

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 summarizes 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).

SOUTHEAST TEXAS MEDICAL ASSOCIATES, L.L.P.

Patient: Sex: Age: Patient's Code Status:

Home Phone: Date of Birth:

Work Phone: **Patient has one or more alerts!** [Click Here to View Alerts](#)

Cell Phone:

[Pre-Visit/Preventive Screening](#)

Patient Eligible For Medicare Preventive Exam

Has the patient traveled to West Africa recently? Yes No

Has the patient had any suspected contact with Ebola? Yes No

Click here if template accessed for administrative use only.
 Click here if the patient is unable to respond.

[Intensive Behavioral Therapy Transtheoretical Model](#)
[Bridges to Excellence View](#)

Preventive Care	Template Suites	Disease Management	Last Updated	Special Functions
SETMA's LESS Initiative I Last Updated: <input type="text" value="01/20/2015"/>	Master GP I Pediatrics Nursing Home I Ophthalmology Physical Therapy Podiatry Rheumatology	Diabetes I Hypertension I Lipids I Acute Coronary Syn I Angina I Asthma Cardiometabolic Risk Syn I CHF I Diabetes Education Headaches Renal Failure Weight Management I	<input type="text" value="01/20/2015"/> <input type="text" value="05/21/2013"/> <input type="text" value="03/08/2013"/> <input type="text" value="//"/> <input type="text" value="//"/> <input type="text" value="//"/> <input type="text" value="09/23/2013"/> <input type="text" value="//"/> <input type="text" value="//"/> <input type="text" value="//"/> <input type="text" value="//"/>	Lab Present I Lab Future I Lab Results I Hydration I Nutrition I Guidelines I Pain Management Immunizations Print Reportable Conditions
Preventing Diabetes I Last Updated: <input type="text" value="//"/> Preventing Hypertension I Smoking Cessation I	Hospital Care Hospital Care Summary I Daily Progress Note Admission Orders I			Information Charge Posting Tutorial E&M Coding Recommendations Drug Interactions I Infusion Flowsheet Insulin Infusion
Exercise Exercise I CHF Exercise I Diabetic Exercise I				

PC-MH Coordination Review *Needs Attention!*

[HEDIS NQF PQRS ACO](#)
[Elderly Medication Summary](#)
[STARS Program Measures](#)

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.

Medical Home Coordination Review

Patient		Ancillary Agencies		Medical Power of Attorney	
Name	Larry QTest	Home Health		Medical Power of Attorney	() -
Date of Birth	09/01/1959	Hospice		Primary Caregiver	() -
Sex	M Age 55 Years	Assisted Living		Emergency Contact	() -
Home Phone	(409)833-9797	Nursing Home		Relation	
Work Phone	() -	Physical Therapy			
Language Spoken	Declined to speci				

Coordination Review Completed Today? <input type="radio"/> Yes <input type="radio"/> No	Last Reviewed	//	Compliance	
Patient needs discussed today at Care Coordination Team Conference? <input type="radio"/> Yes <input type="radio"/> No	Last Reviewed	//	Last H&P	11/10/2011
			Telephone Contact	//
			Correspondence	//
			Birthday Card	//

Chronic Conditions	Care Coordination Team	Phone	Evacuation Options
	Primary MD	() -	
0 Discharge from ear	CFNP	() -	<input type="checkbox"/> Family Name
0 Both parents smoke	Coordinator	() -	<input type="checkbox"/> Community Phone () -
0 Pancreatic cancer	Nurse	() -	
0 Yellow mutant oculocutaneo	Unit Clerk	() -	
0 Purple toe syndrome	Secondary/Specialty Physicians		
0 Red cell aplasia	Evidence-Based Measures Compliance		
0 Chronic ischemic heart dise	HEDIS Measures Compliance		
0 CHF (congestive heart failur	NOF Measures Compliance		
0 Green monkey disease	PQRS Measures Compliance		
0 One chronic disease presen	Lipids Treatment Audit		
0 Two chambered right ventric	Diabetes Physician Consortium		
0 HIV (human immunodeficien			
0 Controlled type 2 diabetes w			
	Advanced Care Planning		
	Code Status Full Code		
	Advanced Directives Discussed?		
	<input type="radio"/> Yes <input type="radio"/> No //		
	Advanced Directives Completed?		
	<input type="radio"/> Yes <input type="radio"/> No Date //		
	Detail		
	Barriers to Care <input type="checkbox"/> 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.

