

Blue Shield Report

A Newsletter for
Professional Providers and
their Staff Members

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BCBSKS adjusting QBRP

Blue Cross and Blue Shield of Kansas (BCBSKS) received feedback from providers regarding the S-4-14 newsletter detailing the Quality-Based Reimbursement Program (QBRP).

BCBSKS revisited the goals to be accomplished with QBRP, and adjustments to the Kansas Health Information Exchange (KHIE) query count for the first quarter measurement period for 2015 have been made.

QBRP is designed to promote improved quality of patient care and better outcomes. These changes are in line with the goals of QBRP.

The changes for 2015 are detailed on Page 2.

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OUR WEB ADDRESS:
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Questions: Contact your professional relations representative or provider network services in Topeka at (785) 291-4135 or (800) 432-3587.

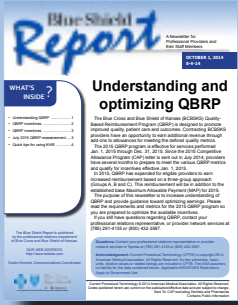
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BCBSKS hears lack of patient data concerns



Understanding QBRP

Wanting more help with understanding and optimizing QBRP?

Checkout a newsletter dedicated to QBRP at: <http://www.bcbsks.com/CustomerService/Providers/Publications/professional/newsletters/2014/S-4-14.pdf>.

As a reminder, the above newsletter does not include the changes made to the KHIE incentive detailed in this newsletter.

Qualify for KHIE incentive

The following is a list of incentive dates and the corresponding qualifying periods.

Incentive Begins	Qualifying Period
1/1/15	8/1/14-10/31/14
1/1/15 (New)	9/1/14-11/30/14
3/1/15	11/1/14-1/31/15
6/1/15	2/1/15-4/30/15
9/1/15	5/1/15-7/31/15
12/1/15	8/1/15-10/31/15

Another concern expressed by providers and users of the Kansas Health Information Exchange (KHIE) was the lack of patient data for many patients when an inquiry is made.

BCBSKS had discussions with providers and leaders from the health information networks on how to best address the lack of patient data in the exchange at this time.

Providers shared that more office

clinical notes and diagnostic test results are needed in the system to receive value when making a query for information. The challenge is getting providers to load the information to the system. Consequently, a request was made to allow in 2015 the QBRP incentive to be earned for either using the system (queries) or sharing clinical data with the system.

Current KHIE incentive language

Use the Kansas Health Information Exchange (KHIE) through a Kansas Department of Health and Environment-approved Health Information Network.

Each provider must inquire (search for patient medical information) to the approved KHIE network at least 60 times per quarter to earn this incentive (see table below for qualifying quarters).

Provider groups with EMR systems that only report by Tax ID must meet the aggregate of 60 inquiries multiplied by the number of prescribing providers in the group. — 2.5 percent, applies to all eligible CPT codes

New KHIE incentive language

Use the Kansas Health Information Exchange (KHIE) through a Kansas Department of Health and Environment-approved Health Information Network.

Each provider must inquire (search for patient medical information) to the approved KHIE network at least 60 times per quarter, **or establish a direct connection with HL7 data feeds that supply the Kansas Minimum Data Set* to the approved health information network. A summary of care document often called a CCD/CCDA (Continuity of Care Document) is acceptable in 2015** to earn this incentive (see table at left for qualifying quarters).

Provider groups with EMR systems that only report by Tax ID must meet the aggregate of 60 inquiries multiplied by the number of prescribing providers in the group. — 2.5 percent, applies to all eligible CPT codes

***Note** — The Minimum Data Set includes the source for the information, patient demographic information, medication and allergy lists, problem list, diagnostic test results, immunizations and procedures.

BCBSKS acknowledges that not all data will be available from all providers and not all EHR systems are capable of transporting the Minimum Data Set. However, providers should make a good faith effort to share all data possible. If data is not sent to an approved health information network then a minimum of 15 months data must be available via a query from a Participant to receive the QBRP KHIE incentive.

2015 KHIE incentive changes

The query count for the first (Aug. 1 to Oct. 31) measurement period is being changed to 30 inquiries as the qualifying measure instead of 60 inquiries. A provider or provider group may qualify for the KHIE incentive if they have a direct connection as described on Page 2, or by meeting the query minimum. If a provider has less than 30 queries during the first measuring period, that provider will not qualify for the incentive beginning Jan. 1, 2015. If at least 30 but less than 60 queries, the provider qualifies beginning Jan. 1, 2015 through Feb. 28, 2015. If more than 60 queries are documented, the provider is qualified from Jan. 1, 2015 through June 30, 2015.

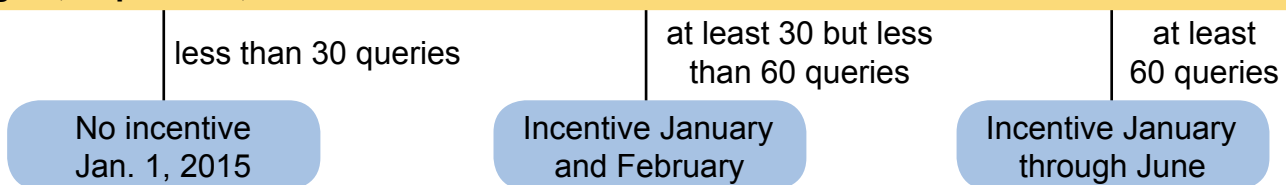
This change addresses the provider concerns of learning the measurement period late and losing a 30-day opportunity to comply.

