Session Agenda

- NCQA Overview
- NCQA Physician Recognition Programs
- HSRP Basics
- Steps to Recognition
- Making the Most of Recognition
- Contact Information
A Brief Introduction.....

• NCQA is a private, independent non-profit health care quality oversight organization founded in 1990
• NCQA is committed to measurement, transparency, and accountability
• NCQA unites diverse groups around a common goal: improving health care quality
• MISSION: To improve the quality of health care
• VISION: To transform health care through quality measurement, transparency, and accountability
NCQA Recognition Programs
Physician-Level Measurement

- Current programs: **DRP, HSRP, BPRP, PPC, PCMH**
- What measures included: **Structure, process and outcomes of excellent care management**
- Where they come from: **partnership with leading national health organizations**
- Who rewards recognized physicians: **many health plans and coalitions of employers**
- Who is recognized: **over 11,000 physicians nationally**
Number of Physician Recognitions by State

as of 7/31/09

- 0 Recognitions
- 1-25 Recognitions
- 26-100 Recognitions
- 101-500 Recognitions
- 501+ Recognitions

Map showing the number of physician recognitions by state as of 7/31/09. States are color-coded based on the number of recognitions.
HSRP Basics...

- Developed in partnership with AHA/ASA
- Launched July 30, 2003
- Voluntary program; non punitive; report only physicians who earn Recognition
- Use nationally recognized reliable valid measures

Over 1,800 Physicians Recognized Nationally

3-year recognition period
Who May Apply?

• Individual physicians who are solo practitioners or practice with a group

• To be eligible, applicants must:
  - have current license: doctor of medicine (MD) or doctor of osteopathy (DO)
  - provide continuing care to patients with ischemic vascular disease (IVD) for at least 12 months
  - have had face-to-face contact with and submit data on a sample of patients with IVD
Eligible Patient Definition

1. Is 18 years of age or older

2. Has had a diagnosis of ischemic vascular disease for at least 12 months

3. Has been under the care of the applicant physician for at least 12 months.
<table>
<thead>
<tr>
<th>Measure</th>
<th>Performance Criteria</th>
<th>Points</th>
</tr>
</thead>
<tbody>
<tr>
<td>Blood Pressure Control &lt; 140/90 mm Hg</td>
<td>75% of patients in sample</td>
<td>10.0</td>
</tr>
<tr>
<td>Complete Lipid Panel</td>
<td>80% of patients in sample</td>
<td>10.0</td>
</tr>
<tr>
<td>LDL Control &lt;100 mg/dl</td>
<td>50% of patients in sample</td>
<td>10.0</td>
</tr>
<tr>
<td>Use of Aspirin or Another Antithrombotic</td>
<td>80% of patients in sample</td>
<td>10.0</td>
</tr>
<tr>
<td>Smoking Status and Cessation Advice or Treatment</td>
<td>80% of patients in sample</td>
<td>10.0</td>
</tr>
<tr>
<td><strong>Total Points</strong></td>
<td></td>
<td><strong>50.0</strong></td>
</tr>
<tr>
<td><strong>Points Needed to Achieve Recognition</strong></td>
<td></td>
<td><strong>40.0</strong></td>
</tr>
</tbody>
</table>
What is the HSRP application and survey process?
Framework for Achieving Recognition

• Review program information
  – www.ncqa.org/hsrp

• Participate in a standards workshop
  – Schedule and materials available on Web site

• Purchase Data Collection Tool*

• Review materials and sign agreements

• Identify eligible patients and collect data

• Self-assess current performance

• Submit completed application, agreements, fee, and results to NCQA when ready

*Materials included with Data Collection Tool (Excel workbook), HSRP Standards and Guidelines, Application Form, Agreement/Business Associates Addendum and Fee Schedule.
HSRP Performance Evaluation

• Performance evaluation based on self-abstracted medical record data:
  – 35 patients/physician for individual applicants (either solo physician or 1 physician from practice site on a workbook)
  – 25 patients/physician for practice sites with 2 to 8 applicants (2-8 physicians on a workbook from same practice site)
  – Alternate methodology available for practice sites of 9 or more physicians

• Data from medical records (electronic or paper), registries or administrative systems are acceptable
Patient Sampling Requirements

