Title:	Medical Records Review/ Data Validation & HEDIS Reporting Process				
Department/Line of Business:	Quality Improvement				
Approver(s):	VP CMO, SWHP				
Location/Region/Division:	SWHP				
Document Number:	SWHP.QLI.007.P				
Effective Date:	6/13/2017	**Last Review/ Revision Date:**	6/13/2017	**Origination Date:**	04/1/1998

LINE OF BUSINESS

This document applies to the following line(s) of business:
All SWHP & ICSW

DEFINITIONS

When used in this document with initial capital letter(s), the following word(s)/phrase(s) have the meaning(s) set forth below unless a different meaning is required by context. Additional defined terms may be found in the BSWH P&P Definitions document.

Medical record- the account compiled by physicians and other health care professionals of a variety of an individual's health information, such as assessment findings, treatment details and progress notes. The data sources include records or documentation maintained on an individual in any health care setting (for example: hospital, practitioner office). The medical record includes automated and paper medical record systems.

Electronic Medical Records (EMR) - should be more than a collection of scanned paper charts. They should have the capability to do index search and retrieval of records, labs or procedures.

Reviewers - Quality Improvement personnel with thorough knowledge of Scott & White Health Plan (SWHP) medical records standards, policies and procedures.

Texas Health and Human Services Commission (HHSC) - administrative agency within the executive department of the State of Texas.

POLICY

Scott and White Health Plan (SWHP) establishes standards for Medical Record Reviews (MRR) for addressing quality of care issues and quality improvement projects such as focused studies and Healthcare Effectiveness Data and Information Set (HEDIS). The standards are used to facilitate communication, coordination, and continuity of care to promote efficient and effective treatment for SWHP members.

PROCEDURE

The Quality Improvement (QI) department validates all encounter data by MRR of a random sample of the eligible population. The MRR verifies all screenings, services, treatment, etc. are preformed when due and as reported, and reported data is accurate and timely. All MRR must adhere to Health Insurance Portability and Accountability Act (HIPAA) Guidelines for keeping member information confidential and accessible by authorized users only.

SWHP establishes an explicit, quantifiable performance goal for each of the measures based on National Committee for Quality Assurance (NCQA) benchmarks. The data source, eligible population, coding, or other means of identifying the clinical process or outcome such as HEDIS Effectiveness of Care measures are used to provide measure specifications that provide enough detail to guide valid measurement.

SWHP conducts annual quantitative and qualitative analysis of the findings, which includes a comparison of results against goals, and casual analysis if goals are not met. SWHP annually measures the effectiveness of its QI program using HEDIS measures. Each selected measures identify a relevant process or outcome on the eligible population. A subset, or sample, of the eligible population is reviewed based on the HEDIS specification annually. The findings are presented to the Quality Improvement Subcommittee (QIS) to recommend and prioritize opportunities for improvement. SWHP submits the audited summary-level HEDIS data to NCQA and patient-level data is reported to the CMS designated patient-level data contractor and the Texas Health and Human Services Commission (HHSC).

ATTACHMENTS

None.

RELATED DOCUMENTS

None.

REFERENCES

2015 NCQA Health Plan Standards, QI 7 (J) Measuring Effectiveness
CMS Managed Care Manual Chapter 5
Texas Medicaid and CHIP Managed Care Contract, Attachment B-1, Section 8.1.20.1 Performance Measurementand Section 8.2.2.3.6 Data Validation
NCQA HEDIS® Roadmap