New York State DOH
Health Home Care Management Reporting Tool (HH-CMART)
Bi Weekly Support Calls – Session #17
October 2, 2013

Questions?

- Please submit your questions in writing to the webinar

- If you would like to ask your questions, raise your hand (making sure you have entered your audio pin code) and we will unmute the call one at a time

- We are working on a Question and Answer document that will be posted on the Health Home website under the HH-CMART section

Agenda

- Revised Specifications
- Revised Database
- Clarifications
- Next Submission
- Common Errors from Last Submission
- Top Tips for Submitting HH-CMART Data
- Scoring for Health Home FACT-GP and Functional Assessment
- Feedback, Help & Ongoing Support
- Q & A

Revised Specifications

- PlanID (element #1)
  - Format modified to allow for SNP and MLTC plan IDs
- HHID (element #2)
  - Language changed to clarify that this should be the HHID (MMIS#) of the **Lead** Health Home.
- ProgramType (element #9)
  - Additional response options:
    - HH SUBSTANCE USE
    - HH HIV
    - NOT ABLE TO CONTACT
    - REVIEW PENDING

Revised Specifications

- AbleContact (element #10)
  - Additional Response Value: TCM-HH CONVERSION
    - Members who were not contacted because they were converted to the HH from an existing TCM program
  - Removed Response Value: Blank (Already Engaged in CM)
    - Once engaged, this element does not need to be modified in later quarters.
- OutreachEffort (element #12)
  - Removed Response Value: Blank (Already Engaged in CM)
  - If there were no outreach activities *for any reason* this element should be zero (0).
    - TCM-HH Conversion – OutreachEffort=0 starting with initial submission.
    - For members engaged in CM in a previous quarter – OutreachEffort=0.

Revised Specifications

- AppropriateCM (element #13) and
  AssessedCM (element #14)
  - Additional response option: REVIEW PENDING

- OptOut (element #16)
  - Additional response options:
    - NOT ABLE TO CONTACT
    - REVIEW PENDING

Revised Database

▸ PlandID (element #1) and HHID (MMIS element #2)
  ◦ Drop down menus will be updated with most recent lists
▸ Error checks
  ◦ "Duplicate CIN"- will check for duplicate segments based on CIN, HHID, and date of engagement.
    • Further clarification provided later in this presentation.
  ◦ Additional checks under consideration
▸ Distribution: mid-October

Clarifications - Modifying elements across submissions

- Elements that will **not** change once entered:

Elements submitted by HH:

Elements extracted by DOH from Person Tracking files:

Elements submitted by HH:	Elements extracted by DOH from Person Tracking files:
‣ HHID (#2)	‣ LastName (#5)
‣ CIN (#4)	‣ FirstName (#6)
‣ DOB (#7)	‣ TriggerDate (#8)
‣ ProgramType (#9)	‣ EngagedCMDate (#18)
	‣ ConsentDate (#19)
	‣ ClosureDate (#25)
	‣ ReasonClosure (#26)
	‣ DateReopened (#28)

Clarifications - Modifying elements across submissions

▸ Elements that **will** change each quarter:
- ◦ ReportDate (#3)
- ◦ Intensity (#20)
- ◦ Intervention Counts (#'s 21-23)
- ◦ Care Management Service Module Elements (#'s 29-34)

Clarifications - Modifying elements across submissions

▸ Elements that **might** change depending on circumstances:

◦ Includes all of the elements not already listed.

◦ Logic for modifying:

• Elements that are typically stable but can still change. *Modify with updated information.*

• Examples: PlanID, CaseClosed, FACT-GP

• Elements that only change during the outreach period. *Once engaged, these do not change again.*

• Examples: AbleContact, OutreachEffort, EngagedCM

Clarifications - Modifying elements across submissions

1. In quarter 1, member is in active outreach, contacted, engaged and receives HH CM services.
    - Quarter 1 submission: All elements are entered and submitted.
    - Quarter 2 submission:
      - OutreachEffort updated to zero (0).
      - All other elements related to outreach and engagement ARE NOT modified from Q1.
      - All elements related to receipt of CM should be updated to reflect Q2 activity.
    - Quarter 3 and beyond: Those elements related to outreach and engagement ARE NOT modified. Only elements related to receipt of CM are revised to reflect the current quarter activity.

