

SYNCRONYS

Webinar Series

March 15, 2022



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Key HEDIS
measure
changes for
2022
and how the
HIE can
help



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AGENDA

- News
- Featured Presentation:
***“Key HEDIS measure changes for 2022
and how the HIE can help”***



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SYNCRONYS LAUNCHING SOON:

- HBI Solutions Spotlight Analytic dashboards
- More radiology image sources
- More clinical data
- More notes
- Further integration of new solutions, e.g., Collective Medical insights and advance care planning from Vynca



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NEWS – WE'RE GROWING



[WWW.INDEED.COM](https://www.indeed.com) – SEARCH 'SYNCRONYS'



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"KEY HEDIS MEASURE CHANGES FOR 2022 AND HOW THE HIE CAN HELP"



Esther Morales, RN, MBA
Vice President of Clinical Strategy



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KEY HEDIS CHANGES FOR 2022

- Advance Care Planning: A discussion OR documentation about preferences for resuscitation, life-sustaining treatment, and end of life care
 - Separated from the Care of the Older Adult sub-measures and now a stand-alone measure.
 - Changed from previous measure to be a measure for all MAPD members, not just SNP members.
 - Changed from previous measure (all members 66+) to have members 66-80 only with advanced illness, frailty, or palliative care, and all members 81+.
 - Changed from previous measure to be administrative only, not hybrid with medical record for sample of members.
 - Requires patient information, and the date of the discussion or documentation (must be in the measurement year)



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KEY HEDIS CHANGES FOR 2022

- Three new standalone measures from the previous Comprehensive Diabetes Care (eliminating hemoglobin A1c (*HbA1c*) test and nephropathy screening):
 - A1c control (both <8 and poor control-more than 9)
 - Eye exam for patients with diabetes
 - Blood pressure control for patients with diabetes



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KEY HEDIS CHANGES FOR 2022



- Race and ethnicity is a required stratification for each product line, with new data tables, for the following measures:

- Controlling Blood Pressure
- HbA1c in Patients with Diabetes
- Colorectal Cancer Screening
- Prenatal and Post-Partum Care
- Children and Adolescent Well Care Visits

This advances NCQA's existing work dedicated to advancing health equity in data and quality measurement.

- Hospice is a required exclusion for all measures

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KEY HEDIS CHANGES FOR 2022



NCQA roadmap for the future is based on six themes:

- Flexibility (allowable adjustments)
- Accuracy (licensing and certification)
- Ease (digital measures)
- Insight (Electronic Clinical Data Systems (eCDS) reporting)
- Equity (closing care gaps)
- Access (telehealth)

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KEY HEDIS CHANGES FOR 2022



For ease, NCQA has a documented 5-year goal to make all HEDIS measures digital in the next 5 years. Better data, better measures, and better alignment.

For insight and eCDS reporting, there are several processes in place:

- Some current HEDIS measures have a transition period where they can be reported through the current method or through eCDS.
- After the transition period some measures are becoming Electronic Clinical Data System (eCDS) measures only such as COL.
- Many new measures start out as eCDS measures and are better measures that assess clinically relevant outcomes such as all the depression screening and outcome measures.

