

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.

	Quality Provider Program Report Hub		From the QPP Report Hub, select the Quality Corrections Tool.
Report	Description		
2023 QPP Clinical Summary	Compilation of success metrics related to measures in 2023	0	
2023 QPP Gaps in Care List	Detailed list of Gaps in Care related to measures in 2023	0	
2023 QPP Gaps in Care for Download	Direct link to the Download tab on the Gaps in Care report for 2023	P	
2022 Medical Home Clinical Summary	Compilation of success metrics related to measures in 2022	ð	
2021 Medical Home Clinical Summary	Compilation of success metrics related to measures in 2021	d	
2020 Medical Home Clinical Summary	Compilation of success metrics related to measures in 2020	Ø	
Hospital Census	List of members admitted to the hospital or ED in the last 7 days	Ø	
Case & Disease Management Patient List	List of members with active Case or Disease Management Cases	0	
Gaps in Care Form	Printable form for clinics to identify gaps in care	0	
Medicare Advantage STARS : Provider	5 HEDIS and 4 PQA Pharmacy/CMS measure performance data available by provider	Ø	
Quality Data Corrections Tool	Submit a correction for Medical Home data		

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		Correction	Member	Provider	Submitted By	Status	Comments	Entered Date	Status Reason Date	0	
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			Barry Noorda					06/08/2023		0	
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		Cervical Cancer Screening		Harmony Schroeder			PendingPending			06/08/2023	0
		Cervical Cancer Screening	Cervical Cancer Screening Cervical Cancer	David Bradshaw					06/08/2023	06/08/2023	0
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QDC Tool Instructions: Submitting a Correction, Continued

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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.

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QDC Tool Instructions: Submitting a Correction, Continued

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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.

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QDC Tool Instructions: Submitting a Correction, Continued





QDC Tool Instructions: Submitting a Correction, Continued

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Submissions page.	🖸 Important Links 👻	Correction	Member	Provider	Submitted By	Status	Comments	Entered Date	Status Reason Date	00					
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	Q Submissions	Comprehensive Diabetes Care		Stanley Graham		Pending		06/08/2023	06/08/2023	0					
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Quality Data Correcti

• 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.

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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.
- 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

• Submit corrections using <u>this online tool</u>.

	Kidney Health Evaluation (KED) Adult Corrections											
Allowable Correct	ion		Subn	ission Correction	on Proce	ess		Additional Required Documentati		Notes for Entering Corrections		
Allowable Correct	Catego	Category Measu		re Compor	nent	Correcti	on Type	(see "General Guidanc Requireme	e" for Standard nts)			
Unaccounted for estimated glomerular filtration rate (eGFR)	Chron	ic	Kidney He Evaluatior	alth for		eGFR				Do not use the nephropa Diabetes Care.	thy option under Comprehensive	
Unaccounted for albumin-creatinine ratio (uACR)	Diseas	Disease Patients Diabe		vith s	erator	ator Urine Creatinin Urine Albumin		Date of test and result		Need to enter all three components separately. Member has to ha all three components to be compliant. Most often, they are not combecause they don't have the two urine tests entered separately.		
Attribution and Demographics												
Correction Type	Allo	wabl	е		Subm	ission Co	rrection Pro	ocess	Re	quired	Notes for Entering Corrections	
	Correction		Category Measure Compon			Compone	nt Correction Type	Docui	mentation	Notes for Entering corrections		
Not My Patient	Changed provi patient moved discharged	Changed provider, patient moved, or patient discharged Birthday is incorrect in Quality Provider Program Gaps in Care for Download.		anged provider, ient moved, or patient charged thday is incorrect in Quality ovider Program Gaps in Care Download.		Attri	Attribution Member Assignmen		Provider Move Member Move nt 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 inco Provider Progra for Download.					Member Detail		[th Member Date of Birth	Documentation from form signed by patie of DOB.	EMR or HIPAA consent nt requesting change
Member Sex	Patient is included in wrong measure based on sex (e.g patien t is male, but include for breast cancer screening		wrong x (e.g., icluded eening.)		Demogra	Demographics Me		ex Member Sex	Documentation from birth sex.	EMR of patient's	Select Health will research claims data and approve if acceptable. List measure exclusion if applicable.	
No Allowable Corrections for Compliance												
Diabetes & Hypertensior	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).											



9

Pulling Reports from the Quality Provider Program Clinical Reports Hub

This Report Hub can be accessed from the **<u>QPP area</u>** 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 <u>nephrology</u> 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?

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

NOTE: See <u>page 19</u> for Excel formatting tips customized for working with Gaps in Care data.



