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

MY 2022

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Introduction

This specifications document describes the State Fiscal Year (SFY) 2023 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 2023 contract period is calendar year (CY) 2022.

ODM requires each managed care plan (MCP) to submit the following to NCQA and ODM. A required measure must be reported by the MCP if there is sufficient data to report a valid rate.

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 2023 (CY 2022)
• Adults' Access to Preventive/Ambulatory Health Services (AAP) *
• Ambulatory Care (AMB)
• Annual Dental Visits (ADV) *
• Antidepressant Medication Management (AMM)
• Appropriate Testing for Pharyngitis (CWP)
• Blood Pressure Control for Patients With Diabetes (BPD)
• Breast Cancer Screening (BCS)
• Cardiac Rehabilitation (CRE)
• Cervical Cancer Screening (CCS)
• Child and Adolescent Well-Care Visits (WCV)
• Childhood Immunization Status (CIS)
• Chlamydia Screening in Women (CHL)
• Controlling High Blood Pressure (CBP)
• Eye Exam for Patients With Diabetes (EED)
• Follow-Up After Emergency Department Visit for Mental Illness (FUM) *
• Follow-Up After Emergency Department Visit for Substance Use (FUA) *
• Follow-Up After Hospitalization for Mental Illness (FUH) *
• Follow-Up Care for Children Prescribed ADHD Medication (ADD) *
• Hemoglobin A1c Control for Patients With Diabetes (HBD)

Table 1 – Required HEDIS Measures for SFY 2023 (CY 2022)
• Immunizations for Adolescents (IMA) • Initiation and Engagement of Substance Use Disorder Treatment (IET) • Inpatient Utilization (IPU) • Kidney Health Evaluation for Patients With Diabetes (KED) • Lead Screening in Children (LSC) * • Pharmacotherapy Management of COPD Exacerbation (PCE) • Prenatal and Postpartum Care (PPC) • Risk of Continued Opioid Use (COU) • Statin Therapy for Patients With Cardiovascular Disease (SPC) * • Statin Therapy for Patients With Diabetes (SPD) • Use of First-Line Psychosocial Care for Children and Adolescents on Antipsychotics (APP) • Use of Opioids at High Dosage (HDO) • Use of Opioids From Multiple Providers (UOP) • Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents (WCC) • Well-Child Visits in the First 30 Months of Life (W30) *

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

Allowable Adjustments

1. Measures designated with an asterisk (*) must include result reporting by race stratification. This denotes measures for which race stratification is not required by the standard HEDIS specification. Results by race must be reported in an Excel format using the following naming convention: MCP_MSR_RACE_MY22.xlsx (MCP = 3-character plan ID: BUC, CAR, MOL, PAR, UHC; MSR = HEDIS measure ID, e.g., SPC). The file layout should be consistent with IDSS fields reported by race for HEDIS measures where results by race are required (e.g., PPC).

- *Race:*
  - White
  - American Indian and Alaska Native
  - Native Hawaiian and Other Pacific Islander
  - Two or More Races
  - Asked but No Answer
  - Total
  - Black or African American
  - Asian
  - Some Other Race
  - Unknown

Audit Requirements: ODM requires each MCP to contract with an NCQA-licensed organization (LO) and undergo and NCQA HEDIS Compliance Audit™[2] 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/

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[2] NCQA HEDIS Compliance Audit™ 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 each submission specified below**:

1. Standard NCQA HEDIS submission. This submission includes both the Medicaid-only <u>and</u> MyCare MMP members for plans participating in the MyCare Ohio program.

2. A "Special Project" HEDIS submission (if required – see page 1). 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 MY2022 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
- ♦   Survey sample frame
- ♦   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 MY2022 folder.

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

    Submission Due Date: June 19**,** 2023, 5 p.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 MY2022 folder.

    Submission Due Date: July 18, 2023, 5 p.m. EDT

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

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 19, 2023, for the IDSS submission, and July 18, 2023, 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 MY2022 (January through December 2022)	Final, locked IDSSs for each submission (Standard NCQA HEDIS submission and Special Project HEDIS submission)	June 19, 2023, 5 p.m. EDT
	Certification letter for audited IDSS data for Standard NCQA HEDIS submission and Special Project HEDIS submission	June 19, 2023, 5 p.m. EDT
	Final Audit Report (one FAR for both the Standard NCQA HEDIS submission and Special Project HEDIS submission)	July 18, 2023, 5 p.m. EDT
	Certification letter for FAR for Standard NCQA HEDIS submission and Special Project HEDIS submission	July 18, 2023, 5 p.m. EDT

Appendix

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

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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