



Subject: HEDIS 2011 Data Collection for UnitedHealthcare and Affiliated Commercial, Medicare and Medicaid/CHIP Plans (See Enclosed FAQ for Additional Membership and Plan Information)

Dear Physicians and Health Care Professionals:

We value our relationship with you, and we appreciate the care you provide to the people we insure. In today's health care environment, quality improvement, performance assessment, and transparent reporting have emerged as key expectations for all system participants. Health plans, physicians, hospitals and other health facilities are all linked by activities designed to improve care outcomes and facilitate more informed patient/consumer decisions. In this regard, the Healthcare Effectiveness Data and Information Set (HEDIS) is used by more than 90 percent of America's health plans to measure performance on important dimensions of care and service. HEDIS data collection and reporting is also mandated by the Centers for Medicare & Medicaid Services (CMS) for Medicare Advantage plans, including Special Needs Plans. Not only does the information and assessment derived from this review support improved physician performance, but it also provides transparent assessment of health plan performance.

To facilitate its assessment, HEDIS incorporates standardized processes to capture medical record information and integrate it with claims-based data elements. UnitedHealthcare has contracted with several vendors (KDJ Consultants, MedAssurant, Inc., Outcomes Health Information Solutions, Q Mark, Inc., and Unival, Inc.) to facilitate medical record review. One of these vendors will contact you, beginning in February 2011, to arrange convenient collection of certain medical record information. The vendor will notify you if the records will be reviewed in your office or if they can be submitted by fax or mail. Our contracts with these vendors stipulate explicit criteria for working with your office in a respectful, non-disruptive, and efficient manner. Of course, these vendors are subject to confidentiality obligations and HIPAA business associate requirements (as described below).

In addition, internal UnitedHealthcare staff may contact you directly for certain medical record information to be faxed or mailed.

Network participants are contractually required to provide medical record information so that we may fulfill our state and federal regulatory and accreditation obligations. As you are aware, HIPAA regulations permit a covered entity, such as a physician practice, to disclose protected health information (PHI) to another covered entity, such as a health plan, without obtaining an enrollee's authorization or consent, for the purpose of facilitating health care operations.

Under HIPAA, health care operations include disclosure of PHI for accreditation (e.g., HEDIS reporting) and certification activities. These disclosures may be made to a business associate, acting on behalf of the covered entity. The American Recovery and Reinvestment Act of 2009 (ARRA) also permits release of records. Our vendors have executed HIPAA-compliant business associate agreements to perform the medical records reviews.

To give you adequate time to prepare the necessary information, we will provide you with a patient list in the next few weeks. If any of the patients listed are not currently in your practice or facility, you will have the opportunity to update the vendor's information. In advance, we appreciate your facilitation of this important initiative. If you have any questions or concerns, we can be reached at 877-211-6545 or uhc_hedis_help@uhc.com.

Sincerely,

Handwritten signature of Sam Ho in black ink.

Sam Ho, MD
Executive Vice President,
Chief Medical Officer
UnitedHealthcare

Handwritten signature of Rhonda Randall in black ink.

Rhonda Randall, DO
VP Medical Management
Chief Medical Officer
UnitedHealthcare Medicare & Retirement

Handwritten signature of Eric Yoder in black ink.

Eric Yoder, MD
SVP Clinical & Health Services
UnitedHealthcare Community Plan

HEDIS 2011 Frequently Asked Questions

1. What is HEDIS?

Healthcare Effectiveness Data and Information Set (HEDIS) is a standardized set of performance measurements developed by the National Committee for Quality Assurance (NCQA, www.ncqa.org) to evaluate consumer health care.

2. What UnitedHealthcare membership is included in HEDIS?

HEDIS data collection pertains to members enrolled in any UnitedHealthcare medical health plan, including those offered by UnitedHealthcare, Oxford, PacifiCare, Neighborhood Health Partnership, M. D. IPA and Optimum Choice, Inc.; members enrolled in any UnitedHealthcare Medicare medical health plan, including those offered by SecureHorizons[®], Evercare[®], and AARP[®] MedicareComplete[®] from SecureHorizons; and members enrolled in any UnitedHealthcare Medicaid medical health plan, including UnitedHealthcare, AmeriChoice by UnitedHealthcare, Great Lakes Health Plan, Unison and Arizona Physicians IPA.

Medicaid and Medicare guidelines require completion of HEDIS data collection annually to meet contract requirements.

3. Does HIPAA permit me to release records to a UnitedHealthcare representative or designated vendor for HEDIS data collection?