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HBI Spotlight Analytics



Jackie Porter, BSN, RNC-E
Director Client Success

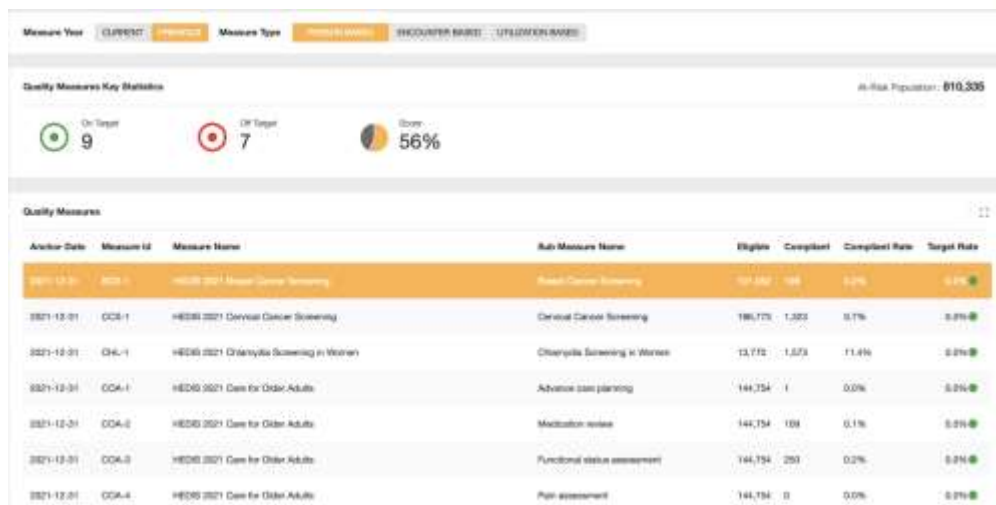


The Power to Predict, the Power to Act



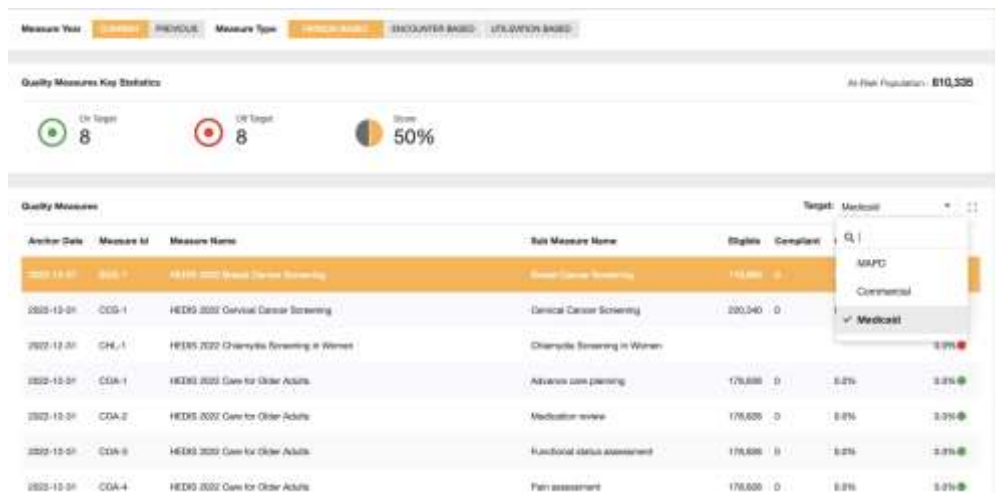
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QUALITY MEASURE DASHBOARD



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TARGET RATES BY LINE OF BUSINESS



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FILTERS AVAILABLE

Filters

- Demographics
- Attribution
- Geographic
- Dx and Disease
- Population Risk
- Measure**

Column: Compliant

Click to select

No

Yes

Clear All Apply Filter



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FILTERS AVAILABLE

Demographics

Age Group: Click to select

Gender: Click to select

Attribution

Payer Category: Click to select

PCP Group: Click to select

PCP: Click to select



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FILTERS AVAILABLE

Demographics
Attribution
Geographic
Dx and Disease
Population Risk
Measure

Geographic - US States

0 states, 0 counties selected

☒ NM - New Mexico

☐ Bernalillo County, NM

☐ Catron County, NM

☐ Chaves County, NM

☐ Cibola County, NM

☐ Colfax County, NM

☐ Curry County, NM

☐ De Baca County, NM

☐ Dona Ana County, NM

☐ Eddy County, NM

☐ Grant County, NM

☐ Guadalupe County, NM



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FILTERS AVAILABLE

Top Level Overview
Population Risk
Measure

ACUTE DISEASE GROUP

Acute Disease Group:

Acute Disease:

CHRONIC DISEASE GROUP

Chronic Disease Group:

Chronic Disease:

FACTORS INFLUENCING HEALTH GROUP

Social Determinants of Health:

