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# FEHB Program Carrier Letter

All Health Maintenance Organizations

U.S. Office of Personnel Management  
Office of Insurance Programs

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**Letter No. 2001-04**

**Date: February 13, 2001**

Fee-for-service [ -- ] Experience-rated HMO [ 04 ] Community-rated [ 04 ]

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**SUBJECT: HEDIS<sup>®</sup> Data**

This letter explains our procedures for collecting Health Plan and Employer Data Information Set (HEDIS<sup>®</sup>) measures in 2001. We first want to thank you for your cooperation in a very successful 2000 HEDIS pilot. A summary of the results from the pilot are now posted on the FEHB carrier web site. For 2001, we plan to contract again with the National Committee for Quality Assurance (NCQA) to have NCQA collect the data for us.

- 1) We will not collect data from plans with fewer than 500 Federal Employees Health Benefits (FEHB) enrollees. Therefore, if you are a plan with fewer than 500 FEHB enrollees, you do not have to take any action with respect to our data collection efforts.
- 2) If you are a plan with 500 or more FEHB enrollees, we will collect data from you. We understand that you already may intend to report HEDIS data to NCQA for non-OPM purposes. If you currently intend to report to NCQA, you do not need to take any additional action to meet our data collection needs (you may continue to follow NCQA's rotation strategy and you do **not** need to report separately to NCQA on FEHB enrollees). We will receive the data directly from NCQA and will adhere to any agreements you have with NCQA regarding public reporting of data.

HEDIS<sup>®</sup> 2001 is the current edition of the Health Plan Employer Data and Information Set, a set of performance measures which NCQA develops and maintains. The measures are used in many ways – as part of purchaser requests, an element of NCQA Accreditation or as the basis of a consumer report card for managed care organizations.

Below is the list of HEDIS<sup>®</sup> 2001 measures we will require for our data collection efforts. These measures are used by accrediting organizations for managed care and network accreditation purposes. Therefore, our reporting requirements will move you one step further in the accreditation process that, as noted in our 2001 Call Letter mailed to you on April 11, 2000, you will be expected to begin in the year 2002 (more information on this requirement will be in the 2002 Call Letter that will be mailed in April of 2001).

*HEDIS Measures*

- Childhood Immunization Status
- Adolescent Immunization Status
- Breast Cancer Screening
- Cervical Cancer Screening
- Prenatal and Postpartum Care

- Advising Smokers to Quit
- Beta Blocker Treatment After a Heart Attack
- Comprehensive Diabetes Care (eye exams rate only)
- Follow Up after Hospitalization for Mental Illness (30 day rate only)
- Cholesterol Management after Acute Cardiovascular Events (screening rate only)
- Antidepressant Medication Management (all 3 rates)

In reporting the HEDIS<sup>®</sup> measures to NCQA, you will need to follow the guidelines and measure specifications in *HEDIS 2001, Volume 2: Technical Specifications*. This publication can be ordered by calling NCQA's Publications Center at 1-800-839-6487. You can address technical questions about the HEDIS measures to NCQA's Technical Inquiry Line at 202-955-5697. For an overview of NCQA and HEDIS reporting, refer to their web site at [www.ncqa.org](http://www.ncqa.org). NCQA also offers training seminars for HEDIS reporting.

In addition to the HEDIS<sup>®</sup> measures, we also will require plans to field the adult CAHPS<sup>®</sup> 2.0H survey. Refer to carrier letter 2000-51, mailed on November 27, 2000, for details on the CAHPS<sup>®</sup> data collection requirements.

Similar to last year's 2000 HEDIS pilot project, we will not require that the 2001 HEDIS data be audited. Consequently, the data we collect in 2001 will not be published. However, we will use the data to provide feedback to plans on their performance relative to other plans. For your planning purposes, we expect to require HEDIS data in 2002 to be audited.

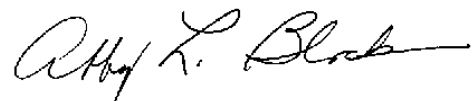
This year NCQA is moving to a Web-based data submission and customer support process. In order for plans to report HEDIS, you must complete NCQA's annual Healthcare Organization Questionnaire (formerly called the Managed Care Organization Questionnaire) on-line through NCQA's Web site using a password. If you have not received information from NCQA concerning your password, contact Reid Kiser at [kiser@ncqa.org](mailto:kiser@ncqa.org). The questionnaire allows plans to enter up to 3 FEHB Sub-codes, a 10-character unique identifier, per HEDIS submission.

The timeline for HEDIS submissions is as follows:

- February 12, 2001: NCQA posts Healthcare Organization Questionnaire on their web site
- March 2, 2001: Deadline for plans to complete on-line Healthcare Organization Questionnaire.
- April 13, 2001: NCQA posts HEDIS 2001 DST on NCQA web site for downloading.
- June 15, 2001: Deadline for plans to submit DST to NCQA web site. Deadline for plans to submit attestations to NCQA.

For more information, contact Janet Pfleeger in our Policy and Information Division at 202/606-0004.

Sincerely,



Abby L. Block  
Assistant Director  
for Insurance Programs