Select Health

Provider Reference Manual

Select Health Quality Provider Program

Nephrology
September 2023

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Quality Data Correction (QDC) Tool Instructions: Submitting a Correction

The QDC Data Correction Tool can be accessed via the **Quality Provider Program (QPP) Report Hub**. Use this tool to enter submissions and view approvals/submissions.

From the QPP Report Hub, select the Quality Data Corrections Tool.

Quality Provider Program
Report Hub

Report	Description	
2023 QPP Clinical Summary	Compilation of success metrics related to measures in 2023	🔗
2023 QPP Gaps in Care List	Detailed list of Gaps in Care related to measures in 2023	🔗
2023 QPP Gaps in Care for Download	Direct link to the Download tab on the Gaps in Care report for 2023	🔗
2022 Medical Home Clinical Summary	Compilation of success metrics related to measures in 2022	🔗
2021 Medical Home Clinical Summary	Compilation of success metrics related to measures in 2021	🔗
2020 Medical Home Clinical Summary	Compilation of success metrics related to measures in 2020	🔗
Hospital Census	List of members admitted to the hospital or ED in the last 7 days	🔗
Case & Disease Management Patient List	List of members with active Case or Disease Management Cases	🔗
Gaps in Care Form	Printable form for clinics to identify gaps in care	🔗
Medicare Advantage STARS : Provider	5 HEDIS and 4 PQA Pharmacy/CMS measure performance data available by provider	🔗
Quality Data Corrections Tool	Submit a correction for Medical Home data	🌐

Once you log in, the report will default to the "Submissions" screen.

Note the "Enter Another Correction" button at top right.

QDC Tool Instructions: Submitting a Correction, Continued

On the screen that opens, enter the EMPI number or Member ID number. Once you enter that number, use the tab or enter keys to auto-populate the patient information.

Enter the provider's last name. A drop-down list will display. The field will begin to auto-populate once you start typing the last name.

NOTE: You MUST select from the drop-down options that appear below this field for the correction to be submitted.

QDC Tool Instructions: Submitting a Correction, Continued

NOTE: Refer to the Allowable Corrections Guide (beginning on **page 9**) for instruction and options.

Select the Category, Measure, and Component from the drop-down lists that appear when you click on the arrow at right of each field.

QDC Tool Instructions: Submitting a Correction, Continued

Upload supporting documentation and add any necessary comments.

NOTE: The only formats supported are .xls, .xlsx, .pdf, and .png file formats.

You can add multiple attachments; however, they must have different file names. If you upload a document with the same name, you will see an error message and will be able to replace the existing file or cancel the upload.

Select the "trash" button to delete an incorrectly uploaded document. You will then have the option to delete or cancel.

QDC Tool Instructions: Submitting a Correction, Continued

Click on "Review & Submit" to have an opportunity to review a summary of your submission.

NOTE: You can "Reset" at any point to start over.

Once you have completed and reviewed all the fields, click on the "Submit" button.

QDC Tool Instructions: Submitting a Correction, Continued

To view the status of a correction you have entered, view the "Submissions" page.

To view more detail, select the "eye" icon next to the relevant submission.

The "View Submissions" window will display the details, including the status and reasons for any rejection/comments from the reviewer.

TIPS FOR SUBMITTING CORRECTIONS:

- For rejected corrections, providers may have the option to resubmit the correction. A majority of the selections will be kept except for the attachments, result date, and result value.

- When resubmitting, consider reopening and downloading the patient file so that you won't have to dig through files looking for the patient record.

- Corrections that have been resubmitted and accepted will still appear as a rejection. Do not resubmit the correction twice if the newly submitted correction was approved.

Allowable Corrections Guide

GENERAL GUIDANCE

- Include a copy of EMR note, progress note, or screen print signed by MA/RN/MD including member name, DOB, and provider.
- Submit corrections **using [this online tool](#).**

- Wait 6 weeks from the date of service to enter corrections to allow for claim lag.
- Don't attach multiple patient records to a single correction

Kidney Health Evaluation (KED) Adult Corrections

Allowable Correction	Submission Correction Process				Additional Required Documentation (see "General Guidance" for Standard Requirements)	Notes for Entering Corrections
	Category	Measure	Component	Correction Type		
Unaccounted for estimated glomerular filtration rate (eGFR)	Chronic Disease	Kidney Health Evaluation for Patients with Diabetes	KED Numerator	eGFR	Date of test and result	**Do not use** the nephropathy option under Comprehensive Diabetes Care.
Unaccounted for albumin-creatinine ratio (uACR)				Urine Creatinine		**Need to enter all three components separately.** Member has to have all three components to be compliant. Most often, they are not compliant because they don't have the two urine tests entered separately.
				Urine Albumin		

Attribution and Demographics

Correction Type	Allowable Correction	Submission Correction Process				Required Documentation	Notes for Entering Corrections
		Category	Measure	Component	Correction Type		
Not My Patient	Changed provider, patient moved, or patient discharged	Member Detail	Attribution	Member Provider Assignment	Provider Move | Member Move | Discharge	Documentation from EMR stating patient request records sent to new provider or note showing patient has been notified they have been discharged from the clinic.	If a patient is only seen for sick visit(s) and immunization(s), they will not be removed from attribution. Not-my-patient corrections are due no later than December 31st of the measurement year.
Date of Birth	Birthday is incorrect in Quality Provider Program Gaps in Care for Download.		Demographics	Date of Birth	Member Date of Birth	Documentation from EMR or HIPAA consent form signed by patient requesting change of DOB.	**Select Health will research claims data and approve if acceptable.**
Member Sex	Patient is included in wrong measure based on sex (e.g., patien t is male, but included for breast cancer screening.)			Member Sex	Member Sex	Documentation from EMR of patient's birth sex.	**Select Health will research claims data and approve if acceptable. List measure exclusion if applicable.**

No Allowable Corrections for Compliance

Diabetes & Hypertension: Blood Pressure Control (BPD / CPB)	The only way for a patient to be compliant in QPP measure is a claim with the accepted blood pressure billing codes (Cat II codes: 3074F, 3075F, 3077F, 3078F, 3079F, 3080F).

