

High Performing Provider (HPP) Designation

Quick Reference Guide

Key Points:

- The Department of Veterans Affairs (VA) has created a High Performing Provider (HPP) designation under the Community Care Network (CCN) for those providers who excel in a set of standard health care evaluation metrics.
- Providers are scored on a set of standard quality metrics approved by VA to determine whether they are deemed to be an HPP. The HPP designation may be used by VA or TriWest Healthcare Alliance when selecting a provider to see a Veteran.
- The HPP designation is intended as one possible factor, ***not the sole factor***, in selection of a CCN provider during the appointing process.
- Regardless of HPP designation, all CCN providers have met the credentialing requirements for participation in the CCN network and are qualified to provide health care to Veterans.

HPP Overview

VA created a HPP designation under CCN for providers who excel in a set of standard health care evaluation metrics. This gives Veterans and schedulers an additional indication of the quality of care provided by CCN providers. The HPP designation is intended as one possible factor, not the sole factor, in Veteran and scheduler selection of a CCN provider.

CCN providers include providers practicing at the individual level, practitioners in a group setting, and institutional providers (such as hospitals). The three types of providers are scored differently.

- **Individual providers** are evaluated based on a combination of VA priority measures and standard measures from Blue Health Intelligence.
- **Provider practice groups** are scored as a single entity, and providers in those groups are assigned the score of the overall group.
- **Hospitals** are scored on a selection of CMS measures from the Hospital Compare system.

How It Works

The HPP designation describes CCN providers based on standard quality metrics approved by VA. Inquiries regarding the HPP process can be submitted to CQHPP@TriWest.com. A summary of

specific provider metrics is available on request by completing the HPP Inquiry Form on the TriWest Payer Space on Availity (www.availity.com) under the “Resources tab. Providers should send the completed HPP Request Form to CQHPP@triwest.com.

TriWest processes the data available on claims, implements the HPP algorithm and submits each provider’s HPP designation to VA. There are three possible designations for a provider:

- ➔ **Unknown** indicates that there is insufficient data available to evaluate performance at the time of scoring. The majority of providers and groups will fall into this category.
- ➔ **Yes** indicates that the provider is a high performer for the measures included in the scoring. This category will represent roughly 15 percent of scored providers.
- ➔ **No** indicates that the provider is scored but is not among the highest performers.

**PLEASE NOTE: The designation of a CCN provider as “No” or “Unknown” does NOT indicate low or poor quality care.*

Improvement Strategies

In the near future, TriWest will provide a confidential “report card” to each provider that details individual performance against these metrics. This information can be used to identify and track any metrics that the provider wishes to improve. To optimize performance on the metric set, providers may wish to use one or more of the approaches published in the medical literature. In addition, providers may improve their use of some key quality codes to document their care for certain conditions.

Additional information on the HPP designation, the metrics used, and key quality codes, is available below under the “Performance Metric Summary” and “Quality Codes” headings. For more information on the HPP designation, please email VHAUMHPP@va.gov.

Performance Metric Summary

The following is a brief summary of potential metrics on which a provider may be scored. The specific measures used for a specific provider depends on a variety of factors, including provider specialty and patient volume. This list will be updated at least quarterly.

VA Priority Measures (individuals and groups)

| Description | Source |
|-------------------------|--------|
| Breast Cancer Screening | HEDIS |

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| Colorectal Cancer Screening | HEDIS |
| Annual Flu Vaccine (FLU) | HEDIS |
| Adult Body Mass Index Assessment (BMI) | HEDIS |
| Diabetes Care - Eye | HEDIS |
| Diabetes Care - Kidney Disease | HEDIS |
| Diabetes - Blood Sugar Controlled | HEDIS |
| Controlling Blood Pressure (HBP) | HEDIS |
| Pharmacotherapy of COPD | HEDIS |

Additional Blue Health Intelligence Measures (also for individuals and groups)

| Description | Source |
|--|--------|
| Acute Hospital Utilization | NCQA |
| Ambulatory Care ED Visits | NCQA |
| Monitoring for Patients on ACE/ARB | NCQA |
| Monitoring for Patients on Digoxin | NCQA |
| Monitoring for Patients on Diuretics | NCQA |
| Antidepressant Medication | NCQA |
| Asthma Medication Ratio | NCQA |
| Antibiotic Treatment in Acute Bronchitis | NCQA |
| Cervical Cancer Screening | NCQA |
| Chlamydia Screening in Women | NCQA |
| ACE or ARB Therapy in Stable CAD with Diabetes | AMA |

