**Issues for the RCHC Data Standards and Integrity Committee**

July 1, 2019 Meeting

Version 1, By Ben Fouts MPH, RCHC Data Analyst

1. **Partnership HealthPlan New Quality Initiatives**

Possible Report Set: 2019 and future QIP Report Set

Issue: There will be increased stringency and oversight of quality of clinical care associated with MediCal Managed Care Plans in California. This means that there will be upcoming changes to the facility site medical record review process and clinical quality measures set facilitated by Partnership HealthPlan. These changes are prompted by the California Department of Health Care Services (DHCS) and also a renewed focus on health services by Governor Newsome.

Description: From the initial lists, it looks like they might continue 10 measures, change one measure, add nine measures and discontinue eight measures. They have yet to officially announce if (and how) the 2019 QIP Measure Set will be affected for Family Practice, Internal Medicine and Pediatric Health Centers. Therefore, it would be premature to speculate on eventual measure lists and discuss them here today. For the time being, we will continue creating the 2019 QIP Report Set in Relevant as previously instructed.

Furthermore, there are additional measures that Partnership may have to report to DHCS and for their NCQA-accreditation process. These may eventually be reported through a health information exchange.

No matter the eventual reporting process, RCHC has purchased the official HEDIS measure definitions and plans to develop a set of new Quality Measures (QM). Some of the QM definitions are based on HEDIS, but others on CMS or NQF definitions (which are more freely available). Since these are quality of care measures, your clinical teams may be interested in them too. In general, it is beneficial to build a strong foundation of QMs and Care Gaps that health centers can choose from because they must report them out or otherwise because it is a performance improvement priority.

Further Detail: See the handout titled “DRAFT of Partnership HealthPlan Proposed Measure Changes.” This is a list of ALL the measures (current and new) that Partnership is considering following. As mentioned previously, it is unknown which will be applicable to the Family Practice Health Centers (and others) or when exactly the reporting will start. Measures that appear to be reportable only by hospitals have been excluded from this list.

We have organized the measures into Tiers. The first tier are measures that already exist. The second and third tiers represent measures that could be designed fairly quickly and easily by RCHC. The forth and fifth tiers of measures are more difficult either because the measures are very complex or the data does not yet exist in the electronic health record of all RCHC health centers. For the fifth tier, there might be future discussions in the Data Standards and Integrity Meeting about how to standardize data entry for particular elements.

1. **Value Set Comparison: UDS/CMS vs.** **QIP/HEDIS**

Possible Report Set: 2019 QIP

Issue: Value Sets are at the core of any quality measure because they define the specific data elements specified by the descriptive text of the measure. Relevant is using Value Sets for diagnosis codes, procedure codes, lab codes and vaccine codes in a more structured manner in the 2019 QMs and possibly for medications later on. There was a discussion of Value Sets applicable to UDS measures in the RCHC June Data Group webinar (a recording of the Webinar and a copy of the slides are posted on the RCHC Peer Collaboration website) .

A comprehensive list of UDS/CMS Value Sets was posted on the RCHC Slack Channel and the QIP/HEDIS Value Sets are available on the Partnership HealthPlan QIP website. It is not necessary for health centers to get into the detail of the Value Sets unless they want to. However, it is important for RCHC to understand the differences between Value Sets and how they change year-after-year and communicate that information to member health centers, especially if the changes will affect the measure outcomes.

Question for RCHC: Are there any differences in the applicable Value Sets between the 2019 UDS and QIP Quality Measures that have common definitions?

Description: The most efficient design mechanism in Relevant would be to ensure that there is one Transformer and/or one Importer that defines a particular data element, and that Transformer or Importer is used in all places where that data element is needed. This makes sense on a practical level: you would not want two definitions of “patients with diabetes” (unless two measures define them differently) nor would you want two Transformers pointing to two different Value Sets that bring up the same groups of patients.

Below is a table of the common Data Elements between the UDS and QIP Value Sets. Relevant is aware of the differences. In most cases where there is a difference, the existing SQL hard-coding for the 2018 Quality Measure is correct. No CPT codes are used for common measures.

|  |  |  |  |
| --- | --- | --- | --- |
| **Measure** | **Diagnosis (ICD)** | **Lab (LOINC)** | **Immunization (CVX)** |
| Childhood Immunization Status |  |  | Same |
| Cervical Cancer Screening | Different (for exclusions) | Same |  |
| Colorectal Cancer Screening | Different (for exclusions) | Same |  |
| Controlling High Blood Pressure (HTN Definition) | Same |  |  |
| Controlling High Blood Pressure (Exclusion Definition) | Different (for exclusions) |  |  |
| Diabetes Management – HbA1c Good Control (≤9%) | Same | Same |  |
| Persistent Asthma (But Different Measures) | Same |  |  |
| Pregnancy | Same |  |  |