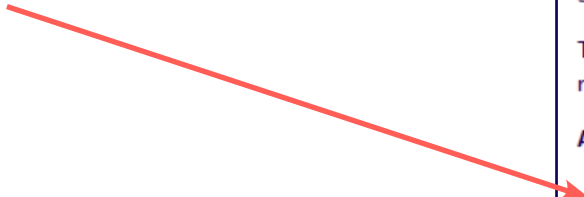# Pulling Reports from the Quality Provider Program Clinical Reports Hub

This Report Hub can be accessed from the **QPP area** of the Select Health provider website (see image at right).

This section covers two frequently accessed reports available at this location:

1 Quality Provider Program Gaps in Care for Download
2 Quality Provider Program Clinical Summary

The instructions that follow will guide you through pulling a patient gaps list as well as pulling provider rates once you access the Report Hub.

Access your reports here.

The Select Health® Quality Provider Program

The Quality Provider Program is an outpatient care delivery model that offers patients a collaborative relationship with a team of providers. This team-based healthcare delivery model is led by a healthcare practitioner and provides comprehensive and continuous patient care for enhancing health outcomes and patient satisfaction.

New programs for 2023 encompass women's health, behavioral health, and nephrology specialties, currently available for Utah providers. For Eastern Idaho and Nevada primary care providers, Select Health Quality Plus Provider Program is available in conjunction with risk management.

Key Program Benefits Include:

- An extended disease management and preventive care focus
- Increased patient involvement in healthcare decisions
- Enhanced care processes through information sharing
- Improved quality of care and patient safety
- Prevention of unnecessary tests and procedures

The Quality Provider Program is an NCQA Partner in Quality -- a program that recognizes organizations providing financial incentives or support services for NCQA - recognized practices. Learn more.

To support clinics in their transformation to a patient-centered medical home care delivery model, Select Health provides clinics with enhanced reporting, a consultant resource, and the opportunity to earn quarterly performance payouts with an annual bonus structure.

Already participating?

- Access your clinic reports (secure login required).
- Access Quality Ribbon Transparency (QRT) Program information: Frequently Asked Questions, Quality Transparency Provider Report Example.

NOTE: See **page 19** for Excel formatting tips customized for working with Gaps in Care data.

Select Health

How to Pull a Patient Gaps List from the Quality Provider Program Gaps in Care for Download Report

Patient gaps data allows you to track current member gaps for different populations, measures, specialties, and more. From the QPP Report Hub link, follow the steps below to filter and download this information:

Access the Gaps in Care Report

Choose the current year's "Gaps in Care for Download" link.

Quality Provider Program Report Hub

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Filter the Data for Your Clinic

Click on the "X" to hide the menu.

Under the "DOWNLOAD" tab, there is a green menu that lets you select the filters you want. The arrows on the right of each filter type open options for narrowing your search.
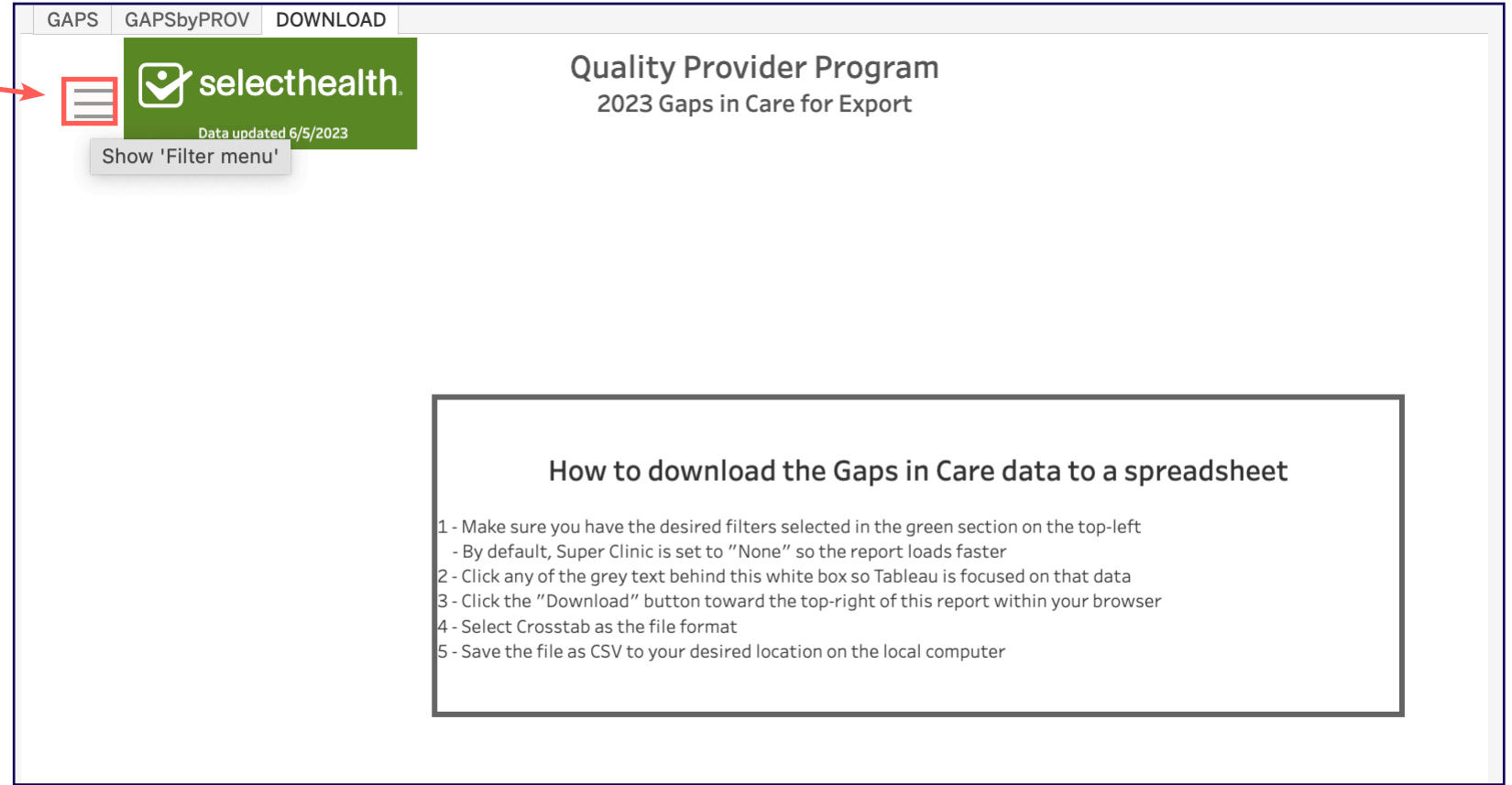
When you have selected the filters in each category that you want, be sure to click on "Apply."

