



2018 Cycle A Measures

Preparation for Submitting Data

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MN Community Measurement

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



MN Community Measurement

- Reporting 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

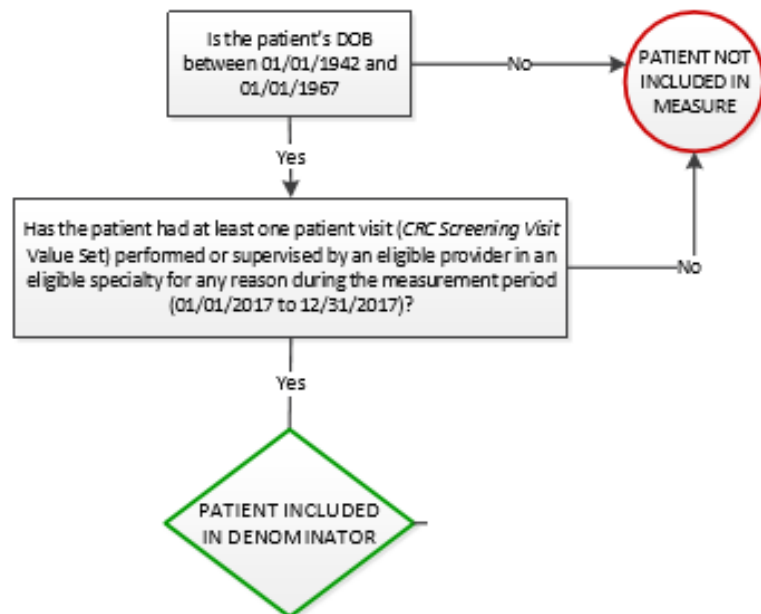
- Available tools and assistance

Timeline

Activity	Dates
<p>Dates of Service</p> <ul style="list-style-type: none"> Colorectal Cancer Screening, ODC, OVC, Asthma Depression 	<p>Jan 1, 2017 through Dec 31, 2017</p> <p>Feb 1, 2017 through Dec 31, 2017</p>
<p>Data Submission</p> <ul style="list-style-type: none"> Colorectal Cancer Screening ODC, OVC, Asthma Depression 	<p>Jan 8, 2017 through Jan 31, 2018</p> <p>Jan 8, 2017 through Feb 15, 2018</p> <p>Jan 8, 2017 through Feb 28, 2018</p>
<p>Data Validation (including Quality Checks & Audits)</p>	<p>Late January through Spring 2018</p>
<p>Final Results</p>	<p>Summer 2018</p>

Colorectal Cancer Screening

- **CHANGE** Measurement Period: Jan 1, 2017 through Dec 31, 2017
- Eligible Population:



- **CHANGE** Patient had at least one patient visit (*CRC Screening Visit Value Set*) performed or supervised by an eligible provider in an eligible specialty during the measurement period.
- See Data Collection Guide for allowable exclusions
 - **CHANGE** Death prior to end of the measurement period removed as an allowable exclusion.

Colorectal Cancer Screening

(Continued)

- Numerator:
 - Number of patients who are up-to-date with an appropriate screening exam:
 - Colonoscopy
 - Sigmoidoscopy
 - CT colonography
 - FIT-DNA Test
 - Stool Blood Tests [FIT or gFOBT]