<table>
<thead>
<tr>
<th>Number of Physicians</th>
<th>Sample Size (per physician/site)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>35</td>
</tr>
<tr>
<td>2</td>
<td>50</td>
</tr>
<tr>
<td>3</td>
<td>75</td>
</tr>
<tr>
<td>4</td>
<td>100</td>
</tr>
<tr>
<td>5</td>
<td>125</td>
</tr>
<tr>
<td>6</td>
<td>150</td>
</tr>
<tr>
<td>7</td>
<td>175</td>
</tr>
<tr>
<td>8</td>
<td>200</td>
</tr>
<tr>
<td>9 or more</td>
<td>Alternate Sampling Methodology Available</td>
</tr>
</tbody>
</table>

Patient selection must follow NCQA guidelines and include all eligible patients regardless of coverage.
Patient Selection Methodology

- Select a “Start Date”
  - Any date within the last 12 months
- Choose to move either forward or backward from the start date to identify eligible patients
- Move day-by-day from your start date consecutively evaluating each patient seen at an office visit for eligibility until the required sample size is met
- Enter all patients evaluated for eligibility in the Workbook or submit blinded log
- Obtain prior approval from NCQA to use any other method to select patients
Medical Record Data Abstraction

When abstracting medical record data:

- Abstract data for care already completed for each patient in the sample for a 12-month period going back from the last visit date for each patient prior to the start date
- Enter, in the data collection tool, the most recent values documented within each patient’s 12-month abstraction period that are related to each of the measures.
- Use medical record documentation (electronic or paper), administrative data systems or registries to identify required data elements
Determine 12 Month Abstraction Period

“Last Visit Date” = the patient’s last visit to the office that precedes the start date

Example 1: Patients identified going forward

<table>
<thead>
<tr>
<th>Start Date</th>
<th>Visit Date Identified as Eligible</th>
<th>Visit Date Prior to Start Date</th>
<th>12-Month Abstraction Period</th>
</tr>
</thead>
<tbody>
<tr>
<td>11/13/08</td>
<td>11/20/08</td>
<td>6/16/08</td>
<td>6/16/08 – 6/17/07</td>
</tr>
</tbody>
</table>

Example 2: Patients identified going backward

<table>
<thead>
<tr>
<th>Start Date</th>
<th>Visit Date Identified as Eligible (Prior to Start Date)</th>
<th>12-Month Abstraction Period</th>
</tr>
</thead>
</table>
Abstract Medical Record Data

Blood Pressure Measurement

Proportion <140/90

• Data elements
  – Record date and value of most recent blood pressure measurement performed within the abstraction period

• Tips
  – To receive full credit for B/P both the systolic and diastolic readings must be below the goal, e.g., 139/89
  – Partial credit available
Abstract Medical Record Data

Lipid Profile and Cholesterol Control
Proportion w/ LDL<100mg/dl

- **Data element**
  - Record date of most recent lipid profile (including value for LDL) within the abstraction period

- **Tips**
  - Abstract from official laboratory sheets, reports or administrative data
  - Use date drawn or date received
  - To receive full credit for control, LDL must be less than 100 (e.g., 99)
  - Partial credit available for LDL control
Abstract Medical Record Data

Use of Aspirin or Antithrombotic

• Data Element
  - Record date of documentation of use of aspirin or another antithrombotic during the abstraction period

• Tips
  - Abstract data from medical records, reports or administrative data
  - Patient self-report is not acceptable
Abstract Medical Record Data

Smoking Status

- **Data Element**
  - Document smoking status

- **Tips**
  - If there is documentation that the patient is a non-smoker, no further documentation is required.
  - Smokers: Record date that documents smoking cessation counseling or treatment within the abstraction period.
## Scoring of Measures