How to download the Gaps in Care data to a spreadsheet

1 - Make sure you have the desired filters selected in the green section on the top-left
  - By default, Super Clinic is set to "None" so the report loads faster
2 - Click any of the grey text behind this white box so Tableau is focused on that data
3 - Click the "Download" button toward the top-right of this report within your browser
4 - Select Crosstab as the file format
5 - Save the file as CSV to your desired location on the local computer

You can click here to have the green filter drop-down menu reappear. This is helpful when you want to look at the data selected before downloading it.

If you want to view a gaps chart, move the filter out of the way to ease viewing.

GAPS   GAPSbyPROV   **DOWNLOAD**

selecthealth.
Data updated 6/5/2023

Show 'Filter menu'

Quality Provider Program
2023 Gaps in Care for Export

How to download the Gaps in Care data to a spreadsheet

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   - By default, Super Clinic is set to "None" so the report loads faster
2 - Click any of the grey text behind this white box so Tableau is focused on that data
3 - Click the "Download" button toward the top-right of this report within your browser
4 - Select Crosstab as the file format
5 - Save the file as CSV to your desired location on the local computer

Export the Data

Click on the "DOWNLOAD" button at upper right to access the filtered data.

Select "Crosstab" under file format.

Select "GapsinCare."

To make sure you capture all relevant data, select "CSV" and then "Download."

NOTE: Save the CSV file as an Excel workbook to allow formatting for readability and usability. Otherwise, your CSV file will look like this.:

How to Pull Provider Rates from the Clinical Summary Report

Provider rates data allows you to track current clinic rates and number of member opportunities as well as to view a breakdown by individual providers within your clinic. From the Quality Provider Program Report Hub link, follow the steps below:
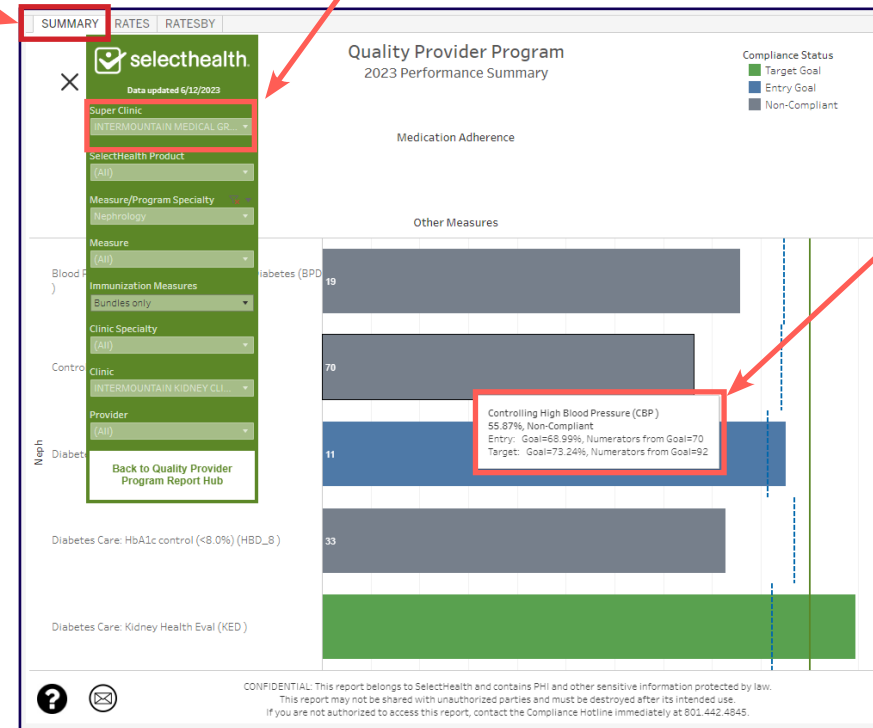
Access Clinic-Specific Data

Select the applicable year's "Clinical Summary."

The "Summary" tab offers filters for refining your data search.

Select your "Super Clinic" and ensure that the data populates in the window behind the Summary tab drop down.

The screen will then display your current data rates and the number of members needed to meet clinic entry and stretch goals. For example, this clinic has a current rate of 55.87% and needs 70 members to meet entry (68.99%).

NOTE: QPP Payment is driven by Gaps Closure. Entry and Stretch Goals are presented for benchmarking.

