DAP CYE 2022 Requirements for Behavioral Health Outpatient, Integrated Clinics & Nursing Facilities

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Health Current
AHCCCS Differential Adjusted Payment (DAP) CYE 2022 Preliminary Public Notice

HIE Participation Requirements, Milestones, Roles & Responsibilities
Agenda

1. DAP Basics
2. Letter of Intent (LOI) Submission Process
3. DAP HIE Requirements
4. Data Quality Strategy & DAP
5. Health Current vs. Participants: Roles & Responsibilities
6. Questions & Answers
Purpose

The purpose of this webinar is to clarify the Health Information Exchange (HIE) requirements for eligible providers participating in the AHCCCS Differential Adjusted Payments (DAP) program.

The HIE participant entities covered in this webinar are:

- Behavioral Health Outpatient Clinics
- Integrated Clinics
- Nursing Facilities
DAP Basics
What is DAP?

DAP Program and Health Information Exchange

- DAP aims to distinguish providers that have committed to supporting designated actions that improve patients’ care experience, improve members’ health and reduce cost of care growth.
- An integral part of the DAP program includes HIE data access and connectivity
- DAP includes various other requirements besides HIE:
  - UTI performance measures
  - Electronic Visit Verification
  - quality reporting & awards
  - pressure ulcers
  - Care Coordination Agreements with IHS/638 facilities
  - partnerships with schools to deliver behavioral health
  - autism centers of excellence
  - e-prescribing
  - and more!
DAP Basics

• Differential Adjusted Payment (DAP) policy is a means for AHCCCS to offer and pay incentives to its provider network based on meeting various requirements, as part of AHCCCS’ broader value-based payment strategy.

• HIE requirements have been a key component of DAP policies since the program began in contract year end (CYE) 2017.

• DAP is scheduled based on CYE schedule, based on contract year for AHCCCS and its MCOs – which is equivalent to federal fiscal year (FFY) schedule.
  • CYE 2021 = October 1, 2020 to September 30, 2021
  • CYE 2022 = October 1, 2021 to September 30, 2022
DAP Basics

• Preliminary Notice posted to AHCCCS website January 29, 2021 with a revision posted February 3, 2021
• Comments accepted through February 26, 2021
• Final Public Notice to be published around March 26, 2021

The DAP CYE 2022 Preliminary Public Notice is available here: CYE 2022PreliminaryDAPPublicNotice01_28_2021revised.pdf (azahcccs.gov)

Information about HIE requirements for DAP CYE 2022 is available here: Differential Adjusted Payment (DAP) Program - Health Current
Differential Adjusted Payment (DAP) Preliminary Public Notice

- HIE Requirements in CYE 2022 for following entities:

<table>
<thead>
<tr>
<th>AHCCCS Eligible Provider Types</th>
<th>HIE Incentive</th>
</tr>
</thead>
<tbody>
<tr>
<td>Behavioral Health Outpatient Clinics (Type 77)</td>
<td>1.0%</td>
</tr>
<tr>
<td>Critical Access Hospitals (CAH)</td>
<td>10%*</td>
</tr>
<tr>
<td>Hospitals Subject to APR-DRG Reimbursement (Type 02) excluding Critical Access Hospitals</td>
<td>2.5%*</td>
</tr>
<tr>
<td>IHS and 638 Tribally Owned and/or Operated Facilities (Type 02)</td>
<td>2.5%</td>
</tr>
<tr>
<td>Integrated Clinics (Type IC)</td>
<td>10%</td>
</tr>
<tr>
<td>Nursing Facilities (Type 22)</td>
<td>1.0%</td>
</tr>
<tr>
<td>Other Hospitals and Inpatient Facilities (Types 71, B1, B3, B5, B6, C4)</td>
<td>2.5%*</td>
</tr>
</tbody>
</table>

*Hospitals, CAH and Other Inpatient Facilities will participate in HIE Data Quality Improvement activities. See Preliminary Public Notice for quality
DAP Preliminary Public Notice

• CYE 2022 Summary HIE Requirements
  - Progressive requirements for any category with HIE requirements this year
  - COVID-19 test, antibody and immunization code and external lab authorization requirements added for all provider types
  - Data Quality scope of work requirements added for IHS/638 providers and Integrated Clinics
  - Connectivity with SDOH Closed-Loop Referral Platform or Advanced Directives Registry Platform added for hospital, critical access hospital and other hospital provider types

