

MY2023 HEDIS Updates

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Learning Objective for Today's Training:

- Review new, revised, and retired measures for HEDIS MY2023
- Improving HEDIS measures using Electronic Clinical Data Systems and CPT – CAT II Codes
- Common barriers and challenges

New, Revised and Retired Measures

HEDIS MY 2023

Based on NCQA HEDIS Specifications released on August 1, 2022:

- ✓ HEDIS added 5 New Measures
- ✓ Retired 5 measures
- ✓ Substantially changed a measure and made small changes across multiple measures
- ✓ NCQA also continued to transition to Electronic Clinical Data Systems (ECDS) reporting.



New Measures MY2023

Measure Name	Details	Intent	LOB
Oral Evaluation, Dental Services (OED)	Medicaid Members, 0-21 years of age who received a comprehensive or periodic oral evaluation with a dental provider	To evaluate pediatric members are receiving dental care and to work towards improving access and utilization of dental evaluations.	MEDICAID
Topical Fluoride for Children (TFC)	Medicaid Members ages 1-4 years of age who received at least 2 fluoride varnish applications	To evaluate pediatric members are receiving fluoride varnish applications and to promote fluoride varnish	MEDICAID
Deprescribing of Benzodiazepines in Older Adults (DBO)	Medicare members 67 years and older who were dispensed benzodiazepines who achieved a ≥ 20% decrease reduction in benzodiazepine dose.	Assess the appropriate reduction of benzodiazepine used in the older adult population	MEDICARE
Emergency Department Visits for Hypoglycemia in Older Adults with Diabetes (EDH)	Medicare Members 67 years and older with diabetes (type 1 and 2), the risk adjusted ratio of observed-to-expected emergency department visits for hypoglycemia during the MY	Give emphasis to prevention of hypoglycemia and encourage avoidance of intensive glycemic control	MEDICARE
Social Need Screening and Intervention (SNS-E)	The percentage of members who were screened, using prespecified instruments, at least once during the measurement period for unmet food, housing and transportation needs, and received a corresponding intervention if they screened positive Screening Include: Food screening and intervention Housing screening and intervention Transportation screening and intervention	Advance Health Equity by encouraging assessment and address the food, housing and transportation needs of their patient populations. ALL LOBS	



Retired Measures

HEDIS Measure

Annual Dental Visit (ADV) – Replaced by Oral Evaluation, Dental Services (OED) and Topical Fluoride for Children (TFC) Measures for MY2023

Frequency of Selected Procedures (FSP) — RETIRED

Flu Vaccinations for Adults Ages 18-64 (FVA), Flu Vaccinations for Adults Ages 65 and Older (FVO), Pneumococcal Vaccination Status for Older Adults (PNU) — included in Adult Immunization Status Measure (AIS-E)

Breast Cancer Screening (BCS) – only the BCS-E measure will be reported



Changes to Existing HEDIS Measures

HEDIS Measure	Details
Adult Immunization Status (AIS-E)	 Pneumococcal numerator: Revised pneumococcal numerator to include any type of pneumococcal vaccine received between age 19 years and older end of MY Include the receipt of PCV20, PCV15, PCV13 or PPSV23
Childhood Immunization Status (CIS)	 Added "anaphylaxis to a vaccine" to select numerators Removed "seropositive test results" from numerator criteria

Electronic Clinical Data Systems (ECDS) and CPT-CAT II Codes

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Electronic Clinical Data Systems (ECDS)

ECDS Sources

- Electronic Health Record (EHR)/Patient Health Record (PHR)
- Health Information Exchange (HIE)
- Administrative claims (Claims processing systems) are considered a key data source for ECDS reporting.



