HEDIS@

Measuring Quality of care for Medicare Advantage, Accountable Care Organizations and Insurance Companies

by James L. Holly, MD

In SETMA's February, 2015 provider training, we will continue the discussion we briefly had on January 22nd about the benefits SETMA receives from fulfilling a number of quality metrics which are defined by **The Healthcare Effectiveness Data and Information Set (HEDIS**[@]). A registered trademark of the National Committee for Quality Assurance (NCQA), **HEDIS**[@] was originally titled the "HMO_Employer Data and Information Set" as of version 1.0 of 1991. In 1993, Version 2.0 of **HEDIS**[@] was known as the "Health Plan Employer Data and Information Set". Version 3.0 of **HEDIS**[@] was released in 1997. In July 2007, NCQA announced that the meaning of "**HEDIS**[@]" would be changed to "Healthcare Effectiveness Data and Information Set." (**HEDIS**[@]) is a widely used set of performance measures which are used by over 90 health insurance programs in order to measure the whether the purchasers of healthcare, generally employers, are getting "their money's worth" with the services they are buying.

The 75 **HEDIS**@ measures are divided into six "domains of care":

- 1. Effectiveness of Care
- 2. Access/Availability of Care
- 3. Experience of Care
- 4. Utilization and Relative Resource Use
- 5. Health Plan Descriptive Information

Only the first of these domains is directly dependent upon the healthcare provider's performance. The **HEDIS**[@] measures for quality performance in effectiveness of care are divided into three categories:

- 1. Effectiveness of Acute Care
- 2. Effectiveness of Preventive Care
- 3. Effectiveness of Chronic Care

Historically, healthcare providers' care was audited on the **HEDIS**[®] standard by companies hired by insurance carriers who did chart audits to determine how providers were performing.

Typically, providers received their results 12-24 months after the audited services were delivered. While the purpose of **HEDIS**[@] was to measure quality, **HEDIS**[@] did not affect quality as very few healthcare providers knew what HEDIS measures were and being published one to two years after the care was delivered, providers largely did not care.

As emphasis on quality and safety increased, and as more and more emphasis was placed on both for the purposes of payment, interest in HEDIS[®] and other quality metrics also increased. In 1999, SETMA determined that the only way we were going to sustain improvements in the quality of the care we provide was to measure that quality ourselves. In 2000, we realized that in order to improve we had to know the standard on the basis of which we were being judged. In 2005, we began tracking our performance on HEDIS@ measures internally. In 2009, SETMA began to publicly report by provider name on our performance on **HEDIS**[@] measures.

The following is the rationale for the above. SETMA determined that if we were going to be:

- 1. Given a test
- 2. Where the test questions were going to be given to us before the test
- 3. Where the test is an "open book test"
- 4. Where there is no time limited set on taking the test

Why not look up the answers before the test?

Furthermore, in that the purpose of the test should not only be to evaluate the one being tested but also hopefully to teach the one being tested, it is necessary for the provider to know his/her performance at the point of care. This means that if **HEDIS**[@] is going to affect the quality and safety of the care being given, the provider has to know how he/she is performing on **HEDIS**[@] at the time the care is being given.

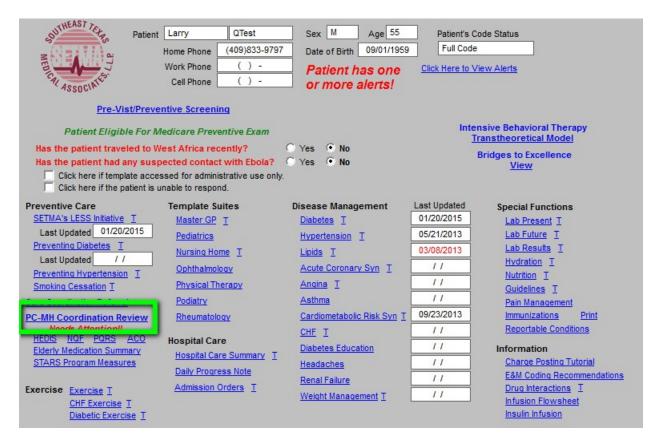
The foundation of the quality measurements for ACO payments and for enhanced payments for Medicare Advantage on the basis of the STARS rating system is **HEDIS**[@].