NCQA Partner In Quality

(NCQA

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

		Quality Provider Program Report Hub	
	Report	Description	
	2023 QPP Clinical Summary	Compilation of success metrics related to measures in 2023	0
Choose the current year's	2023 QPP Gaps in Care List	Detailed list of Gaps in Care related to measures in 2023	P
"Gaps in Care for Download" link.	2023 QPP Gaps in Care for Download	Direct link to the Download tab on the Gaps in Care report for 2023	ð
	2022 Medical Home Clinical Summary	Compilation of success metrics related to measures in 2022	P
	2021 Medical Home Clinical Summary	Compilation of success metrics related to measures in 2021	P
	2020 Medical Home Clinical Summary	Compilation of success metrics related to measures in 2020	P
	Hospital Census	List of members admitted to the hospital or ED in the last 7 days	P
	Case & Disease Management Patient List	List of members with active Case or Disease Management Cases	P
	Gaps in Care Form	Printable form for clinics to identify gaps in care	O
	Medicare Advantage STARS : Provider	5 HEDIS and 4 PQA Pharmacy/CMS measure performance data available by provider	P
	Quality Data Corrections Tool	Submit a correction for Medical Home data	



Filter the Data for Your Clinic









Export the Data



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

_						
GapsIn	Care - 2023	06-09T	180808.780.txt	t		
1	Member	EMPI	Member ID	Birth Date	Provider	Clinic Measure Qualified Date Compliance Date Status Status Detail Achievable Date Day(s) Until Noncomp Markara
2						"STOKES, CATHERINE 0." INTERMOUNTAIN NORTHERN UTAH PEDIATRICS Well-Care Visits: 3-11 Years (WCV_11) J
3						"MARTIS, KATE" INTERMOUNTAIN COTTONWOOD FAMILY PRACTICE Diabetes Care: Kidney Health Eval (KED) Martin Martin Control (KED)
4						GAN, MARK K." INTERMOUNTAIN LAYTON CLINIC Well-Care Visits: 12–17 Years (WCV_17) Jul-16–2019 Achievable
5						ALENTINE, D. MARK M" INTERMOUNTAIN ALTA VIEW CLINIC Well-Care Visits: 3-11 Years (WCV_11) Nov-14-2016
6						LL, TYLER S." INTERMOUNTAIN HIGHLAND CLINIC Cancer Screening: Colorectal (COL) Apr-11-2027 Jun-7-2022 Colorectal
7						DMUNDS, ALYSON E." INTERMOUNTAIN ALTA VIEW CLINIC Well-Care Visits: 18-21 Years (WCV_21) Aug-6-2023
8						LARKSON, SAMANTHA L." INTERMOUNTAIN MCKAY-DEE INTERNAL MEDICINE CLINIC Cancer Screening: Colorectal (COL
9						TRASSER, CATHERINE A." INTERMOUNTAIN NORTHERN UTAH PEDIATRICS - LAYTON Well-Care Visits: 12-17 Years (WC
10						DMUNDS, ALYSON E." INTERMOUNTAIN ALTA VIEW CLINIC Well-Care Visits: 12-17 Years (WCV_17) Feb-1-2023
11						STEVEN P." INTERMOUNTAIN NORTHERN UTAH PEDIATRICS - LAYTON Well-Care Visits: 12-17 Years (WCV_17) Oct-1
12						ROUGH, PHILLIP M." INTERMOUNTAIN KAYSVILLE CREEKSIDE CLINIC Cancer Screening: Colorectal (COL) Nov-5
13						IOVE, LAURA C." INTERMOUNTAIN ROSE CANYON CLINIC Cancer Screening: Colorectal (COL) Mar-16-2024 Feb-2
14						DMUNDS, ALYSON E." INTERMOUNTAIN ALTA VIEW CLINIC Well-Care Visits: 12–17 Years (WCV_17) Oct-8–2019 F
15						STEVEN P." INTERMOUNTAIN NORTHERN UTAH PEDIATRICS - LAYTON Well-Care Visits: 12-17 Years (WCV_17) Nov-240
16					-	TRASSER, CATHERINE A." INTERMOUNTAIN NORTHERN UTAH PEDIATRICS - LAYTON Well-Care Visits: 3-11 Years (WCV



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:





View Provider Breakdown



Download Provider Rate Data





€	Save As		
ሰ Home			
🖹 New	L Recent		Documents > Project Management (DeSha
🗁 Open	Intermountain Healthcare	Excel Workbook (*.xlsx)	▼ Save
Info	OneDrive - Intermountain Heal DeShayla.Williams@selecthealth.org	More options	
Save	Sites - Intermountain Healthcare DeShayla.Williams@selecthealth.org	Name 1	Date modified
Save As	Other locations		
Print	This PC	Deb Reference	3/15/2023 1:55 PM
Share	Add a Place	Requires Review	5/3/2023 1:59 PM
Export	Browse	P	
Publish		Contract Trackers	3/16/2023 5:34 PM
Close		Data Assignments	4/5/2023 11:07 AM
More		Final Payout Review	5/24/2023 8:29 AM

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	Mombors (agos 18 to 75) with a	Hemoglobin A1c < 8%	Annual, most recent A1c used for measurement		A1c Cat II codes: • Compliant: 3044F <7; 3051F 7-8 • Non-compliant: 3052F 8-9; 3046F >9	
Diabetes: Eye Exam/EED	diagnosis of diabetes through medical or pharmacy claims	Retinal eye exam performed by an eye care professional	 Annual if positive Every 2 years if negative 	 Gestational or steroid-induced diabetes PCOS w/o diagnosis of diabetes 	 Eye exam inclusion Cat II codes: 2022F; 2023F Low risk of retinopathy: 3072F 	
Diabetes: Blood Pressure Control/BPD					BP Cat II codes: • SBP <130 mm Hg: 3074F	
Controlling High Blood Pressure/CBP	Members (ages 18–85) with a diagnosis of hypertension through medical or pharmacy claims	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 	 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 	
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	ESRDDialysis 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 <u>Quality Provider Program 2023 Quality Measures: Nephrology booklet</u>. ** 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.