<table>
<thead>
<tr>
<th>Standard</th>
<th>Criteria</th>
<th>Points</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Blood pressure control</strong></td>
<td>75% of patients in sample</td>
<td>10.0</td>
</tr>
<tr>
<td>BP Result</td>
<td>Credit Toward Numerator</td>
<td></td>
</tr>
<tr>
<td>&lt; 140/90 mm Hg</td>
<td>1.00</td>
<td></td>
</tr>
<tr>
<td>&lt; 145/90 or &lt;140/95 mm Hg</td>
<td>0.75</td>
<td></td>
</tr>
<tr>
<td>&lt; 145/95 mm Hg</td>
<td>0.50</td>
<td></td>
</tr>
<tr>
<td>≥ 145/95 mm Hg</td>
<td>0.00</td>
<td></td>
</tr>
<tr>
<td><strong>Complete lipid profile</strong></td>
<td>80% of patients in sample</td>
<td>10.0</td>
</tr>
<tr>
<td><strong>Cholesterol control</strong></td>
<td>50% of patients in sample</td>
<td>10.0</td>
</tr>
<tr>
<td>LDL Result</td>
<td>Credit Toward Numerator</td>
<td></td>
</tr>
<tr>
<td>&lt; 100 mg/dl</td>
<td>1.00</td>
<td></td>
</tr>
<tr>
<td>100 – 109 mg/dl</td>
<td>0.75</td>
<td></td>
</tr>
<tr>
<td>110 – 119 mg/dl</td>
<td>0.50</td>
<td></td>
</tr>
<tr>
<td>120 – 129 mg/dl</td>
<td>0.25</td>
<td></td>
</tr>
<tr>
<td>≥ 130 mg/dl</td>
<td>0.00</td>
<td></td>
</tr>
<tr>
<td><strong>Use of aspirin or another antithrombotic</strong></td>
<td>80% of patients in sample</td>
<td>10.0</td>
</tr>
<tr>
<td><strong>Smoking status and cessation advice or treatment</strong></td>
<td>80% of patients in sample</td>
<td>10.0</td>
</tr>
<tr>
<td><strong>Total Points</strong></td>
<td></td>
<td>50.0</td>
</tr>
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<td></td>
<td>40.0</td>
</tr>
</tbody>
</table>
### Heart Stroke Recognition Program

### Medical Record Abstraction Worksheet

#### Summary

<table>
<thead>
<tr>
<th>Start Date: (mm/dd/yyyy)</th>
<th>7/1/2003</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Number of Physicians Seeking Recognition:</td>
<td>6</td>
</tr>
<tr>
<td>Number of Applicants:</td>
<td>6</td>
</tr>
<tr>
<td>Required Eligible Patient Sample per Applicant:</td>
<td>25</td>
</tr>
<tr>
<td>Required Total Eligible Patient Sample:</td>
<td>150</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Applicant Number</th>
<th>Applicant Name</th>
<th>Total Patients Reviewed for Eligibility</th>
<th>Total Eligible Patients</th>
<th>Add'l Eligible Patients Needed for Required Sample</th>
<th>CM 1 Blood Pressure Control (≤140/90 mm Hg)</th>
<th>Patients That Met Criteria (75% required)</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Physician 1</td>
<td>28</td>
<td>25</td>
<td>0</td>
<td>21.75</td>
<td>87%</td>
<td>10</td>
</tr>
<tr>
<td>2</td>
<td>Physician 2</td>
<td>25</td>
<td>25</td>
<td>0</td>
<td>20.25</td>
<td>81%</td>
<td>10</td>
</tr>
<tr>
<td>3</td>
<td>Physician 3</td>
<td>25</td>
<td>25</td>
<td>0</td>
<td>17.25</td>
<td>69%</td>
<td>0</td>
</tr>
<tr>
<td>4</td>
<td>Physician 4</td>
<td>28</td>
<td>25</td>
<td>0</td>
<td>22</td>
<td>88%</td>
<td>10</td>
</tr>
<tr>
<td>5</td>
<td>Physician 5</td>
<td>30</td>
<td>25</td>
<td>0</td>
<td>28.25</td>
<td>81%</td>
<td>10</td>
</tr>
<tr>
<td>6</td>
<td>Physician 6</td>
<td>26</td>
<td>25</td>
<td>0</td>
<td>22.75</td>
<td>91%</td>
<td>10</td>
</tr>
<tr>
<td>7</td>
<td>Physician 7</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0%</td>
<td>0</td>
</tr>
<tr>
<td>8</td>
<td>Physician 8</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0%</td>
<td>0</td>
</tr>
</tbody>
</table>
# Workbook - Enter Patient Data

**Heart Stroke Recognition Program**

**Medical Record Abstraction**

**Applicant 1 - Physician 1**

- **Start Date:** 7/1/2006
- **BP Control:** 0/0 (0.00%)%
- **Lipid Profile:** 0/0 (0.00%)
- **Aspirin:** 0/0 (0.00%)
- **Smoking:** 0/0 (0.00%)