This presentation summaries SETMA's deployment of all HEDIS[@] measures, of HEDIS[®] measures for ACO payments, and of HEDIS@ measures for the STARS program. For a detailed explanation of each, see the following links to tutorials on SETMA's website:

- All **HEDIS**[@] Measures beginning with page 42 on the following tutorial: Patient-Centered Medical Home SETMA's Medical Home Coordination Review (MHCR) **Tutorial**
- **HEDIS**[@] Measures related to qualifying for ACO shared savings payments. Accountable Care Organization Quality Measures Performance Tool Tutorial
- **HEDIS**[@] Measures related to increasing the STAR rating for the Medicare Advantage Plan. Going from a 3.5 to a 4 STAR can mean millions of dollars of increased payments to providers for the care they provide. STARs - A Tutorial for Utilizing SETMA's Deployment of the STARS MA Program

SETMA's Deployment of HEDIS[@]

The first screen of SETMA's Electronic Medical Record is seen below. In the first column is a hyperlink entitled **PC-MH Coordination Review** (seen outlined in Green below).



When this link is activated, the **Medical Home Coordination Review** appears. As indicated above and as seen in the hyperlink outlined in Green below, the full **HEDIS**[@] measure sets is listed here.

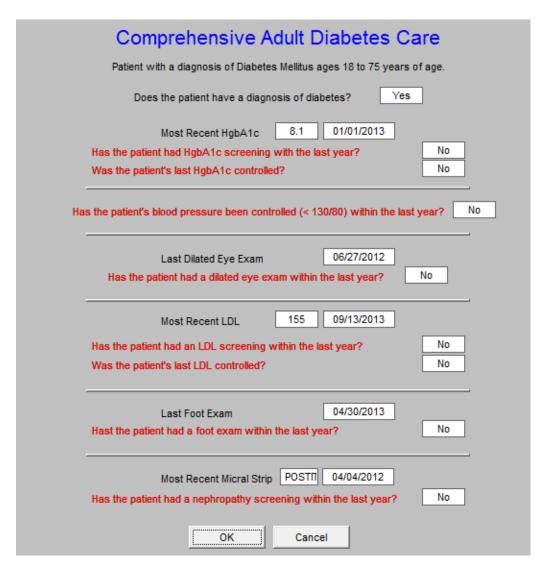
If a provider wishes to evaluate his/her own **HEDIS**[@] performance on all measures, it can be done so by clicking this button. If you wish to review all **HEDIS**[@] measures which are dependent upon the healthcare provider, you can do so by accessing this link.

Me	dical Home Coordina	tion Review	v
Patient	Ancillary Agencies		Medical Power of Attorney
Larry QTest	Home Health		()-
Date of Birth 09/01/19	959 Hospice	70	Primary Caregiver
Sex M Age 55 Yea			()-
- Tigo			Emergency Contact
Home Phone (409)833-			()-
Work Phone () -	Physical Therapy		Relation
Language Spoken Declined to	speci		
Coordination Review Complete	ed Today? Last Reviewed	11	Compliance
C Yes	○ No		Lust non
Patient needs discussed today	at Care Last Reviewed	11	Telephone Contact //
Coordination Team Conference			Correspondence //
C Yes	○ No		Birthday Card / /
Chronic Conditions	Care Coordination Team	Phone	Evacuation Options
# Problem Description	Primary MD	() -	Self Evacuation Contact Information
0 Discharge from ear	CENP	() -	Family Name
0 Both parents smoke	Coordinator	() -	Community Phone () -
0 Pancreatic cancer	Nurse	() -	
0 Yellow mutant oculocutaneo		()-	Advanced Care Planning
0 Purple toe syndrome	Unit Clerk	1.	Code Status Full Code
0 Red cell aplasia	Seconday/Speciality Physicians		Code Ciaido
0 Chronic ischemic heart disea	Evidence-Based Measures Compliance		Advanced Directives Discussed?
0 CHF (congestive heart failur			⊙ Yes ◯ No //
0 Green monkey disease	HEDIS Massures Com	-linear	Advanced Directives Completed?
0 One chronic disease presen	HEDIS Measures Compliance		© Yes C No Date //
0 Two chambered right ventric			
0 HIV (human immunodeficient	PQRS Measures Com	pliance	Detail
1 Controlled type 2 diabetes w	Controlled type 2 diabetes w Lipids Treatment Audit		
	Diabetes Physician Cor	nsortium	Barriers to Care NONE