Clarifications - Modifying elements across submissions

2. In quarter 1, a member in TCM is converted into the HH:

   ◦ Quarter 1 submission: All elements are entered and submitted.

     • AbleContact="TCM-HH CONVERSION" ;

     • OutreachEffort=0.

   ◦ Quarter 2 and beyond: Those elements related to outreach and engagement ARE NOT modified. Only elements related to receipt of CM revised to reflect current quarter activity.

Clarifications – Multiple Rows for Members

- Multiple rows for a member are allowed in a quarterly submission for a single HH only if the member was engaged in more than one distinct segments of CM during the quarter.
  - For example, a member in a Chronic Health type of program, leaves the HH program in January but the person is engaged into a Substance Abuse program with the HH in March.
- Members in outreach should **not** have multiple rows in a submission.
  - If outreach is conducted by multiple downstream providers in the same quarter then the Lead HH should combine those efforts into one row. A member should never be engaged with two providers at the same time.

Clarifications – Who to Include

▶ All members who are…
  ◦ In active outreach with the HH or
  ◦ Are engaged in the HH.

▶ Member segments which were closed in previous quarters should not be submitted unless the earlier segment is reopened or a new segment is started in the current quarter.

Next HH-CMART Submission

When to Submit

▸ **Monday, November 4, 2013**

What to Submit

▸ Data for ALL elements in the HH-CMART tool.

▸ This will include all data for the third quarter of 2013 (July – September 2013) .

▸ The report date field for this report is 3/2013.

▸ All data should be entered into the HH CMART (Access) tool and the tool itself should be submitted.

Who Submits

▸ Lead Health Homes are responsible for sending data for all downstream HH's and CM providers.

Next HH-CMART Submission
How to Submit

▸ The CMART tool should be submitted using the **NEW** HCS **Health Home CMART File Upload** application.

1. Log into the HCS.
2. Click the 'Applications' tab at the top of the Home page.
3. Click on the 'H' tab at the top of the Applications page.
4. Find the "Health Home CMART File Upload" link.
   - Clicking on the link will bring you directly to the upload page.
   - Clicking on the "+" icon in the 'Add/Remove' column will add it to "My Applications" on left side of screen for future access.
5. Click "Browse" to choose the CMART tool for submission. Include any comments in the box. Click "Upload".
6. The file will be sent directly & securely to the QARR BML email account. We will notify you of receipt.

FACT GP / HH Functional Assessment Data Review

Common Errors found on the FACT GP and HH Functional Assessments

Type	Issue/Resolution
FACTGP and HH-Functional Assessment scores are above maximum	FACTGP should not be higher than 84. HH-Functional Assessment cannot be higher than 28.
Field #36 – ReasonFactGP	Word 'Initial' misspelled in various ways. Use drop downs.
HH-Functional Assessment Question Six (Field #47)	HH6 should only have a score of 8 or 0(zero). Any other number is an error and should be fixed.
Fractional Values for HH-FACTGP Scores.	Fractional scores should not exist. All scores should be rounded to the nearest whole number.
FACTGP and HH-Functional Assessment scores are incorrectly calculated	FACTGP (37-41) and HH(42-49) scores are either lower or higher than what subscores totals should indicate. Some scores have reversed scoring methodology that was not reflected in the total score calculations.
Data is carried over from one report to another	The same data was reported in multiple quarters. Only required to report is Initial, Annual, and upon Discharge when one occurs during reporting period.
Negative values are entered	All numbers entered for FACTGP and Functional Assessment are positive and should not have a negative value.

