



2017 Cycle A Measures

Preparation for Submitting Data

Amy Krier
Senior Project Specialist

Lindsey Ziegler
Project Coordinator

MN Community Measurement

- Accelerating the improvement of health through public reporting
- Our vision:
 - To be the primary trusted source for health data sharing and measurement
 - To drive change that improves health, patient experience, cost and equity of care for everyone in our community
 - To be a resource used by providers and patients to improve care
 - To partner with others to use our information to catalyze significant improvements in health
- History
 - 2004: HEDIS measures by medical group.
 - Health plan data
 - 2006: Developed DDS Method to allow reporting measures by clinic
 - Data submitted voluntarily by clinics
 - 2010: Statewide Quality Reporting and Measurement System.



Agenda

Timeline

- Milestone Dates

Depression

- Measure Specifications

Optimal Diabetes Care

- Measure Specifications

Optimal Vascular Care

- Measure Specifications

Data Submission Process

- Pre-Submission Data Certification
- Data File Preparation & Data Submission

Data Validation Process

- Quality Checks
- Audit Expectations

Resources

- Available tools and assistance

Timeline

Activity	Dates
Dates of Service <ul style="list-style-type: none">• ODC & OVC• Depression	Jan 1, 2016 through Dec 31, 2016 Feb 1, 2016 through Jan 31, 2017
Data Submission <ul style="list-style-type: none">• ODC & OVC• Depression	Jan 9, 2017 through Feb 10, 2017 Feb 1, 2017 through Feb 28, 2017
Data Validation (including Quality Checks & Audits)	February through Spring 2017
Final Results	Summer 2017

Depression Care Measures

Measure Specifications

- Eligible Population
 - The eligible population consists of patients with an index contact during the index period.
 - A visit must meet all of the following criteria to be indexed:
 - Patient has a visit or contact with an eligible provider in an eligible specialty.
 - Patient is 18 years of age or older at the time of the visit.
 - Patient has a PHQ-9 result greater than nine during the visit.
 - Patient has an active diagnosis of major depression or dysthymia (*Major Depression or Dysthymia Value Set*).
 - For behavioral health providers only: The diagnosis of major depression or dysthymia must be the primary diagnosis.
 - The patient is NOT in a prior index period.
 - An index period begins with an index visit and is 13 months in duration.
- Eligible Specialties/Provider Types
 - Family Medicine, Internal Medicine, Geriatric Medicine, Psychiatry, Behavioral Health
 - Medical Doctor, Doctor of Osteopathy, Physician Assistant, Advanced Practice Registered Nurse
 - If a physician is on-site: Licensed Psychologist, Licensed Independent Clinical Social Worker, Licensed Professional Clinical Counselor, Licensed Marriage & Family Therapist

Depression Care Measures

Measure Specifications (cont.)

- Exclusions to be applied when identifying the Eligible Population
 - Medical Group Administered Required Exclusions
 - Patient has an active diagnosis of bipolar disorder (*Bipolar Disorder Value Set*) or personality disorder (*Personality Disorder Value Set*) in any position.
 - Medical Group Administered Allowable Exclusions
 - Patient was a permanent nursing home resident at any time during the measurement period.
 - Patient was in hospice or receiving palliative care at any time during the measurement period.
 - Patient died prior to the end of the measurement period.
 - Patients who have NOT already been submitted and/or indexed may be excluded upfront.
 - Patients who have already been submitted should have an exclusion record submitted in the data file.

Depression Care Measures

Measure Specifications (cont.)

- Follow-up PHQ-9 Scores
 - Once a patient is indexed, submit all follow-up PHQ-9 scores during the 13 month index period for the patient.
 - Include all scores regardless of score value, diagnosis, visit type or method of administration.
- Total population submission is required.
- Timeframes for Measure Calculation
 - Dates of Service for data submission in 2016:
 - February 1, 2016 through January 31, 2017
 - Index Period to determine denominator:
 - January 1, 2015 through December 31, 2015
 - Assessment Periods evaluated for numerator compliance:
 - 6 Month Measures: June 1, 2015 through July 30, 2016
 - 12 Month Measures: December 2, 2015 through January 30, 2017