### Eligibility

- **Is the patient 18 years or older?**
- **Has the patient had a diagnosis of IVD for at least 12 months?**
- **Was the patient (1) under the care of the participant physician for IVD for at least 12 months or (2) had a stroke 12 months or more prior to the last visit date?**

### Abstraction Period

**Begining**

**Date of patient's last visit with the applicant physician (mm/dd/yyyy)**

**End**

**Year of Birth**

**Gender**

**Date of most recent blood pressure test during the abstraction period (mm/dd/yyyy)**

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**NCQA**

Measuring quality, improving health care.

**HSRP Workshop**

April 2009
## Workbook - See Preliminary Scores

<table>
<thead>
<tr>
<th>CM 3</th>
<th>CM 4</th>
<th>CM 5</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cholesterol Control (LDL &lt;100 mg/dl)</td>
<td>Use of Aspirin or Another Antithrombotic</td>
<td>Smoking Status and Cessation Treatment or Advice</td>
</tr>
<tr>
<td><strong>Patients That Met Criteria (50% required)</strong></td>
<td><strong>Patients That Met Criteria (80% required)</strong></td>
<td><strong>Patients That Met Criteria (80% required)</strong></td>
</tr>
<tr>
<td>Number</td>
<td>% of Eligible</td>
<td>Score</td>
</tr>
<tr>
<td>-------</td>
<td>--------------</td>
<td>------</td>
</tr>
<tr>
<td>25</td>
<td>100%</td>
<td>10</td>
</tr>
<tr>
<td>25</td>
<td>100%</td>
<td>10</td>
</tr>
<tr>
<td>0</td>
<td>0%</td>
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<td>0</td>
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<tr>
<td>0</td>
<td>0%</td>
<td>0</td>
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</tbody>
</table>

**Total Score**

<table>
<thead>
<tr>
<th>Score</th>
<th>Score</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>50</td>
<td>40</td>
<td>0</td>
</tr>
</tbody>
</table>

**Note 3:**
- If a criterion is met, check the box. If the patient does not meet the criteria, leave the box unchecked.
- If you are unsure if a patient meets the criteria, check the box with an asterisk (*).

Please submit the Survey for review.
Submit HSRP Application Materials NCQA

Materials to submit:

• Completed Application Form
• Signed HSRP Agreement (2 copies)
  – Includes Business Associate Addendum
• Completed Medical Record Data Entry Workbook
• Application Fee
What Happens Next?

• When NCQA has received all information needed to complete the application, NCQA reviews and makes recognition determinations
  – 5 percent of applications are randomly selected for audit
• Physicians achieving Recognition receive:
  – Letter of recognition
  – Posting to the Recognized Physician Directory
  – Certificate of recognition
  – Media kit/marketing and advertising guidelines
• Reporting to health plans, Bridges To Excellence® (BTE)*

* Bridges to Excellence (BTE) - is a not-for-profit organization developed by employers, physicians, health care services, researchers, and other industry experts with a mission to create significant leaps in the quality of care by recognizing and rewarding health care providers who demonstrate that they have implemented comprehensive solutions in the management of patients and deliver safe, timely, effective, efficient, equitable and patient-centered care.
NCQA’s Recognition Program Physician Directory

Physicians with multiple recognitions clearly identified

Additional physician practice data available
RECOGNITION: REWARDED IN MANY WAYS

Provider Directories

Fee Schedules, P4P
Financial Incentives

Network Entry

Active Steering
To Recognized MDs

Specialty Board
Maintenance of Certification

Data Collection Assistance
HSRP Contact Information

• **Mailing Address**
  NCQA
  Heart/Stroke Recognition Program
  1100 13th Street NW, Suite 1000
  Washington, DC 20005

• **Customer Support**
  (questions on HSRP in general, purchasing the workbook, etc.)
  1-888-275-7585

• **HSRP Staff**
  (questions on sampling methodology, measures, etc.)
  hsrp@ncqa.org

• **Web**
  www.ncqa.org/hsrp
NCQA would like to thank our Heart/Stroke Recognition Program (HSRP) Sponsors.

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Champion Sponsors

Patron Sponsors

Bristol-Myers Squibb/Sanofi Pharmaceuticals Partnership