Top Tips for Submitting HH CMART DATA

➢**Uniform Data is essential**
  ✓Health Home instructs CM Agency how to enter data in a uniform manner
  ✓ Ensure proper column formatting (dates, numbers etc)
  ✓Guidelines for clarification of data entry are the HH CMART Technical Requirement Specifications found at this web location:
  http://www.health.ny.gov/health_care/medicaid/program/medicaid_health_ homes/assessment_quality_measures/docs/hh_cmart_specs_v1.pdf
  ✓ Check previous support webinars or call or email HH program for clarifications (see Resource Slide at end)

➢**Check for data entry errors (DOH developing Edits for Fact GP HH Funct.)**
  ✓CMA edits data before sending it to the Health Home
    •Run edit checks on data entry to find the data errors
    •CMA entering on a spreadsheet checks data on spreadsheet then imports the data into the HH CMART tool
    • Once data is in tool, select from HH CMART Tool main menu
        Data Entry Errors and **Frequencies**
  ✓Health Home edits data before sending it to the Department
    •Run edit checks on data entry to find the data errors prior to sending data to HH
    •CMA entering on a spreadsheet can import the data into the HH CMART tool
    •Once data is in tool, select from HH CMART Tool main menu
        Data Entry Errors and **Frequencies**

Top Tips for Submitting HH CMART DATA

▶ **The Health Home FACT-GP/HH Functional Assessments is required to assess every member**

- Intervals required to report include Initial, Annual, Discharge
- Submit the results of the most recent assessment for the reporting period
- No other assessment intervals need be reported (i.e. updates, sentinel events etc.)
- If the FACT-GP+HH Assessment is not completed for the reporting period for a member, fields (**35-49**) will be left blank.
  - Do not send if the data has not changed from previous quarterly report
- Submission of subscores should include all sections (PWB, SWB, EWB, FWB) on FACT –GP; If any missing, "section subscore" is negated
- The results of the FACT-GP Assessment and HH-Functional Questionnaire will not directly impact the acuity score of the member.
- These assessments <u>do not replace the initial comprehensive assessment</u>.

Top tips for Submitting HH CMART Data

- Alignment of data-
  - ✓ To ensure proper column alignment prior to uploading data from template into HH CMART Tool, collection and importing of HH CMART data should be done using the HH CMART Import Template found on the HH Website here:
    - ✓ http://www.health.ny.gov/health_care/medicaid/program/medicaid_health_homes /assessment_quality_measures/process_measures.htm
- All columns names must match the column names in the tool
  - ✓ Any additional columns are problematic rendering the file useless to the Department
  - ✓ The HH CMART Import Template is constructed with the exact names needed for importing data into the tool
  - ✓ Resubmission of incorrect files will be necessary- send only the required data for the reporting period

Top tips for Submitting HH CMART Data

▶ Selection of a element value- need exact match with value noted into HH CMART Technical Requirement Specifications "Valid Response Values"-

✓ many misspellings during manual entry- use drop down arrows for selection- **check data prior to submission**

▶ HHID- (#2) – This is the Lead HH MMIS ID number, not the NPI number

▶ Format in columns should agree with data entered (i.e. Text ,number, date)

Correct Scoring for Health Home FACT-GP and Functional Assessment

- ▸ Scoring of the FACT GP/ HH Functional Assessments
  - ✓ Health Home FACT-GP/HH Functional Assessments should be scored using the FACT GP and Health Home Questionnaire Scoring Sheet

    http://www.health.ny.gov/health_care/medicaid/program/medicaid_health_homes/assessment_quality_measures/index.htm

  - ✓ The tabulated FACT GP SUBSCORES (#37-39) are entered into the HH CMART tool or whatever method the Lead HH & CM Program agree on
- ▸ Scoring of both assessments includes a *reverse scoring methodology* for some questions.
- ▸ Straight addition **is not used** when calculating the sub scores for these assessments.
  - ◦ Example: Sometimes when a response to a question is a 4, it is scored as a 0
- ▸ Health Home FACT-GP sections with reverse scoring:

    PWB and EWB (field # 37 and 39) See example Slide 24
- ▸ Functional Assessment sections with reverse scoring:

