The Future of HEDIS®

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Episode 4: December 10, 2019
Welcome!

Episode 4 of this webinar series

6,622 registrants in this series
49% of series registrants are from health plans.
Welcome!

*Episode 4 of this webinar series*

43% of registrants are new
Recommended Viewing

See our earlier webinars: ncqa.org/future_of_hedis

Episode 1: The Basics (July 12, 2019)
Episode 2: Answering Common Questions (September 27, 2019)
Why change HEDIS, and why now?

Health care environment
Feedback
Market research
What’s the purpose?

Improve utility of HEDIS

Maintain integrity of measures throughout the system
We don’t have all the answers
Changes will be gradual

A process, not an event
Collaboration, not commands
Readiness varies, so the pace will vary
We are early in this journey

More webinars and dialogue to come
5 Core Topics

“The Future of HEDIS”
How HEDIS works

NOT

Content
What HEDIS measures

ACCURACY
Licensing & Certification

INSIGHT
ECDS Reporting

TIME
Schedule Change

EASE
Digital Measures

FLEXIBILITY
Allowable Adjustments

The Future of HEDIS
Allowable Adjustments

What? “What’s the vision?”

- Adjust measures
- Keep clinical intent
- Use HEDIS at different levels of system
Allowable Adjustments

_So What? “Why should I care?”_

- Customize *correctly*
- Study gaps in care
- Reduce burden
Allowable Adjustments

Now What? “What’s my next step?”

- Consider how you use or want to adjust our measures
- Read what’s allowable (end of Vol. 2 measure sections)
- Contact MyNCQA
Licensing & Certification

What? “What’s the vision?”

- All HEDIS users need a license agreement
- Commercial services based on HEDIS also need certification
Licensing & Certification

So What? “Why should I care?”

- Accuracy, reliability
- Trust in value-based payments
- Apples-to-apples comparability
Licensing & Certification

Now What? “What’s my next step?”

How do you use HEDIS?

Commercial Users:
MyNCQA> Ask a Question>Orders>
Custom License Agreement
Digital Measures

What? “What’s the vision?”

- Digitalized versions of existing measures that use traditional reporting
- Measures written as computer code (machine-readable)
- Download measures directly
Digital Measures

So What? “Why should I care?”

- Easier transfer of measures into your IT system
- Reduce interpretation, recoding, human error
- Standardize to ease use across care continuum
Digital Measures

So What? “Why should I care?”

Our most-viewed video of 2019: “An Introduction to Digital Measures”

ncqa.org/digital-hedis-video
Digital Measures

Now What? “What’s my next step?”

Take our real-time survey
ECDS Reporting

What? “What’s the vision?”

A type of digital measure

Report clinical data according to data source
ECDS Reporting

What? “What’s the vision?”

HEDIS / 88 non-survey measures

ECDS / 11

DIGITAL / 19
ECDS Reporting

So What? “Why should I care?”

Leverages more and better data into greater insight

Fosters patient-centered care
ECDS Reporting

Now What? “What’s my next step?”

Order ECDS measures: (store.ncqa.org/ECDS)

Report ECDS measures

Share experiences about ECDS reporting
First ECDS measure to be publicly reported

Prenatal Immunization Status

HEDIS MEASUREMENT YEAR 2020
(Reported June 2021)
ECDS Reporting

Now What? “What’s my next step?”

Health Plan Report Card will highlight ECDS-reporting plans.
Schedule Change

What? “What’s the vision?”

Current: 6-month lag
(Jan-Dec measures = July notice)

Future: 5-month head start
(Jan-Dec measures = prior Aug notice)
Schedule Change

**So What? “Why should I care?”**

**NOW**

- **2019**
  - JAN
  - JUL
  - DEC
  - Measures apply to **2019 period**
  - Year is half over before plans see the newest version of measures

**NEW**

- **2021**
  - JAN
  - AUG
  - DEC
  - HEDIS measures released

- **2022**
  - JAN
  - DEC
  - Measures apply to **2022 period**
  - Plans have 5-month advance notice on measures

- **2023**
  - JAN
  - JUN
  - DEC
  - Report HEDIS results for **2022 period**
Schedule Change

So What? “Why should I care?”

NOW

2019

HEDIS measures released

Measures apply to 2019 period

2020

Year is half over before plans see the newest version of measures

Report HEDIS results for 2019 period

NEW

2021

HEDIS measures released

2022

Measures apply to 2022 period

2023

Report HEDIS results for 2022 period

Measure specs, 11 months sooner

Year is half over before plans see the newest version of measures

Plans have 5-month advance notice on measures
Schedule Change

Now What? “What’s the next step?”

A related simplification: the HEDIS naming convention.

What’s the difference?  Why so many?
Transition Year: Two HEDIS editions coming July 1, 2020.

<table>
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<th>Event</th>
<th>HEDIS MY 2020</th>
<th>HEDIS MY 2021</th>
<th>HEDIS MY 2022</th>
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<td>7/1/2020</td>
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<td>10/1/2020</td>
<td>3/31/2021</td>
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<td>12/15/2020</td>
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<td>Data Submission Due</td>
<td>6/15/2021</td>
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Before we continue…

Let us hear from you again
Learning Collaboratives with ECDS
Implementation of Measures and Quality Improvement

Alcohol Learning Collaborative
(2017-2020)

Funded by the Centers for Disease Control and Prevention & Substance Abuse and Mental Health Services Administration

Participants: EmblemHealth (NY), GOBHI (OR), S. CA Kaiser Permanente (CA)

NCINQ Adolescent Depression Collaborative
(2018-2020)

Funded by the Agency for Healthcare Research and Quality & CMS

Participants: Affinity (NY), Excellus BCBS (NY), GOBHI (OR), CenCal (CA), AmeriHealth Caritas (DC)
Learning Collaborative Target Measures

Electronic Clinical Data Systems

Plans collect data from various sources to accurately assess performance.