• ALL DAP-eligible providers MUST have a signed HIE Participation Agreement and DAP letter of intent (LOI) submitted by April 1, 2021

• HIE implementation services for new entities are available on first come, first serve basis, so get started soon!
# Future DAP HIE Requirement Progression

**Attachment F - HIE Strategy by Provider Type**

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<thead>
<tr>
<th>HIE DAP Criteria</th>
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- **Agreement**
  - Execute agreement and electronically submit information.
  - LOI with milestones for: execute agreement, approve SOW, transmit ADT, and transmit lab/radiology data.
  - For non-inpatient facilities, transmit registration events and encounter summaries.
- **Milestones**
  - Execute agreement and access HIE data via HIE services.
  - LOI with milestones for: submit immunization data (if applicable), execute data quality SOW, and submit data quality profile.
- **Data Access**
  - Measure data quality in first quarter of calendar year using a metric to be defined.
- **Data Prep**
  - Data Prep
- **Data Quality**
  - Data Quality
Letter of Intent (LOI) Submission Process
LOI Submission Process

Submission of a signed Letter of Intent (LOI) is required. In the LOI, providers agree to achieve HIE milestones by specified dates or maintain participation in the milestone(s) that they have previously achieved.

The LOI submission process entails sending the LOI letter to two email addresses:

Email #1: AHCCCSDAP@azahcccs.gov
Email #2: DAP@healthcurrent.org

(Note: These are new email addresses from prior years)

The LOI must be sent by April 1, 2021

LOI templates are located at:
Differential Adjusted Payment (DAP) Program - Health Current
DAP HIE Requirements
# DAP HIE Requirements - Summary

<table>
<thead>
<tr>
<th>Milestone Activity</th>
<th>Deadline</th>
<th>Hospitals</th>
<th>Critical Access Hospitals</th>
<th>Other Inpatient Facilities</th>
<th>Indian Health Service/638 Facilities</th>
<th>Integrated Clinics</th>
<th>Behavioral Health Outpatient</th>
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<td>Submit Data</td>
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<td>SDOH Closed-Loop Referral SOW</td>
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<tr>
<td>SDOH Closed-Loop Referral OR Advanced Directives Registry SOW</td>
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</tr>
</tbody>
</table>

*NOTE: If applicable, COVID-19 test, antibody and immunization codes by May 1, 2021 or go-live date for new data suppliers or within 30 days of initiating the COVID-19 service with current data suppliers.
## DAP Provider Categories – CYE 2022

<table>
<thead>
<tr>
<th>DAP HIE Categories</th>
<th>Provider Type</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hospitals Subject to APR-DRG Reimbursement</td>
<td>02</td>
</tr>
<tr>
<td>Critical Access Hospital (designated as CAH by March 15, 2021)</td>
<td>02</td>
</tr>
<tr>
<td>Other Hospitals and Inpatient Facilities:</td>
<td></td>
</tr>
<tr>
<td>Psychiatric Hospitals, with the exception of public hospitals</td>
<td>71</td>
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<tr>
<td>Secure Residential Treatment Centers (17+ beds)</td>
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</tr>
<tr>
<td>Non-Secure Residential Treatment Centers (17+ beds)</td>
<td>B3</td>
</tr>
<tr>
<td>Subacute Facilities (1-16 beds)</td>
<td>B5</td>
</tr>
<tr>
<td>Subacute Facilities (16+ beds)</td>
<td>B6</td>
</tr>
<tr>
<td>Rehabilitation Hospitals</td>
<td>C4</td>
</tr>
<tr>
<td>Long-Term Acute Care Hospitals</td>
<td>C4</td>
</tr>
<tr>
<td>IHS and 638 Tribally-Owned and/or Operated Facilities</td>
<td>02</td>
</tr>
<tr>
<td>(Hospitals owned and/or operated by IHS or under tribal authority by March 15, 2021)</td>
<td></td>
</tr>
<tr>
<td>Nursing Facilities</td>
<td>22</td>
</tr>
<tr>
<td>Integrated Clinics</td>
<td>IC</td>
</tr>
<tr>
<td>Behavioral Health Outpatient Clinics</td>
<td>77</td>
</tr>
</tbody>
</table>

Requirements for All Providers

Note: For any milestone that includes electronic submission of patient information, the information transferred to the qualifying HIE must be actual patient data; the transfer of test data does not fulfill these requirements. It must include all patient data, including behavioral health data and data covered by 42 C.F.R. Part 2.
Integrated Clinics

Eligibility

• The provider must be licensed by the ADHS as an Outpatient Treatment Center which provides both behavioral health services and physical health services.