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View Provider Breakdown

Access the "RATESBY" tab to see a breakdown by provider.

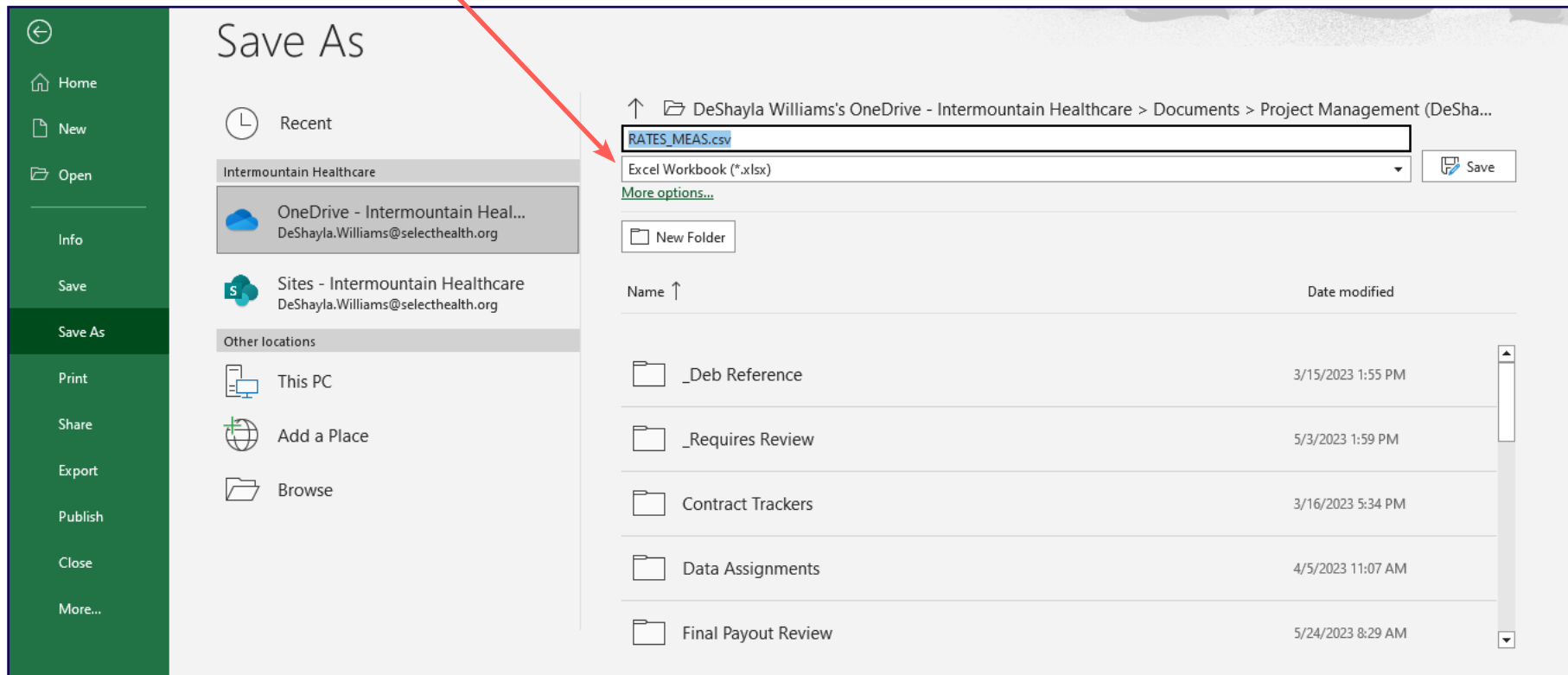## Download Provider Rate Data

A pop-up will appear in the middle of the screen with file format options. Select "Crosstab."

When the "Download Crosstab" window opens, select "MEAS_RATES."

To make sure you capture all applicable data, select "CSV" as the format.

Click "Download."

Once you export report data as a CSV file, save the file as an Excel Workbook to format for readability and ease of use.

2023 Quality Provider Program Nephrology Measures: Quick Guide

(For more details, refer to the Quality Provider Program 2023 Quality Measures: Nephrology booklet.)

Measure/Abbr.	Who's Included? (Denominator)	What's Needed? (Numerator)	How Often?	Exclusion(s)**	Helpful Codes
Diabetes: A1c in Control/HBD	Members (ages 18 to 75) with a diagnosis of diabetes through medical or pharmacy claims	Hemoglobin A1c < 8%	Annual, most recent A1c used for measurement	• Gestational or steroid-induced diabetes • PCOS w/o diagnosis of diabetes	A1c Cat II codes: • **Compliant**: 3044F <7; 3051F 7–8 • **Non-compliant**: 3052F 8–9; 3046F >9
Diabetes: Eye Exam/EED		Retinal eye exam performed by an eye care professional	• Annual if positive • Every 2 years if negative		• Eye exam inclusion Cat II codes: 2022F; 2023F • Low risk of retinopathy: 3072F
Diabetes: Blood Pressure Control/BPD		Blood pressure <140/90 mm Hg	Annual, most recent BP used for measurement	• ESRD • Dialysis in measurement year • Kidney transplant • Nephrectomy • Pregnancy • Nonacute inpatient admission	BP Cat II codes: • SBP <130 mm Hg: 3074F • SBP 130–139 mm Hg: 3075F • SBP ≥140 mm Hg: 3077F • DBP <80 mm Hg: 3078F • DBP 80–89 mm Hg: 3079F • DBP ≥90 mm Hg: 3080F
Controlling High Blood Pressure/CBP	Members (ages 18–85) with a diagnosis of hypertension through medical or pharmacy claims				
Diabetes: Kidney Health Evaluation/KED	Members (ages 18–85) with a diagnosis of diabetes through medical or pharmacy claims	eGFR and uACR (or urine creatinine and albumin test within 4 days of each other)	Annual	• ESRD • Dialysis in measurement year	• **eGFR codes:** 80047, 80048, 80050, 80053, 80069, 82565 • **uACR codes:** 82043, 82570
Readmission Rates	Members (ages ≥18) with an acute inpatient or observation stay discharge	Acute readmission followed by an unplanned acute readmission with a diabetes diagnosis within 30 days of the discharge date	After each discharge	Hospital stays for the following reasons: • If the direct transfer's discharge date occurs after December 1 of the measurement year • Admission date is the same as the index discharge date • Member died during the stay • Diagnosis of pregnancy or a condition originating in the perinatal period • Planned hospital stay for maintenance chemotherapy, rehabilitation, organ transplant, and a potentially planned proceduret	

