# EOCCO Provider Reports User Guide

# Report Overview

Welcome to the new monthly EOCCO Progress Reports. As in previous versions, these reports indicate the most recently reported rates on EOCCO claims-based incentive measures. Due to the claims processing lag the rates may not include all services completed thus far.

The reporting period will change each month, and the rates displayed will be reflective of services provided between January 1, 2020 and the end of the previous month. The specific Reporting Period for every report will be indicated at the top of each tab.

As always, please reach out to EOCCOmetrics@modahealth.com with questions or concerns.

## How to access the Provider Reports portal:

Our monthly EOCCO Progress Reports will no longer be sent by email and will now be posted on the Provider Reports portal (modahealth.com/riskshare/#/login) along with information on other patients assigned to you that are covered by a Moda Health plan.

Please email providerreports@modahealth.com if you need assistance accessing your account or re-setting your password. Passwords expire every 90 days, so we recommend that users set a recurring reminder to change their password before this expiration. Once your account is established, you will receive an email directing you to the portal when the reports are posted each month.

Once you log into your portal account, select your clinic or organization from the drop-down menu on the main page. You will see a list of all reports that you have access to, the monthly quality progress report is called "202008_QM_[FACILITY NAME]". Please note that the reporting date ("202008") will change each month.

For users that are part of a larger health system or organization, you may notice that you can view reports for several different clinics when you log in to the portal. This is because the portal requires us to list the same users for all clinics under each organizational tax identification number (TIN). While we can generate individual reports for each clinic, we cannot dictate which users are able to view which clinic's reports. We can however restrict user access to just clinical quality reports, just financial reports, or both.

Please email providerreports@modahealth.com if you would like to update user access to your organization's reports.

## Updates to EOCCO progress reports:

The new reports include all patients enrolled in several value-based payment (VBP) plans administered by Moda. These plans include EOCCO and the Oregon Educators Benefit Board/Public Employees Benefit Board Coordinated Care Model (OEBB/PEBB CCM).

Reports are now generated and distributed by the Moda VBP Analytics team via the Provider Reports portal. Recipients will be notified via e-mail when updated reports are posted and will be directed to sign into the portal to access their documents.

The Opioid Report and Roster information previously included in the EOCCO progress report will be moved to the Pharmacy Opportunity Report and Member Roster Report, respectively, on the Provider Reports portal website.

Only the information relevant to your clinic will be included on your monthly reports. For example, if you do not have any OEBB/PEBB CCM patients assigned, you will not receive the OEBB/PEBB CCM summary page, nor any of the outreach lists that apply only to the CCM.

Please note: This user guide is designed for providers and clinic staff focusing specifically on **CCO Incentive Measures**. For resources on reports related to the CCM program or other lines of business, please refer to the "About the reports" section of the Provider Reports portal.

Please read on for more information on the new reporting format.

*How to filter outreach lists*:

Similar to the previous progress reports, these new reports contain outreach lists for patients with care gaps for certain claims-based measures. Each outreach list on the provider progress reports can be filtered to show specific segments of the patient population for an incentive measure.

For example, to see only EOCCO patients with care gaps for well-child visits, navigate to tab "6. Well-child List" on your progress report. Click the down arrow to the right of Column F "EOCCO Member", make sure only the box next to "1" is checked, and click "OK". You will now only see your EOCCO patients with care gaps for this measure. To clear the filter and re-display all patients from both plans, click the down arrow again and choose (Select All) from the list.



*To filter the care gap lists, click on the drop-down arrow for the column you would like to filter by.*

*Then select the desired filter options and click 'OK'.*

## 1. Overall Results

- This tab indicates the number of quality measures for which your organization is meeting targets for each VBP plan you participate in.
- Column D ('Measures Eligible') is based on which measures have a sufficient denominator size at your clinic, which for most measures is 10 patients or more.
- Column E ('Measures Met') is based on the number of measures for which your clinic has met the improvement target for the current measurement year.
- The data is based on patients assigned to your clinic as of the current reporting month (or end of the measurement period, whichever is earlier).