1. **Value Set Comparison: UDS/CMS 2018 vs. 2019**

Possible Report Set: 2019 UDS

Issue: In past Data Standards and Integrity meetings, it was decided that the 2019 UDS QMs should be joined directly to Value Sets and that there should be a specific and known date when the QMs are switched from the 2018 Value Set to the 2019 Value Set. Since the official 2019 UDS Instruction Manual was recently released, Relevant is currently preparing the 2019 UDS QM Report Set. When those reports are ready and initial validation is complete, they will be copied to all health center instances of Relevant and the 2019 Value Set will be “turned on.” Health Centers will still be able to query for 2018 Value Set Codes in Data Grip but none of the standard Transformers/Importers will be pointed to the old Value Set.

In the meantime, another important question concerns the potential code changes in the new UDS/CMS Value Set. Year-to-year, most measures have new versions of the CMS measure definitions and Value Sets. The descriptive text of the UDS measures has not changed from 2018 to 2019 in the instruction manual (except for the birth dates that describe the current measure age ranges and two other known issues[[1]](#footnote-1))

Question for RCHC: Are there any differences in the applicable 2018 and 2019 UDS Value Sets?

Description: The table on the next page shows the changes to the 2019 Value Set relative to the 2018 Value Set for the UDS Measures that have Value Sets. There are some comments following the table. Most of the changes are small and I do not anticipate any significant changes to the measure denominators and numerators solely due to the switch. Nonetheless, data should be systematically collected before and after the switch in order to understand and document the action.

In the table on the next page, cells with the text “Same” signify no change in related Value Sets for that data type. Cells with a number show codes added or removed from 2018 to 2019. Cells with no number mean the data type is not applicable to the measure. CPT codes thatr

| UDS Measure | CPT | ICD | LOINC | CVX |
| --- | --- | --- | --- | --- |
| Added | Removed | Added | Removed | Added | Removed | Added | Removed |
| Childhood Immunization Status |  |  | 1 | 35 | Same | Same | 5 | 2 |
| Cervical Cancer Screening |   |   |   |   | 3 | 0 |   |   |
| Weight Assessment and Counseling for Nutrition and Physical Activity for Children | Same | Same | 9 | 0 |   |   |   |   |
| Preventive Care and Screening: Body Mass Index (BMI) Screening and Follow-Up Plan | Same | Same | 7 | 0 |   |   |   |   |
| Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention | Same | Same |   |   |   |   |   |   |
| Use of Appropriate Medications for Asthma |   |   | Same | Same |   |   |   |   |
| Statin Therapy for the Prevention and Treatment of Cardiovascular Disease |   |   | Same | Same | Same | Same |   |   |
| Ischemic Vascular Disease (IVD): Use of Aspirin or Another Antiplatelet |   |   | Same | Same |   |   |   |   |
| Colorectal Cancer Screening |   |   | 0 | 6 | Same | Same |   |   |
| Preventive Care and Screening: Screening for Depression and Follow-Up Plan |   |   | 2 | 1 |   |   |   |   |
| Dental Sealants for Children between 6-9 Years | Same | Same |   |   |   |   |   |   |
| Controlling High Blood Pressure |  |  | 3 | 0 |   |   |   |   |
| Diabetes: Hemoglobin A1c (HbA1c) Poor Control (>9 percent) |   |   | Same | Same | Same | Same  |   |   |

Notes

* The greatest change in terms of number of removed codes can be seen in the measure Childhood Immunization Status. These codes belonged to the Value Set “Malignant Neoplasm of Lymphatic and Hematopoietic Tissue” and are generally extremely rare in children under 2 years of age.
* Two measures did not have new versions of measure descriptions or Value Sets: “Use of Appropriate Medications for Asthma” and “Dental Sealants for Children between 6-9 Years”
* One measure is new in 2019: “Statin Therapy for the Prevention and Treatment of Cardiovascular Disease”
* In previous years, the Value Set for IVD (measure “Ischemic Vascular Disease (IVD): Use of Aspirin or Another Antiplatelet”) changed dramatically. In 2019, this Value Set did not change.
* The Value Set for Pregnancy appears in the ICD columns for the row with the measure “Weight Assessment and Counseling for Nutrition and Physical Activity for Children” even though it is also applicable to other measures.
1. As previously discussed in a Data Standards and Integrity meeting, the PHQ-9 is not considered follow-up to a positive PHQ-2. The wording in the 2019 instructions is: “Do not count a PHQ-9 screening that follows a positive PHQ-2 screening during the measurement period as meeting the measurement standard for a follow-up plan to a positive depression screening” (page 90). Also discussed was the change to the tobacco measure, where “Cessation counseling intervention for a tobacco user must occur at or following the most recent screening and before the end of the measurement year” (page 84). [↑](#footnote-ref-1)