# Managed Care Operations Memorandum General Operations MCOPS Memo # 01/2020-001

Date: January 17, 2020

**Subject:** Requirements for 2020 HEDIS<sup>®</sup>, CAHPS<sup>®</sup> and Pennsylvania Performance

Measure (PAPM) Submissions

To: Physical Health HealthChoices Managed Care Organizations (PH-MCO) and

Providers - Statewide

From: Laurie Rock, Director, Bureau of Managed Care Operations, Office of Medical

Assistance Programs

## Purpose:

Notification to PH-MCOs of requirements to report 2020 Healthcare Effectiveness Data Information Set (HEDIS®), Consumer Assessment of Healthcare Providers and Systems (CAHPS®), and PAPM results to the Department of Human Services (the Department.)

#### Background:

Each year the Department updates its reporting requirements to be consistent with National Committee for Quality Assurance (NCQA™) requirements for the reporting year found in the HEDIS® Technical Specifications, Volume 2. NOTE: This is a repeat of the HEDIS® 2020 Reporting Requirements distributed January 3, 2020, by Pennsylvania's External Quality Review Organization (EQRO).

#### **Exception:**

None. All Medical Assistance PH-MCOs must report HEDIS® 2020 and PAPMs.

#### Discussion:

The HEDIS® 2020 reporting requirements are outlined below.

PH-MCOs must report the complete set of Medicaid measures, excluding measures requiring a behavioral health benefit, as specified in the HEDIS® 2020 Technical Specifications, Volume 2. No measures may be rotated from the prior year.

For HEDIS® 2020, New Medicaid measures:

• POD Pharmacotherapy for Opioid Use Disorder

For HEDIS® 2020 New Medicaid ECDS Measures:

- BCS-E Breast Cancer Screening
- ADD-E Follow-Up Care for Children Prescribed ADHD Medication
- PND Prenatal Depression Screening and Follow-Up
- PDS Postpartum Depression Screening and Follow-Up
- AIS Adult Immunization Status
- PRS Prenatal Immunization Status

The following HEDIS<sup>®</sup> 2019 *first-year Medicaid measure* will be publicly reported for HEDIS<sup>®</sup> 2020.

COU Risk of Continued Opioid use

The following HEDIS® Measures will be retired for 2020:

- MPM Annual Monitoring for Patients on Persistent Medications
- APC Use of Multiple Concurrent Antipsychotics in Children and Adolescents
- HAI Standardized HealthCare-Associated Infection Ratio

The following HEDIS® 2020 Medicaid measures will require a full sample size and no reduction is allowed:

- Controlling High Blood Pressure (CBP)
- Hemoglobin A1c Poor Control > 9 (HbA1c Poor Control)
- Prenatal Care in the First Trimester (PPC)
- Well Child Visits in the First 15 Months of Life (W15)

The Pennsylvania External Quality Review Organization (EQRO) will provide file layouts and submission instructions for HEDIS<sup>®</sup> 2020 Member Level Data under separate cover on Monday, January 6, 2020. PH-MCOs must submit HEDIS<sup>®</sup> 2020 member level data to the Pennsylvania EQRO by **July 1, 2020**.

**NOTE:** For 2021 the HEDIS® measure "MMA" Medication Management for People with Asthma – 75% Medication compliance will be removed and will change to "AMR" Asthma Medication Ratio for 2021 Exhibit B1.

**NOTE:** Screening for Depression and Follow-up for Adolescents and Adults (DSF) will not be mandatory in 2020 but will need to be piloted for care rendered in 2021 with one high volume Adult practice and one high volume Pediatric practice and be reported in 2022.

## The Department's PAPMs reporting requirements are outlined below.

The Department is continuing the following PAPMs in 2020:

