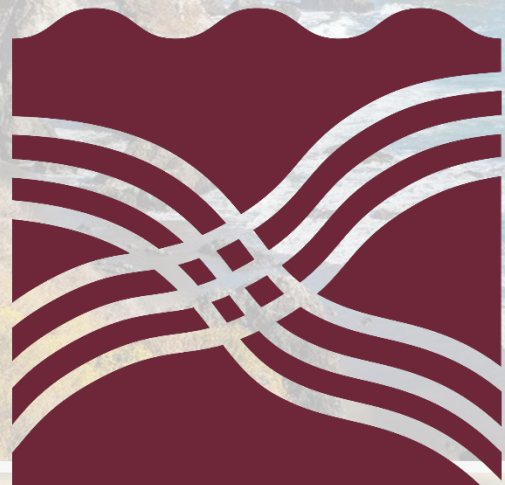




PARTNERSHIP



HEALTHPLAN
of CALIFORNIA
A Public Agency



Introduction to HEDIS

Partnership Healthplan HEDIS Team
July 17, 2024

About Us



Mission:

To help our members, and the communities we serve, be healthy.

Vision:

To be the most highly regarded managed care plan in California.

Agenda

- HEDIS Overview
- Reporting Populations
- Administrative, Hybrid and Electronic Clinical Data System (ECDS) Measures
- Data Collection vs Medical Record Collection
- HEDIS Timeline

HEDIS Office Hours Schedule

Title	Date	Topics	
<u>Introduction to HEDIS</u>	07/17/2024	<ul style="list-style-type: none"> HEDIS Overview Reporting Populations County Level Oversample Administrative, Hybrid and ECDS Measures 	<ul style="list-style-type: none"> Data Collection vs Medical Record Collection HEDIS Timeline
<u>HEDIS Office Hours</u>	07/31/2024	Have a HEDIS question? Join us for an open forum Q&A.	
<u>Provider Medical Record Collection Overview</u>	08/14/2024	<ul style="list-style-type: none"> Why do we collect records? How do we access and collect records? Who collects the records? 	
<u>HEDIS Office Hours</u>	08/28/2024	Have a HEDIS question? Join us for an open forum Q&A.	
<u>MY2023 Annual Summary of Performance</u>	10/30/2024	<ul style="list-style-type: none"> HPA (Health Plan Accreditation) 	<ul style="list-style-type: none"> Managed Care Accountability Set (MCAS)
<u>Hybrid Measure Overview</u>	11/13/2024	<ul style="list-style-type: none"> Overview of Hybrid measures HPA (Advent Advisory) vs MCAS (HSAG) 	<ul style="list-style-type: none"> BPD**, CBP, CCS, CIS, EED**, HBD, IMA, LSC+, PPC, WCC-BMI**

** HPA Only

HEDIS Overview



HEDIS Overview

HEDIS stands for:

- Healthcare Effectiveness Data and Information Set

Why does HEDIS exist?

- HEDIS is a measurement tool maintained by the National Committee for Quality Assurance (NCQA).
- HEDIS is used to evaluate clinical quality in a standardized way.
- The California Department of Healthcare Services (DHCS) and NCQA selects a subset of measures for Medi-Cal plans to report on annually as required for State and NCQA Accreditation reporting.
- DHCS and NCQA uses annual HEDIS performance reporting to evaluate the delivery of quality care and services to its members.

Partnership's Expansion History

1998:

1st year reporting
HEDIS at
Partnership

2009:

Expanded into
Sonoma County

2011:

Expanded into
Mendocino and Marin
Last year Reporting
Partnership Advantage
(Medicare)

2013:

Expanded into the
Northern Region
counties

2022:

1st year reporting
Health Plan
Accreditation
(HPA)

2024:

First year
Expansion
counties



Who's who?

- We work with many agencies throughout the year.
 - National Committee for Quality Assurance (NCQA) – Provides regulations for HEDIS measures and Accreditation at the national level.
 - <https://www.ncqa.org/>
 - Advent Advisory Group – Licensed by NCQA to conduct HEDIS Compliance Audits.
 - <https://www.adventadvisorygroup.com/>
 - Department of Healthcare Services (DHCS) – Selects the Managed Care Accountability Set (MCAS) measures for the annual reporting each year at the state level.
 - <https://www.dhcs.ca.gov/>
 - Health Services Advisory Group (HSAG) – Licensed by NCQA to conduct HEDIS Compliance Audits on behalf of DHCS.