EMF & Lifestyle Factors:

Other Factors Influencing Health:

OTHER FILTERS

Chronic Disease Count:

Pregnant Status:

Tobacco Use:

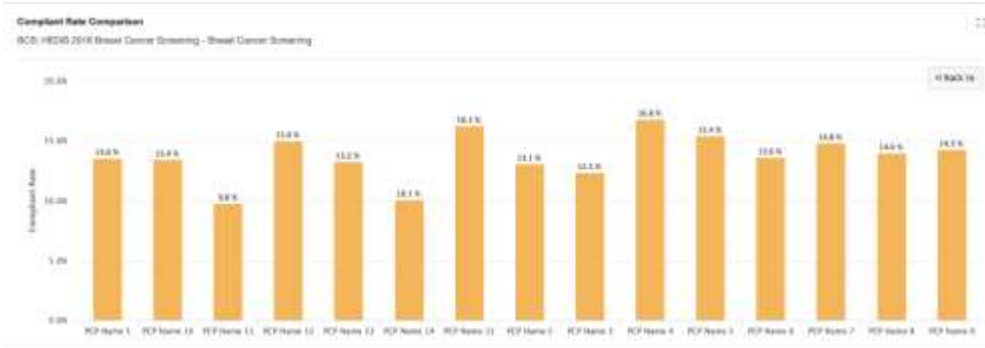


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COMPARE PERFORMANCE BY PCP GROUP

| PCP Group | Compliant Rate |
|-------------|----------------|
| PCP Group 1 | 11.25 |
| PCP Group 2 | 11.65 |
| PCP Group 3 | 11.75 |
| PCP Group 4 | 11.85 |
| PCP Group 5 | 11.55 |

AND PCP WITHIN A GROUP



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LIST OF NON-COMPLIANT MEMBERS

BCD: Breast Cancer Screening (Eligible Patients)
Showing 1 to 19 of 277 patients

| Patient ID | Last Name | First Name | DOB | Age | Gender | Compliant |
|------------|-----------|------------|------------|-----|--------|-----------|
| 130880 | Houssain | Lida | 1939-07-04 | 88 | Female | No |
| 127541 | Korred | Brenda | 1997-09-07 | 89 | Female | No |
| 130002 | Edison | Julie | 1949-08-14 | 88 | Female | No |
| 128821 | Gieson | Wilma | 1936-08-15 | 87 | Female | No |
| 126728 | Elmendorf | Jane | 1943-11-08 | 74 | Female | No |
| 122253 | Newton | Kristen | 1967-05-25 | 57 | Female | No |
| 130888 | Chudwick | Mary | 1936-07-11 | 87 | Female | No |
| 134180 | Browning | Agnes | 1905-10-03 | 87 | Female | No |
| 133887 | Murphy | Alexandra | 1946-12-26 | 88 | Female | No |
| 134820 | Browning | Bethelie | 1939-07-14 | 82 | Female | No |
| 125475 | Parade | Gloria | 1925-04-26 | 98 | Female | No |

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IDENTIFY ALL GAPS FOR A SINGLE MEMBER