The following is an example of the technical specifications of a **HEDIS**[@] measure. All can be reviewed by accessing each of the measures. To determine whether you have fulfilled **HEDIS**[@] measures you can simple use the color coding: **red** means the measure applies to this patient and has not been fulfilled; **black** means the measure applies to the patient and has been fulfilled; grey means the measure does not apply to this patient.

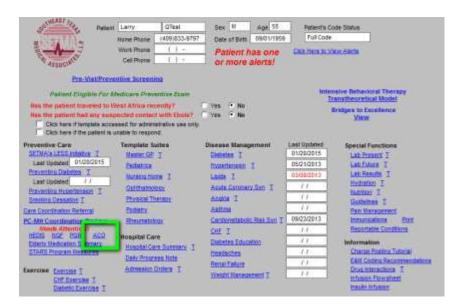
Legend Measures in red are measures which apply to this Measures in black are measures which apply to the Measures in gray are measures which do not app		nis patient that	are in compliance.
Effectiveness of Preventive Care		Effectiveness of Chronic Care	
<u>View</u>	Adult BMIAssessment Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents	<u>View</u> <u>View</u>	Persistence of Beta-Blocker Therapy After a Heart Attack Controlling High Blood Pressure
	Childhood Immunization Status Immunizations for Adolescents Lead Screening in Children	View	Cholesterol Managment for Patients with Cardiovascular Disease Comprehensive Adult Diabetes Care
<u>View</u>	Colorectal Cancer Screening Breast Cancer Screening	View View	Use of Appropriate Medications for People with Asthma Use of Spirometry Testing in the Assessment
	Cervical Cancer Screening Chlamydia Screening in Women Glaucoma Screening in Older Adults	<u>View</u> View	and Diagnosis of COPD Pharmacotherapy Management of COPD Exacerbation Follow-Up After Hospitalization for Mental Illness
	Use of High-Risk Medications in the Elderly Care for Older Adults	View	Antidepressant Medication Management Follow-Up Care for Children Prescribed
Effectiveness of Acute Care			Attention-Deficit/Hyperactivity Disorder Medication Osteoporsis Management in Women
<u>View</u>	Appropriate Treatment for Children with Upper Respiratory Infection Appropriate Testing for Children with Pharyngitis	View	Disease Modifying Anti-Rheumatic Drug Therapy for Rheumatoid Arthritis Annual Monitoring for Patients on Persistent Medications
	Avoidance of Antibiotic Treatment in Adults with Acute Bronchitis		Medication Reconciliation Post-Discharge

The following is an example of the details of a **HEDIS**[@] measure. To review all of the measures details see above.

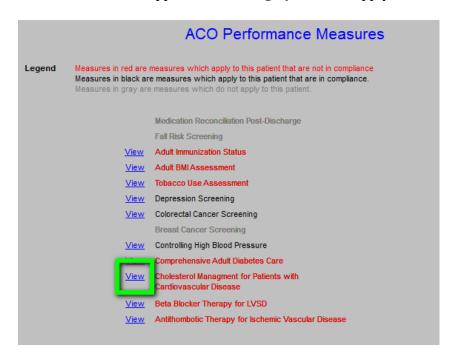


ACO HEDIS[®] Metrics

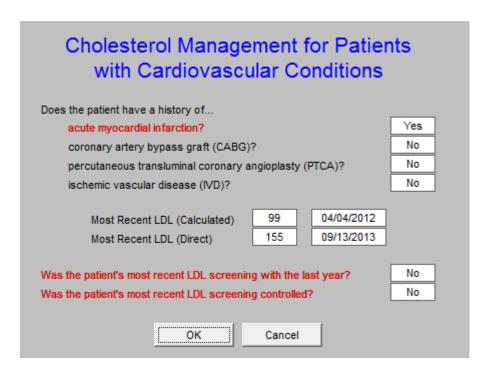
To review your performance on the **HEDIS**[@] quality metrics required in order to benefit from the Accountable Care Organization (ACO) shared-savings plan, you can see the link on the AAA Home Template below, outlined in green.