HEDIS Outcomes

Managed Care Accountability Set (MCAS) Mandated Reporting (DHCS)

- Held accountable to DHCS established average performance levels
- Rankings based on the NCQA Quality Compass Benchmarks
- Potential sanctions

NCQA Health Plan Accreditation (HPA)

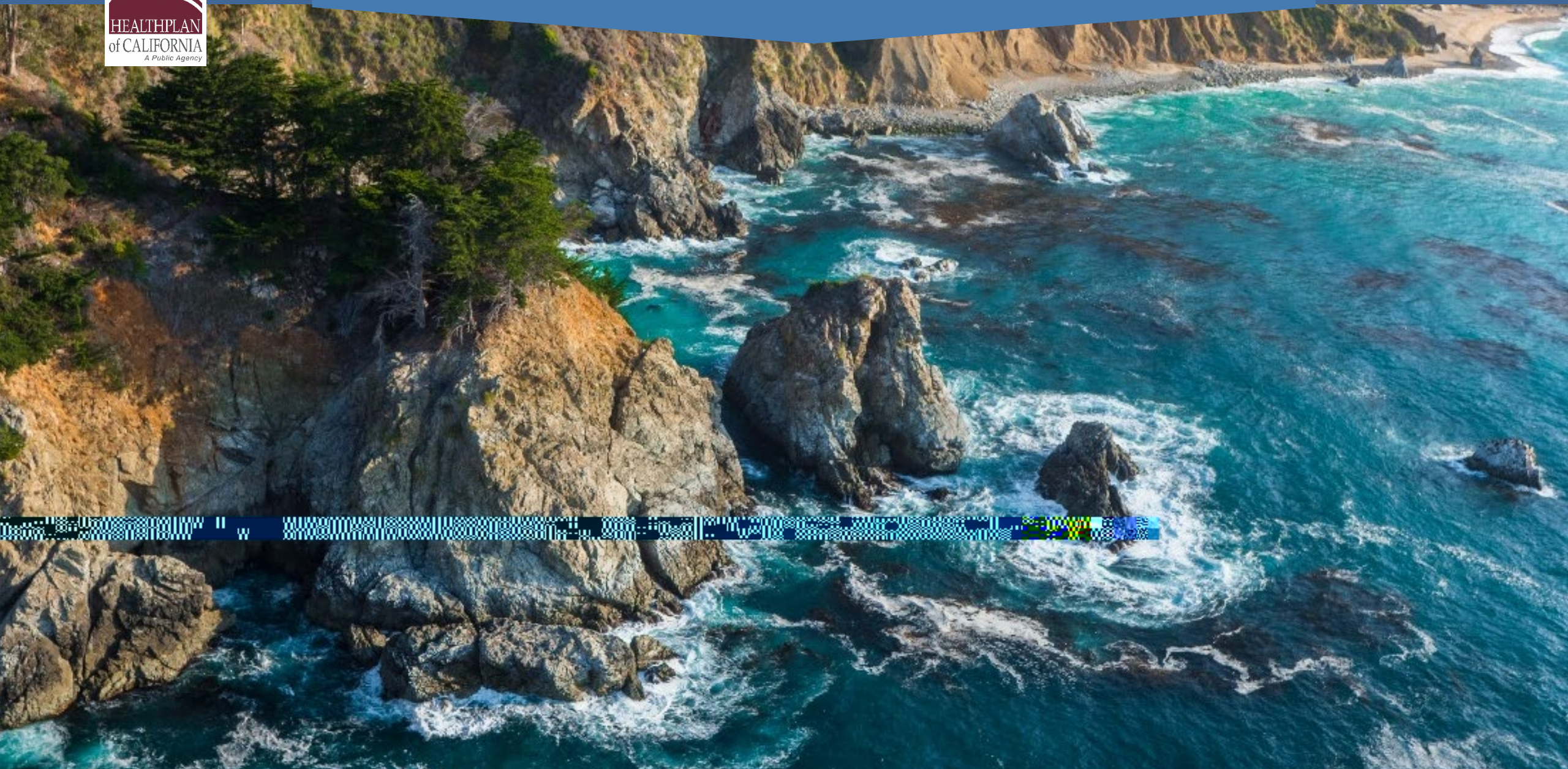
- Mandated reporting
- HEDIS performance affects Star rating, which contributes to Partnership's overall Accreditation status.