Case: 3 Active Gaps 1 Open Gap

Patient-Sized Measures

| Anchor Date | Measure ID | Measure Name | Sub Measure Name | Last Compliant Date | Due Date | Compliant |
|-------------|------------|--|--|---------------------|------------|-----------|
| 2018-12-31 | ABA | HEDIS 2018 Adult BMI Assessment | Adult BMI Assessment | N/A | 2018-12-31 | No |
| 2018-12-31 | BCE | HEDIS 2018 Breast Cancer Screening | Breast Cancer Screening | N/A | 2018-12-31 | No |
| 2018-12-31 | CCG-1 | HEDIS 2018 Comprehensive Diabetes Care | Hemoglobin A1c (HbA1c) testing | 2018-06-27 | 2018-12-31 | Yes |
| 2018-12-31 | CCG-2 | HEDIS 2018 Comprehensive Diabetes Care | HbA1c poor control ($\geq 9.0\%$) | N/A | 2018-12-31 | No |
| 2018-12-31 | CCG-3 | HEDIS 2018 Comprehensive Diabetes Care | HbA1c control ($\leq 8.2\%$) | 2018-06-26 | 2018-12-31 | Yes |
| 2018-12-31 | CCG-4 | HEDIS 2018 Comprehensive Diabetes Care | HbA1c control ($\leq 7.9\%$) for a selected population | 2018-11-27 | 2018-12-31 | Yes |
| 2018-12-31 | CCG-5 | HEDIS 2018 Comprehensive Diabetes Care | Eye exam (retinal) performed | N/A | 2018-12-31 | No |
| 2018-12-31 | CCG-6 | HEDIS 2018 Comprehensive Diabetes Care | Medical attention for nephropathy | 2018-01-27 | 2018-12-31 | Yes |
| 2018-12-31 | CCG-7 | HEDIS 2018 Comprehensive Diabetes Care | BP control ($<140/90$ mm Hg) | 2018-04-27 | 2018-12-31 | Yes |
| 2018-12-31 | CCG | HEDIS 2018 Colorectal Cancer Screening | Colorectal Cancer Screening | N/A | 2018-12-31 | No |



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Advance Care Planning Review



Lorrie Griego
Director, Presbyterian Advance Care Planning

Director, New Mexico MOST



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Ensuring that patients are at the center of their healthcare

The Hallmarks of Effective Advance Care Planning

- Supports patients in creating an effective plan
 - A well prepared agent
 - Specific instructions
- Plans are available to treating physician / provider
- Plans are incorporated into patient care

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HEDIS and Advance Care Planning



Intent:

Advance care planning is associated with improved quality of life, increased provider trust and decreased hospitalization. This measure will allow plans to understand if advance care planning is provided to beneficiaries who are most likely to benefit from it.



Meeting the Measure:

Advance Care Planning evidence must include either the presence of an Advance Care Plan in the Medical Record or documentation of advance care planning discussion and the date it was discussed.

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Advance Care Planning Documents

- Living Will
 - Document that provides information about care choices
- Medical Durable Power of Attorney
 - Document that names a person to speak on a patient's behalf if they are unable to make or voice decisions.

Advance care planning documents frequently combine both areas in one advance directive document.

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Advance Care Planning in New Mexico



- Appropriate for all adult patients
- No Required Form



- Signed by the individual (patient)
- Notary / witness not required



Traditional
Advance Directive



New Mexico Medical Orders
for Scope of Treatment



- Used when an individual has a life-limiting illness or is very sick



- Transferable across all healthcare settings



- Signed by the patient or their legally recognized healthcare decision maker AND an authorized healthcare provider

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Amadeus | FLAUBERT, Gustave | 101 Male | 100 Dec-11-1959 (62y)

Amadeus | Patient Summary | Coordinates | Pathway | Telephone | External Record | Patient Sourced Data | Images | Adv Directives/MOST

Clinical Documents
Showing: All | Mark All As Read | Group By: Category | Sort By: Date

- Patient Summary
- BUA Print Results
- PDMP Report URL
- Medication Claim History
- Dynamic Documents (1)
- Hsp C Summary (1)
- Laboratory (9 / 23)
- Radiology (16 / 27)
- Transcribed Documents (1 / 2)
- Transition of Care (1)

Other Identifiers

- 99677 (Collective Medical)
- 03458-3454 (Clemens St Vincent Regional Med Ctr)
- 70230 (Miners Collax Medical Center)
- 70240 (Miners Collax Medical Center)
- AAA-01006-0 (ORION)
- AAA-02001-0 (ORION)
- AAA-02100-7 (ORION)

Demographics

Address: 0500 Jagan Drive, Santa Fe, NM, 87507, (Home)

Phone: 505-655-2026 (Mobile)

Phone: +1(505) 655-2026 (Home)

Emergency Contact

Name: ARCHE, ELLEN

Phone: 505-641-0094 (Home)