* For more details, refer to the **Quality Provider Program 2023 Quality Measures: Nephrology booklet**.

** Hospice will exclude members from all measures.
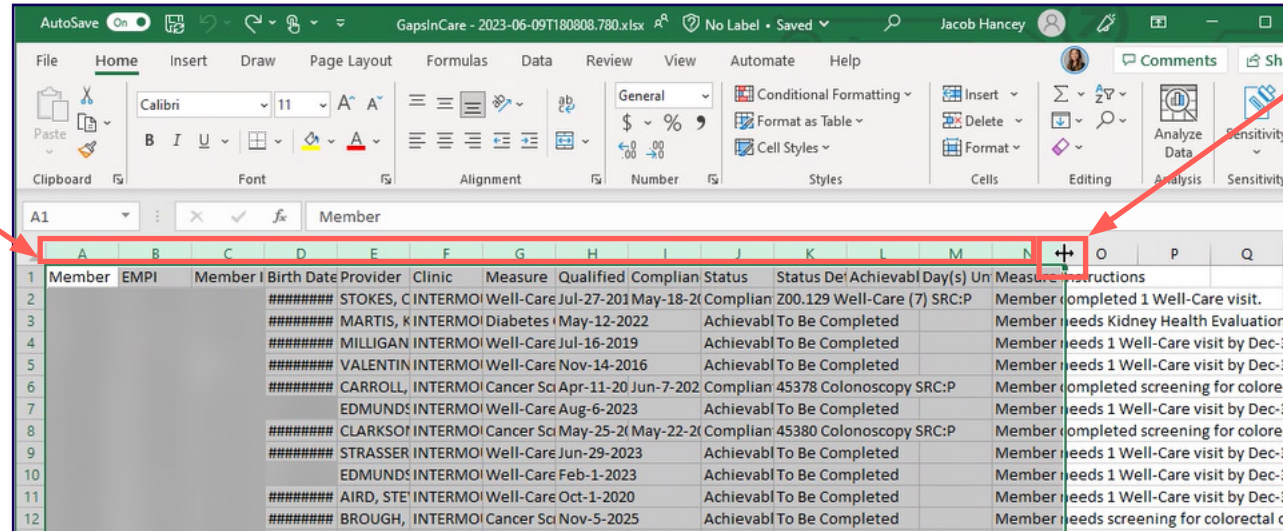
Appendix: Other Resources

How to Format a Gaps List in Excel

Once you have downloaded and saved the Gaps List in Excel, open the file and follow the formatting tips in this section. These tips will help you manage the data in the Gaps List more efficiently.

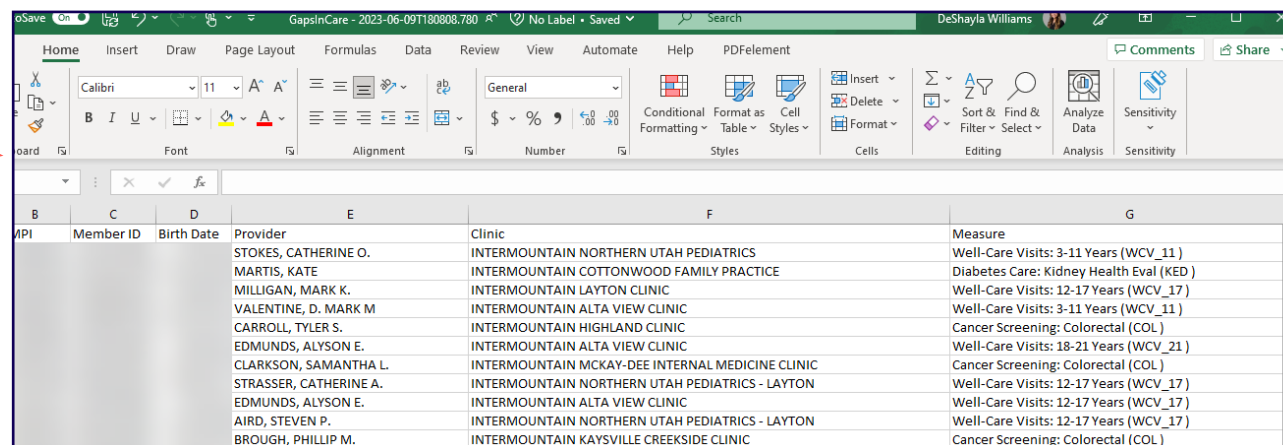For more information on these functions and other common Excel formatting tips, access Microsoft's **Excel Training Page**.

The examples on this page indicate how to widen rows in the Excel spreadsheet, making it easier to read the data.

