NCQA HEDIS Software Certification℠

Certification Report: Q Mark, Inc.

Certification Outcome

Date of Certification Report	March 3, 2008
Name of Certified Product	HEDISHelp
Version Number for Certified Product	12
Version of HEDIS Technical Specifications	HEDIS® 2008
Overall Certification Outcome	**CERTIFIED**

Measure Detail

Measure	Status	Date
Childhood Immunization Status	Pass	12/12/2007
Lead Screening in Children	Pass	12/17/2007
Breast Cancer Screening	Pass	11/28/2007
Cervical Cancer Screening	Pass	12/03/2007
Colorectal Cancer Screening	Pass	12/04/2007
Chlamydia Screening in Women	Pass	12/17/2007
Glaucoma Screening in Older Adults	Pass	12/04/2007
Appropriate Testing for Children With Pharyngitis	Pass	12/18/2007
Appropriate Treatment for Children With Upper Respiratory Infection	Pass	12/18/2007
Avoidance of Antibiotic Treatment in Adults With Acute Bronchitis	Pass	12/18/2007
Use of Spirometry Testing in the Assessment and Diagnosis of COPD	Pass	12/18/2007
Pharmacotherapy Management of COPD Exacerbation	Pass	01/23/2008
Use of Appropriate Medications for People With Asthma	Pass	01/07/2008
Cholesterol Management for Patients With Cardiovascular Conditions	Pass	12/19/2007
Controlling High Blood Pressure	Pass	12/19/2007
Persistence of Beta-Blocker Treatment After a Heart Attack	Pass	12/19/2007
Comprehensive Diabetes Care	Pass	01/09/2008
Disease Modifying Anti-Rheumatic Drug Therapy in Rheumatoid Arthritis	Pass	12/30/2007
Osteoporosis Management in Women Who Had a Fracture	Pass	12/20/2007
Use of Imaging Studies for Low Back Pain	Pass	01/12/2008

Measure	Status	Date
Antidepressant Medication Management	Pass	01/10/2008
Follow-Up Care for Children Prescribed ADHD Medication	Pass	01/11/2008
Follow-Up After Hospitalization for Mental Illness	Pass	01/14/2008
Annual Monitoring for Patients on Persistent Medications	Pass	12/26/2007
Potentially Harmful Drug-Disease Interactions in the Elderly	Pass	12/29/2007
Use of High-Risk Medications in the Elderly	Pass	12/17/2007
Adults' Access to Preventive/Ambulatory Health Services	Pass	12/03/2007
Children and Adolescents' Access to Primary Care Practitioners	Pass	12/04/2007
Annual Dental Visit	Pass	12/03/2007
Initiation and Engagement of Alcohol and Other Drug Dependence Treatment	Pass	01/19/2008
Prenatal and Postpartum Care	Pass	12/22/2007
Frequency of Ongoing Prenatal Care	Pass	12/26/2007
Well-Child Visits in the First 15 Months of Life	Pass	12/17/2007
Well-Child Visits in the Third, Fourth, Fifth and Sixth Years of Life	Pass	12/04/2007
Adolescent Well-Care Visits	Pass	12/04/2007
Frequency of Selected Procedures	Pass	12/29/2007
Ambulatory Care	Pass	12/30/2007
Inpatient Utilization—General Hospital/Acute Care	Pass	12/27/2007
Inpatient Utilization—Nonacute Care	Pass	12/28/2007
Identification of Alcohol and Other Drug Services	Pass	01/22/2008
Mental Health Utilization	Pass	01/22/2008
Antibiotic Utilization	Pass	12/26/2007
Outpatient Drug Utilization	Pass	12/25/2007
Relative Resource Use for People With Diabetes	Pass	02/22/2008
Relative Resource Use for People With Asthma	Pass	02/19/2008
Relative Resource Use for People With Acute Low Back Pain	Pass	02/21/2008
Relative Resource Use for People With Cardiovascular Conditions	Pass	02/26/2008
Relative Resource Use for People With Uncomplicated Hypertension	Pass	02/28/2008
Relative Resource Use for People With COPD	Pass	02/29/2008
Enrollment by Product Line	Pass	12/23/2007
Enrollment by State	Pass	12/23/2007
Language Diversity of Membership	Pass	12/27/2007
Race/Ethnicity Diversity of Membership	Pass	12/26/2007
Weeks of Pregnancy at Time of Enrollment	Pass	12/23/2007
Years in Business/Total Membership	Pass	02/05/2008
Systematic Sampling	Pass	01/04/2008
CAHPS 4.0H Adult Survey	Pass	12/12/2007
CAHPS 3.0H Child Survey	Pass	12/14/2007

If you have questions about any information contained in this report please contact Anne Marie Smith, Licensure and Certification Manager at 303-651-6995 or smith@ncqa.org.