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| Beta-Blocker Therapy in Stable CAD with Prior MI | AMA |
| Colonoscopy Interval for Patients with Polyps | AMA |
| Contraceptive Care | Office of Population Affairs |
| Emergency Department Utilization | NCQA |
| Episiotomy (overuse) | AMA |
| Medication Management for Patients with Asthma | NCQA |
| Medication Safety Monitoring - Kidney Disease | NCQA |
| Medication Safety Monitoring - Dementia | NCQA |
| Medication Safety Monitoring - Fall or Fracture | NCQA |
| PSA-Based Screening in Older Men | CMS |
| Imaging for the Evaluation of Primary Headache | NCQA |
| Pelvic Organ Prolapse: Preoperative Screening | AUGS |
| Bowel Injury during Pelvic Organ Prolapse Repair | AUGS |
| Ureter Injury during Pelvic Organ Prolapse Repair | AUGS |
| All-Cause Readmissions | NCQA |
| Timeliness of Prenatal Care | NCQA |
| Screening for Carcinoma in Hepatitis C Cirrhosis | AMA |
| Statin Therapy for Patients with Cardiovascular Disease | NCQA |
| Surgical Site Infection | American College of Surgeons |
| Unplanned Hospital Readmission within 30 days | American College of Surgeons |

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| Unplanned Reoperation within 30 days | American College of Surgeons |
| Use of High-Risk Medications in the Elderly | NCQA |
| Use of Imaging Studies for Low Back Pain | NCQA |
| Use of Spirometry in the Assessment of COPD | NCQA |

Center of Excellence (measures used solely for hospitals or other institutions)

| Description | Source |
|---|------------------|
| Patient Given Discharge Information | Hospital Compare |
| Care Transition (Composite measure) | Hospital Compare |
| Hospital Rating | Hospital Compare |
| Recommend Hospital | Hospital Compare |
| AMI-Fibrinolytic in 30min of ED arrival | Hospital Compare |
| AMI-Median time to transfer | Hospital Compare |
| AMI-Median time to ECG | Hospital Compare |
| Kidney and diabetic complications after surgery | Hospital Compare |
| Respiratory failure after surgery | Hospital Compare |
| Serious blood clots after surgery | Hospital Compare |
| Blood stream infection after surgery | Hospital Compare |
| Abdomen or pelvic wound dehiscence | Hospital Compare |
| Accidental laceration from medical treatment | Hospital Compare |
| Pressure sores | Hospital Compare |
| Collapsed lung due to medical treatment | Hospital Compare |

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| Broken hip from a fall after surgery | Hospital Compare |
| Bleeding or bruising during surgery | Hospital Compare |
| Central line-associated bloodstream infections | Hospital Compare |
| Catheter-associated urinary tract infections | Hospital Compare |
| Surgical site infections from colon surgery | Hospital Compare |
| Surgical site infections from abdominal hysterectomy | Hospital Compare |
| Methicillin-resistant Staphylococcus Aureus sepsis | Hospital Compare |
| Clostridium difficile intestinal infections | Hospital Compare |

Quality Codes

Quality codes are used by the provider to optimize performance on some VA Priority Measures. At this time, they are used to validate care for three measures: BMI, FLU, and HBP.

| Metric | Code | Description | Source |
|--------|--------|---|---------|
| BMI | Z68.1 | Body mass index (BMI) 19.9 or less, adult | ICD10CM |
| BMI | Z68.20 | Body mass index (BMI) 20.0-20.9, adult | ICD10CM |
| BMI | Z68.21 | Body mass index (BMI) 21.0-21.9, adult | ICD10CM |
| BMI | Z68.22 | Body mass index (BMI) 22.0-22.9, adult | ICD10CM |
| BMI | Z68.23 | Body mass index (BMI) 23.0-23.9, adult | ICD10CM |
| BMI | Z68.24 | Body mass index (BMI) 24.0-24.9, adult | ICD10CM |
| BMI | Z68.25 | Body mass index (BMI) 25.0-25.9, adult | ICD10CM |

