

Blue Shield Report

A Newsletter for
Professional Providers and
their Staff Members

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Questions:

Contact your Professional Relations Representative, or the Professional Relations Hotline in Topeka at 785-291-4135 or 1-800-432-3587.

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What Is HEDIS?

Developed by the National Committee on Quality Assurance (NCQA), HEDIS (Health Plan Employer Data and Information Set) is a set of standardized performance measures comparing managed care plans to one another on a variety of attributes other than just premium price. HEDIS results provide a guide for comparing health care quality strengths between participating Plans. HEDIS includes measures on effectiveness of care, utilization of services, and member perceptions of health care and the health plan as measured by the Consumer Assessment of Health Plan Study (CAHPS) survey.



Blue Cross and Blue Shield of Kansas (BCBSKS) has voluntarily participated in HEDIS, reporting results on its various managed care products since 1994. In addition, the HEDIS data collection and reporting process undergoes an annual audit by an outside licensed HEDIS Compliance Audit firm. Premier Blue uses HEDIS results to measure performance on several key quality indicators as well as the development of strategies for improving the quality of care to its members.

What To Expect For HEDIS 2003



In order to assure the accuracy and overall benefits of the HEDIS process, appropriate

and meticulous data collection is required. Data collection for each HEDIS measure is obtained by either an administrative method in which claims information is the sole source of data used, or a hybrid method, in which information is collected from the BCBSKS claims database and from randomly selected patient medical records. Licensed, professional nurses perform all reviews.

Within the next few weeks your office may be contacted to schedule an on-site review or you may receive a request to copy and submit records to Premier Blue for the purpose of the HEDIS

study. If an on-site review is scheduled, BCBSKS nurses may ask to use a copier in your office to copy portions of medical records for auditing purposes.

We understand that the data collection process requires significant time and resources on everyone's part in order to obtain the required information. Premier Blue truly appreciates your contractual consent to copy and supply records at no charge for this important quality improvement study.

Due to the extensive number of charts that must be reviewed and the short timeframe in which Premier Blue has to compile this information, cooperation and timely response to these medical review requests is critical.

Please note that the charts reviewed as part of the HEDIS data collection will not have an affect on any other type of review in which you may be involved.

What Are The HEDIS Measurements?

Below is a brief description of each measure for which your medical records may have been selected as part of this year's HEDIS data collection. (Some record sample eligibility parameters are not discussed, e.g. enrollment and continuous coverage requirements).

Comprehensive Diabetes – Seeks to identify the percentage of members 18 through 75 years old, who are diagnosed with Type 1 or Type 2 diabetes and have received the following services and subsequent lab values within the specified ranges: hemoglobin A1c (HbA1c) tested, HbA1c poorly controlled (>9.5%), lipid profile performed, lipids controlled (LDL <130 mg/dL), eye exam performed, and kidney disease (nephropathy) monitored.

Childhood Immunization Status - Identifies the percentage of children who turned two years old during 2002 that have received the following immunizations before their second birthday: four DTaP/DT, three IPV, one MMR, three H influenza type B, three hepatitis B, and one chicken pox vaccine.

Adolescent Immunization Status - Identifies the percentage of adolescents who turned thirteen years old during 2002 and received a second dose of MMR, three doses of hepatitis B, and one dose of VZV by the adolescent's thirteenth birthday.

Controlling High Blood Pressure - Assesses if blood pressure (BP) was controlled among adults age 46-85 with diagnosed hypertension (HTN). Medical record review is conducted to confirm the diagnosis of HTN and assess BP control during the measurement year.

Prenatal and Postpartum – Identifies the percentage of women who delivered a live birth between November 6, 2001, and November 5, 2002. The measure assesses the following facets of prenatal and postpartum care:

- **Timeliness of Prenatal Care** – The percentage of pregnant women who received a prenatal care visit in the first trimester or within 42 days of enrollment in the health plan.
- **Postpartum Care** – The percentage of women who had a postpartum visit on or between 21 and 56 days of delivery.

HEDIS 2002 Results

The following are the most recent HEDIS 2002 results for Premier Blue, which reflect results for calendar year 2001. They are provided for your information since we are committed to communicating these results to plan providers each year.

The results for Premier Blue are shown in comparison to the national average for HMOs that were audited and reported their results, as well as the average for all HMOs that include Kansas in their service areas. Since it is not required for plans to report HEDIS, these results reflect only those plans who collect and report their HEDIS scores.

As illustrated in the table, Premier Blue compares favorably with the national averages for most of these measures. Shaded results indicate those which are different from the national average by a statistically significant margin.