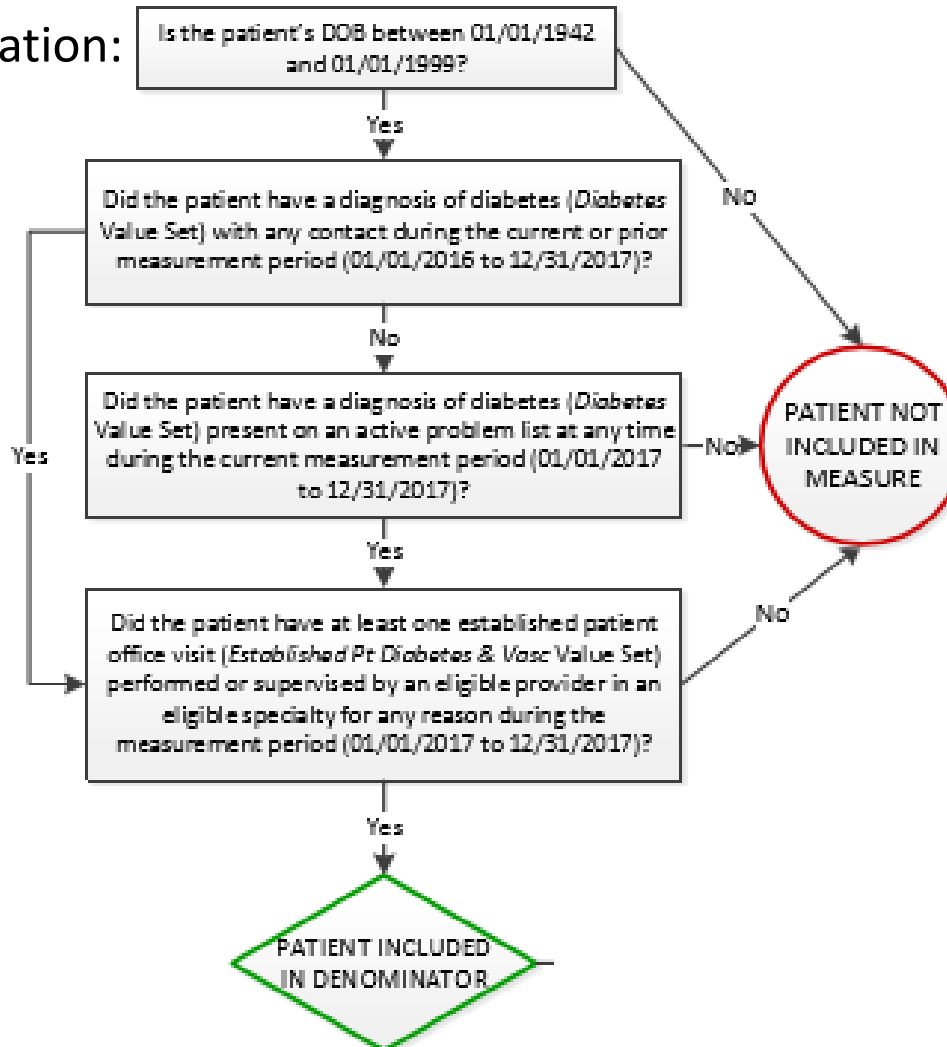
Colorectal Cancer Screening

(Continued)

- Total vs Sample Population Submission
 - Full population data is required for clinics that had an EMR in place by 01/01/2016.
 - Clinics eligible to submit a sample must submit a minimum sample of 60 patients per clinic.

Optimal Diabetes Care

- Measurement Period: Jan 1, 2017 – Dec 31, 2017.
- Eligible Population:



Optimal Diabetes Care

(Continued)

- Patients meeting all five of the following targets are numerator compliant:
 - HbA1c <8.0 mg/dL
 - Blood pressure is systolic <140 mmHg AND diastolic <90 mmHg.
 - Not a tobacco user
 - On a statin medication
 - If patient has ischemic vascular disease, is on a daily aspirin or anti-platelet medication