Optimal Diabetes Care

Eligible Population Specifications

- Measurement Period: January 1, 2016 – December 31, 2016.
- Eligible Population:
 - Patient was 18 years or older at the start of the measurement period AND less than 76 years at the end of the measurement period.
 - **NEW** Patient had a diagnosis of diabetes (*Diabetes Value Set*) with any contact during the current or prior measurement period OR had diabetes present on an active problem list during the current measurement period.
 - **NEW** Patient had at least one established patient office visit (*Established Pt Diabetes & Vasc Value Set*) for any reason, performed or supervised by an eligible provider in an eligible specialty during the current measurement period
 - Family Medicine, Internal Medicine, Geriatric Medicine, Endocrinology
 - Medical Doctor, Doctor of Osteopathy, Physician Assistant, Advanced Practice Registered Nurses

Optimal Diabetes Care

Eligible Population Specifications (cont.)

- Medical Group Administered Allowable Exclusions
 - Patient was a permanent nursing home resident at any time during the measurement period.
 - Patient was in hospice or receiving palliative care at any time during the measurement period.
 - Patient died prior to the end of the measurement period.
 - Documentation that diabetes diagnosis was coded in error.
 - Patient was pregnant at any time during the measurement period (*Diabetes with Pregnancy Value Set*).
 - **NEW** Patient had only urgent care visits during the measurement period.

Optimal Diabetes Care

Eligible Population Specifications (cont.)

- Total vs Sample Population Submission
 - Full population data is required for clinics that had an EMR in place by 01/01/2015.
 - Clinics eligible and choosing to submit a random sample of patients from their eligible population must submit a minimum of 60 patients per clinic.
 - Clinics with less than 60 patients must submit their total population.

Optimal Diabetes Care

Numerator Specifications

- Patients meeting all five of the following targets are numerator compliant:
 - Most recent HbA1c in the measurement period is <8.0
 - Most recent blood pressure in the measurement period is systolic <140 mmHg AND diastolic <90 mmHg.
 - Not a tobacco user
 - Status confirmed within last two measurement periods
 - On a statin medication during the measurement period, unless allowed contraindications or exceptions are present.
 - If patient has ischemic vascular disease, is on a daily aspirin or anti-platelet medication during the measurement period, unless allowed contraindications or exceptions are present.

Optimal Vascular Care

Eligible Population Specifications

- Measurement Period: January 1, 2016 – December 31, 2016.
- Eligible Population:
 - Patient was 18 years or older at the start of the measurement period AND less than 76 years at the end of the measurement period.
 - **NEW** Patient had a diagnosis of ischemic vascular disease (*Ischemic Vascular Disease* Value Set) with any contact during the current or prior measurement period OR had ischemic vascular disease present on an active problem list during the current measurement period.
 - **NEW** Patient had at least one established patient office visit (*Established Pt Diabetes & Vasc* Value Set) for any reason, performed or supervised by an eligible provider in an eligible specialty during the current measurement period
 - Family Medicine, Internal Medicine, Geriatric Medicine, Cardiology
 - Medical Doctor, Doctor of Osteopathy, Physician Assistant, Advanced Practice Registered Nurses

Optimal Vascular Care

Eligible Population Specifications (cont.)

- Medical Group Administered Allowable Exclusions
 - Patient was a permanent nursing home resident at any time during the measurement period.
 - Patient was in hospice or receiving palliative care at any time during the measurement period.
 - Patient died prior to the end of the measurement period.
 - Documentation that IVD diagnosis was coded in error.
 - **NEW** Patient had only urgent care visits during the measurement period.

Optimal Vascular Care

Eligible Population Specifications (cont.)

- Total vs Sample Population Submission
 - Full population data is required for clinics that had an EMR in place by 01/01/2015.
 - Clinics eligible and choosing to submit a random sample of patients from their eligible population must submit a minimum of 60 patients per clinic.
 - Clinics with less than 60 patients must submit their total population.

Optimal Vascular Care

Numerator Specifications

- Patients meeting all four of the following targets are numerator compliant:
 - Most recent blood pressure in the measurement period is systolic <140 mmHg AND diastolic <90 mmHg.
 - Not a tobacco user
 - Status confirmed within last two measurement periods
 - On a statin medication in the measurement period, unless allowed contraindications or exceptions are present.
 - On a daily aspirin or anti-platelet medication in the measurement period, unless allowed contraindications or exceptions are present.

