

**The Ohio Department of Medicaid's
Specifications for the Submission of MCP
Self-Reported, Audited HEDIS Results**

Provider Agreement Effective July 1, 2020 through June 30, 2021
Measurement Year: CY 2020

Contact: Zamda Lumbi
Issued: December 2020

Introduction

This specifications document describes the State Fiscal Year (SFY) 2021 requirements for collecting and submitting self-reported Healthcare Effectiveness Data and Information Set (HEDIS[®])¹ data to ODM.

The following key components are addressed:

- ◆ The required performance measures
- ◆ The audit requirements
- ◆ The data submission protocol
- ◆ The data certification requirements
- ◆ The data submission timeline

The measurement year for the SFY 2021 contract period is calendar year (CY) 2020.

ODM requires each managed care plan (MCP) to submit the following to NCQA and ODM:

- 1) Standard NCQA HEDIS submission. For MCPs also participating in MyCare Ohio this submission includes both the Medicaid-only and MyCare Medicare-Medicaid Plan (MMP) members.
- 2) A “Special Project” NCQA HEDIS submission is also required for MCPs participating in MyCare Ohio. This submission is limited to Medicaid-only members (i.e., the MyCare MMP members are excluded).

Table 1 displays the required HEDIS measures that **must** be reported for both submissions.

Table 1 – Required HEDIS Measures for SFY 2021 (CY 2020)

- Adults’ Access to Preventive/Ambulatory Health Services – Total
- Ambulatory Care-Emergency Department (ED) Visits
- Annual Dental Visits, Total Rate
- Antidepressant Medication Management – Effective Acute Phase Treatment, Effective Continuation Phase Treatment
- Appropriate Testing for Children With Pharyngitis
- Breast Cancer Screening
- Cardiac Rehabilitation – Initiation, Engagement 1, Engagement 2, Achievement - 18-64, 65 and older, Total
- Cervical Cancer Screening
- Child and Adolescent Well-Care Visits 3-11 years, 12-17 years, 18-21 years, and Total
- Childhood Immunization Status (Combo 2), (Combo 3), (Combo 10)
- Chlamydia Screening in Women, Total
- Comprehensive Diabetes Care – Eye Exam (Retinal) Performed, Blood Pressure Control (<140/90 mm Hg), HbA1c Control (<8.0%), HbA1c Poor Control (>9.0%), HbA1c Testing, Medical Attention for Nephropathy

¹HEDIS[®] is a registered trademark of the National Committee for Quality Assurance (NCQA).

Table 1 – Required HEDIS Measures for SFY 2021 (CY 2020)

- Controlling High Blood Pressure
- Follow-Up After Emergency Department Visit for Alcohol and Other Drug Dependence, 7-Day Follow-Up, 30-Day Follow-Up
- Follow-Up After Emergency Department Visit for Mental Illness, 7-Day Follow-Up, 30-Day Follow-Up
- Follow-Up After Hospitalization for Mental Illness, 7-Day Follow-Up, 30-Day Follow-Up
- Follow-Up Care for Children Prescribed ADHD Medication - Initiation Phase , Continuation & Maintenance Phase
- Immunization for Adolescents (HPV), (Combo 1), (Combo 2)
- Initiation and Engagement of Alcohol and Other Drug Dependence Treatment, Initiation of AOD Treatment—Total, Engagement of AOD Treatment— 13–17 years, 18+ years, Total
- Inpatient Utilization – General Hospital/Acute Care, Total Medicaid
- Kidney Health Evaluation for Patients With Diabetes– 18–64 years, 65-74 years, 75- 85 years, Total
- Lead Screening in Children
- Mental Health Utilization
- Pharmacotherapy Management of COPD Exacerbation, Dispensed a Systemic Corticosteroid within 14 days of the Event, Dispensed a Bronchodilator within 30 days of the Event
- Prenatal and Postpartum Care - Timeliness of Prenatal Care, Postpartum Care
- Risk of Continued Opioid Use, percentage of members with at least 15 days of prescription opioids in a 30-day period, percentage of members with at least 31 days of prescription opioids in a 62-day period
- Statin Therapy for Patients With Cardiovascular Disease, Received Statin Therapy, Total
- Statin Therapy for Patients With Diabetes, Received Statin Therapy
- Use of First-Line Psychosocial Care for Children and Adolescents on Antipsychotics, Total
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- Use of Opioids at High Dosage, New Episode of Opioid Use Lasts at least 15 Days in a 30-Day Period, New Episode of Opioid Use Lasts at least 31 Days in a 62-Day Period
- Use of Opioids From Multiple Providers- Multiple Providers, Multiple Pharmacies, Multiple Prescribers and Multiple Pharmacies
- Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents: BMI Percentile Documentation, Counseling for Nutrition, Counseling for Physical Activity
- Well-Child Visits in the First 30 Months of Life - Well-Child Visits for Age 15 Months–30 Months, Two or More Visits
- Well-Child Visits in the First 30 Months of Life - Well-Child Visits in the First 15 Months, Six or More Visits