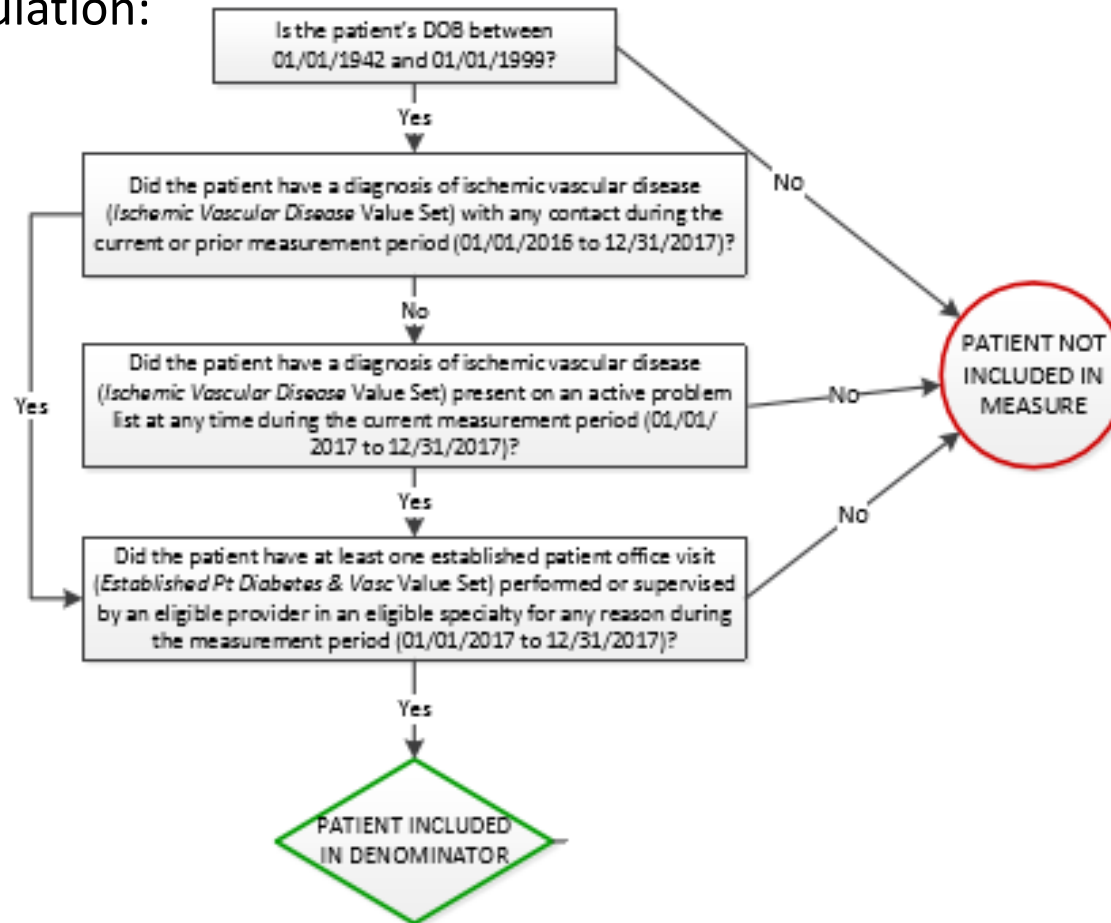
Optimal Diabetes Care

(Continued)

- Total vs Sample Population Submission
 - Full population data is required for clinics that had an EMR in place by 01/01/2016.
 - 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

- Measurement Period: Jan 1, 2017 – Dec 31, 2017.
- Eligible Population:



Optimal Vascular Care

(Continued)

- Patients meeting all four of the following targets are numerator compliant:
 - Blood pressure is systolic <140 mmHg AND diastolic <90 mmHg.
 - Not a tobacco user
 - On a statin medication
 - On a daily aspirin or anti-platelet medication