Select columns with information by holding down your mouse, starting at the top of column A and dragging to the last column with data.
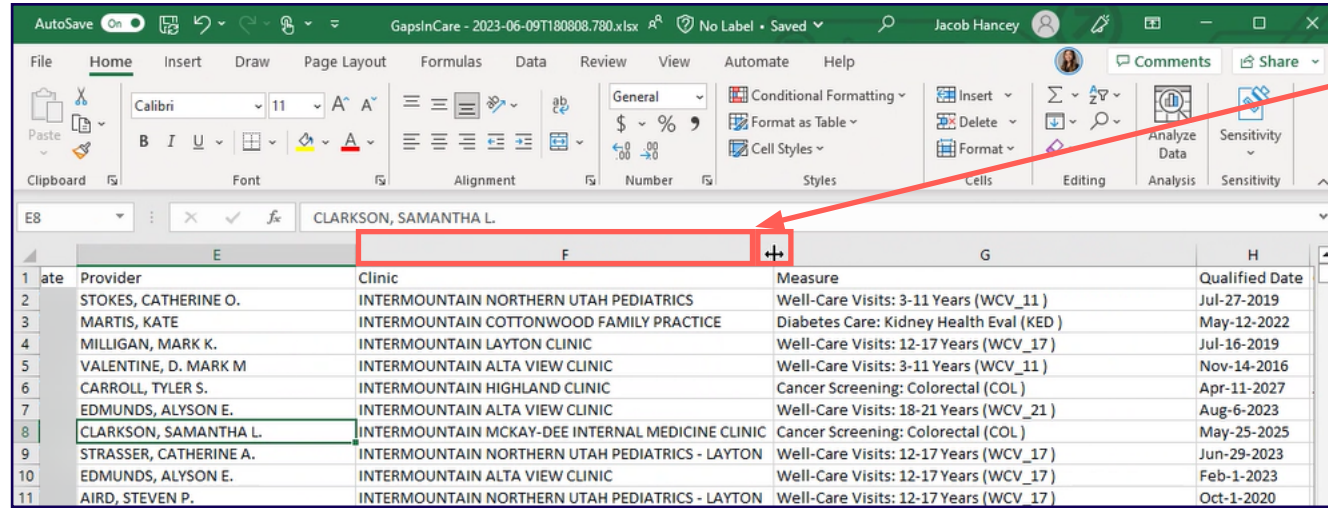

Next, hover between any column divider that is highlighted until the column resize pointer appears. Double click on the pointer to resize the selected columns.

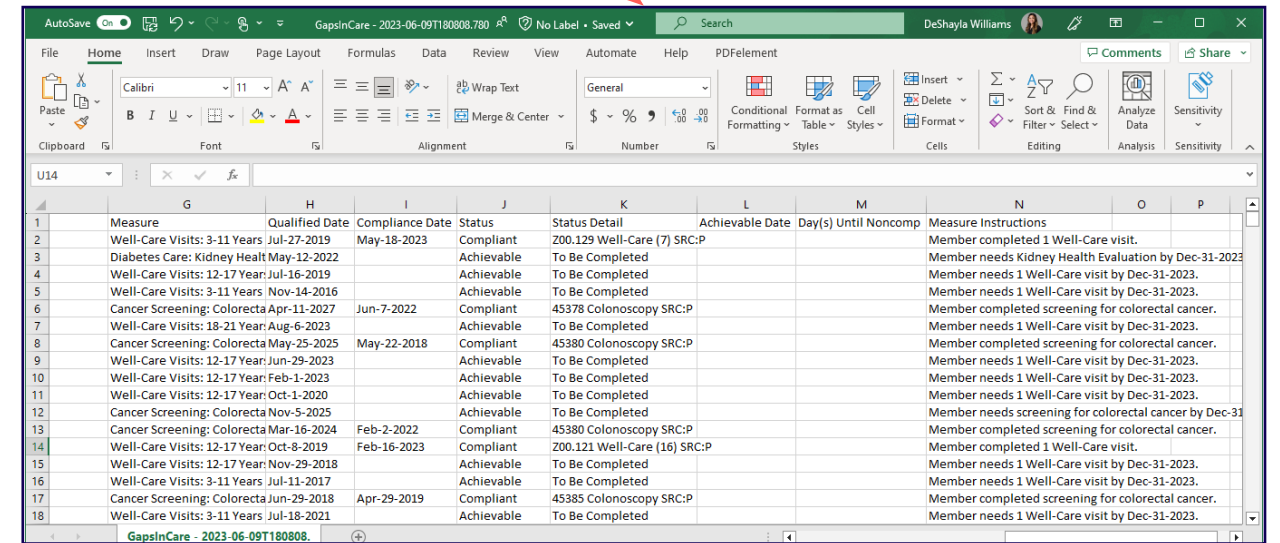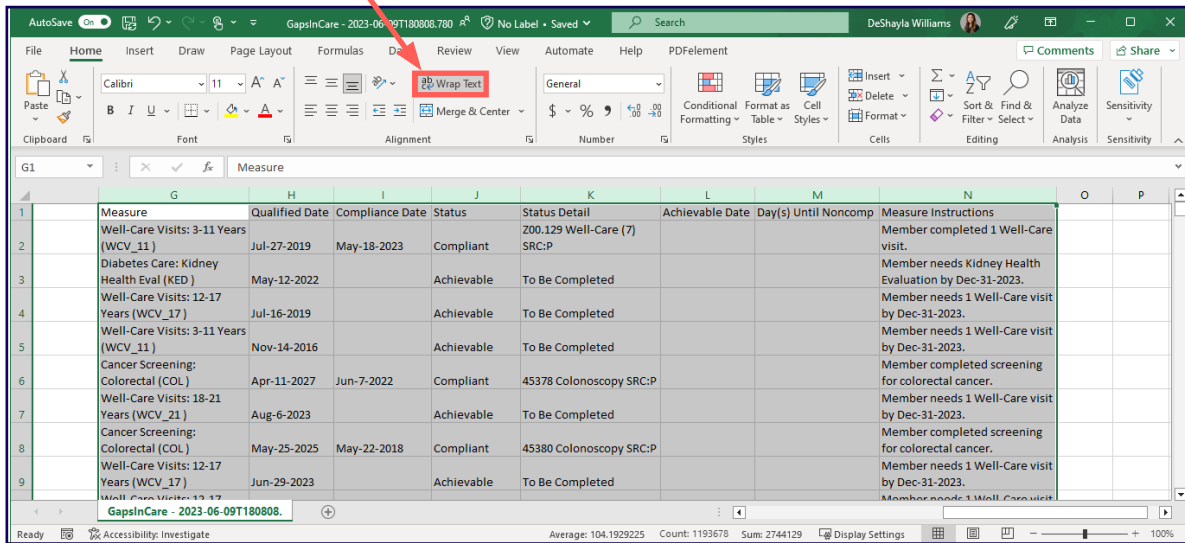This is the resulting view once the columns have resized.