• Behavioral Health Services Utilization at Least 40.0%

Milestone #1

No later than April 1, 2021 the clinic must have in place an active participation agreement with a qualifying HIE organization and submit a LOI to AHCCCS and the HIE, in which it agrees to achieve the following milestones by the specified dates or maintain its participation in the milestone activities if they have already been achieved.

• If it is the clinic’s first year in the DAP initiative, then it must meet the participation agreement requirement of this milestone no later than August 1, 2021.
Integrated Clinics

Milestone #2
No later than April 1, 2021, the clinic must electronically submit actual patient identifiable information to the production environment of the qualifying HIE organization, including both a registration event and an encounter summary as well as specifically Seriously Mentally Ill (SMI) data elements, as defined by the qualifying HIE organization.

• If a clinic is in the process of integrating a new Practice Management and/or electronic health record (EHR) system, or if it is the clinic’s first year in the DAP HIE initiative, then it must meet this milestone no later than November 1, 2021.

Milestone #3
No later than April 1, 2021, the clinic must have actively accessed, and continue to access on an ongoing basis, patient health information via a qualifying HIE organization, utilizing one or more HIE services, such as the HIE Portal, ADT Alerts, Clinical Notifications, or an interface that delivers patient data into the clinic’s EHR.

• If it is the clinic’s first year in the DAP HIE initiative, then it must meet this milestone no later than January 1, 2022.
**Integrated Clinics**

**Milestone #4**

No later than May 1, 2021, or by the clinic’s go-live date for new data suppliers, or within 30 days of initiating the respective COVID-19 related services for current data suppliers, the clinic must complete the following COVID-19 related milestones, if they are applicable:

- Related to COVID-19 testing services, submit all COVID-19 lab test codes and the associated LOINC codes to the qualifying HIE organization to ensure proper processing of lab results within the HIE system.
- Related to COVID-19 antibody testing services, submit all COVID-19 antibody test codes and the associated LOINC codes to the qualifying HIE organization to ensure proper processing of lab results within the HIE system.
- Related to COVID-19 immunization services, submit all COVID-19 immunization codes and the associated CDC-recognized code sets to the qualifying HIE organization to ensure proper processing of immunizations within the HIE system.
Integrated Clinics

Milestone #5
No later than May 1, 2021, clinics that utilize external reference labs for any lab result processing must submit necessary provider authorization forms to the qualifying HIE, if required by the external reference lab, to have all outsourced lab test results flow to the qualifying HIE organization on their behalf.

Milestone #6
No later than November 1, 2021 the clinic must approve and authorize a formal SOW to initiate and complete a data quality improvement effort, as defined by the qualifying HIE organization and in collaboration with a qualifying HIE organization.
Integrated Clinics

Milestone #7
No later than January 1, 2022 the clinic must complete the initial data quality profile with a qualifying HIE organization.

Milestone #8:
No later than May 1, 2022 the clinic must complete the final data quality profile with a qualifying HIE organization.
Integrated Clinics

- DAP rates for Integrated Clinics will be paid for select physical health services and will provide an increase of 10.0% for dates of service in CYE 2022.

- Physical health services which qualify for the increase include Evaluation and Management (E&M) codes, vaccine administration codes, and a global obstetric code.

- See Attachment C of the Preliminary Notice for the specific list of codes which are proposed to increase for purposes of DAP.
Behavioral Health Outpatient Clinics (Type 77)

Eligibility
Behavioral Health Outpatient Clinics (Type 77) are eligible for a DAP increase under the following criteria. Provider Type 77 means:
• The organization is licensed by the Arizona Department of Health and
• Is certified for Behavioral Health T19 (BH C&T) and
• Has signed a Provider Agreement with AHCCCS

Milestone #1
No later than April 1, 2021 the clinic must have in place an active participation agreement with a qualifying HIE organization and submit a LOI to AHCCCS and the HIE, in which it agrees to achieve the following milestones by the specified dates or maintain its participation in the milestone activities if they have already been achieved.
• If it is the clinic’s first year in the DAP initiative, then it must meet the participation agreement requirement of this milestone no later than August 1, 2021.
Behavioral Health Outpatient Clinics (Type 77)

Milestone #2
No later than April 1, 2021 the clinic must have actively accessed, and continue to access on an ongoing basis, patient health information via a qualifying HIE organization, utilizing one or more HIE services, such as the HIE Portal, ADT Alerts, Clinical Notifications, or an interface that delivers patient data into the clinic’s EHR.