2014 HEDIS Technical Specifications for Physician Measurement

Legend Measures in red are measures which apply to this patient that are not in compliance
Measures in black are measures which apply to this patient that are in compliance.
Measures in gray are measures which do not apply to this patient.

<p>Effectiveness of Preventive Care</p> <p>View Adult BMI Assessment Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents Childhood Immunization Status Immunizations for Adolescents Lead Screening in Children</p> <p>View Colorectal Cancer Screening Breast Cancer Screening Cervical Cancer Screening Chlamydia Screening in Women Glaucoma Screening in Older Adults Use of High-Risk Medications in the Elderly Care for Older Adults</p> <p>Effectiveness of Acute Care</p> <p>View Appropriate Treatment for Children with Upper Respiratory Infection View Appropriate Testing for Children with Pharyngitis Avoidance of Antibiotic Treatment in Adults with Acute Bronchitis</p>	<p>Effectiveness of Chronic Care</p> <p>View Persistence of Beta-Blocker Therapy After a Heart Attack View Controlling High Blood Pressure View Cholesterol Management for Patients with Cardiovascular Disease View Comprehensive Adult Diabetes Care Use of Appropriate Medications for People with Asthma View Use of Spirometry Testing in the Assessment and Diagnosis of COPD View Pharmacotherapy Management of COPD Exacerbation View Follow-Up After Hospitalization for Mental Illness View Antidepressant Medication Management Follow-Up Care for Children Prescribed Attention-Deficit/Hyperactivity Disorder Medication Osteoporosis Management in Women Disease Modifying Anti-Rheumatic Drug Therapy for Rheumatoid Arthritis View Annual Monitoring for Patients on Persistent Medications Medication Reconciliation Post-Discharge</p>
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The following is an example of the details of a **HEDIS[®]** measure. To review all of the measures details see above.

Comprehensive Adult Diabetes Care

Patient with a diagnosis of Diabetes Mellitus ages 18 to 75 years of age.

Does the patient have a diagnosis of diabetes?

Most Recent HgbA1c

Has the patient had HgbA1c screening with the last year?

Was the patient's last HgbA1c controlled?

Has the patient's blood pressure been controlled (< 130/80) within the last year?

Last Dilated Eye Exam

Has the patient had a dilated eye exam within the last year?

Most Recent LDL

Has the patient had an LDL screening within the last year?

Was the patient's last LDL controlled?

Last Foot Exam

Has the patient had a foot exam within the last year?

Most Recent Micral Strip

Has the patient had a nephropathy screening within the last year?

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.

Patient: Larry Q. Neal | Sex: M | Age: 55 | Patient's Code Status:
 Home Phone: (409)833-8797 | Date of Birth: 09/01/1959 | Full Code:
 Work Phone: | | - | **Patient has one or more alerts!** | [Click Here to View Alerts](#)
 Cell Phone: | | - |

[Pre-Visit/Preventive Screenings](#)
Patient Eligible For Medicare Preventive Exam
 Has the patient traveled to West Africa recently? Yes No
 Has the patient had any suspected contact with Ebola? Yes No
 Click here if template accessed for administrative use only
 Click here if the patient is unable to respond.

Preventive Care	Template Suites	Disease Management	Last Updated	Special Functions
ACMA's LISC Initiative ACO	Welder GP	Diabetes	01/28/2015	Lab Present
Preventive Diabetes	Zacharia	Hypertension	05/21/2013	Lab Future
Preventive Hypertension	Mataja Suite	Labs	03/08/2013	Lab Results
Sexual Coherence	Orthobiology	Acute Calcium/Ser		Hydration
Care Coordination Referral	Physical Therapy	Acidosis		Bunten
PC-MH Coordination	Podiatry	Asthma		Gastritis
Wound Attention	Rheumatology	Cardiometabolic Risk Ben	09/23/2013	Pain Management
HSA/ HSC/ USR	Hospital Care	CHF		Immunizations Prof
Patient Medication History	Hospital Care Summary	Diabetes Education		Reportable Conditions
ITARS Program Overview	Daily Process Note	Headaches		Information
Exercise: Exercise	Admission Orders	Renal Failure		Chronic Patient Tutorial
CHF Exercise		Weight Management		eAlert Criteria Recommendations
Diabetes Exercise				Drug Interactions
				Infusion Flowchart
				Insulin Infusions

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

ACO Performance Measures

Legend
 Measures in red are measures which apply to this patient that are not in compliance
 Measures in black are measures which apply to this patient that are in compliance.
 Measures in gray are measures which do not apply to this patient.