Public Reporting: Health Plan
Rankings and Scorecard

Identify & Inform Improvement
Work

Indicate High Quality Healthcare

Reporting Populations



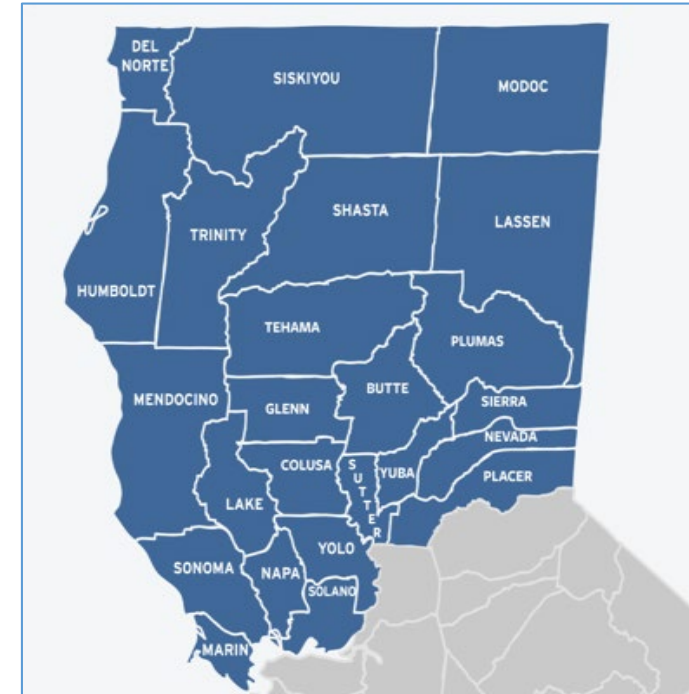
Reporting Populations

DHCS and HPA Reporting Population

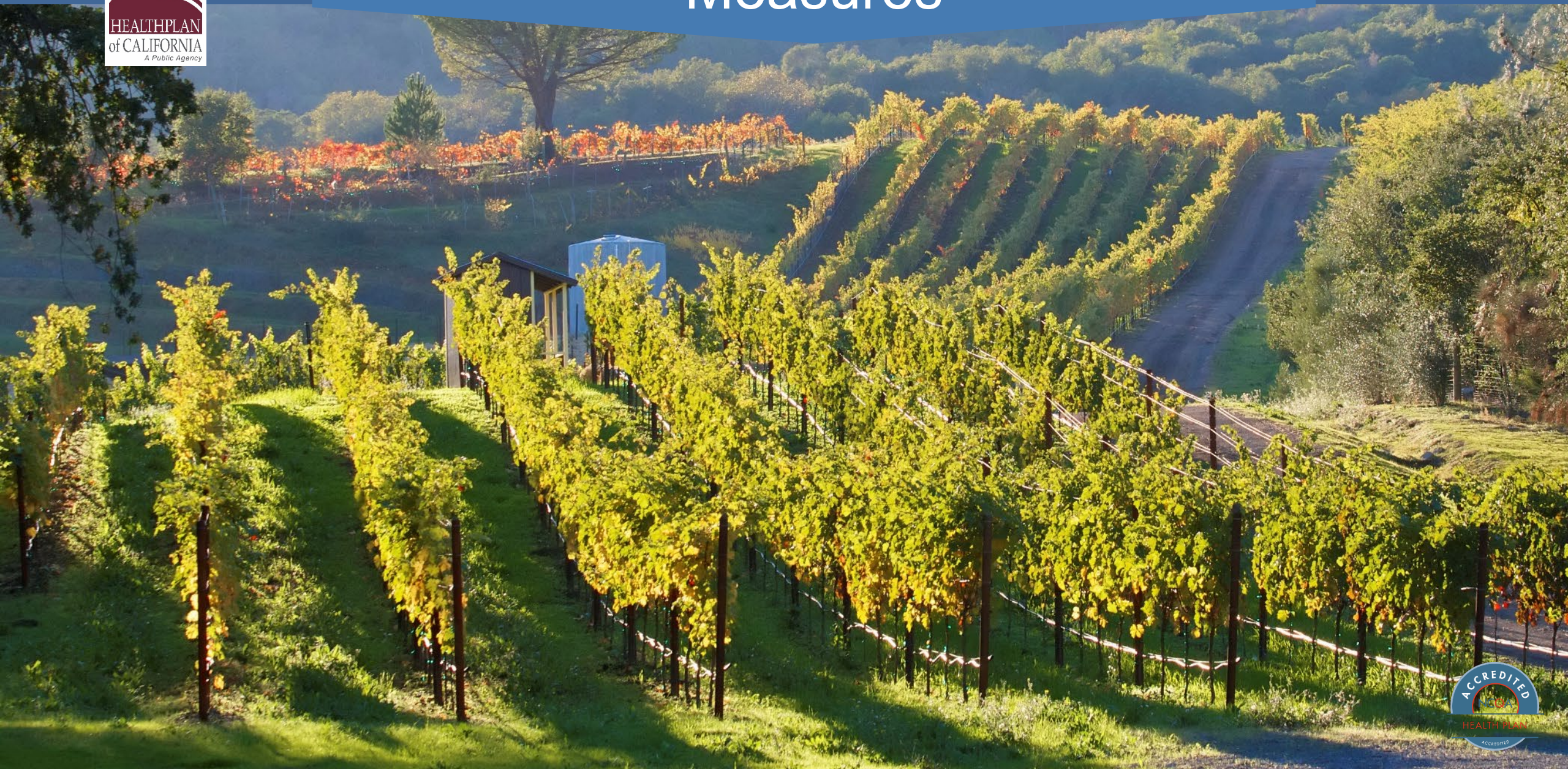
Partnership Counties

Humboldt, Del Norte, Lassen, Modoc, Siskiyou, Trinity, Shasta, Tehama, Sonoma, Marin, Mendocino, Lake Solano, Yolo, Napa, Glenn, Butte, Plumas, Sierra, Nevada, Placer, Yuba, Sutter, Colusa

All 24 counties – Plan-wide reported rates



Administrative, Hybrid and ECDS Measures



Domains of Care

Effectiveness
of Care

Access/
Availability of
Care

Experience
of Care

Utilization and
Risk Adjusted
Utilization

HealthPlan
Descriptive
Information

Measures
Collected Using
Electronic Clinical
Data Systems

Hybrid Measures

BPD**

- Blood Pressure Control (<140/90) for Patients with Diabetes

CBP

- Controlling High Blood Pressure

CCS

- Cervical Cancer Screening

CIS

- Childhood Immunization Status – Combo 10

EED**

- Eye Exams for Patients with Diabetes

IMA

- Immunizations for Adolescents – Combo 2

GSD

- Glycemic Status Assessment for Patients with Diabetes

LSC*

- Lead Screening in Children

PPC Pre & Post

- Timeliness of Prenatal Care
- Postpartum Care

WCC**

- BMI Percentile

**Indicates HPA reporting only
* Indicates MCAS reporting only

Electronic Clinical Data Systems Measures

BCS-E

- Breast Cancer Screening

COL-E

- Colorectal Cancer Screening

DRR-E

- Depression Remission or Response for Adolescents and Adults