Widen a Column and Wrap Text

Select any column perceived as large. Hover over the column divider of the selected column until the column resize pointer appears. Drag and resize the column as needed.
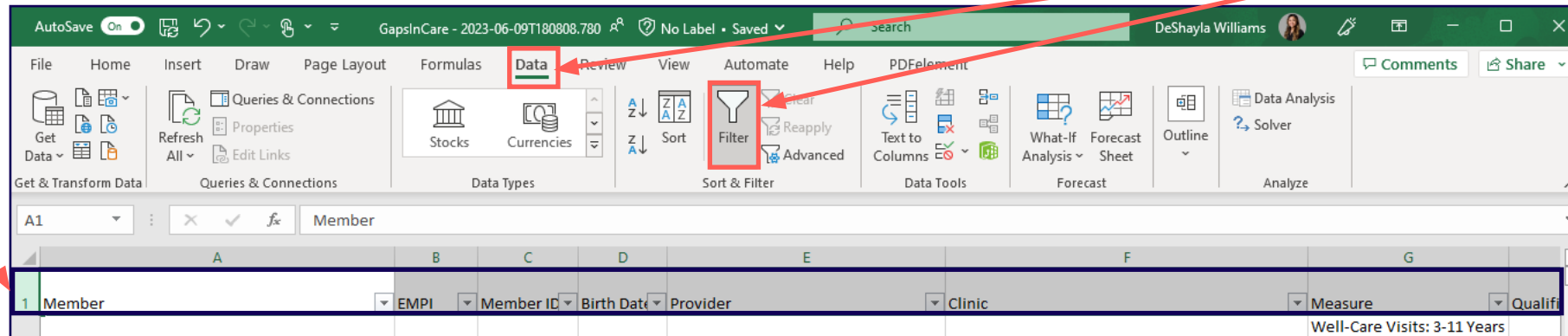
For readability of the resized columns, make sure all columns are still selected. Then, click on "Wrap Text" to fit the content in the columns to the new width.

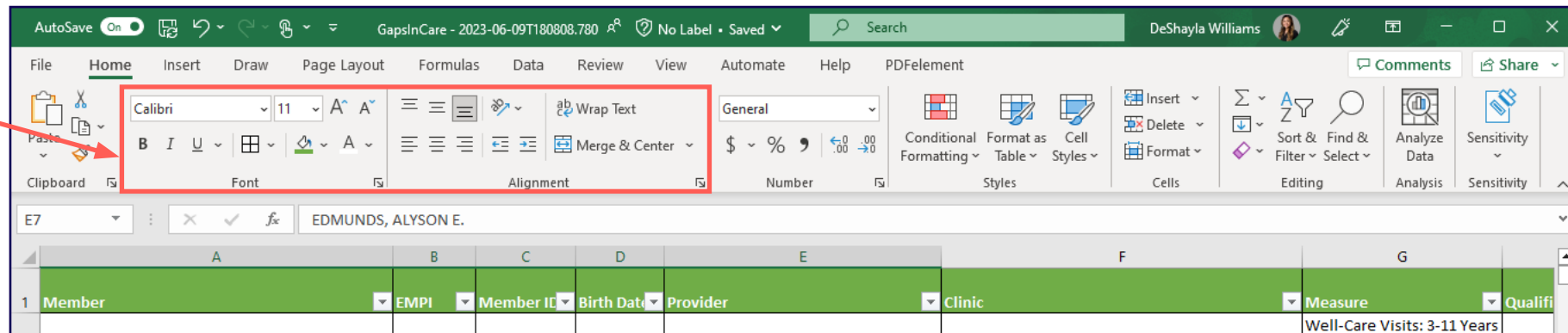This is the resulting view once the text wraps.

