



# 2017 Cycle A Measures

*Preparation for Submitting Data*

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# 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
<b>Dates of Service</b> <ul style="list-style-type: none"><li>• ODC &amp; OVC</li><li>• Depression</li></ul>	Jan 1, 2016 through Dec 31, 2016 Feb 1, 2016 through Jan 31, 2017
<b>Data Submission</b> <ul style="list-style-type: none"><li>• ODC &amp; OVC</li><li>• Depression</li></ul>	Jan 9, 2017 through Feb 10, 2017 Feb 1, 2017 through Feb 28, 2017
<b>Data Validation</b> (including Quality Checks & Audits)	February through Spring 2017
<b>Final Results</b>	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](mailto:support@mncm.org)
- Monthly Q & A Calls: 3<sup>rd</sup> Thursday of every month, 12:00pm

# Thank you!

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



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## Connect with us!

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