DSF-E

- Depression Screening and Follow-Up for Adolescents and Adults

PDS-E

- Postpartum Depression Screening and Follow Up

PND-E

- Prenatal Depression Screening and Follow-Up

PRS-E

- Prenatal Immunization Status - Combination Rate

AIS-E

- Adult Immunization Status



Data Collection vs Medical Record Collection



Eureka | Fairfield | Redding | Santa Rosa



Data Collection Methods

Data for HEDIS is obtained by one or more data collection methods.

- Administrative – Reported rates use the entire eligible population. Transaction data is used, which could be claims, lab, pharmacy or encounter data.
- Hybrid – Reported rates consist of a systematic sample of members from the eligible population no greater than 411. Partnership looks for numerator compliance in medical record data to supplement the administrative data collection.
- ECDS - Electronic clinical data, providers submit electronically in a standardized format.



HEDIS Timeline

HEDIS Timeline

September

- 1st Wave Provider Communication

October

- 2nd Wave Provider Communication
- Remote Access Testing Starts
- ROADMAP received from NCQA
- ECDS Data test files are due

November

- Final Provider Communication
- Updated HEDIS documents available on HEDIS webpage

December

- Provider Retrieval Webinar
- Final ROADMAP submissions due

January

- Final ECDS Data Files Due
- Primary Source Verification starts
- Data integration begins

February – April

- Medical Record Collection

August

- Annual Summary of Performance posted to HEDIS webpage

Questions

