

WHAT IS HEDIS AND WHY IS IT IMPORTANT TO ME?

What is HEDIS?

HEDIS (Healthcare Effectiveness Data Information Set) is a tool designed by NCQA (National Committee for Quality Assurance) to measure performance on important dimensions of care and service, and is used by more than 90% of America's health plans. NCQA measures Preventive Services and Physical and Mental Health conditions. These measurements are rated and used by health plans to evaluate their performance, as well as, performance against that of other health plans and national benchmarks. HEDIS rates reflect how together, the health plan and providers are providing good care to improve the health of individuals, families, and communities.

Who needs this information? Minnesota Community Measurement and more!

Minnesota Community Measurement publicly reports clinic, medical group, and hospital rate. The accuracy and completeness of our rates are not just a reflection of how we performed as a health plan, but you as a provider. In addition to Minnesota Community Measurement, MDH (Minnesota Department of Health) and CMS (Center for Medicare and Medicaid Services) contractually require health plans to report a subset of measures for their members.

Your Obligation and Access to PHI (Protected Health Information)

South Country conducts a required HEDIS audit and to do this, accurate information must be collected **March-May annually** by an abstraction vendor. This contracted vendor is a "Business Associate" under HIPAA and is ethically and legally bound to protect, preserve, and maintain the confidentiality of any PHI gathered from medical records at provider locations. The required HEDIS collection of data takes place annually from March to June. You, as a provider, have a contractual obligation to South Country to allow this to take place, using the best possible method, to create the best results. NCQA has many regulations, requirements, and technical specifications for HEDIS audits. Some information can be obtained by medical and pharmacy claims. However, most must be obtained from medical record reviews at provider locations.

The Process

A required number of members are randomly selected through our claims system, which identifies a member as having a condition related to those noted above. Our claims system is then used to identify the provider(s) that see these members. Trained abstractors collect the required information from our providers. These abstractors make appointments with individual or central locations. The preferred method of gathering information for the required HEDIS audit involves the abstractor going to these locations and having full access to members' information, ability to copy pages and scan them into their portable devices/laptop computers, and finish in a timely manner. The ability to copy and scan records is very important as South Country must review the work for accuracy. If the abstractor simply retrieves information and records it, South Country cannot review the accuracy of the information collected. This review of accuracy is a NCQA required step of the audit.

How can I help?

South Country would like your assistance and cooperation in obtaining your current medical records contact name, phone number and fax number, and most importantly, your process for abstraction this coming HEDIS season. Each year there are misunderstandings about what HEDIS is, why we need so much information, what can be obtained and how, if there is a central location for abstraction, if there is an EMR system, etc.

Please contact Lori Nelson, Clinical Performance Improvement Coordinator, at 507-431-6597 or toll free at 866-722-7770 or at lnelson@mnscha.org with these updates and/or questions or concerns.