    HH1, HH2, and HH3 (field # 42, 43, 44) See example Slide 25

FACT-GP & Health Home Functional Assessment

- Reverse Scoring for field #37 – **PWB**: Physical Well Being subscore
  - Responses of 0 are scored as 4

FACT-GP + HH Scoring Sheet				Response		Score
CIN:						
Subscale				Response		Score
Physical Well-being	PWB	GP1 lack of energy		0		4
		GP2 nausea		0		4
		GP3 physical condition		0		4
		GP4 pain		0		4
		GP6 ill		0		4
		GP7 bed-ridden		0		4
					SUM	24
**For this question series, put a "4" for the "Response" (Column E) for any question not answered.					Number of questions answered:	6
					PWB Subscale Score:	24

- Reverse Scoring for field #39 – **EWB** : Emotional Well Being subscore
  - Responses of 0 are scored as 4

Emotional Well-being	EWB	GE1 sad		0		4
		GE4 nervous		0		4
		GE5 worry about death		0		4
		GE6 worry will worsen		0		4
					SUM	16
**For this question series, put a "4" for the "Response" (Column E) for any question not answered.					Number of questions answered:	4
					EWB Subscale Score:	16

FACT-GP & Health Home Functional Assessment Element 47- HH6

- **Homelessness scoring on the FACT GP/HH-Functional Assessment –** Homelessness is scored on a Yes and No basis. A higher score represents better health, a score of "0" indicates that the member was homeless in the last 7 days; if they are housed, the score is "8".

  - **8 points for NO**

  - **0 points for YES**

- **Only a value of 0 or 8 should be entered.**

Home Health Functional Questionaire					
Subscale			Response		Score
Health Home	HH	HH1 dressing	0		4
		HH2 eating	4		0
		HH3 interpretation need	4		0
		HH4 people to help me	4		4
		HH5 go to doctor or clinic	4		4
		HH6 homeless	0		0
For HH 6: Place number in "Response" column appropriate to answer	YES = 0	NO = 8			
				HH Subscale Score:	12
				Entered as Element # 48	

FACT-GP & Health Home Functional Assessment Combine Scores Reported

Any missing values or incorrectly scored questions or subsections will affect these total scores.

▸ 48 – **HHSubscale**: Scoring sheet adds the HH-Functional Assessment scores together to = HHSubscale Score

▸ 49 – **HHFACT GP**: Scoring sheet adds the Health Home FACT-GP Total Score + HH Subscale Score = Total FACT GP/HH-Functional Assessment Score

FACT-GP Assessment & Health Home Functional Questionnaire Resources

▶The FACT- GP Assessment and Health Home Functional Questionnaire are on the Health Home website under the Assessments and Quality Metrics HH-CMART menu at this location:
http://www.health.ny.gov/health_care/medicaid/program/medicaid_health_homes/assessment_quality_measures/index.htm

▶The FACT- GP and Health Home Questionnaire Scoring Sheet and Scoring Guidelines are located on the same page or at this location:
http://www.health.ny.gov/health_care/medicaid/program/medicaid_health_homes/assessment_quality_measures/docs/fact-gp_sccoring_sheet_hh_locked_mod.xls

Ongoing support

- Support calls will be scheduled as needed on Wednesdays from 10 a.m. to 11 a.m. **To Be Announced**
  - The next call will be October 16, 2013. We will discuss data logic checks and how these data will be used by DOH going forward.
- Slides & Audio recordings from all webinars can be accessed by visiting the Health Home website at: http://www.health.ny.gov/health_care/medicaid/program/medicaid_health_homes/meetings_webinars.htm

Feedback and Help

▸ We encourage your feedback by either:

  ◦ Emailing the Health Home Team with the subject of *Quality Metrics* via the Health Home website at: **https://apps.health.ny.gov/pubdoh/health_care/medicaid/program/medicaid_health_homes/emailHealthHome.action** or

  ◦ Calling the Health Home provider line: 518.473.5569

▸ Additional HH-CMART resources are available at: **http://www.health.ny.gov/health_care/medicaid/program/medicaid_health_homes/assessment_quality_measures/process_measures.htm**