Electronic Clinical Data Systems

NCQA ECDS Specification and Digital Measure

- The full HEDIS digital specifications may be purchased in the NCQA store via NCQA's Digital Measure pages: https://store.ncqa.org/hedis-quality-measurement/hedis-my-2023-dqms.html
- 16 ECDS measures are available for purchase
 - Select individual measures or bundle (all)
- Will not take the place of administrative data
 - o Traditional measures may be retired 2-3 years after implementation of ECDS
 - BCS retired in 2023.
 - COL expected to be retired in 2024

Example of EHR for ECDS Reporting

- Mammograms (BCS –E)
 - There are several ways to build this reporting out when you are not the billing provider
 - a. Attach the CPT (77065, 77066, 77067) code to the order, as the staff closes the order when the chart comes in then the code will drop, but not push out to an encounter
 - b. Standardize your data documentation under past medical history section of the EHR when the pdf comes through, or member reports the data to the clinic. Ensure your data structure has **SNOMED** or **LOINC** codes are attached once the documentation is notated.

LOINC	SNOMED
 24605-8: MG Breast Diagnostic 24606-6: MG Breast Screening 26175-0: MG Breast – bilateral screening 26176-8: MG Breast – left screening 26177-6: MG Breast – right screening 26347-5: MG Breast – left diagnostic 26348-3: MG Breast – right diagnostic 	 24623002: Screening mammography (procedure) 43204002: Bilateral mammography (procedure) 71651007: Mammography (procedure) 566571000119105: Mammography of right breast (procedure) 572701000119102: Mammography of left breast (procedure)



Coding Category II Codes

- CPT Category II Codes are supplemental tracking codes used for performance measurement and data collection related to quality and performance measurement to include HEDIS
 - Bill CPT- CAT II Codes:
 - Medicaid \$0.01 charge
 - Medicare \$0.01 charge
 - Ambetter \$0.00 charge



Coding - CPT-CAT II CODES by Measure

Measure	CPT II Codes	Measure	CPT II Codes
A1c (HBD) – Medical (APM, SMD, SSD) – BH	3046F value greater than 9 3051F value 7.0-7.9 3052F value 8.0-9.0 3044F value 6.9 or less	Eye Exam (EED)	2022F, 2024F, 2026F, 2023F, 2025F, 2023F
Blood Pressure (CBP, BPD) * Diastolic and Systolic – need both components billed	Diastolic 3078F value < 80 3079F value 80-89 3080F value ≥ 90 Systolic 3074F value 129 or less 3075F value 130-139 3077F value ≥ 140	Medication Reconciliation (TRC- MRP)	 * This requires a reconciliation of medications the member was discharged with to the medication list member was taking before hospitalization (outpatient). * Recommend completing within 3 days of discharge to prevent complications/readmissions
Advance Care Planning (ACP)	1123F, 1124F, 1157F, 1158F	LDL-C results (APM, SMD, SMC) — BH	3048F, 3049F, 3050F
Care for Older Adults – Functional Status Assessment (COA –FS)	1170F	Care for Older Adults – Medication Assessment/Review (COA-MR)	1160F * This is different then reconciliation post discharge. It is a review of medications the member is taking at time of face-to-face/telehealth visit
Care for Older Adults – Pain Assessment (COA –PA)	1125F, 1126F	Prenatal & Postpartum (PPC)	Prenatal: 0500F, 0501F, 0502F Postpartum: 0503F



Common Barriers and Challenges

Barriers and Challenges We Face

It takes a village to move the needle. We are faced with barriers and challenges from both our member and provider community.





In Summary

- Prepare for new and revised HEDIS measures
- Identify barriers and challenges and implement an action plan for improvement
 - Take steps to improve clinical oversight of chronic disease management
- Build out your systems
 - Implement CPT CAT II Codes
 - Include ECDS reporting from EHR
- Plan for the future of Electronic Clinical Data Reporting

Questions ?

Resource Links

CPTII Codes Billing for Medicaid

https://www.pshpgeorgia.com/content/dam/centene/peachstate/pdfs/PSHP-GA-CAID-CPTII-bill-22.pdf

HEDIS Quick Reference Guide (MY2023)

https://www.pshpgeorgia.com/content/dam/centene/peachstate/pdfs/PSHP-GA-HEDIS-QRG-2023.pdf

Breast Cancer Screening (BCS- E) – Provider Tip Sheet

https://www.pshpgeorgia.com/content/dam/centene/peachstate/pdfs/PshpPrvdrBrestCancrScren23.pdf