- Medication Reconciliation Post-Discharge
- Fall Risk Screening
- [View](#) **Adult Immunization Status**
- [View](#) **Adult BMI Assessment**
- [View](#) **Tobacco Use Assessment**
- [View](#) Depression Screening
- [View](#) Colorectal Cancer Screening
- Breast Cancer Screening
- [View](#) Controlling High Blood Pressure
- [View](#) **Comprehensive Adult Diabetes Care**
- [View](#) **Cholesterol Management for Patients with Cardiovascular Disease**
- [View](#) Beta Blocker Therapy for LVSD
- [View](#) Antithrombotic Therapy for Ischemic Vascular Disease

The details of one of the metrics are shown below.

Cholesterol Management for Patients with Cardiovascular Conditions

Does the patient have a history of...

acute myocardial infarction?

Yes

coronary artery bypass graft (CABG)?

No

percutaneous transluminal coronary angioplasty (PTCA)?

No

ischemic vascular disease (IVD)?

No

Most Recent LDL (Calculated)

99

04/04/2012

Most Recent LDL (Direct)

155

09/13/2013

Was the patient's most recent LDL screening with the last year?

No


Was the patient's most recent LDL screening controlled?

No

OK

Cancel

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



Patient: Sex: Age: Patient's Code Status:

Home Phone: Date of Birth:

Work Phone: **Patient has one or more alerts!** [Click Here to View Alerts](#)

Cell Phone:

[Pre-Vist/Preventive Screening](#)

Patient Eligible For Medicare Preventive Exam

Has the patient traveled to West Africa recently? Yes No

Has the patient had any suspected contact with Ebola? Yes No

Click here if template accessed for administrative use only.

Click here if the patient is unable to respond.

Preventive Care

[SETMA's LESS Initiative](#)

Last Updated:

[Preventing Diabetes](#)

Last Updated:

[Preventing Hypertension](#)

[Smoking Cessation](#)

[Care Coordination Referral](#)

[PC-MH Coordination Review](#)

Needs Attention!!

[HEDIS](#) [NQF](#) [PQRS](#) [ACO](#)

[STARS Program Measures](#)

Exercise [Exercise](#)

[CHF Exercise](#)

[Diabetic Exercise](#)

Template Suites

[Master GP](#)

[Pediatrics](#)

[Nursing Home](#)

[Ophthalmology](#)

[Physical Therapy](#)

[Podiatry](#)

[Rheumatology](#)

Hospital Care

[Hospital Care Summary](#)

[Daily Progress Note](#)

[Admission Orders](#)

Disease Management

[Diabetes](#)

[Hypertension](#)

[Lipids](#)

[Acute Coronary Svn](#)

[Angina](#)

[Asthma](#)

[Cardiometabolic Risk Svn](#)

[CHF](#)

[Diabetes Education](#)

[Headaches](#)

[Renal Failure](#)

[Weight Management](#)

Last Updated

Special Functions

[Lab Present](#)

[Lab Future](#)

[Lab Results](#)

[Hydration](#)

[Nutrition](#)

[Guidelines](#)

[Pain Management](#)

[Immunizations](#)

[Reportable Conditions](#)

Information

[Charge Posting Tutorial](#)

[E&M Coding Recommendations](#)

[Drug Interactions](#)

[Infusion Flowsheet](#)

[Insulin Infusion](#)

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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.

Medicare Advantage 2012 STARS Program

Legend Measures in red are measures which apply to this patient that are not in compliance
Measures in black are measures which apply to this patient that are in compliance.
Measures in gray are measures which do not apply to this patient.

- [View](#) **Adult BMI Assessment**
- [View](#) Colorectal Cancer Screening
- Breast Cancer Screening
- [View](#) **Glaucoma Screening in Older Adults**
- [View](#) Use of High-Risk Medications in the Elderly
- [View](#) **Care for Older Adults**
- [View](#) Controlling High Blood Pressure
- [View](#) **Cholesterol Management for Patients with Cardiovascular Disease**
- [View](#) **Comprehensive Adult Diabetes Care**
- Osteoporosis Management in Women
- Disease Modifying Anti-Rheumatic Drug Therapy
- Rheumatoid Arthritis
- [View](#) **Flu & Pneumonia Vaccines**
- [View](#) **Fall Risk Assessment & Prevention**
- [View](#) **Diabetes Medications**
- [View](#) **Hypertension Medications**
- [View](#) **Cholesterol Medications**

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 received a flu shot within the last year?

 Last Flu Shot

Has the patient had a pneumonia vaccination?

 Last PneumoVax