

HEDIS Frequently Asked Questions



Several HEDIS measures require us to “lookback” to

prior years for evidence of potential exclusions. Members frequently join MVP with a medical or surgical history that would qualify for exclusion from a particular measure. For example:

- History of bilateral mastectomy will exclude a patient from the BCS (Breast Cancer Screening) measure;
- Those with a history of colon cancer or total colectomy are excluded from the COL (Colon Cancer Screening) measure;
- Those with a history of TAH, TVH, or absence of a cervix are excluded from the CCS (Cervical Cancer Screening) measure.

MVP is unaware of this history if one of these exclusions occurred while a member was insured by another health plan. These members appear on MVP Gap Lists until we are notified that they meet criteria to be excluded for the related measure. Forward medical record documentation reflecting such history in order to close these gaps.

Lookback timeframes may have occurred during a period when the member was not your patient. You will need to send documentation of each date/screening/procedure to close one of these gaps that may appear on your list for that reason. For example:

- The BCS (Breast Cancer Screening) measure requires female members 50–74 years of age to have a mammogram to screen for breast cancer between October 1 two years prior and December 31 of the current year.
- The COL (Colon Cancer Screening) measure requires members 50–75 years of age to have an appropriate screening test in a specified timeframe as follows:
 - Colonoscopy during this year and up to nine years prior
 - Flexible Sigmoidoscopy during this year and up to four years prior
 - FIT-DNA Test (i.e. Cologuard) during this year and up to two years prior
 - CT Colonography during this year and up to 4 years prior
- The CCS (Cervical Cancer Screening) measure requires female members 21–64 years of age to have a Pap performed every three years: the current year and up to two years prior;

Or, for women 30–64 years of age, a PAP+HPV co-testing every five years: the current year and up to four years prior in women who were at least 30 years of age on the DOS.

Note: This measure also requires documentation of the result of the screening.

Other measures with an associated “lookback” period include:

- ABA (Adult BMI Assessment)—For members 18–74 years of age, looks back to the measurement year and the year prior for documentation of weight and BMI for members 20 years and older. Members ages 18 and 19 require height, weight, and BMI percentile documentation for the same time span.
- CDC (Comprehensive Diabetes Care)—For members 18–75 years of age, the Retinal Eye Exam requirement is for completion of the exam during the measurement year, regardless of findings on the report. Exams from the prior year may be submitted only if the report is negative for diabetic or hypertensive retinopathy.

Members who have used Hospice services during the calendar year are excluded from ALL HEDIS hybrid measures during the same year. Hybrid Measures use a combination of claims data and medical record review. They are:

- ABA—Adult BMI Assessment
- ADL/QARR—Adolescent Preventive Care (NYS Quality Assurance Reporting Requirement)
- AWC—Adolescent Well Care
- CBP—Controlling High Blood Pressure
- CCS—Cervical Cancer Screening
- CDC—Comprehensive Diabetes Care
- CIS—Childhood Immunization Status
- COL—Colorectal Cancer Screening
- IMA—Immunizations for Adolescents
- LSC—Lead Screening in Children
- MRP—Medication Reconciliation Post-Discharge
- TRC—Transitions of Care
- W15—Well-Child in first 15 months of life
- W34—Well-Child 3,4,5,6 years of Age
- WCC—Weight Assessment and Counseling for Nutrition and Physical Activity for Children and Adolescents

Members living long-term in an institutional setting anytime during the measurement year are excluded from the BCS (Breast Cancer Screening), CBP (Controlling High Blood Pressure), COL (Colorectal Cancer Screening), and OMW (Osteoporosis Management in Women Who Had a Fracture) measures.

If your office is qualified to do POC testing (i.e. HbA1c, Urine protein testing, Lead screening, etc), remember to either send in a claim for the test **or** submit the lab result to ensure you are credited for ordering the testing.