Audit Requirements

ODM requires each MCP to contract with an NCQA-licensed organization (LO) and undergo an NCQA HEDIS Compliance Audit^{TM2} conducted by an NCQA-Certified HEDIS Compliance Auditor (CHCA). A list of LOs can be found at: <https://www.ncqa.org/programs/data-and-information-technology/hit-and-data-certification/hedis-compliance-audit-certification/licensed-organizations/> and a list of CHCAs can be found at https://www.ncqa.org/wp-content/uploads/2019/09/Certified_Hedis_Compliance_Auditors.pdf .

²NCQA HEDIS Compliance AuditTM is a trademark of the National Committee for Quality Assurance (NCQA).

All audits must be conducted according to NCQA's *HEDIS Compliance Audit: Standards, Policies, and Procedures, Volume 5*.

Audit Scope: The audit scope must include at a minimum **all ODM required measures for a total of two submissions** (when required – see page 2):

1. Standard NCQA HEDIS submission. This submission includes both the Medicaid-only and MyCare MMP members.
2. A “Special Project” HEDIS submission. This submission is limited to Medicaid-only members (i.e., the MyCare MMP members are excluded).

Audit Timeline: Audits are required for self-reported data submission of HEDIS MY2020 data. Audits must be completed in accordance with NCQA's timeline.

Audit Components: All audits must include: (1) auditor review of Record of Administration, Data Management and Processes (Roadmap) completed by the MCP, (2) source code/software certification review, (3) supplemental data validation [if applicable], (4) medical record review validation, (5) audit visits (onsite or remote), and (6) final rate review.

Final Audit Report: The Final Audit Report (FAR), prepared by the audit organization, must address:

- ◆ Information about the LO
- ◆ Audit team information
- ◆ MCP information
- ◆ Audit scope, product lines, and timeline
- ◆ Supplemental database findings
- ◆ Source code review findings
- ◆ Medical Record Review validation findings
- ◆ Information System (IS) standards findings
- ◆ Final audit results statement

Note: If the FAR contains any additional attachment that documents the auditor's assessment of the MCP's compliance with specific IS standards, please include these attachments as part of the FAR submission.

Data Submission Protocol

1. MCPs are required to submit the audited HEDIS data to IPRO/ODM as follows:

Submission Tool: NCQA’s Interactive Data Submission System (IDSS)—must be the final, auditor-locked version

Submission Format: Data-Filled Workbook (Excel) and CSV Workbook for each submission

Submission Units:

1. Standard NCQA HEDIS submission. This submission includes both the Medicaid-only and MyCare MMP members.
2. A “Special Project” HEDIS submission. This submission is limited to Medicaid-only members (i.e., the MyCare MMP members are excluded).

Naming Conventions: Maintain the IDSS-generated naming convention for each file (e.g., workbook-submission ID.xls or .csv) Examples: “workbook-1234.xls” or “workbook-1234.csv”

Submission Method: IDSS files and data certification letter should be submitted to IPRO’s secure FTP site in the MCP-specific HEDIS MY2020 folder.

