

ATTACHMENT 19
**HCIP -FOURTH (4TH) YEAR
BENCHMARKS REFERENCE GUIDE**
Amendment O (2021-2022)
Plan Vital



PUERTO RICO HEALTH INSURANCE ADMINISTRATION
ADMINISTRACIÓN DE SEGUROS DE SALUD DE PUERTO RICO

HEALTH CARE IMPROVEMENT PROGRAM



HEALTH CARE IMPROVEMENT PROGRAM BENCHMARKS
FOURTH YEAR
BENCHMARKS REFERENCE GUIDE
GOVERNMENT HEALTH PLAN PROGRAM
NOVEMBER 1, 2018 – SEPTEMBER 30, 2022

Vol:1

Revised July 14, 2021



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HEALTH CARE IMPROVEMENT PROGRAM 2020 BENCHMARKS REFERENCE

HIGH COST CONDITIONS	SCORED MEASURES	2020 BENCHMARKS (1/1/2020-12/31/2020)
Medicaid/Federal and State High Cost Conditions		
Cancer	• Readmissions rate	12.28
	• PHQ-9	17.79
End-Stage Renal Disease (ESRD)	• Admissions/1000	49.80
	• PHQ-9	16.58
Multiple Sclerosis	• Admissions/1000	31.70
CHIP High Cost Conditions		
Cancer	• Readmissions rate	N/A
Children and Youth with Special Healthcare Needs (CYSHCN)	• Child and Adolescent Well-Care Visits	47.12
	• Annual Dental Visits	44.61
Autism	• Child and Adolescent Well-Care Visits	41.21

CHRONIC CONDITIONS	SCORED MEASURES	2020 BENCHMARKS (1/1/2020-12/31/2020)
Medicaid/Federal, State, and CHIP Chronic Conditions		
Diabetes	• Comprehensive Diabetes Care:	
	○ HbA1c	70.37
	○ Eye exam	20.89
	○ Kidney Health Evaluation for Patients with Diabetes	9.33
	• Admissions/1000	41.36
Asthma	• Admissions/1000	32.48
	• ED Use/1000	164.91
	• PHQ-9	13.18
Medicaid/Federal and State Chronic Conditions		
Severe Heart Failure	• Admissions/1000	80.13
	• PHQ-9	15.73



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CHRONIC CONDITIONS	SCORED MEASURES	2020 BENCHMARKS (1/1/2020-12/31/2020)
Hypertension	<ul style="list-style-type: none"> ED Use/1000 	51.03
Chronic Obstructive Pulmonary Disease (COPD)	<ul style="list-style-type: none"> Admissions/1000 	69.74
Chronic Depression	<ul style="list-style-type: none"> Follow up after Hospitalization for Mental Illness: 7 days 	45.65
	<ul style="list-style-type: none"> Follow up after Hospitalization for Mental Illness: 30 days 	73.26
	<ul style="list-style-type: none"> Inpatient Admission/1000 	52.13

EFFECTIVENESS OF CARE	SCORED MEASURES	2020 BENCHMARKS (1/1/2020-12/31/2020)
BCS	<ul style="list-style-type: none"> Breast Cancer Screening 	57.90
CCS	<ul style="list-style-type: none"> Cervical Cancer Screening 	43.43
COL	<ul style="list-style-type: none"> Controlling High Blood Pressure 	41.60
SSD	<ul style="list-style-type: none"> Diabetes Screening for People with Schizophrenia or Bipolar Disorder who are using Antipsychotic Medications. 	49.74
FUH	<ul style="list-style-type: none"> Follow-Up After Hospitalization for Mental Illness: 30 days 	71.51
ÁAP	<ul style="list-style-type: none"> Adults' Access to Preventive/Ambulatory Health Services 	69.15
ADV	<ul style="list-style-type: none"> Annual Dental Visit 	36.85
PPC	<ul style="list-style-type: none"> Timeliness of Prenatal Care 	66.15
	<ul style="list-style-type: none"> Postpartum Care 	33.91
AWC	<ul style="list-style-type: none"> Child and Adolescent Well-Care-Visits 	28.75

ER HU INITIATIVE	SCORED MEASURES	2020 BENCHMARKS (1/1/2020-12/31/2020)
ER	Overall emergency room utilization rate x 1,000 on identified population with 7 or more visits to the emergency room	946.21



ATTACHMENT 19
CODE BOOK FOR THE FOURTH (4TH) YEAR

Amendment O (2021-2022)

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HEALTH CARE
IMPROVEMENT
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HEALTH CARE IMPROVEMENT PROGRAM CODE BOOK I

GOVERNMENT HEALTH PLAN PROGRAM

NOVEMBER 1, 2018 – SEPTEMBER 30, 2022

Code Book for the fourth year

Vol:1



I.1 Scored Measures for 2021-2022

I.1.1 High Cost Conditions Initiative

Readmissions rate	
Technical specifications	Plan all cause (PCR) metric: HEDIS MY 2020 & MY 2021, Volume 2 technical specifications .
PHQ-9	
Definition	The PHQ-9 is a multipurpose instrument for screening, diagnosing, monitoring and measuring the severity of depression.
Numerator	Patients in the denominator who were screened with a PHQ-9 test during the measurement period.
Denominator	All eligible population with the condition during the measurement year or period.
Continuous enrollment	N/A
Allowable gap	N/A
Description	Codes
	<p>CPT: 96127 Brief emotional/behav asmt</p> <p>G8431: Screening for depression is documented as being positive and a follow-up plan is documented Short Description: Pos clin depres scrn f/u doc</p> <p>G8510: Screening for depression is documented as negative, a follow-up plan is not required; Short description: Scr dep neg, no plan reqd</p> <p>Other: Supplementary Data (test performed by case managers among others)</p>
Exclusions	N/A
Admissions/1000	
Definition	Discharges for a principal diagnosis of selected conditions (see HCIP Manual) per 1,000 enrolled population. Excludes obstetric admissions and transfers from other institutions.
Numerator	Discharges for members with a principal diagnosis (ICD-10-CM) which meet the criteria of the applicable initiative/condition