## 2. Coordinated Care Model (CCM) Summary

- This tab shows your clinic's current rate and 2020 target on CCM quality measures. Your current rate is based on your assigned patients enrolled in an OEBB/PEBB CCM plan.
- Though there is some overlap between the CCM incentive measures and CCO incentive measures, this tab does *not* reflect your clinic's performance on any CCO incentive measures.

## 3. EOCCO Incentive Measures Summary

- This tab shows your clinic's current rate and 2020 improvement target on CCO incentive measures. Your current rate is based on your assigned patients who are currently enrolled in EOCCO.
- Where applicable, this section indicates your clinic's final performance on measures in the previous year as well as the year to date performance in the previous year and current year.
- This report will not display rates for the 4 clinical quality measures (*Cigarette Smoking Prevalence, Depression Screening, Diabetes HbA1C Poor Control,* and *SBIRT*) because they rely on EHR data. Clinics will be responsible for submitting their current year data on these measures to EOCCO at the beginning of the year following the measurement year.
- This report does not display rates for the 1 hybrid quality measure (*Prenatal and Postpartum Care*) because this rate is calculated from a combination of claims and EHR data for a sample of 411 randomly selected patients. If any patients in the sample are assigned to your clinic, the EOCCO Quality team will request data for them the beginning of the year following the measurement year.
- This report does not include outreach rosters for the *Assessments for Children in DHS Custody* measure as the EOCCO Quality team communicates directly with clinics about these patients. If you don't receive regular files from EOCCO for the DHS Custody measure and would like to, please reach out to audrey.egan@modahealth.com.
- This report does not include outreach rosters for the *Preventive Dental Visits* measures, as these are included in the Dental Care Organization (DCO) reports, along with *Assessments for Children in DHS Custody* and *Oral Evaluation for Adults with Diabetes.*

## 4. Childhood Immunizations Outreach List

- This tab includes <u>currently enrolled</u> patients that are in the denominator for the *Childhood Immunization Status (Combo 2)* incentive measure and have not yet completed their childhood immunization series.
- This list may be used as an outreach roster for non-compliant patients however, we always encourage clinics to utilize ALERT IIS data in addition to these reports since ALERT is more up to date than claims data.
- Because the deadline for this metric is birthday-based, each patients' 2nd birthday is noted in Column A ('Deadline').
- All patients with a deadline within 12 months of the report date are included in the gap list, even if the individual will not be included in the metric for the current year (e.g. a patient with a gap and deadline of Jan 1, 2021 will appear on the 2020 gap list).
- Please note that you can view gaps for specific plans (EOCCO, OEBB/PEBB CCM) by filtering Columns G ('EOCCO Member') and H ('CCM Member'). See filtering instructions on page 3.

## 5. Adolescent Immunizations Outreach List

- This tab includes <u>currently enrolled</u> patients that are in the denominator for the *Immunizations for Adolescents* incentive measure and have not yet completed their adolescent immunization series.
- This list may be used as an outreach roster for non-compliant patients however, we always encourage clinics to utilize ALERT IIS data in addition to these reports since ALERT is more up to date than claims data.
- Because the deadline for this metric is birthday-based, each patients' 13th birthday is noted in Column A ('Deadline').
- All patients with a deadline within 12 months of the report date will be included in the gap list, even if the individual will not be included in the metric for the current year (e.g. a patient with a gap and deadline of Jan 1, 2021 will appear on the 2020 gap list).
- Please note that you can view gaps for specific plans (EOCCO, OEBB/PEBB CCM) by filtering Columns G ('EOCCO Member') and H ('CCM Member'). See filtering instructions on page 3.

## 6. Well-Child Visits Outreach List

- This tab includes <u>currently enrolled</u> patients that are in the denominator for the *Well-Child Visits in the Third, Fourth, Fifth and Sixth Years of Life* incentive measure and have not yet completed their annual well-child visit.
- This list may be used as an outreach roster for non-compliant patients.
- Users can view the time since the patient's last well-child visit in column A ('Months Since Last Visit').
- All patients with a deadline within 12 months of the report date will be included in the gap list, even if the individual will not be included in the metric for the current year (e.g. a patient with a gap and deadline of Jan 1, 2021 will appear on the 2020 gap list).

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- Please note that you can view gaps for specific plans (EOCCO, OEBB/PEBB CCM) by filtering Columns F ('EOCCO Member') and G ('CCM Member'). See filtering instructions on page 3.

