP, NOT CLINIC
- Align process and procedures with the target HEDIS health care quality improvement measures to maximize opportunity
- Integrate and reinforce the CentAccount member education and reward program
- What else?
QUESTIONS?

How Will You Approach This in Your Office??
Who will Help You?