Please notify ODM (zamda.lumbi@medicaid.ohio.gov) and IPRO Chuck Merlino (cmerlino@ipro.org) of the uploaded files.

Submission Due Date: June 17, 2021, 10 a.m. EDT

2. MCPs are required to submit the FAR to IPRO/ODM as follows:

Submission Format: PDF Version of the FAR (one FAR should be provided that includes findings for both the Standard NCQA HEDIS submission and the “Special Project” HEDIS submission)

Submission Method: The FAR, along with any attachments, and the FAR data certification letter should be submitted to IPRO’s secure FTP site in the MCP-specific HEDIS MY2020 folder.

Please notify ODM Zamda Lumbi (zamda.lumbi@medicaid.ohio.gov) and Chuck Merlino (cmerlino@ipro.org) of the uploaded files.

Submission Due Date: July 19, 2021, 5 p.m. EDT

In addition to submitting self-reported HEDIS results, MCPs are required to submit the FAR to IPRO/ODM. A review of each FAR will be conducted in order to determine if any data collection or reporting issues were identified. In addition, any measure that is assigned an audit result of “Biased Rate” (i.e., *BR*) will be evaluated to determine the issue(s) that resulted in the assignment of an *BR*. MCPs must be prepared to provide any requested supporting documentation to account for an *BR* audit designation. Based on the findings from the review of the FAR and any *BR* audit result assigned, ODM will have the discretion to require a corrective action plan or other action as designated by the State.

Data Submission Requirements

Each MCP must submit separate signed data certification letters (Appendix) attesting to the accuracy and completeness of (1) the audited HEDIS data and (2) the FAR. The MCP must provide the file name of the IDSS file/FAR in the appropriate area specified in the certification letters. Data certification letters are to be submitted in accordance with the Data Submission Protocol specified in this document. Data certification letters are due on the same day that the data files are submitted (June 17, 2021, for the IDSS submission, and July 19, 2021, for the FAR).

Data Submission Timeline

MCPs are required to adhere to the following timeline for the submission of self-reported HEDIS data:

	Submission Requirement	Due Date
HEDIS MY2020 (January through December 2020)	Final, locked IDSSs for each submission (Standard NCQA HEDIS submission and Special Project HEDIS submission)	June 17, 2021, 10 a.m. EDT
	Certification letter for audited IDSS data for Standard NCQA HEDIS submission and Special Project HEDIS submission	June 17, 2021, 10 a.m. EDT
	Final Audit Report (one FAR for both the Standard NCQA HEDIS submission and Special Project HEDIS submission)	July 19, 2021, 5 p.m. EDT
	Certification letter for FAR for Standard NCQA HEDIS submission and Special Project HEDIS submission	July 19, 2021, 5 p.m. EDT

Appendix

MCP Self-Reported HEDIS Data Letter of Certification for Audited IDSS Data

I, the undersigned, do hereby attest, based on my knowledge, information, and belief, that the data contained in the file submission(s) are accurate, truthful, and complete. Furthermore, I attest that the data submitted were audited via a HEDIS Compliance Audit conducted by an NCQA-licensed organization.

Signature of CEO, CFO, or delegated authority	Print Name
IDSS file name(s):	
Name of MCP Submitted for:	

Submitter Name	MCP Org and Sub ID
Street Address	Telephone Number (include area code) ()
City and State	Zip Code

**MCP Self-Reported HEDIS Data
Letter of Certification for
Final Audit Report**

I, the undersigned, do hereby attest, based on my knowledge, information, and belief, that the information contained in the Final Audit Report (FAR) is accurate, truthful, and complete. Furthermore, I attest that the FAR was produced as a result of an NCQA HEDIS Compliance Audit conducted by an NCQA-licensed organization.

Signature of CEO, CFO, or delegated authority	Print Name
FAR file name(s):	
Name of MCP Submitted for:	

Submitter Name	MCP Org and Sub ID
Street Address	Telephone Number (include area code) ()
City and State	Zip Code