## 7. Diabetes HbA1C Poor Control Outreach List

- This tab includes <u>currently enrolled</u> patients ages 18-75 with diabetes without a recent HbA1c test per EOCCO's claims data.
- Users can view the time since the patient's last A1c test in column A ('Months Since Last HbA1c').
- All patients with a deadline within 12 months of the report date will be included in the gap list, even if the individual will not be included in the metric for the current year (e.g. a patient with a gap and deadline of Jan 1, 2021 will appear on the 2020 gap list).
- You may see some patients in this section who aren't truly diabetic. This is because the diabetes roster is our "best guess" at who could be in your denominator for this measure at the end of the year based on our claims data rather than your EHR data. A diagnosis of diabetes may be added to a lab order and billed out even if the patient isn't diabetic. Therefore, we recommend using your EHR to obtain the most precise version of who will be in the denominator for the *Diabetes: HbA1c Poor Control* incentive measure.
- Please note that you can view gaps for specific plans (EOCCO, OEBB/PEBB CCM) by filtering Columns F ('EOCCO Member') and G ('CCM Member'). See filtering instructions on page 3.

## 8. Antidepressant Medication Management Outreach List

- NOT a CCO incentive measure

## 9. Statin Therapy for Patients with Diabetes Outreach List

- NOT a CCO incentive measure

## 10. Adolescent Well Care Outreach List

- NOT a CCO incentive measure

## 11. Breast Cancer Screening Outreach List

- NOT a CCO incentive measure

## 12. Oral Screening for Diabetics Outreach List

- This tab includes <u>currently enrolled</u> patients that are in the denominator for the *Oral Evaluation for Adults with Diabetes* incentive measure and have not yet completed their annual oral evaluation.
- This list may be used as an outreach roster for non-compliant patients.
- Users can view the time since the patient's oral evaluation in column A ('Months Since Last Screening').
- Users can view the patient's oral health provider in column B ('Assigned/Treating Dentist') to help coordinate care.
- All patients with a deadline within 12 months of the report date will be included in the gap list, even if the individual will not be included in the metric for the current year (e.g. a patient with a gap and deadline of Jan 1, 2021 will appear on the 2020 gap list).
- Please note that you can view gaps for specific plans (EOCCO, OEBB/PEBB CCM) by filtering Columns G ('EOCCO Member') and H ('CCM Member'). See filtering instructions on page 3.

## 13. Full Gap List

- This tab shows the number of care gaps for all of your assigned patients that are enrolled in either EOCCO or OEBB/PEBB CCM.
- This section displays every patient who has been eligible and assigned to your clinic at any time during the measurement year.
- Please note that you can view gaps for specific plans (EOCCO, OEBB/PEBB CCM) by filtering Columns E ('EOCCO Member') and F ('CCM Member'). See filtering instructions on page 3.
- Users can view the number of care gaps per patient in column J ('Total number of care gaps') as well as flags for which measures need closing in Columns K-T.
- You can also view full numerator and denominator lists for each measure in this report by using filters on Columns AL-BK. A '1' indicates the patient belongs to that measure denominator or numerator. A '0' indicates the patient does not belong to that measure denominator or numerator.
  - For example, if you want to view all of your patients in the denominator for the *Childhood Immunization Status (Combo 2)* measure, simply click the drop-down arrow on the heading for column AM ('EOCCO – Childhood immunizations – Denominator'). Make sure that only the box next to '1' is checked, and click 'OK'.
    - You will now see a shorter list of patients with both '1's and '0's in column AL ('EOCCO – Childhood immunizations – Numerator'). Patients with a '1' are in the measure numerator, meaning they are compliant for this measure. Patients with a '0' are not in the measure numerator, meaning they are not compliant for this measure.
    - Finally, if you want to view all of your non-compliant patients in the *Childhood Immunization Status (Combo 2)* measure, click the drop-down arrow on the AL column heading. Make sure that only the box next to '0' is checked, and click 'OK'.

To find patients in the denominator of a specific measure, click on the drop-down measure of the column you would like to filter.

To view patients in the denominator for a certain measure, make sure only '1' is checked in the measure denominator column.

## 14. About This Report

- This tab gives additional background information on the topics included in this report.