Yes. You are permitted to disclose protected health information (PHI) to the vendors who are acting on our behalf, as UnitedHealthcare business associates. A signed consent form from the member is not required under the HIPAA privacy rule for you to release the requested information to the vendors. The following link provides more information about the HIPAA privacy rule. <http://www.hhs.gov/ocr/privacy/>

4. Does the American Recovery and Reinvestment Act of 2009 (ARRA) also permit me to release records to a UnitedHealthcare representative or designated vendor for HEDIS data collection?

Yes. While the ARRA maintains and expands the current HIPAA patient health information privacy and security protections, physicians are allowed to disclose patient health information for health care operation purposes as under the current HIPAA rules. (See question 3 above.)

5. Is my participation in HEDIS data collection mandatory?

Yes. Network participants are contractually required to provide medical record information so that we may fulfill our state and federal regulatory and accreditation obligations.

6. Do I have to participate even if I participate in one of the NCQA Recognition Programs?

Yes. NCQA Recognition Programs do not satisfy HEDIS data collection requirements.

7. Who are the contracted vendors and what is their relationship with UnitedHealthcare? UnitedHealthcare has contracted with KDJ Consultants, MedAssurant, Inc., Outcomes Health Information Solutions, QMark, Inc., and Unival, Inc. These medical record review vendors met stringent criteria related to HIPAA and confidentiality designed to document their ability to successfully complete all aspects of the HEDIS project. As contracted entities to UnitedHealthcare, they function as our partners in completing HEDIS data collection.

8. How should I provide the records to the contracted vendor?

The vendor will either schedule an onsite review at your location or ask that you fax or mail the information to them. The methodology chosen will typically depend on the volume of records being requested from your office.

9. Will anyone else contact our office on behalf of UnitedHealthcare for records?

Yes. UnitedHealthcare internal staff may contact you directly for records.

10. How should I provide the records to internal health plan staff?

You will be requested to either fax or mail the records directly to a UnitedHealthcare location.

11. Should I allow a record review for a member who is no longer with UnitedHealthcare or for a member who is deceased?

Yes. Medical record reviews may require data collection on services obtained over multiple years.

12. Am I required to provide medical records for a member who was seen by a physician who has retired, died or moved?

Yes. HEDIS data collection includes reviewing medical records as far back as 10 years. Archived medical records/data may be required to complete data collection.

13. What is my office's responsibility regarding HEDIS data collection?

You and your office staff are responsible for responding to the contracted vendor's request for medical record documentation in a timely manner. The vendor will contact your office to establish a date for either onsite, fax or mail data collection. A patient list will be faxed to you so the requested medical records can be made available for the appointment or for faxing/ mailing the documentation to the vendor. If a patient included on the vendor list is not part of your practice, you should notify the vendor immediately.

14. Who should be responsible for coordinating this process in my office?

Your office manager or another employee you designate should be responsible for making records available for onsite reviews or fax/mail. In offices with a medical record department, the office manager or your designee should coordinate with the medical records contact so he or she knows that the request was authorized.

15. When will the vendor or internal health plan staff need the records?

HEDIS data collection is a time sensitive project. Medical records should be made available on the date of the onsite review, or by the date requested, in the case of fax/mail. Typically, data collection begins in mid to late February and ends in late May.

It is imperative that you respond to a request for medical records within five business days to ensure we are able to report complete and accurate rates to state and federal regulatory bodies, as well as NCQA.

16. Will I be reimbursed for copies/materials?

Generally we do not reimburse for medical record copies requested for HEDIS data collection. If you have additional questions, please refer to your participation agreement or talk to your UnitedHealthcare network representative. Most vendors have laptop scanning capabilities that create a digital image, making record copying unnecessary. However, vendors without this capability require their representatives to make copies of the pertinent chart documentation to comply with the intent of the measure.

17. May I request a specific data collection method?

The health plan and the vendor representatives evaluate provider demographics to determine record volume by site, measure, and geographical location to identify the most appropriate collection methodology. We will be as flexible as possible in determining the collection methodology for your organization.

18. What are Risk Adjustment record reviews and are they the same as HEDIS?

No. Risk Adjustment reviews are not the same as HEDIS. Risk Adjustment reviews capture medical record documentation to determine a Medicare patient's health status and ultimately ensure accurate coding and reimbursement.

19. To whom should I speak if I have further questions/concerns regarding HEDIS data collection?

You may reach us at 877-211-6545 or uhc_hedis_help@uhc.com.

Note:

If you were contacted to fax medical record documentation for HEDIS in 2010, it is possible you may be contacted again in 2011. It is imperative that you respond to a request for medical records within five business days to ensure we are able to report complete and accurate rates to state and federal regulatory bodies, as well as NCQA.