• If it is the clinic’s first year in the DAP HIE initiative, then it must meet this milestone no later than January 1, 2022.
Behavioral Health Outpatient Clinics (Type 77)

Milestone #3
No later than May 1, 2021, clinics that utilize external reference labs for any lab result processing must submit necessary provider authorization forms to the qualifying HIE, if required by the external reference lab, to have all outsourced lab test results flow to the qualifying HIE organization on their behalf.

Milestone #4
No later than October 1, 2021 the facility must approve and authorize a formal SOW with a qualifying HIE organization to develop and implement the data exchange necessary to support transmission of data elements described in Milestone #5.
Behavioral Health Outpatient Clinics (Type 77)

Milestone #5
No later than April 1, 2022 the clinic must electronically submit actual patient identifiable information to the production environment of the qualifying HIE organization, including both a registration event and an encounter summary, as well as SMI data elements, as defined by the qualifying HIE organization.
Behavioral Health Outpatient Clinics (Type 77)

Milestone #6:
By the clinic’s go-live date for new data suppliers, or within 30 days of initiating the respective COVID-19 related services for current data suppliers, the clinic must complete the following COVID-19 related milestones, if they are applicable:

• Related to COVID-19 testing services, submit all COVID-19 lab test codes and the associated LOINC codes to the qualifying HIE organization to ensure proper processing of lab results within the HIE system.

• Related to COVID-19 antibody testing services, submit all COVID-19 antibody test codes and the associated LOINC codes to the qualifying HIE organization to ensure proper processing of lab results within the HIE system.

• Related to COVID-19 immunization services, submit all COVID-19 immunization codes and the associated CDC-recognized code sets to the qualifying HIE organization to ensure proper processing of immunizations within the HIE system.
Nursing Facilities (Type 22)

Eligibility
Nursing Facilities, Provider Type 22, are eligible for DAP increases under the following criteria.

Milestone #1
No later than April 1, 2021, the Nursing Facility must have in place an active participation agreement with a qualifying HIE organization and submit a LOI to AHCCCS and the HIE, in which it agrees to achieve the following milestones by the specified dates or maintain its participation in the milestone activities if they have already been achieved.
Nursing Facilities (Type 22)

Milestone #2
No later than May 1, 2021, facilities that utilize external reference labs for any lab result processing must submit necessary provider authorization forms to the qualifying HIE, if required by the external reference lab, to have all outsourced lab test results flow to the qualifying HIE organization on their behalf.
Nursing Facilities (Type 22)

Milestone #3
No later than October 1, 2021 the facility must approve and authorize a formal SOW with a qualifying HIE organization to develop and implement the data exchange necessary to support transmission of certain data elements.

Required data elements will be developed by the qualifying HIE organization in collaboration with Arizona Health Care Association by May 1, 2021.

Milestone #4
No later than April 1, 2022 the Nursing Facility must electronically submit actual patient identifiable information to the production environment of a qualifying HIE organization, inclusive of the data elements required by the qualifying HIE organization, as referenced in Milestone #3.
Nursing Facilities (Type 22)

Milestone #5

By the facility’s go-live date for new data suppliers, or within 30 days of initiating the respective COVID-19 related services for current data suppliers, the facility must complete the following COVID-19 related milestones, if they are applicable:

- Related to COVID-19 testing services, submit all COVID-19 lab test codes and the associated LOINC codes to the qualifying HIE organization to ensure proper processing of lab results within the HIE system.
- Related to COVID-19 antibody testing services, submit all COVID-19 antibody test codes and the associated LOINC codes to the qualifying HIE organization to ensure proper processing of lab results within the HIE system.
- Related to COVID-19 immunization services, submit all COVID-19 immunization codes and the associated CDC-recognized code sets to the qualifying HIE organization to ensure proper processing of immunizations within the HIE system.
Nursing Facilities (Type 22)

The DAP percentage is awarded to the nursing facility. For example, if an ownership change occurs during CYE 2022, the DAP percentage shall be applied to the new Provider ID for that facility.
Data Quality Strategy & DAP

Melissa Kotrys
CEO
Health Current
### Future DAP HIE Requirement Progression

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**Agreement**

- Execute agreement and electronically submit information.
- LOI with milestones for: execute agreement, approve SOW, transmit ADT, and transmit lab/radiology data.