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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	
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3	MARTIS, KATE	INTERMOUNTAIN COTTONWOOD FAMILY PRACTICE	Diabetes Care: Kidney Health Eval (KED)	May-12-2022
4	MILLIGAN, MARK K.	INTERMOUNTAIN LAYTON CLINIC	Well-Care Visits: 12-17 Years (WCV_17)	Jul-16-2019
5	VALENTINE, D. MARK M	INTERMOUNTAIN ALTA VIEW CLINIC	Well-Care Visits: 3-11 Years (WCV_11)	Nov-14-2016
ő	CARROLL, TYLER S.	INTERMOUNTAIN HIGHLAND CLINIC	Cancer Screening: Colorectal (COL)	Apr-11-2027
7	EDMUNDS, ALYSON E.	INTERMOUNTAIN ALTA VIEW CLINIC	Well-Care Visits: 18-21 Years (WCV_21)	Aug-6-2023
8	CLARKSON, SAMANTHA L.	INTERMOUNTAIN MCKAY-DEE INTERNAL MEDICINE CLINIC	Cancer Screening: Colorectal (COL)	May-25-2025
9	STRASSER, CATHERINE A.	INTERMOUNTAIN NORTHERN UTAH PEDIATRICS - LAYTON	Well-Care Visits: 12-17 Years (WCV_17)	Jun-29-2023
10	EDMUNDS, ALYSON E.	INTERMOUNTAIN ALTA VIEW CLINIC	Well-Care Visits: 12-17 Years (WCV_17)	Feb-1-2023
11	AIRD, STEVEN P.	INTERMOUNTAIN NORTHERN UTAH PEDIATRICS - LAYTON	Well-Care Visits: 12-17 Years (WCV_17)	Oct-1-2020

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.

 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.

This is the resulting view once the text wraps.

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6	Cancer Screening: Colorectal (COL)	Apr-11-2027	Jun-7-2022	Compliant	45378 Colonoscopy SRC:P			Member completed screening for colorectal cancer.			
7	Well-Care Visits: 18-21 Years (WCV_21)	Aug-6-2023		Achievable	To Be Completed			Member needs 1 Well-Care vis by Dec-31-2023.	it		
8	Cancer Screening: Colorectal (COL)	May-25-2025	May-22-2018	Compliant	45380 Colonoscopy SRC:P			Member completed screening for colorectal cancer.			
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8	Cancer Screening: Colorecta	May-25-2025	May-22-2018	Compliant	45380 Colonoscopy SRC:P			Member completed screening f	or colorecta	cancer.		
9	Well-Care Visits: 12-17 Years	Jun-29-2023		Achievable	To Be Completed			Member needs 1 Well-Care visit	t by Dec-31-2	2023.		
10	Well-Care Visits: 12-17 Years	Feb-1-2023		Achievable	To Be Completed			Member needs 1 Well-Care visit	t by Dec-31-2	2023.		
11	Well-Care Visits: 12-17 Years	Oct-1-2020		Achievable	To Be Completed			Member needs 1 Well-Care visit	t by Dec-31-2	2023.		
12	Cancer Screening: Colorecta	Nov-5-2025		Achievable	To Be Completed			Member needs screening for co	lorectal can	er by Dec-3	1	
13	Cancer Screening: Colorecta	Mar-16-2024	Feb-2-2022	Compliant	45380 Colonoscopy SRC:P			Member completed screening f	or colorecta	cancer.		
14	Well-Care Visits: 12-17 Years	Oct-8-2019	Feb-16-2023	Compliant	Z00.121 Well-Care (16) SR0	C:P		Member completed 1 Well-Care	e visit.			
15	Well-Care Visits: 12-17 Years	Nov-29-2018		Achievable	To Be Completed			Member needs 1 Well-Care visit	t by Dec-31-2	2023.		
16	Well-Care Visits: 3-11 Years	Jul-11-2017		Achievable	To Be Completed			Member needs 1 Well-Care visit	t by Dec-31-2	2023.		
17	Cancer Screening: Colorecta	Jun-29-2018	Apr-29-2019	Compliant	45385 Colonoscopy SRC:P			Member completed screening f	or colorecta	cancer.		
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Filter Data and Apply Custom Formatting



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

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Freeze Panes to Make Scrolling and Comparing Data Easier

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Questions?

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