Allergies

| Details | Reactions | Onset Date | Type | Source |
|---|------------------|---------------------|---------------|--------|
| Allergy to Peanuts | Anaphylaxis | On Date 15-Jan-2012 | Food | CW, I |
| No known Allergies | UNKNOWN | UNKNOWN | Miscellaneous | MOH |
| NEOMYCIN/POLYMYXIN (DEXAM) 0.1 % Suspension | redness/swelling | UNKNOWN | Miscellaneous | MOH |

Encounter History

| Admission | Discharge | Admit Reason | Discharge Diagnosis | Visit Type | Specialty | Facility | Physician | Attending |
|-------------|-------------|------------------|--|------------|-----------------|------------------------------|---------------|--------------------|
| Jan-10-2021 | Jan-10-2021 | LEFT SIDE PAIN | Calculus of ureter | Emergency | | Miners Collax Medical Center | | HELEE KING |
| Apr-20-2020 | Apr-20-2020 | I | | Outpatient | | Miners Collax Medical Center | | CHRISTINE LOPEZ MD |
| Apr-11-2008 | Apr-16-2008 | | | Inpatient | Medical Service | Red Regional Hospital | Dr Joe MARTIN | Joe Martin |
| Apr-11-2008 | Apr-14-2008 | Nausea (Ongoing) | Hepatitis A - current infection (Ongoing) (1 of 2 diagnoses) | Inpatient | Medical Service | Red Regional Hospital | Dr Joe MARTIN | Joe Martin |

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► TASK LIST

► COMMUNICATE

▼ ADVANCE DIRECTIVES AND MOST FORMS

Digital Advance Care Planning Tools

► PORTAL MESSAGING

SHOW

LAST

SYNCRONYS
BETTER DATA. BETTER HEALTH.

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SYNCRONYS
IMMEDIATE CARE HEALTH

Report Problem ? April Salary: 1

Patient Search

HIDE SEARCH FIELD

Fill in Patient's Information

Required Search Information

Q Gustave Flaubert

Additional Information

Gender

☒ Male

☐ Female

☐ Other

Date of Birth

12 11 1959

SSN (Last 4 Numbers)