**Milestones**

- For non-inpatient facilities, transmit registration events and encounter summaries.
- Execute agreement and access HIE data via HIE services.
- LOI with milestones for: submit immunization data (if applicable), execute data quality SOW, and submit data quality profile.

**Data Access**

- Measure data quality in first quarter of calendar year using a metric to be defined.
Data Quality Strategy

The primary objective of Health Current’s Data Quality Strategy is to obtain and deliver high quality patient health information by partnering with and actively engaging its data sources to apply local and national standards to the content and ensure completeness and consistency of data exchanged.
What is a Data Quality Profile?  
(Applies to Phases 1 & 2)

A Health Current Data Quality Profile is:

- An assessment/analysis of the completeness, including standardization, of the data sent from the Participant to the HIE
- With a purpose of identify and closing/improving any gaps in the data being sent from the Participant
- Created based on the set of data elements that will be measured for the data quality phase and type of participant
- Provided so that the Participant knows how their current data submission compares to the data improvements being proposed, and can initiate work internally as a result, to close those gaps and ensure completeness of their data

Note: HIE data quality improvements are measured as a comparison of a baseline period (typically July of current year) to a final period (typically March of the following year).
When do Data Quality-related DAP Incentives Apply?

• AHCCCS anticipates CYE 2023 DAP criteria for Integrated Clinics could include criteria directed at continuing the development and execution of a data quality improvement effort, as defined by a qualifying HIE organization. DAP incentives would be available for clinics that meet data quality standards as set by the HIE. The measurement period for the CYE 2023 data quality standards is intended to be from July 1, 2021 to March 31, 2022.

• For Integrated Clinics, it is anticipated that their CYE 2023 DAP incentive will be based on meeting data quality measure improvements between July 2021 and March 2022.
When do Data Quality-related DAP Incentives Apply?

➢ AHCCCS anticipates CYE 2023 DAP criteria for Behavioral Health Outpatient Clinics could include the development of a data quality improvement plan, as defined by a qualifying HIE organization and in collaboration with a qualifying HIE organization.

➢ AHCCCS anticipates CYE 2023 DAP criteria for Nursing Facilities could include the development of a data quality improvement plan, as defined by a qualifying HIE organization and in collaboration with a qualifying HIE organization.
How are the HIE Data Quality Metrics Determined?

1) Health Current’s **Data Governance and Clinical Advisory Councils** identify areas where improving data quality will result in a significant return on investment for all HIE participants (ex. ADT completeness to support HIE Alerts)

2) Health Current **drafts recommended HIE data quality standards** for each provider type, including the level of improvement, the specific data elements to be measured, the standards to be used, inclusions and exclusions, etc.

3) Data Governance Council **approves recommended HIE data quality standards** for each phase

4) Draft data quality standards **presented to Health Current Board of Directors** for additional feedback

5) Health Current **facilitates feedback from impacted HIE participants** through a comment period

6) Final **feedback incorporated into final draft** HIE data quality standards for each phase

7) Final draft of HIE Data Quality Standards for each phase reviewed and **approved by Health Current Board of Directors**

8) Approved HIE Data Quality Standards for each phase are **submitted to AHCCCS** for incorporation into DAP Preliminary Public Notice (with standard comment period)
CYE 2022 DAP HIE Data Quality Standards
Details available in DAP Preliminary Rule (Attachment A & B)
Data Quality Profile for ADTs – SAMPLE

Measure 1 Group
Total Elements: 19,765
73.3% Complete
26.7% Incomplete

Measure 2 Group
Total Elements: 11,859
100.0% Complete
0.0% Incomplete

Measure 3 Group
Total Elements: 3,953
100.0% Complete
0.0% Incomplete

Measure 4 Group
Total Elements: 59,295
89.1% Complete
10.9% Incomplete

Measure 5 Group
Aggregate Group Elements: 94,872
87.7% Complete
12.3% Incomplete
Health Current provides an aggregate data quality report to AHCCCS for each of the DAP data quality measures and including all DAP participating providers.
Calculating the DAP Incentives

Health Current provides AHCCCS with reports that identify which DAP participating providers meet the DAP data quality incentives and which do not. This is the same information that Health Current provides to the DAP participating providers via the data quality profiles.
Participant vs. Health Current: Roles & Responsibilities
Milestones, Deadlines, Roles & Responsibilities

As noted in previous slides, milestones vary based on your provider type and are progressive over time.