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| BMI | Z68.26 | Body mass index (BMI) 26.0-26.9, adult | ICD10CM |
| BMI | Z68.27 | Body mass index (BMI) 27.0-27.9, adult | ICD10CM |
| BMI | Z68.28 | Body mass index (BMI) 28.0-28.9, adult | ICD10CM |
| BMI | Z68.29 | Body mass index (BMI) 29.0-29.9, adult | ICD10CM |
| BMI | Z68.30 | Body mass index (BMI) 30.0-30.9, adult | ICD10CM |
| BMI | Z68.31 | Body mass index (BMI) 31.0-31.9, adult | ICD10CM |
| BMI | Z68.32 | Body mass index (BMI) 32.0-32.9, adult | ICD10CM |
| BMI | Z68.33 | Body mass index (BMI) 33.0-33.9, adult | ICD10CM |
| BMI | Z68.34 | Body mass index (BMI) 34.0-34.9, adult | ICD10CM |
| BMI | Z68.35 | Body mass index (BMI) 35.0-35.9, adult | ICD10CM |
| BMI | Z68.36 | Body mass index (BMI) 36.0-36.9, adult | ICD10CM |
| BMI | Z68.37 | Body mass index (BMI) 37.0-37.9, adult | ICD10CM |
| BMI | Z68.38 | Body mass index (BMI) 38.0-38.9, adult | ICD10CM |
| BMI | Z68.39 | Body mass index (BMI) 39.0-39.9, adult | ICD10CM |
| BMI | Z68.41 | Body mass index (BMI) 40.0-44.9, adult | ICD10CM |
| BMI | Z68.42 | Body mass index (BMI) 45.0-49.9, adult | ICD10CM |
| BMI | Z68.43 | Body mass index (BMI) 50-59.9, adult | ICD10CM |
| BMI | Z68.44 | Body mass index (BMI) 60.0-69.9, adult | ICD10CM |

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| BMI | Z68.45 | Body mass index (BMI) 70 or greater, adult | ICD10CM |
| FLU | 90630 | Adult Influenza Vaccine | CPT |
| FLU | 90654 | Adult Influenza Vaccine | CPT |
| FLU | 90656 | Adult Influenza Vaccine | CPT |
| FLU | 90658 | Adult Influenza Vaccine | CPT |
| FLU | 90661 | Adult Influenza Vaccine | CPT |
| FLU | 90673 | Adult Influenza Vaccine | CPT |
| FLU | 90674 | Adult Influenza Vaccine | CPT |
| FLU | 90682 | Adult Influenza Vaccine | CPT |
| FLU | 90686 | Adult Influenza Vaccine | CPT |
| FLU | 90688 | Adult Influenza Vaccine | CPT |
| FLU | 90756 | Adult Influenza Vaccine | CPT |
| FLU | 90655 | Influenza Vaccine Administered | CPT |
| FLU | 90657 | Influenza Vaccine Administered | CPT |
| FLU | 90661 | Influenza Vaccine Administered | CPT |
| FLU | 90662 | Influenza Vaccine Administered | CPT |
| FLU | 90673 | Influenza Vaccine Administered | CPT |
| FLU | 90685 | Influenza Vaccine Administered | CPT |
| FLU | 90686 | Influenza Vaccine Administered | CPT |
| FLU | 90687 | Influenza Vaccine Administered | CPT |
| FLU | 90688 | Influenza Vaccine Administered | CPT |
| FLU | G0008 | Influenza Vaccine Administered | HCPCS |

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| HBP | 3078F | Diastolic Less Than 80 | CPT-CAT-II |
| HBP | 3079F | Diastolic 80-89 | CPT-CAT-II |
| HBP | 3080F | Diastolic Greater Than/Equal To 90 | CPT-CAT-II |
| HBP | 3074F | Systolic Blood Pressure < 130 | CPT-CAT-II |
| HBP | 3075F | Systolic Blood Pressure 130 to 139 | CPT-CAT-II |
| HBP | 3077F | Systolic Greater Than/Equal To 140 | CPT-CAT-II |