Denominator	All eligible population with the condition during the measurement year or period.
Continuous enrollment	N/A
Allowable gap	N/A
Description	Codes
	Revenue codes: See Appendix A
Exclusions	Exclude cases: With admission source for transferred from a different hospital or other health care facility UB04 Admission source - 2, 3) With a point of origin code for transfer from a hospital, Skilled Nursing Facility (SNF) or Intermediate Care Facility (ICF), or other healthcare facility (Appendix A) (UB04 Point of Origin - 4,5,6) - With missing gender (SEX=missing), age (AGE=missing), quarter (DQTR=missing), year (YEAR=missing), principal diagnosis (DX1=missing)
ED (Emergency room) Use/1000	
Definition	For members 18 years of age and older, the number of observed emergency department (ED) visits during the measurement year. *ED visits for a principal diagnosis of selected conditions (see HCIP Manual).
Numerator	The number of all ED visits during the measurement year. Count each visit to an ED once, regardless of the intensity or duration of the visit. *ED visits for a principal diagnosis of selected conditions (see HCIP Manual).
Denominator	All eligible population with the condition during the measurement year or period.
Continuous enrollment	N/A
Allowable gap	N/A.
Description	Codes



	<p>CPT: 99281-99285, 99288</p> <p>Place of service code: 23</p> <p>Use the following reference:</p> <ul style="list-style-type: none"> - ED Visits from HEDIS Ambulatory Care (HEDIS MY 2020 & MY 2021, Volume 2 technical specifications). - ED Use ICD10 codes tab from the Code Book II Health Care Improvement Program
Exclusions	<p>HEDIS MY 2020 & MY 2021, Volume 2 technical specifications:</p> <p>The measure does not include mental health or chemical dependency services. Exclude visits for mental health or chemical dependency. Any of the following meet criteria:</p> <ul style="list-style-type: none"> • A principal diagnosis of mental health or chemical dependency (Mental and Behavioral Disorders Value Set). • Psychiatry (Psychiatry Value Set). • Electroconvulsive therapy (Electroconvulsive Therapy Value Set).
Emergency Room High Utilizers Initiative	
Definition	Overall emergency room utilization rate x 1,000 on identified population with 7 or more visits to the emergency room
Numerator	Total Number of ER Visits incurred by members with 7 or more ER Visits
Denominator	Total members with 7 or more ER Visits
Continuous enrollment	N/A
Allowable gap	N/A
Description	<p>CPT: 99281-99285, 99288</p> <p>Place of service code: 23</p>




Exclusions	HEDIS MY 2020 & MY 2021, Volume 2 technical specifications: The measure does not include mental health or chemical dependency services. Exclude visits for mental health or chemical dependency. Any of the following meet criteria: <ul style="list-style-type: none"> • A principal diagnosis of mental health or chemical dependency (Mental and Behavioral Disorders Value Set). • Psychiatry (Psychiatry Value Set). • Electroconvulsive therapy (Electroconvulsive Therapy Value Set).
(ADV) Annual Dental Visit	
Technical specifications	HEDIS MY 2020 & MY 2021, Volume 2 technical specifications
(AAP) Adults' Access to Preventive/Ambulatory Health Services	
Technical specifications	HEDIS MY 2020 & MY 2021, Volume 2 technical specifications
(WCV) Child and Adolescent Well-Care Visits	
Technical specifications	HEDIS MY 2020 & MY 2021, Volume 2 technical specifications
(BCS) Breast Cancer Screening	
Technical specifications	HEDIS MY 2020 & MY 2021, Volume 2 technical specifications
(CCS) Cervical Cancer Screening	
Technical specifications	HEDIS MY 2020 & MY 2021, Volume 2 technical specifications
(CDC) Comprehensive Diabetes Care	
Technical specifications	HEDIS MY 2020 & MY 2021, Volume 2 technical specifications
Kidney Health Evaluation for Patients With Diabetes	
Technical specifications	HEDIS MY 2020 & MY 2021, Volume 2 technical specifications
(CBP) Controlling High Blood Pressure	
Technical specifications	HEDIS MY 2020 & MY 2021, Volume 2 technical specifications



(FUH) Follow up after Hospitalization for Mental Illness (7 and 30 days)	
Technical specifications	HEDIS MY 2020 & MY 2021, Volume 2 technical specifications
(PPC) Prenatal And Postpartum Care	
	HEDIS MY 2020 & MY 2021, Volume 2 technical specifications
(SSD) Diabetes Screening for People with Schizophrenia or Bipolar Disorder who are using Antipsychotic Medications	
Technical specifications	HEDIS MY 2020 & MY 2021, Volume 2 technical specifications

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