For each HIE milestone referenced in the CYE 2022 DAP Preliminary Public Notice, these slides provide a description of the respective roles and responsibilities for both Health Current and the AHCCCS participating provider.

Review the milestones that apply to your organization and the respective roles and responsibilities to determine what steps and activities must be completed to achieve the milestone.

If you have any questions:
• Contact your Health Current Account Manager if you are an active HIE Participant
• Contact the Health Current recruitment team at recruitment@healthcurrent.org if you are not yet an HIE Participant
Milestone: Execute a Participation Agreement

Participant

• Initiate contact with Health Current as soon as possible
• Review participation agreement
• Authorized representative to execute agreement
• Return agreement to Health Current by March 28, 2021, to ensure full execution by April 1, 2021 deadline

Health Current

• Create organization-specific participation agreement
• Fully execute agreement after received by participant
• Introduce participant to assigned Health Current account manager, for service implementation

NOTE: Health Current rarely agrees to changes to its participation agreement, due to the fact the agreement has interconnecting requirements among all HIE participants and over 850 Arizona healthcare organizations have signed the agreement.
**Milestone: Approve & Authorize Data Exchange SOW**
*Applies to Behavioral Health Outpatient Clinics and Nursing Facilities only*

**Participant**
- Inform your Health Current Account Manager you intend to meet DAP requirements
- Collaborate with Health Current on drafting of a SOW
- Agree to project details, including timelines, vendor commitments and resource assignments
- Sign off on the SOW prior to the deadline of October 1, 2021

**Health Current**
- Account manager will develop SOW in collaboration with participant
- SOW will be based on standard template created by Health Current and will include, but is not limited to, timelines, vendor commitments and resource assignments
Milestone: Electronically Submit Data

Participant

• Along with any vendor partners, complete activities related to interface development and ADT data submission
• Important for Participant to stay engaged and meet all mutually agreed upon deadlines and requirements in order to meet all DAP deadlines.

Health Current

• Provide Participant with detailed technical specifications listing the types of data required for submission within each category noted
• Assign resources and complete all agreed upon timelines and activities, to ensure that Participant meets their DAP deadline.
Milestone: Approve & Authorize Data Quality SOW*
*Applies to Integrated Clinics

Participant

- Work with Health Current Account Manager to review and finalize standard Data Quality SOW
- Approve final Data Quality SOW, in advance of the November 1, 2021 deadline

Health Current

- Draft the participant’s Data Quality SOW, based on a standard template
- Review draft with participant, and revise as needed, to ensure agreement with all activities, timelines and resource assignments
Milestone: Complete Initial Data Quality Profile
*Applies to Integrated Clinics

Participant

- Collaborate with Health Current on any required activities, in order for Health Current to complete the initial data quality profile for the Participant
- Once data quality profile is received, participant will collaboratively review the gaps identified with Health Current and develop work plan to address the gaps

Health Current

- Utilize data sets sent in by the Participant to create the initial data quality profile
- Share profile with participant and discuss any gaps in data segments, such that the participant can work internally to close identified gaps
Milestone: Complete Final Data Quality Profile
*Applies to Integrated Clinics

**Participant**

- Work with Health Current to mitigate issues and reduce data gaps identified in the initial data quality profile
- Work with Health Current Account Manager to complete the Data Quality SOW by supporting Health Current’s production of the final data quality profile

**Health Current**

- Complete activities outlined in the Data Quality SOW and produce final data quality profile
- Assign resources to meet all agreed upon Data Quality SOW timelines and activities, to ensure that Participant meets May 1, 2022 deadline
- Submit initial and final data quality profile results to AHCCCS for calculation of DAP incentives, as appropriate
Milestone: Access HIE Data

Participant

- Review information provided by Health Current and determine what HIE services your organization is interested to implement
- Implement Patient Rights Process (PRP) to be in compliance with Arizona’s health information organization (HIO) statute to inform patients of their rights (via Notice of Health Information Practices) and to allow patients to “opt-out” of their information being accessible via the HIE if they so desire (HIE opt-out rate is less than 1%)
- Important for Participant to stay engaged and meet all mutually agreed upon deadlines and requirements in order to meet all DAP deadlines.

Health Current

- Provide Participant with information about the various HIE “data access” services that are available
- Provide Participant with information about the Patient Rights Process and support Participant in their implementation of process
- Assign resources and complete agreed upon timelines and activities, to ensure Participant meets DAP deadline
Questions?

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Imagine fully informed health.