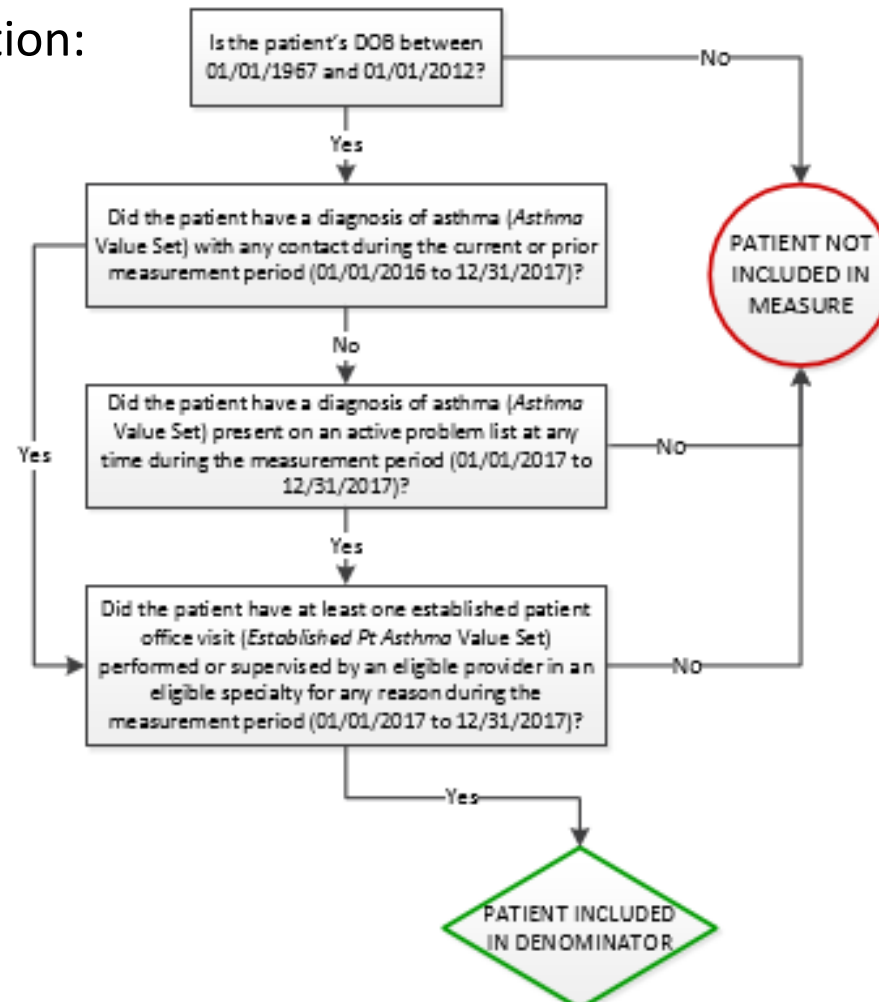
Optimal Vascular Care

(Continued)

- Total vs Sample Population Submission
 - Full population data is required for clinics that had an EMR in place by 01/01/2016.
 - 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.

Asthma Measures

- **CHANGE** Measurement Period: Jan 1, 2017 through Dec 31, 2017
- Eligible Population:



Asthma Measures

(Continued)

- Optimal Asthma Control Numerator:
 - Number of patients who meet all of the following targets:
 - Asthma control tool result indicates patient's asthma is well controlled
 - Patient reported a total number of emergency department visits and hospitalizations due to asthma less than 2
- Asthma Education and Self-Management Numerator:
 - Number of patients that have a written asthma management plan

Asthma Measures

Sample Submission

- Total vs Sample Population Submission
 - Full population data is required for clinics that had an EMR in place by 1/1/2016.
 - Clinics eligible to submit a sample must:
 - Submit two samples.
 - Pediatric patients age 5 – 17
 - Adult patients age 18 – 50
 - Submit a minimum sample of 60 patients per age group, per clinic.
 - If a clinic does not have 60 patients in a particular age group, total population must be submitted for that age group.

Depression Care Measures

Measure Specifications

- Eligible Population:
 - An index visit must meet all of the following criteria:
 - Patient has a contact or face-to-face visit with an eligible provider in an eligible specialty.
 - Patient is 18 years of age or older.
 - Patient has a PHQ-9 result greater than nine.
 - Patient has an active diagnosis of major depression or dysthymia.
 - For psychiatry providers and behavior health providers with a psychiatrist on site only: The diagnosis must be the primary diagnosis.
 - **CHANGE** This requirement is applicable prior to 11/1/2017. Requirement is **no** longer applicable on or after 11/1/2017.
 - The patient is NOT in a prior index period.

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.
 - 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
 - For indexed patients:
 - Submit all follow-up PHQ-9 scores during the 13 month index period
 - Include all scores.
- Total population submission is required.
- Timeframes for Measure Calculation
 - **CHANGE** Dates of Service for data submission in 2018: Feb 1, 2017 through Dec 31, 2017
 - Dates of Index: Dec 1, 2015 – Nov 30, 2016
 - Dates of Follow-Up
 - 6 Month Measures: May 2, 2016 through June 29, 2017
 - 12 Month Measures: November 1, 2016 through December 30, 2017

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
 - <http://mncm.org/submitting-data/training-and-guidance/#data-collection-guides>
 - Pre-Submission Data Certification Template
 - Data Collection Spreadsheet Template
 - Data Collection Form

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.)

- In the Data Portal:
 - Agree to Business Associate Agreement (BAA), if not previously completed
 - Agree to DDS Terms and Conditions for applicable measure
 - Make Data Files Transfer selection for applicable measure
 - Complete Exclusions step on Data Portal, if applicable

Data Submission Process

(cont.)

- Data File
 - Collect all data for all patients from all clinics in Data Collection Spreadsheet Template
 - Data elements and field specifications detailed in guide
 - Complete all quality checks
 - Save completed file in Excel (.xlsx) format and also in .csv format.
- Prior to data upload, confirm that you have:
 - MNCM Data Portal login
 - Patient Count Data
 - 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 stop 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
 - FAQs
- MNCM Helpline: 612/746-4522
- MNCM Support email: support@mncm.org
- Monthly Q & A Calls

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

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