- Prenatal Screening for Smoking and Treatment Discussion during a Prenatal Visit (PSS) - MRR
- Annual Dental Visits for Enrollees with Developmental Disabilities (ADD)
- Dental Sealants for 6 to 9 year olds at elevated carries risk (SEAL-CH)
- Reducing Potentially Preventable Readmissions (RPR)
- For the following three measures, PH-MCOs will be required to submit only the eligible population:
  - o Cesarean Rate for Nulliparous Singleton Vertex (NSV).
  - o Percent of Live Births Weighing less than 2,500 grams (LBW)
  - Elective Delivery (ED)
- Follow-up care for Children Prescribed Attention Deficit Hyperactivity Disorder (ADHD) Medication
- Diabetes Short-Term Complications Admission Rate (DAR)
- Chronic Obstruction Pulmonary Disease (COPD) or Asthma in Older Adults Admission Rate
- Heart Failure Admission Rate (HF)
- Asthma in Younger Adults Admission Rate (AAR)
- Developmental Screening in the First Three Years of Life (DEV-CH) Note: this measure will be reported administratively
- Adherence to Antipsychotics for Individuals with Schizophrenia (SAA-AD)(Adult Core Set)
- Contraceptive Care for All Women Ages 15-44 (CCW)
- Contraceptive Care for Postpartum Women Ages 15-44 (CCP)
- Adult annual Dental Visit >21 (A-ADV)
- Concurrent Use of Opioids and Benzodiazepines (COB)

New PAPM for 2020:

• Use of Pharmacotherapy for Opioid Use Disorder (OUD-AD) (Adult Core Set)

Pennsylvania Performance Measure Technical Specifications are not to be shared externally without prior written consent from the Department.

The requirements for CAHPS® reporting are outlined below.

PH-MCOs must submit the following CAHPS® files for both Adult Medicaid and Child Medicaid without chronic conditions according to  $NCQA^{TM}$  guidelines specified in the 2020  $NCQA^{TM}$  HEDIS® Volume 3.

- Record Level Data in provided csv template. This should include individual responses for a record ID for each question. Reponses should be filtered to include only disposition 0.
  - When submitting member level data to DocuShare, please follow the following naming convention:

MCOName\_Adult\_CAHPS\_YYYY or MCOName\_Child\_CAHPS\_YYYY Example (name is not case sensitive):

AetnaBetterHealth\_Adult\_CAHPS\_2020 NO spaces. If the file does not have the correct naming convention it will be returned.

- Composite Data from NCQA™
- CAHPS® summary or banner files as submitted in prior years

The Adult CAHPS® and Child CAHPS® without chronic conditions must be completed including the **additional three adult dental and four child dental** questions listed below. Please be sure to code responses in the record level data according to the coding provided to the left of the checkbox.

For example, in the below list of possible responses, "Yes" is coded as a 1 and "No" is coded as a 2. This process for these PA specific dental questions should follow the same guidelines as provided in the 2020 NCQA<sup>TM</sup> HEDIS<sup>®</sup> Volume 3 instructions.

	3
<sup>2</sup> □ No	
Addit	ional Adult CAHPS® dental questions:
C1.	In the last 6 months, did you get care from a dentist's office or dental clinic?
¹□ Ye	S .
<sup>2</sup> □ No	ightarrow  oIf No, the Adult dental questions are complete. Code all other dental
quest	tions as "9" No data
C2.	In the last 6 months, how many times did you go to a dentist's office or dental clinic?
00 □ N	one $ ightarrow$ If None, the Adult dental questions are complete. Code all other dental
quest	tions as "9" No data
<sup>01</sup>	1
<sup>02</sup>	2
<sup>03</sup>	3
04	4

1□ Voc

<sup>05</sup> □ 1	5 to 9 0 or mo	
care your	ders in	ant to know your rating of all your dental care from all dentists and other dental the last 6 months. Using any number from 0 to 10, where 0 is the worst dental and 10 is the best dental care possible, what number would you use to rate care?
00	0 1 2	Worst dental care possible
03	3 4 5	
06	6 7 8	
<sup>09</sup> □	9 10	Best dental care possible
D1. ¹□ Y€ ²□ N€	es	last 6 months, did your child get care from a dentist's office or dental clinic?
D2.	?	last 6 months, how many times did your child go to a dentist's office or dental
		If none, go to question D4
<sup>01</sup> □	1 2	
03	3	
04□	4	
05 <b>□</b>	5 to 9	
<sup>06</sup> □	10 or	
D3.		ant to know your rating of all your child's dental care from all dentists and other
	•	ders in the last 6 months. Using any number from 0 to 10, where 0 is the worst
		possible and 10 is the best dental care possible, what number would you use to
00 <b>□</b>	your chi O	ild's dental care? Worst dental care possible
01	1	worst derital care possible
02 <b>□</b>	2	
03	3	