9999

SEARCH

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Patient Search

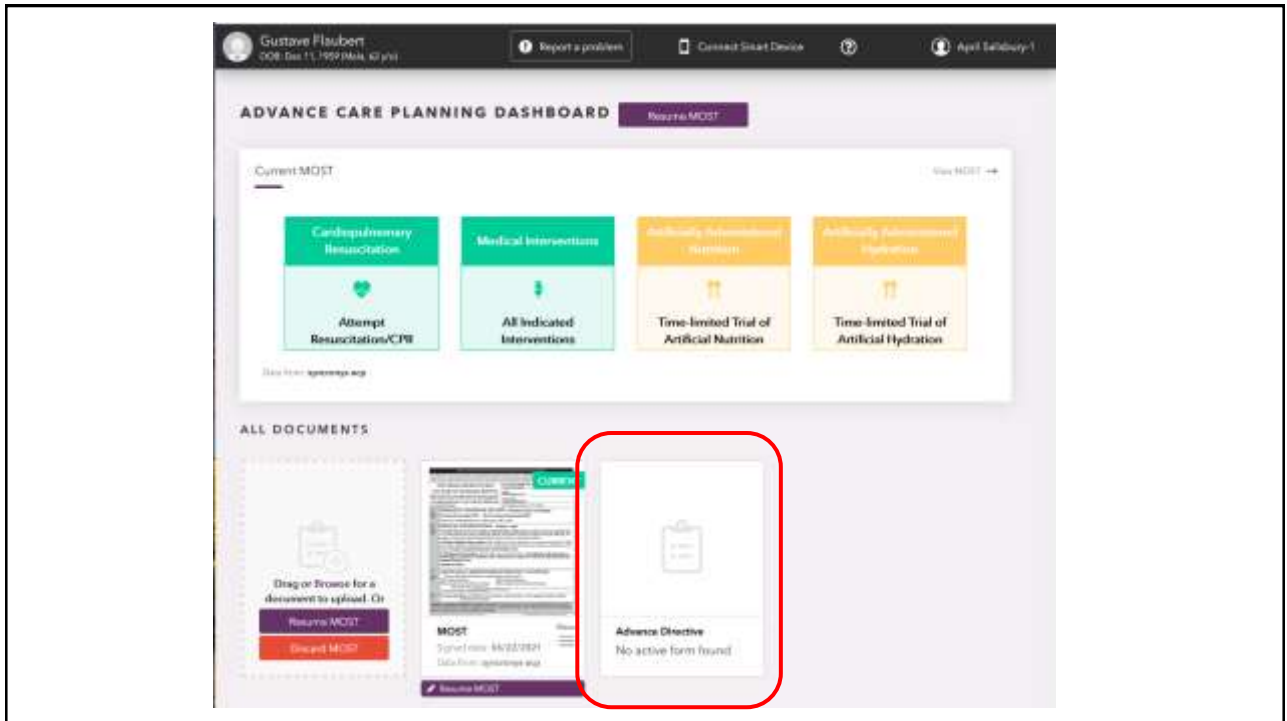
SHOW SEARCH FIELD

Search Results

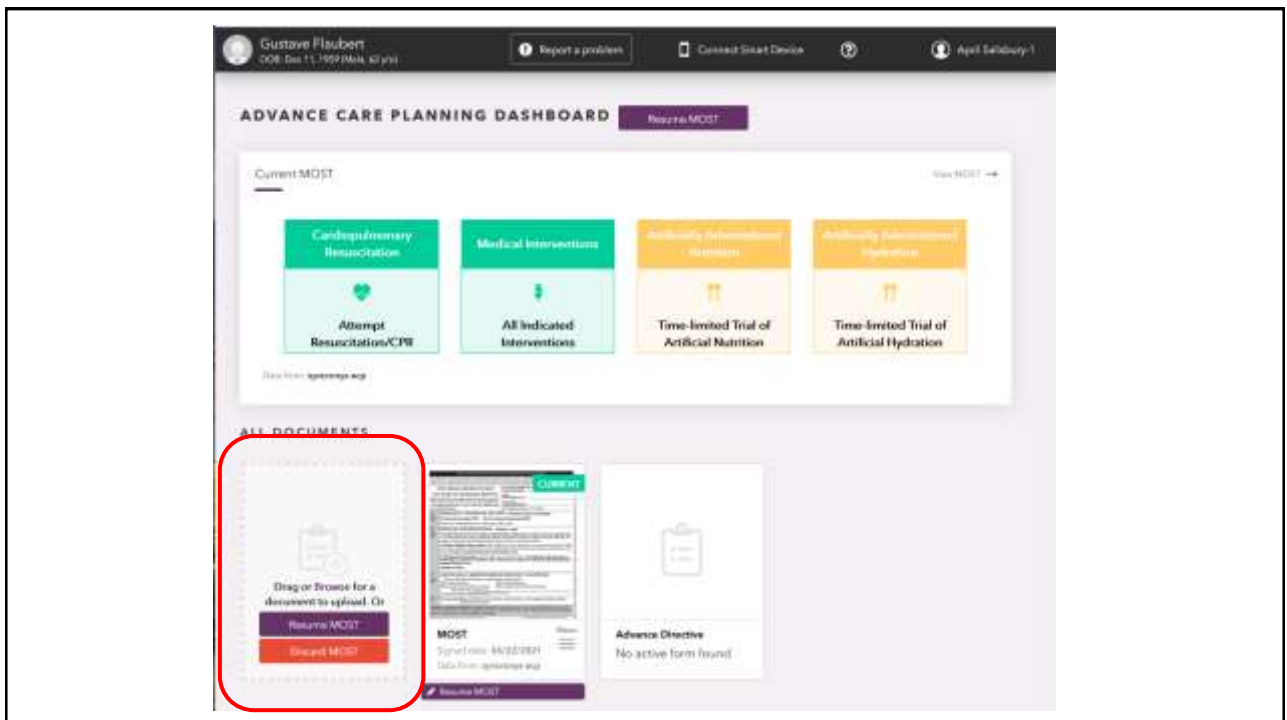
| NAME | DATE OF BIRTH | SSN | FACILITY NAME | POLST AVAILABLE | GENDER | view more > |
|------------------|---------------|-------------|---------------|-----------------|--------|-------------|
| Gustave Flaubert | 1959-12-11 | ***-**-6789 | Synchronys | Yes | Male | |

