

CCO Incentive Measure Specification Changes

Between 2017 and 2018

This document summarizes changes between the 2017 and 2018 specifications for the CCO incentive measures. Specifications are posted online <http://www.oregon.gov/oha/HPA/ANALYTICS/Pages/CCO-Baseline-Data.aspx>.

Please contact us at metrics.questions@state.or.us.

Adolescent Well Care Visits

Changes from HEDIS 2017 to 2018 include revision to the Data Elements for Reporting table when using the hybrid method. Note as OHA is only using administrative data to calculate this measure, this change does not apply.

Ambulatory Care: Emergency Department Utilization

Changes from HEDIS 2017 to 2018 include:

- HEDIS 2018 further clarify the methods to identify an ED visit that resulted in an inpatient stay for exclusion: When an ED visit and an inpatient stay are billed on separate claims, the visit results in an inpatient stay when the admission date for the inpatient stay occurs on the ED date of service, or on calendar day after. An ED visit billed on the same claim as an inpatient stay is considered a visit that resulted in an inpatient stay.
- HEDIS 2018 removed 'AOD Rehab and Detox Value Set' from required exclusion; this value set only contained ICDPCS inpatient procedure codes, and these services may still be identified for exclusion based on chemical dependency diagnosis codes (included in the Mental and Behavioral Disorders Value Set).
- HEDIS 2018 Ambulatory Outpatient Visits value set deleted one CPT code 99420.
- HEDIS 2018 Mental and Behavioral Disorders Value Set added 13 ICD10 diagnosis codes: F32.81, F32.89, F34.81, F34.89, F42.2, F42.3, F42.4, F42.8, F42.9, F50.81, F50.89, F64.0, F80.82.
- HEDIS 2018 ED Procedure Code Value Set added 51 and deleted 22 CPT codes.

Assessments for Children in DHS Custody

OHA has modified the start of denominator inclusion period to November 1 of the year prior to the measurement year (instead of starting from January 1st of the measurement year).

CAHPS – Access to Care

The Metrics and Scoring Committee voted to include separate benchmarks for children and adults on this measure beginning in 2018 (in previous years one weighted average across children and adults was calculated and used as the benchmark). Beginning in 2018, CCOs must achieve the separate benchmarks or improvement targets for both children and adults to qualify for credit on this measure.

Childhood Immunization Status

Changes from HEDIS 2017 to 2018 include:

- Revised the Data Elements for Reporting table when using the hybrid method. Note as OHA is only using administrative data to calculate this measure, this change does not apply.
- HEDIS 2018 added CVX 107 to DTaP Vaccine Administered Value Set, CVX 89 to Inactivated Polio Vaccine (IPV) Administered Value Set, CVX 17 to Haemophilus Influenzae Type B (HiB) Vaccine Administered Value Set, and CVX 45 to Hepatitis B Vaccine Administered Value Set. To note, these codes have been included in the 'OHA additional CVX' code set, therefore it does not result in any calculation changes for OHA.

Cigarette Smoking Prevalence

- In 2017, CCOs must meet the minimum benefit requirement and meet a threshold score of 75% to “meet” the measure.
- The Cessation Benefits Floor section was reorganized to improve readability and clarifying language was added regarding quit line benefits. These are clarifications, not a change in the intent.
- The Cessation Benefits Floor includes nicotine lozenges without prior authorization.
- In the EHR Prevalence section, a diagram was added to illustrate the relationship between the smoking rate and the tobacco use rate. This diagram is copied from an existing FAQ.
- Added clarifying language in Data Elements for Reporting to emphasize that the data to be reported is for CCO Medicaid members only. Open card Medicaid members are not counted in this measure. This is a clarification of the specifications, not a change in the intent of the measure.
- Under continuous enrollment criteria, removed reference to eligibility rule of “eligible as of last date of the reporting period” and added reference to alignment with CMS specifications.
- For those using components of NQF0028/CMS138, updated list of value sets as outlined in the Technical Release Notes available here: <https://ecqi.healthit.gov/ecqm/measures/cms138v6>
- Updated hyperlinks where URLs have changed.

Colorectal Cancer Screening

Changes from HEDIS 2017 to 2018 include:

- Add required exclusions to the Medicare product line for members 65 years of age and older living long-term in institutional settings. OHA will exclude Institutional SNP (I-SNP) members when drawing the sample list.
- Revised the Data Elements for Reporting table when using the hybrid method. Note OHA does not report this measure using the HEDIS template, so this change does not apply.
- Added CPT 74261, 74262 to CT Colonography Value Set.

OHA continues to adopt the full HEDIS hybrid specifications for 2018. It is the CCO’s responsibility to identify numerator compliance using any of the data sources allowed under the HEDIS hybrid method. Information may be abstracted from administrative data (claims), paper medical records, and audited supplemental databases or from automated systems such as electronic medical records (EMRs), registries, or claims systems.

- If using administrative data to identify numerator compliance, CCOs must follow HEDIS 2018 specifications for allowable codes and measure logic.

- If using medical record data to identify numerator compliance, CCOs must follow HEDIS 2018 specifications to conduct the chart review.