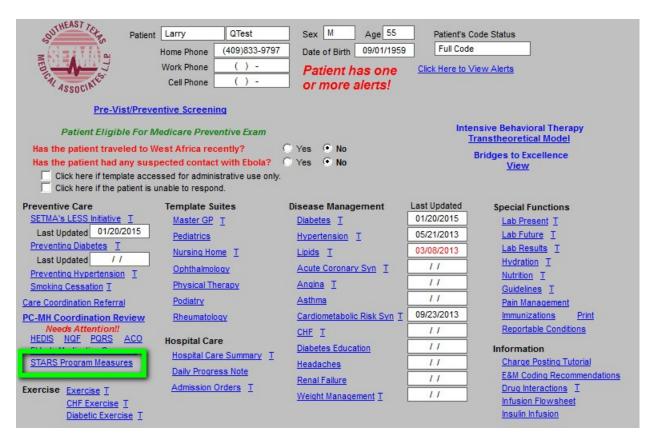
Your performance is shown on the template which pops us. The coding is the same: **red** applies and not done; **black** applies and done; grey does not apply.



The details of one of the metrics are shown below.



The Medicare Advantage STARS Program quality metrics are launched below by clicking on the hyperlink outlined in green

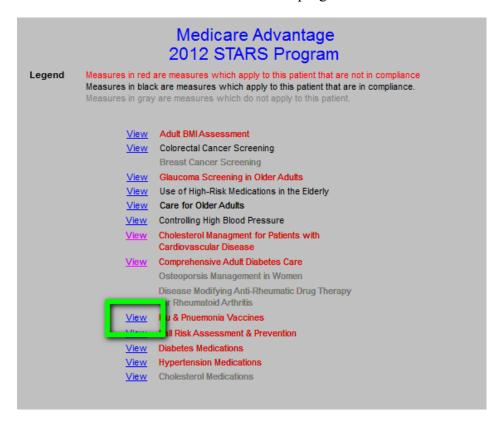


Overview of STARS Content

The **Overall Star Rating** combines scores for the types of services each plan offers: What is being measured? For plans covering health services, the overall score for quality of those services covers many different topics that fall into 5 categories:

- Staying healthy: screenings, tests, and vaccines: Includes whether members got various screening tests, vaccines, and other check-ups that help them stay healthy.
- Managing chronic (long-term) conditions: Includes how often members with different conditions got certain tests and treatments that help them manage their condition.
- Member experience with the health plan: Includes ratings of member satisfaction with the plan.
- Member complaints and changes in the health plan's performance: Includes how often Medicare found problems with the plan and how often members had problems with the plan. Includes how much the plan's performance has improved (if at all) over time.
- **Health plan customer service**: Includes how well the plan handles member appeals. For plans covering drug services, the overall score for quality of those services covers many different topics that fall into 4 categories:
- **Drug plan customer service:** Includes how well the plan handles member appeals.
- Member complaints and changes in the drug plan's performance: Includes how often Medicare found problems with the plan and how often members had problems with the plan. Includes how much the plan's performance has improved (if at all) over time.
- Member experience with plan's drug services: Includes ratings of member satisfaction with
 the plan.
- **Drug safety and accuracy of drug pricing**: Includes how accurate the plan's pricing information is and how often members with certain medical conditions are prescribed drugs in a way that is safer and clinically recommended for their condition. For plans covering health and drug services, the overall score for quality of those services covers all of the topics above.

The following gives the details of the **HEDIS**[@] measures which apply to the MA STARS program.



The following is one details of one of the **HEDIS**[@] STARS metrics.

Adult Immunization Status
Immunization status for adults 50 years of age and older.
Has the patient recieved a flu shot within the last year? No Last Flu Shot 01/13/2014
Has the patient had a pneumonia vaccination? Last PneumoVax 04/19/2013
OK Cancel