Product and Process Information

Certification Process

Vendors receive unique sets of randomly generated member-level test data, or "test decks," which they process for each measure their HEDIS software calculates. The vendors' results are compared to the expected results to determine if the software computed HEDIS correctly for numerators, denominators, and exclusions. If not, the vendors can correct the code, get a new deck, and repeat the process.

Product Overview
Q Mark, Inc. produces HEDISHelp, a HEDIS reporting product. HEDISHelp processes data through a PC environment to produce HEDIS rates. HEDISHelp calculates all 57 measures including the eligible population (sample frame) for the survey measures, and the systematic samples for the hybrid measures. The system provides data for all populations (commercial, Medicare and Medicaid).

HEDISHelp provides a companion software product, HYBRIDHelp, for installation at the health plan to assist with the chart review process for the hybrid methodology.

Process
HEDISHelp is used both by Q Mark, Inc. in-house and by MCOs that license the Software. Q Mark, Inc. receives data from clients in a standard file layout (see the vendor's HEDIS 2008 Data Requirements document for details). There are eight files for which Q Mark provides a layout with the delivery date file being optional. After receiving the appropriate files, the HEDISHelp software imports the files into data tables while doing quality checks. Then, the HEDISHelp software computes the measures and produces output files. Customers who license the Software perform the above steps themselves.

For HEDISHelp to accurately report HEDIS® measures, certain key fields in the file layouts must be fully populated.

File Layout

(See the vendor's HEDIS 2008 Data Requirements for complete layouts)

File Layout Name	Key Field	Comments
General Membership Data	MemberID	Must be a unique identifier that links all occurrences of the member, and links members across files; records without valid values will not be loaded for processing
	Gender	Records with missing gender will be imported, but not considered for gender specific measures
	Birthdate	Records with missing date of birth will not be imported
Enrollment Data	Member ID	Must be a unique identifier that links all occurrences of the member, and links members across files; records without valid values will not be loaded for processing
	Enrollment Date	Contains the greater of the enrollment date or the notification date
	Disenrollment Date	Date the member disenrolled from the Plan.
	Payor	i.e. Commercial, Medicaid, Medicare, CHIP
	Product Type	i.e. HMO, PPO, POS
Provider Data	Provider ID	Must contain a unique Provider ID, a missing Provider ID will generate an error and the record will not be imported.
	PCP	Indicates whether the Provider is a PCP
	Specialty	Provider specialty mapped to HEDISHelp specialty is required
	Provider Prescription	Indicates whether the Provider has prescribing privileges
Visit File	Member ID	Must be a unique identifier that links all occurrences of the member, and links members across files; records without valid values will not be loaded for processing
	Date of Service	Records with a missing service date will not be loaded for processing
	Claim Number	The claim number for the event
	Provider ID	Provider /Location that provided the service
	Code fields	Separate fields are provided for the various code types including CPT4, DRG, ICD-9 diagnosis and procedure, UB-92 revenue, bill, occurrence, and status codes
Pharmacy File	Member ID	Must be a unique identifier that links all occurrences of the

File Layout Name	Key Field	Comments
		member, and links members across files; records without valid values will not be loaded for processing
	Date of Service	Records with a missing service date will not be loaded for processing
	NDC Code	Records with a missing NDC Drug Code will not be loaded for processing.
Lab File	Member ID	Must be a unique identifier that links all occurrences of the member, and links members across files; records without valid values will not be loaded for processing
	Date of Service	Records with a missing service date will not be loaded for processing
	CPT4 Code	Records with a missing CPT4 will not be loaded for processing unless a LOINC code is found
	LOINC Code	Records with a missing LOINC code will not be loaded for processing unless a CPT4 code is found
Delivery	Mom's Member ID	Must be a unique identifier that links all occurrences of the member, and links members across files; records without valid values will not be loaded for processing
	Delivery Date	Mom's delivery date must be present or the record will not import
PCP Eligibility File	Member ID	Must be a unique identifier that links all occurrences of the member, and links members across files; records without valid values will not be loaded for processing
	Provider ID	Provider ID is required
	PCP Start Date	Date member was first assigned to the PCP is required
	PCP End Date	Date member disenrolled with the PCP is required