Data Submission Process

- Getting Started
 - MNCM Data Portal
 - Request access here: <https://data.mncm.org/login>

Welcome to the MNCM Data Portal!

Log In

Please Log In

E-mail Address

Password
 [I forgot my password.](#)

GO >>

Registration

Need to [register](#) for an account? [Click Here.](#)

Data Submission Process

(cont.)

- Data Collection Guide & Tools
 - All documents can be found on the Resources tab in the MNCM Data Portal
 - Data Collection Guide & Value Set Dictionary
 - Review thoroughly
 - Guide includes data collection and submission instructions
 - Value Set Dictionary includes all administrative codes applicable to the measure.
 - Both can also be found on <http://mncm.org/submitting-data/training-and-guidance/#data-collection-guides>
 - Pre-Submission Data Certification Template
 - Outlines method for identifying patient population
 - Data Collection Spreadsheet Template
 - Fully formatted Excel template for submitting patient data
 - Data Collection Form
 - A tool most beneficial to groups utilizing paper charts or manual EMR abstraction for data collection.

Data Submission Process

(cont.)

- Pre-Submission Data Certification
 - Download and complete the Pre-Submission Data Certification Form.
 - Upload the form to the Data Portal
 - MNCM must review and approve document prior to data collection and submission
 - Details can be found in the applicable Data Collection Guide

Data Submission Process

(cont.)

- Data File
 - Collect all data for all patients from all clinics in applicable measure specific Data Collection Spreadsheet Template
 - Template has correct formatting and fields
 - Submission of Depression data requires three separate files
 - Required data elements and field specifications detailed in guide
 - Quality check data to ensure completeness and accuracy
 - Save completed file in Excel (.xls) format and also in .csv format. The .csv file will be uploaded to the Data Portal.
- Prior to data upload, confirm that you have:
 - MNCM Data Portal login
 - Patient Count Information
 - See applicable Data Collection Guide for required count(s)
 - Patient level data file(s) (.csv format)

Data Submission Process

(cont.)

Step 1: Enter
Denominator

- Method Used for Data Collection
- REL Collection Best Practice Status
- Eligible Population Counts

Step 2: Review
& Save

- Review data entered in Step 1

Data Submission Process

(cont.)

Step 3: Upload Data

- Import CSV data file
- Review & resolve any identified Errors or Warnings; Errors impede submission

Step 4: Review & Submit

- Complete Data Submission Quality Checklist
- Review preliminary results
- Supply comments explaining result changes from previous submission
- Click “Submit to MN CM”

Step 5: Done

- Download processed patient level data

Data Validation

- Data Validation process:
 - Pre-Submission Data Certification (prior to data collection)
 - Data quality checks
 - Validation audit
 - Two-week medical group review
- Audit conducted to validate that submitted data matches source data in patient's medical record
- Collaborative process between MNCM and medical group
- Occurs after data submission
- MNCM utilizes the NCQA "8 and 30" process for validation audits

Resources

- Resources tab in MNCM Data Portal
 - Data Collection Guides and Value Set Dictionaries
 - Data Collection Tools
 - Pre-Submission Data Certification Templates
 - Data Collection Forms
 - Data Collection Spreadsheet Templates
 - Webinar recording link & presentation slides
 - FAQ
- MNCM Helpline: 612/746-4522
- MNCM Support email: support@mncm.org
- Monthly Q & A Calls: 3rd Thursday of every month, 12:00pm

Thank you!

- MNCM Data Portal
<https://data.mncm.org/login>
- MNCM corporate website
www.mncm.org
- MNCM consumer website
www.mnhealthscores.org
- Questions
 - support@mncm.org
 - 612-746-4522



Amy Krier, Senior Project Specialist

krier@mncm.org

Lindsey Ziegler, Project Coordinator

ziegler@mncm.org

Connect with us!

On the web

MNCM.org
MNHealthScores.org

On social media

[@mnhealthscores](https://twitter.com/mnhealthscores)
facebook.com/mnhealthscores
[Linkedin.com/company/mn-community-measurement](https://linkedin.com/company/mn-community-measurement)

