How Do You Use Codes Now?

Quality of Care
Billing
Medical Records

HEDS MEASURES DEFINITIONS

How Codes Are Used

Codes Impact Performance at All Levels
- Practice Level
- Practice group and state averages
- Health Plan
- MCO Level
- Direct and Indirect Care Costs
- State Medicaid Level

CODING: How Can You Use Codes to Gather Data?

Using Codes to Measure Performance
- Medical Aesthetics (ICD-10)
- Quality of Care Measures (HRQOL, ICD-10, etc.)
Coding: How can you use codes to gather data

Well Child 0 - 15 months - QTIP

- # of children 18-23 months of age who were seen during the measurement year who had 6 or more well child visits
- # of children 18-23 months of age seen during the measurement year who were assessed for oral health risk or had at least one fluoride varnish

Well Child 0 - 15 months - HEDIS

Well Child 3 - 6 years - QTIP

- # of children 3 to 6 years of age recently seen who had one or more well care visits with a primary care practitioner (PCP) during the measurement year
- # children 3 to 6 years of age recently seen who had documented discussion about diet or weight in the chart

Well Child 3 - 6 years - HEDIS

ADHD - HEDIS

- Intake: The 12-month window starting March 1 of the year prior to the measurement year and ending February 28 of the measurement year
- Negative Medication History: A period of 120 days (4 months) prior to the IUDS when the member had no ADHD medications dispensed for either new or refill prescriptions.
- Continuous Medication: The number of medication treatment days during the 10-month follow-up period must be ≥210 days (i.e., 300 treatment days - 90 gap days).

ADHD - HEDIS

<table>
<thead>
<tr>
<th>Column1</th>
<th>Denominator</th>
<th>Numerator</th>
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<tbody>
<tr>
<td>Initiation</td>
<td>3893</td>
<td>41%</td>
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<tr>
<td>Continuation</td>
<td>824</td>
<td>57%</td>
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ADHD - QTIP

- Percentage of newly diagnosed ADHD patients 6-12 years of age who had a follow-up visit within 30 days of when the first ADHD medication was dispensed
- Percentage of patients 6-12 years of age diagnosed with ADHD who have had at least 3 flu within a ten month period
- Percentage of children with newly prescribed stimulants with a diagnosis of ADHD who have a standardized instrument such as Vanderbilt or Conners recorded in their chart

Asthma MMA - 2 Year Criteria

1. At least one ED visit with asthma as the principal diagnosis
2. At least one asthma inhaler prescription filled within the previous year
3. At least four asthma attacks within a 12 month period, with asthma as one of the chief diagnoses and at least two asthma medication (IUPC) episodes
4. At least two asthma medications dispensed during one year

CHIPRA Asthma Measures

- Severity Classification
- Controller Prescription
- Asthma Action Plan
- Asthma Control Test / Spirometry / Peak Flow
- Flu Shots

External Reporting Resources

- Meeting with Managed Care Organizations
- Institute for Families in Coop during grant extension

QTIP Lessons Learned

Coding and Performance Measurement
Barriers to Coding for Quality
- Payer billing guidelines may differ
- Changes to physicians' coding
  - Practice billing staff
  - Larger health systems (centralized billing)
- EMR system
  - EMR systems inability to track pediatric measures
  - QTIP challenges in extracting the data for HI

QTIP Strategies for Success
- QI, including coding, is a TEAM sport.
  - Physicians, Nurses, and Office Staff
- Communicating changes in reimbursement policy to billing staff
- 50% of QTIP11 practices implemented changes in coding (billing and EMR).

Lessons Learned
- QTIP practices, as a group, perform higher than the state on most Core measures.
- QTIP practices are influencing performance improvement in the state.
- Quality improvement at the practice level is critical to measurable change for the state.

Questions?
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