Frequently Asked Questions (FAQs) about HEDIS

Each year Partnership HealthPlan of California (PHC) is required to collect and publically report data for Healthcare Effectiveness Data and Information Set (HEDIS), a standardized set of performance measures developed by the National Committee for Quality Assurance (NCQA, www.ncqa.org) to evaluate consumer healthcare.

PHC’s HEDIS Team has developed this document to address common questions from providers about the annual HEDIS Project. If you have a question that is not addressed here, please contact us at (866) 828-2302.

1. **Does PHC contract with a vendor to collect medical record evidence for the purpose of HEDIS?**

   Yes, PHC has contracted with Enterprise Consulting Solutions, Inc. (ECS) to collect medical records for the purpose of HEDIS. ECS’ processes and policies have been reviewed and vetted by PHC leadership and our provider network as well as outside security firms ensuring HIPAA compliance. As a Business Associate, ECS has actionable written policies and documentation of security policies.

2. **Does the Health Information Portability and Accountability Act (HIPAA) permit me to release records to a PHC representative or designated vendor for HEDIS data collection?**

   Yes. You are permitted to disclose protected health information (PHI) to PHC or our medical record retrieval vendor (ECS). A signed consent from the member is not required under the HIPAA privacy rule for you to release the requested information to PHC. Data used for treatment, payment, and healthcare operations may be disclosed without member consent. HEDIS falls into “healthcare operations”.


3. **Why is HEDIS important to PHC and how long have we been doing it?**

   HEDIS measures the quality of care provided to our members and provides a platform to assist providers and PHC in identifying targeted opportunities for improvement. PHC has been reporting on a subset of HEDIS measures since 1998, as mandated by the Department of Health Care Services (DHCS).

4. **What’s the difference between HEDIS and the Primary Care Physician Quality Improvement Program (PCP QIP)?**

   The PCP QIP is an optional pay-for-performance program designed in collaboration with PHC providers that offers substantial financial incentives for meeting specific thresholds across a set of measures. QIP measures are often similar to HEDIS with varying specifications. HEDIS is State mandated activity that measures the quality of care being provided to our members using a subset of measures developed by the NCQA.

5. **Is my participation in HEDIS mandatory? Please refer to section 3.6 of your PHC contract.**

   Yes. Contracted providers are contractually required to participate in Partnership’s Quality Improvement and Utilization Management Programs. This includes participation in office reviews, chart and access audits and focused reviews.
6. **We submit claims, why does PHC need medical records?**
   For a select number of measures, NCQA allows us the opportunity to collect medical record data in addition to claims and encounter data in order to accurately capture the quality of care being provided to our members. Not all services rendered are captured through claims and encounter data.

7. **What is my responsibility in the data collection process?**
   HEDIS is a time sensitive project. It is very important that you respond to requests for medical record documentation in a timely manner to ensure we are able to report the quality of care provided to members. ECS will contact you on behalf of PHC to establish a date and your preferred method of retrieval for medical record collection. A patient list will be provided to you in early February, so you know what medical records ECS will be collecting.

8. **Who do I call if I have a question regarding the list of patient records being requested?**
   ECS’s Provider Support Center is available to help with any concerns that arise with the patient list. They can be reached at (877) 445-9293. If your site has any concerns about working with ECS please contact PHC’s HEDIS Team at (866) 828-2302.

9. **What documentation will ECS be sending me?**
   ECS will be sending out a provider packet. This packet will include an authorization letter, PHC’s minimum documentation requirements and the list of patients whose charts are being collected. PHC will be providing our network with a **sample** of what the provider packet will look like. If your site has not received the **sample** packet by 12/31/2015 please contact PHC’s HEDIS Team at (866) 828-2302.

10. **When will PHC’s contracted vendor need the medical records?**
    NCQA requires all medical record reviews are finalized by May 15, 2016. This is a very short time allocated by NCQA to obtain and review over 17,000 medical records. We ask that your site work with ECS to schedule a method of retrieval and select a retrieval date no later than April 4, 2016.

11. **What methods of medical record retrieval are available?**
    For greater than 10 medical record charts, ECS will offer to come on-site and obtain records from your EMR via encrypted flash drive or through read-only remote EMR access granted to ECS by the provider. Paper charts will be scanned onto an encrypted flash drive. Other options for less than 10 records, include faxing, mailing or uploading them to a secure FTP site.

12. **What types of measures is PHC collecting data for?**
    PHC collects data from a variety of sources to satisfy administrative and hybrid measures. **Administrative Measures** use data collected through claims and/or encounter services billed. **Hybrid Measures** use data collected from both claims and/or encounter services billed and are supplemented with data collected from the Medical Record Chart.
13. What types of documentation will ECS be collecting?
When collecting medical records, our vendor (ECS) will be looking for specific information to satisfy the measure(s). Please note: ECS will only collect what is necessary for the measure. No mental health records will be accessed.
Some examples of what they will be collecting are:

- History and Physicals
- Progress notes
- Lab reports
- OB flow charts
- Immunization and Disease Registries
- BMI/ growth charts

14. Will anyone else be contacting me for medical records?
Yes. PHC staff may contact you directly for records.

15. What if the record requested is for a member who no longer has PHC or a member who is deceased?
The records are still needed because the member was with PHC at the time the service was provided and the data required for the measure can go back several years.

16. Will I be reimbursed for copies and materials?
Generally we do not reimburse for medical record copies requested for HEDIS data collection. If you have additional concerns, please refer to your participation agreement or contact a member of the PHC’s HEDIS Team.

17. Where can I find information and helpful resources about PHC’s HEDIS project?
You may visit our webpage at:
http://www.partnershiphp.org/Providers/Quality/Pages/HEDISLandingPage.aspx

18. How can I contact the HEDIS team if I have additional questions?
You may contact us at: Phone: (866) 828-2302 | E-Mail: hedismra@partnershiphp.org

19. What is Regional Reporting?
When PHC expanded in 2013 to cover 8 additional counties, PHC received approval from DHCS to allow HEDIS to be reported at a regional level. Please note below the following 4 regions HEDIS is required to be reported:

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

This means one rate per measure/per region is publicly reported. The challenge with reporting HEDIS at a regional level is the ability to gauge County level performance to better assist with identifying targeted opportunities for improvement. PHC will conduct county-level over-sampling which will allow PHC to collect enough data to address the challenge of reporting at a regional level.
20. **Is PHC’s contracted vendor ECS aware of how to navigate multiple different EMR systems?**
ECS medical record technicians are trained on a variety of electronic health record systems and are tested on HEDIS measure required documentation. Many sites use their EMR a bit differently and the technician may need a few minutes of your time to acquaint them with your system.

21. **Will I need to provide access to my EMR for the ECS Medical Record Technician(s) collecting the records?**
There are multiple types of logins that can be created to access an EMR. You can choose to generate a named user for the technician or an auditor or guest login. Please note that the technician will need to be able to access all portions of the record including growth charts, flow sheets, etc. We ask that logins be set up and tested prior to the onsite visit.

22. **What if I do not receive a call from ECS or PHC?**
If you don’t hear from PHC or ECS with a request for records, feel free to reach out to the HEDIS Team to confirm if any records are needed.

**Note:** If you were contacted to provide medical record documentation for HEDIS in a previous year, it is possible you may be contacted again this year. It is very important that you respond to a request for medical records quickly to ensure we are able to receive and abstract the required data from the records.

Thank you in advance for participating in our HEDIS Project. It is PHC and ECS’ goal to minimize disruptions to your office, maintain a high level of confidentiality as well as provider satisfaction.