Clinical data may be captured in electronic health records, health information exchanges, clinical registries, case management records and administrative claims.

- Unhealthy Alcohol Use Screening and Follow-Up
- Depression Screening and Follow-Up for Adolescents and Adults
- Utilization of the PHQ-9 to Monitor Depression Symptoms for Adolescents and Adults
- Depression Remission or Response for Adolescents and Adults
What have we learned?

Key facilitators and barriers to improving behavioral health ECDS measures

Facilitators

Project Champions

Strategic and Persistent Efforts

Stakeholder Engagement

Limited Access to Data

Barriers

Stigma

Lack of Integration and Follow-up
Which Interventions have Plans Found to be Helpful?

**Strategies for Improvement**

**Access to Data**
- Leverage health information exchanges
- Incentivize provider reporting
- Partner with provider groups to exchange data
- Incorporate LOINC codes into provider EHRs
- Work with data vendors

**Increase Screening**
- Educate providers on use of standardized tools and coding terminology
- Incorporate screenings into clinical workflow
- Use apps to engage patients

**Follow-Up and Management**
- Educate and train providers on evidence based care
- Develop workflows for follow-up/management
- Outreach to members with positive screening and/or diagnosis
- Utilize case management resources
Accessing Clinical Data for HEDIS Reporting

Learning from the experiences of AmeriHealth Caritas District of Columbia

- Began effort ~5 years ago with collection of supplemental data from EHRs of two large Federally Qualified Health Centers
- With focus on depression ECDS measures also explored getting clinical data from internal case management programs and health information exchanges
- Findings:
  - Focus on practices/exchanges where the bulk of plan membership is represented
  - Incorporate data exchange with practices into value-based payment arrangements
  - Transform manual data collection processes into automatic feeds
  - Provide relevant data back to clinicians (e.g., provider portal)

Listen to full podcast available here:
What’s Ahead for 2020

Collecting and Reporting Measures

• Reporting the behavioral health ECDS measures for HEDIS 2020

Quality Improvement Resources/Tools

• Develop guide for reporting ECDS measures:
  o Addressing barriers/challenges
  o Using data collection tools
  o Balancing & interim measures to track performance
• Identify best practices and resources for improving care
• Case studies describing successful changes
7 Principles
(per NCQA-CMS/ONC discussions)
Minimize Reporting Burden

- Use data generated in the course of planning, delivering, or paying for care
- Use common measures across programs
- Use common measure set for all providers
Strengthen Data’s Scope, Quality and Validity

- Use data from all suitable sources, not just payers and providers
- Independently verify data quality and validity to provide info on issues and gaps
- Strengthen knowledge generated using the most granular information possible
- Assess all sites and care types (in part by being person-centric)
Establish National Systems and Data Infrastructure

• Maximize health IT and computable data’s potential to help providers improve

• Create timely point-of-care decision support based on data from many sources

• Provide community- or region-level infrastructure and support
Ensure Clinical Soundness

- Align with clinical guidelines that advance quality measurement to a continuous cycle of information supporting QI
- Preserve meaningful comparison and quantifiable progress as guidelines evolve
- Aid improvement through continuous measurement, intervention, assessment
Ensure Fairness

- Avoid disadvantaging providers or patient populations
- Create a more inclusive QI approach that accommodates all people and groups
- Standardize risk adjustment for populations
- Determine population-level risk adjustment and stratification one measure at a time
- Make measurement methods, data sources and results transparent
6 Align with Societal Goals

- Select measures for impact on cost, quality, social determinants, equity and wellbeing

- Prioritize measures by anticipated benefit (value = resources used/projected benefit)

- Incentivize care for complex patients based on shared savings and improving health, not on benchmarks that complex patients cannot reach

- Separate patient characteristics from provider performance to avoid cherry-picking
Provide Timely and Targeted Analysis and Feedback

- Build benchmarks cautiously and include statistical results
- Provide fast, actionable information from CQMs
Digital Measurement Community
Digital Measurement Community

*Coming Soon!*

A **NEW** interactive platform for stakeholders engaged in the development and implementation of digital quality measures

To sign up, visit:

**www.ncqa.org/dmc**

or email

**digital.measures@ncqa.org**
A New Interactive Digital Measurement Community

Addressing Knowledge Barriers and Lack of Coordination Across Disciplines

The Digital Measurement Community will foster collaboration around three primary areas of high impact and value:

- **Sharing Best Practices**
  To promote quality and accountability in the field

- **Education**
  To facilitate the adoption of digital measures and related standards

- **Collaboration**
  Collaborating to build a vibrant digital measurement community
The Digital Quality Summit has grown quickly

Registrations 2017-2019
Who attends the Digital Quality Summit
Attendance by org type 2017-2019
Available for download

A resource for states from the 2019 Digital Quality Summit

ncqa.org/electronic-reporting/states
Save the date!
Digital Quality Summit 2020
Washington, DC
July 22-24
Questions
How to ask questions after today’s Q&A

my.ncqa.org
Log in with Single Sign In

My Questions

Ask a Question

PCS
Policy Program
Clarification Support

Submit Your Question
Use the Q&A chat window to ask a question

Q&A

Ask: All Panelists

Select a panelist in the Ask menu first and then type your question

Send