See the guidance document for additional information on allowable data sources. OHA will provide updated guidance to CCOs on the hybrid methodology for 2018 in fall 2018 and samples in early 2019. Guidance will be posted online at <http://www.oregon.gov/oha/HPA/ANALYTICS/Pages/CCO-Baseline-Data.aspx>.

Controlling Hypertension

Changes are documented in Technical Release Notes available at <https://ecqi.healthit.gov/ecqm/measures/cms165v6>

Changes to this measure include:

- New exclusion: Exclude patients in hospice care from the denominator.
- Change in measure logic: Replaced the 'starts before start of' and 'starts before end of' logical operator to address situations where time stamps are not attached to procedures, diagnosis, and immunizations. Wherever applicable, the operators have been changed to 'starts before or concurrent with start of' or 'starts before or concurrent with end of' respectively.
- Removed 'Other Services Related to Dialysis' and 'Dialysis Education' interventions from the list of Denominator Exclusions to remove proxies for dialysis.
- Updated the logic to ensure the BP reading takes place after the diagnosis of essential hypertension to meet the measure intent.
- Under continuous enrollment criteria, removed reference to eligibility rule of “eligible as of last date of the reporting period” and added reference to alignment with CMS specifications.

Dental Sealants

None.

Depression Screening

Changes are documented in Technical Release Notes available at <https://ecqi.healthit.gov/ecqm/measures/cms002v7>

Changes to this measure include:

- Revised the example list of screening tools to include additional example tools, including perinatal screening tools, to align with the clinical guideline recommendations.
- Replaced 'Risk Category Assessment' datatype with 'Assessment, Performed' datatype to conform with QDM 4.3 changes.
- Under continuous enrollment criteria, removed reference to eligibility rule of “eligible as of last date of the reporting period” and added reference to alignment with CMS specifications.

Developmental Screening

None.

Diabetes: HbA1c Poor Control

Changes are documented in Technical Release Notes available at <https://ecqi.healthit.gov/ecqm/measures/cms122v6>

Changes to this measure include:

- Added exclusion for patients in hospice care.
- Under continuous enrollment criteria, removed reference to eligibility rule of “eligible as of last date of the reporting period” and added reference to alignment with CMS specifications.

Disparity Measure: Emergency Department Utilization for Individuals Experiencing Mental Illness

- N/A

Effective Contraceptive Use

- Modified the incentive measure age range from 18 – 50 years old, to 15 – 50 years old.
- Women who have had tubal ligation (Female Sterilization category numerator codes) are now counted as permanent numerator hits for the CCO that they are continuously enrolled with during the measurement year.
- Moved the ‘pregnancy non-compliant exclusion’ to the ‘denominator exclusion’ section; also modified to only use the HEDIS 2018 Pregnancy Value Set (with the updates in HEDIS 2018, Pregnancy Diagnosis Value Set is now a complete subset of Pregnancy Value Set; no additional codes are identified in the Pregnancy Diagnosis Value Set, so there is no need for using the ‘union’ of two value sets).

PCPCH Enrollment

- None, though:
 - Note inclusion of ‘grace period’ for identifying clinics that might have applied for 5 STAR designation by December 31st of the measurement year is retained.
 - Note also that the October 2017 Metrics & Scoring Committee decision to exclude members attributed or assigned to tribal clinics from this measure for both the 2017 and 2018 measurement periods remains. Members enrolled in tribal clinics will be counted in the measure again beginning in 2019.

Prenatal Care

Changes from HEDIS 2017 to 2018 include:

- Updated the administrative numerator specification to indicate when codes must be on the same claim and when codes can occur on different dates of service.
- Revised the Data Elements for Reporting table when using the hybrid method. Note OHA does not report this measure using the HEDIS template, so this change does not apply.
- HEDIS 2018 Value Set updates include:
 - Deliveries Value Set: deleted all ICD9PCS codes (no longer relevant).
 - Herpes Simplex Antibody Value Set: added LOINC code.

- Non-live Births Value Set: added 10 ICD10CM diagnosis codes.
- Postpartum Visits Value Set: deleted all ICD9CM and ICD9PCS codes (no longer relevant).
- Pregnancy Diagnosis Value Set: added 31, and deleted 8 ICD10CM diagnosis codes.
- Toxoplasma Antibody Value Set: added 1 and deleted 2 LOINC codes.

OHA continues to adopt the full HEDIS hybrid specifications for 2018. It is the CCO's responsibility to identify numerator compliance using any of the data sources allowed under the HEDIS hybrid method. Information may be abstracted from administrative data (claims), paper medical records, and audited supplemental databases or from automated systems such as electronic medical records (EMR/EHR), registries or claims systems.

- 1) If using administrative data to identify numerator compliance, CCOs must follow HEDIS 2018 specifications for allowable codes and measure logic.
- 2) If using medical record data to identify numerator compliance, CCOs must follow HEDIS 2018 specifications to conduct the chart review.

See the annual chart review guidance document for additional information on allowable data sources. OHA will provide sampling frames and updated guidance to CCOs on the hybrid methodology for 2018 in fall 2018. Guidance will be posted online at <http://www.oregon.gov/oha/HPA/ANALYTICS/Pages/CCO-Baseline-Data.aspx>

Weight Assessment and Counseling in Children and Adolescents

- N/A