<sup>04</sup>	4					
<sup>05</sup> □ 5	5					
<sup>06</sup> □ (	6					
<sup>07</sup> □	7					
<sup>08</sup> □ 8	8					
<sup>09</sup>	9					
<sup>10</sup> □ ′	10 Best dental care possible					
D4. \	Which of the following would help your child see the dentist more often? (Choose all					
that ap	pply)					
a□ l	Help with transportation to the dentist					
°□ F	Reminders to visit the dentist					
	More dentists to choose from					
	More convenient office hours					
	Dentists that speak my language					
<sup>f</sup> □ l	Help in finding a dentist					
9 <b>0</b> E	Better communication about benefits from my child's health plan					
<sup>h</sup> □ E	Education about good dental care					
' П П	None of the above. My child sees the dentist as often as I like <b>If "None of the</b>					
above	" is selected, any other responses that may have been selected to this					
questi	on are invalidated. Meaning: If the respondent selects "None of the above"					
to this	s question, he or she cannot select any other response options to this					
questi	on. If the survey format allows them to select other options in addition to					
"None	of the above" to this question, the other selections should be discounted					
	nly this "None of the above" response should be recorded. Any other options					
selecte	ed should be removed from final counts for the numerator and/or					
denom	ninator					
	Other (write in) <b>Do not include count of write in response in any category</b>					
other t	than "other"					

The Pennsylvania EQRO will provide PAPMs specifications, file layouts and submission instructions under separate cover.

Reminder: A State-wide Obstetrical Needs Assessment Form (ONAF) was developed for all PH-MCOs to use, effective February 2012 and revised as of December 23, 2019. The revisions were made to make the ONAF an acceptable submission for a positive numerator hit for the new Electronic Clinical Data Systems (ECDS).

The Department's submission requirements are outlined below.

• PH-MCOs must submit an **electronic copy** of the HEDIS<sup>®</sup> 2020 ROADMAP by **January** 31, 2020, via the Department's DocuShare Internet site.

- PH-MCOs must submit <u>both</u> hard and electronic copies in Excel of the HEDIS<sup>®</sup> 2020 IDSS, including the Adult CAHPS<sup>®</sup> and Child CAHPS<sup>®</sup> without chronic conditions, by June 15, 2020. The hard copy of the Adult CAHPS<sup>®</sup> and Child CAHPS<sup>®</sup> without chronic conditions must include the banner table data from your CAHPS<sup>®</sup> vendor, as well as NCQA<sup>™</sup> Data Submission for both Adult and Child (Record Level Data)
- The Department is requiring the PH-MCOs to submit the IDSS extract, electronic copy in Excel via the Department's DocuShare Internet site. However, PH-MCOs have the option of either allowing their vendors to submit electronic copies (CD) via their CAHPS® vendors to the Department, as has been the procedure in the past or submitting themselves through DocuShare in Excel.

Please send your **hardcopy versions** (should be one sided) of the IDSS and **hardcopy** and/or electronic copy (CD) CAHPS® results to:

Ms. Pauline Saunders
Department of Human Services
Bureau of Managed Care Operations
Division of Quality and Special Needs Coordination
303 Walnut Street/Commonwealth Tower, 6<sup>th</sup> FL
PO Box 2675
Harrisburg, PA 17105
pasaunders@pa.gov

- The Pennsylvania EQRO will conduct the HEDIS® compliance audit in 2020. PH-MCOs must comply with all audit standards and requirements determined by NCQA™.
- The Department participates in the American Public Human Services Association (APHSA), Medicaid HEDIS® Database project and the National CAHPS® Benchmarking Database (NCBD), project each year. Further information about NCBD submission of your CAHPS® data will be given to you at a later date. The Department contact for the NCBD project is Susie Brubaker, (717) 772-6300.
- PH-MCOs must submit HEDIS® 2020 member level data to the Pennsylvania EQRO by July 1, 2020.

### **Next Steps:**

The Department will provide notification of changes as they occur. Please direct any questions to Pauline Saunders, Office of Medical Assistance Programs, at (717) 772-6300.

0	bs	$\sim$ I	Δŧ	Δ.
v	$\mathbf{v}$	vi	$-\iota$	↽.

This MCOPS memo remains in effect until it is superseded.

## Attachment:

N/A