February 5, 2015

Statewide Medicaid Managed Care (SMMC) Policy Transmittal

Policy Transmittal: 15-06

Applicable to:
- Comprehensive Long-term Care (LTC) Plan
- Managed Medical Assistance Health Maintenance Organization
- Managed Medical Assistance Provider Service Network
- Managed Medical Assistance Specialty Plan
- Children’s Medical Services Network Plan

Re: HEDIS 2015 (Calendar Year 2014) Performance Measure Reporting

By July 1 of each contract year, each managed care plan must deliver to the Agency a report on performance measure data and a certification by a National Committee for Quality Assurance (NCQA) certified HEDIS auditor that the performance measure data reported for the previous calendar year are fairly and accurately presented. (Attachment II, Section VII.B.2.a.) The managed care plan must meet Agency-specified performance targets for all performance measures. For HEDIS and Agency-defined measures, the Agency established performance targets prior to execution of the Contract. The Agency may change these targets and/or change the timelines associated with meeting the targets. The Agency must make these changes with sixty (60) days' advance notice to the managed care plan. (Attachment II, Section VII.B.4.a.) A report, certification or other information required for performance measure reporting is incomplete when it does not contain all data required by the Agency or when it contains inaccurate data. (Attachment II, Section VIII.B.2.b)

Managed care plans must submit performance measure data as specified in Section XIV, Reporting Requirements, the Managed Care Plan Report Guide and Performance Measures Specifications Manual. (Attachment II, Section VII.B.1.) The performance measure report that Managed Medical Assistance (MMA) plans submit to the Agency by July 1, 2015 (representing calendar year 2014 data) should include any eligible enrollees who were enrolled in the plan during calendar year 2014, whether they were in a Reform, Non-Reform, or MMA plan, or some combination of plans. The enrollees must meet the continuous enrollment criteria across contracts for the performance measure. For example, if a performance measure requires only three months of continuous enrollment during the measurement year, you may have enrollees

1 The contract citation for the CMSN plan is Attachment I, Section VII.B.2.a.
2 The contract citation for the CMSN plan is Attachment I, Section VII.B.1.d.
3 The contract citation for the CMSN plan is Attachment I, Section VII.B.2.b
4 The contract citation for the CMSN plan is Attachment I, Section VII.B.1.
who met this criterion in Reform, Non-Reform, and MMA, and they would all be included in one rate calculation for the measure. For any measures requiring 12 months of continuous enrollment with no more than a one-month gap, an enrollee must have been enrolled in the health plan under Reform or Non-Reform and MMA in order to meet this criterion.

Despite the following measures being removed from HEDIS 2015, managed care plans serving MMA enrollees will still be required to report on Comprehensive Diabetes Care: LDL Screening and Comprehensive Diabetes Care: LDL-C Control for July 1, 2015 reporting, using HEDIS 2014 specifications. Managed care plans serving MMA enrollees will also be required to report on three of the HIV/AIDS performance measures for July 1, 2015 reporting: Highly Active Anti-Retroviral Treatment (HAART), HIV-Related Outpatient Medical Visits (HIVV), and Viral Load Suppression Among Persons in HIV Medical Care (VLS). For HAART and HIVV, please refer to the attached technical specifications for July 1, 2014 reporting. Specifications for VLS can be found in the Medicaid Adult Core Set Technical Specifications Manual released in May 2014 found here: [http://www.medicaid.gov/Medicaid-CHIP-Program-Information/By-Topics/Quality-of-Care/Downloads/Medicaid-Adult-Core-Set-Manual.pdf](http://www.medicaid.gov/Medicaid-CHIP-Program-Information/By-Topics/Quality-of-Care/Downloads/Medicaid-Adult-Core-Set-Manual.pdf).

If you have any questions, please contact your Agency contract manager at (850) 412-4004.

Sincerely,

[Signature]

Beth Kidder  
Assistant Deputy Secretary for Medicaid Operations

BK/ktd  
Attachment