	Premier Blue	National HMO Average	Kansas HMO Average
Screening Mammography	79.0%	74.8%	73.1%
Cervical Cancer Screening	83.7%	77.7%	80.2%
Chlamydia Screening (Combined Rate)	24.7%	25.3%	20.5%
Controlling Hypertension	52.4%	54.5%	
Cholesterol Screening After Acute Cardiac Event			
Lipid Profile	73.9%	76.0%	79.0%
Lipid Control	56.9%	68.9%	56.3%
Comprehensive Diabetes			
HbA1c Screening	88.0%	81.0%	84.1%
Poor HbA1c Control*	29.0%	38.4%	31.2%
Eye Exam	72.4%	51.4%	47.1%
Lipid Profile	81.8%	80.6%	78.8%
Lipid Control	55.2%	49.9%	51.3%
Nephropathy Screening	63.4%	48.0%	51.1%
Appropriate Asthma Medications (Combined Rate)	69.0%	64.7%	65.8%
Ambulatory Follow-Up After Inpatient Mental Health Hospitalization	79.3%	74.7%	73.8%
Prenatal Care	81.9%	81.5%	84.2%
Check-Ups After Delivery	80.9%	74.2%	81.2%

*This is a "negative" measure. Lower scores are better.

CAHPS 2002 Results

A member's perception of their health plan is a key indicator of the quality of care and services being provided. Therefore, Premier Blue annually conducts the CAHPS (Consumer Assessment of Health Plan Survey) sponsored by NCQA.

CAHPS is a set of standardized questions that assess patient satisfaction with their experience of care. The results are based on a randomly selected sample of members from Premier Blue and satisfaction with their experience of care is summarized through ratings and composite scores. The overall goal of the CAHPS survey is to effectively and efficiently obtain information from the person receiving care.



Continual improvements in services and programs are a major part of what Premier Blue strives for as a managed care organization. Once again, Premier Blue can illustrate the continual quality of its care, services, and programs by comparing itself to national and Kansas HMO averages. As illustrated in the table below, Premier Blue compares favorably with the national and Kansas HMO averages on most of these measures. The shaded areas below represent Premier Blue results that are different by a statistically significant margin from the national average.

	Premier Blue	National HMO Average	Kansas HMO Average
Rating of Healthcare			
Getting Care Quickly (% "Always/Usually")	82.26%	78.88%	77.77%
Getting Needed Care (% "Not a Problem")	77.54%	75.33%	77.52%
Courteous and Helpful Office Staff (% "Always/Usually")	91.57%	91.45%	89.48%
How Well Doctors Communicate (% "Always/Usually")	89.97%	89.87%	88.36%
Rating of Specialist Seen Most Often (% 8, 9 or 10)	65.50%	74.96%	71.76%
Rating of Personal Physician or Nurse (% 8, 9 or 10)	71.72%	74.02%	70.62%
Rating of All Healthcare (% 8, 9 or 10)	71.47%	71.77%	67.68%
Rating of Health Plan			
Claims Processing (% "Always/Usually")	92.00%	84.44%	84.89%
Customer Service (% "Not a Problem")	66.93%	68.94%	63.63%
Rating of Health Plan (% 8, 9 or 10)	67.05%	62.33%	60.81%

HEDIS and HIPAA

Questions regarding patient consent for HEDIS information have arisen in relation to HIPAA (Health Insurance Portability and Accountability Act). Patient consent for record release is not required under HIPAA privacy regulations for the HEDIS data collection process.

According to the HIPAA Privacy Rule (45 CFR 160, 164) as amended August 14, 2002, health care providers can disclose protected health information (PHI) to health plans for the following types of health care operations:

- Quality assurance and quality improvement activities
- Accreditation activities (e.g., HEDIS data collection)
- Case management, care coordination and related functions
- Disease management
- Protocol development
- Credentialing
- Provider or health plan performance evaluation
- Training
- Certification
- Licensing

Providers are permitted by HIPAA to disclose PHI to health plans for the above purposes **without authorization from the patient** when both the provider and health plan have or had a relationship with the patient and the information relates to the relationship (45 CFR 164.506(c)(4)).

The Department of Health and Human Services explains in the Preamble to the Privacy Rule that “the final Rule would permit a health care provider to disclose protected health information to a health plan for HEDIS purposes, even if the individual no longer was covered by the health plan, provided that the period for which information is needed overlaps with the period for which the individual was enrolled in the health plan” (Fed. Reg. 53217).

For any additional guidance about providing medical information for the HEDIS data collection process, please see your Premier Blue Policy Memo, Section V: Health Plan Employer Data and Information Set (HEDIS), page 13.