Filter Data and Apply Custom Formatting

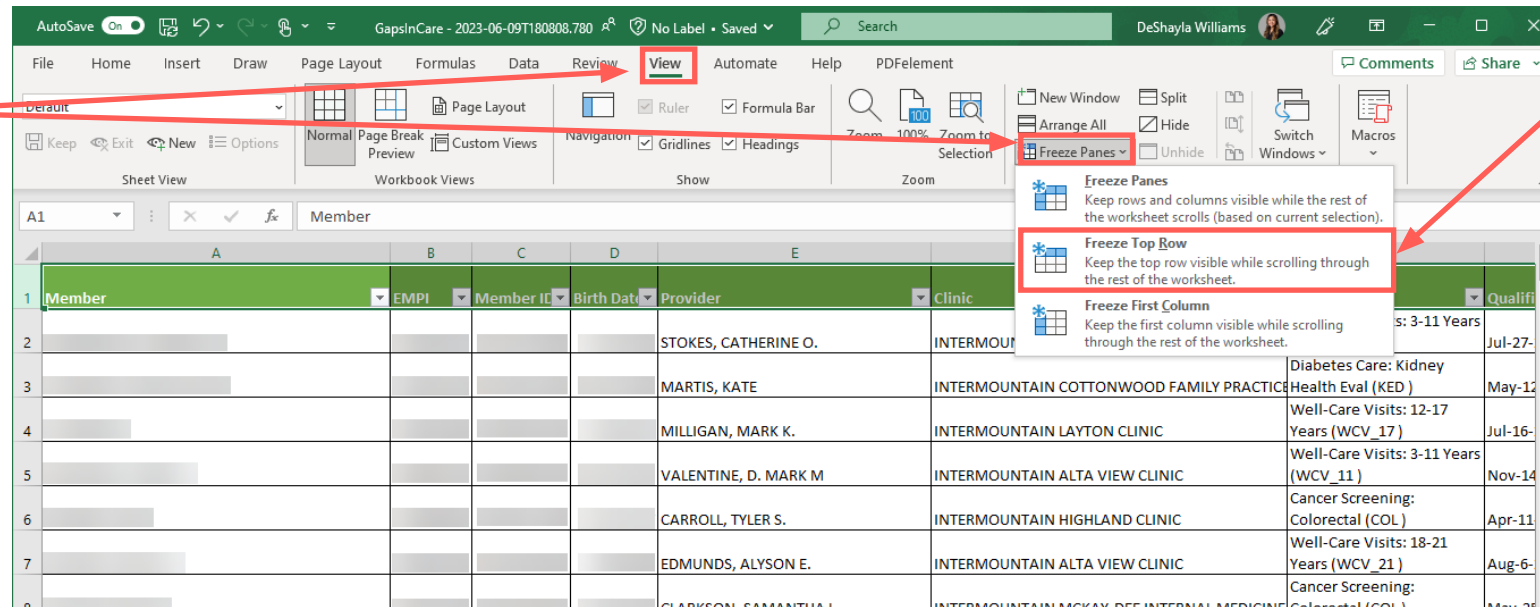Select row 1 (or any combination of rows that you want to filter).

Then, select "Data" and "Filter." This will create drop-down filters to organize the data in row 1.

Use the "Font" and "Alignment" sections of the tool bar to custom format cells (e.g., to distinguish table headings).
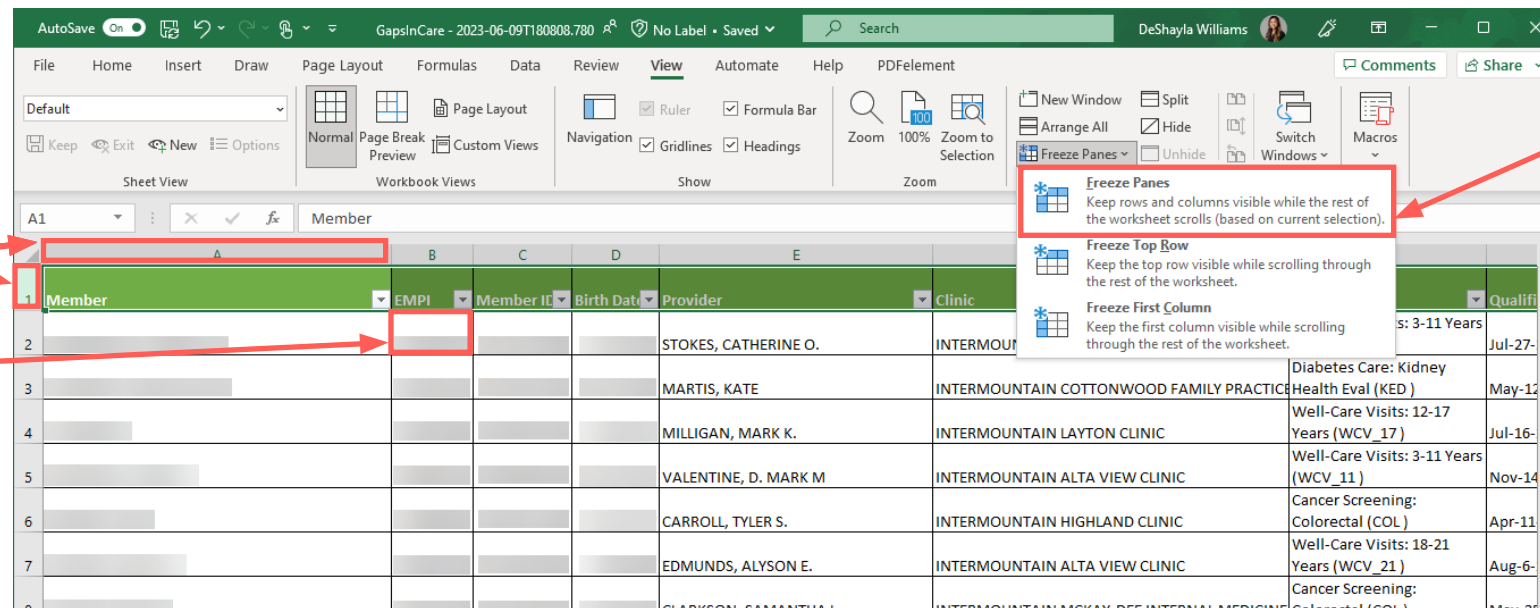
Freeze Panes to Make Scrolling and Comparing Data Easier

To scroll through the data and still have the headers visible, you can freeze rows by selecting "View" and "Freeze Panes."

Select "Freeze Top row" to scroll with visible headers.

If you want to freeze a row (e.g., row 1) and a column (e.g., column A), select the cell BELOW the row and to the RIGHT of the column you want to freeze.

Then, select "Freeze Panes."

Questions?

**Contact your Quality Provider Performance representative
(qualityprovider@selecthealth.org)**