One additional measuring period is being added from Sept. 1 through Nov. 30 to qualify beginning Jan. 1, 2015 for those providers that do not qualify by having a direct connection or by meeting the query threshold in the first measuring period. For the measuring period from Sept. 1, 2014 through Nov. 30, 2014, if a provider has less than 30 queries, that provider will not qualify for the incentive beginning Jan. 1, 2015. If at least 30 but less than 60 queries, the provider qualifies beginning

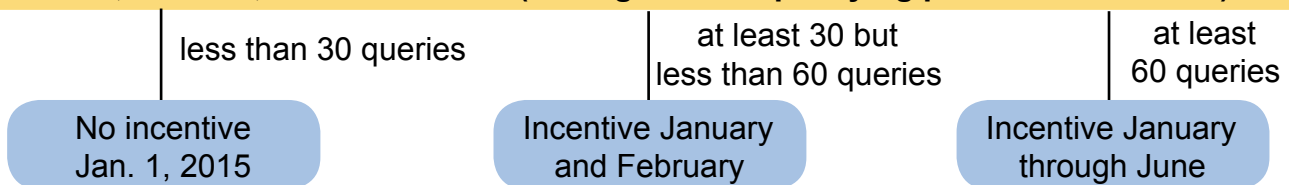
Jan. 1, 2015 through Feb. 28, 2015. If more than 60 queries are documented, the provider is qualified from Jan. 1, 2015 to June 30, 2015.

The Nov. 1, 2014 through Jan. 31, 2015 measuring period remains unchanged. If a provider has not yet qualified, or previously qualified by having at least 30 but less than 60 queries, and has less than 60 queries during this measuring period, the provider will not qualify to receive the KHIE incentive beginning March 1, 2015. If a provider has not yet qualified and has 60 or more queries, the provider has qualified to receive the incentive from March 1, 2015 through June 30, 2015.

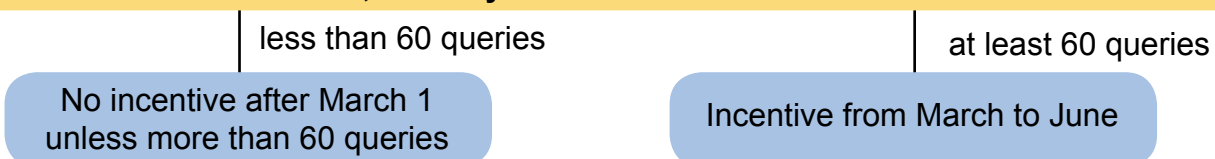
1. August, September, October 2014



2. September, October, November 2014 (adding second qualifying period for incentive)



3. November and December 2014, January 2015



OR

4. If HL7 connection or CCD in 2015, the query requirement will be waived but still encouraged to take full advantage of the HIE.

Quick tips: Using KHIE for Group B providers

Prescribing providers need to log in and query KHIE — The prescribing provider, not a nurse or clerk, must log in and query an exchange to count as an inquiry.

Group vs. Individual reporting based on EMR — Provider groups with EMRs that only report by Tax ID must meet the aggregated of 60 inquiries multiplied by the number of prescribing providers in the group. If the query to the exchange is performed within the EMR or if a group **requests in advance** to report in aggregate, all patient queries of KHIE will be counted and reported to BCBSKS in aggregate.

Groups may choose reporting by the aggregate method — The group must request this method in advance. Once this method has been requested, group reporting will be in effect through 2015.

Once aggregate reporting has been requested, a delegated staff member may log in using their own name and password. The query will be attributed to the prescribing provider group in order to achieve the query threshold (number of prescribing providers multiplied by 60), and either all providers will qualify or none will qualify.

Aggregate requests dates

Groups wanting to report by the aggregate method must submit requests to BCBSKS in writing according to the following table:

Request for Aggregate Reporting by:	Aggregate Incentive Reporting begins:
Nov. 1, 2014	Jan. 1, 2015
Feb. 1, 2015	March 1, 2015
May 1, 2015	June 1, 2015
Aug. 1, 2015	Sept. 1, 2015
Nov. 1, 2015	Dec. 1, 2015

Notifying BCBSKS if wanting reporting at group level rather than individual — Send your request in an email to 2015.QBRP.Confirmations@bcbsks.com. Include group name, tax ID and billing NPI. All prescribing providers within the group who also have established user names with their KHIE will be qualified to receive the QBRP incentive if the group meets the required number of queries.

Patient queries do not have to be BCBSKS members — All patient queries qualify. The intent of the incentive is to promote use of the exchange.

A query is a query, regardless of whether information is available — A query still counts toward the incentive even when there is no information.

Multiple queries on the same patient are acceptable — Patient information may change, and querying the same patient multiple times is allowed.

The patient does not have to be a hospital or clinic patient — Any patient is eligible as long as the provider has a professional relationship with the patient and reason to query.

Your rep is here to help — For help with KHIE or QBRP, contact your professional relations representative or provider network services in Topeka at (785) 291-4135 or (800) 432-3587.