Did not find the patient you were looking for? Add Patient

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Gustave Flaubert
DOB: Dec 11, 1959 (Male, 62 y/o) | Language: English | VOID/REMOVE form | Download | Print

Gustave Flaubert (Male, 62 y/o) | Data from: synchronys-acp

SEND FORM WITH PATIENT WHENEVER TRANSFERRED OR DISCHARGED

This medical order is consistent with the patient's wishes and should be considered in the same manner as a DNR order issued prior to a hospitalization. The New Mexico MOST is an advance healthcare directive or healthcare decision and must be honored in accordance with state law (NMSA 1978§24-7A-1 et seq.). If there is a conflict between this directive and an earlier directive, the most current choices made by the patient or the Healthcare Decision Maker shall control.

| | | |
|--|--|---|
| New Mexico Medical Orders For Scope of Treatment (MOST) First follow these orders, then contact the healthcare provider. These medical orders are based on the person's current medical condition and preferences. Any section not completed does not invalidate the form. | | Last Name/First/Middle Initial Flaubert/Gustave/ |
| | | Address 6599 Jaguar Drive |
| | | City/State/Zip Santa Fe/NM/87507 |
| | | Date of Birth (mm/dd/yyyy) 12/11/1959 |

A
Check One

EMERGENCY RESPONSE SECTION: Person has no pulse or is not breathing.

☒ Attempt Resuscitation/CPR ☐ Do Not Attempt Resuscitation/DNR

When not in Cardiopulmonary arrest, follow orders in B, C and D.

B
Check One

MEDICAL INTERVENTIONS: Patient has a pulse

☐ **Comfort Measures:** Do not transfer to hospital unless comfort needs cannot be met in current location. Use medication by any route, positioning, wound care and other measures to relieve pain and suffering. Use oxygen, suction and manual treatment of airway obstruction as needed for comfort.

☐ **Limited Additional Interventions:** May include care as described above. Use medical treatment, IV fluids and cardiac monitor as indicated. Do not use intubation, advanced airway interventions, or mechanical ventilation. Transfer to hospital if indicated. Avoid Intensive Care

Images, white photocopies, faxes and electronic scans are valid.

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QUESTIONS



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YOUR CUSTOMER ENGAGEMENT TEAM



UNMH/SRMC | City, State, and Local Government | Fire/Rescue | Shelters –

April Salisbury, Director Onboarding & Training
asalisbury@synchronys.org; 505-938-9905

Payers | PHS | City, State, and Local Government | Shelters –

Terri Stewart, Chief Administrative Officer
tstewart@synchronys.org; 505-938-9909



Ambulatory Clinic Groups/Systems | Specialty Clinics | Federally Qualified Health Centers –

Renee Sussman, Customer Relationship Manager
rsussman@synchronys.org; 505-938-9914



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YOUR CUSTOMER ENGAGEMENT TEAM



Hospitals (Western NM) | Indian Health Service | Tribal Health Systems/Clinics –

Mona Benally, Customer Relationship Manager
rbenally@synchronys.org; 505-938-9915

Hospitals (East of I-25 and Metro) | Diagnostic Facilities –

Victor Miramontes, Customer Relationship Manager
vmiramontes@synchronys.org; 505-938-9902



**Federal, State, and County Corrections
 Skilled Nursing Facilities | Long Term Care |
 Rehabilitation | Home Care | Hospice –**

Jerry Martinez, Customer Relationship Manager
jmartinez@synchronys.org; 505-938-9916



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