Accurate Coding = Better Care, Better Outcomes

Improving Patient Outcomes Through Documentation

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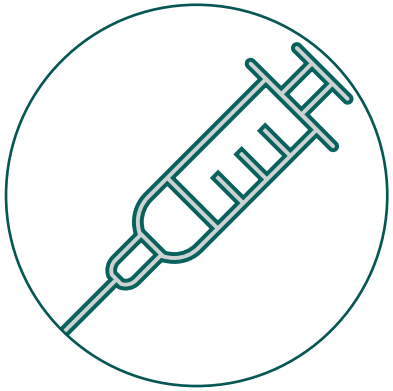
What is HEDIS®? And Why It Matters

- Nationally standardized set of quality measures developed by NCQA
- Used to evaluate health plans on:
  - Quality of Care
  - Access to Care
  - Member experience
- It's not about checking boxes, it's about making sure care is visible, measurable, and coordinated – overall improving the quality of healthcare
- HEDIS® and accurate coding - Together they help identify high-risk members and guide targeted, evidence-based care
- HEDIS® allows for an "apples to apples" comparison of the performance of health plans by consumers and employers

Measuring Care, Improving Health

HEDIS® and accurate coding help identify risks and guide evidence-based care to keep members healthy



Preventative Care

Vaccines and screenings protect against illness and catch conditions early (CIS, IMA, BCS, CCS, COL)

Chronic & Risk-Based Care

Accurate Coding and risk capture identify high-risk members, guiding targeted care and follow-up (CBP, GSD, EED, PPC)

Behavioral Health and Transitions

Timely follow-up after mental health emergencies supports stability and safe transitions (FUH, FUM)

Better data, better care, healthier members

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How HEDIS® is Measured

- Each HEDIS® measure has:
  - *Denominator:* Patients who qualify for the measure
    - Example: Patients with a pregnancy during the measurement year
  - *Numerator:* Patients who received the recommended care
    - Example: Prenatal care and postpartum visit
- If the services are coded/billed and transmitted, it counts in the numerator
- If the service happens, but isn't coded or shared, it looks like it never happened
- If there's a complication related to the pregnancy, the complication needs to be documented & coded to the highest specificity
- Tip: Wisconsin uses global obstetric billing, which can make it harder to identify when prenatal and postpartum visits occurred unless they're coded individually

$$\frac{\text{75 Pregnant patients with proper coding for prenatal appointments in the first trimester}}{\text{100 pregnant patients}} = \text{75\% performance for Timeliness of Prenatal Care}$$

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How Data Tells the Story of the Patients' Health

Accurate Documentation & Coding	• Show who is managing chronic conditions effectively • Complete capture of the patient's burden of illness • Identifies who missed a preventative screening • Highlights who needs outreach or education
Common missed opportunities:	• Blood pressure taken, but no CPT II result code submitted • Diabetic labs performed, but missing CPT II code with lab value • Missing condition specificity or vague diagnoses
Why it matters:	• Missed codes = Missed outreach • Patients lose care coordination opportunities • Impacts preventative reminders and clinical alerts

Codes are the language that turns care into measurable data

Accurate Coding: Understanding Code Types

ICD-10-CM Codes (International Classification of Diseases)

- Purpose: Identify diagnoses, symptoms, and reasons for visits
- Used to classify and report patient's conditions

CPT Codes (Current Procedural Terminology)

- Purpose: Describe medical, surgical, and diagnostic services
- Used to report what services were provided to the patient

HCPCS (Healthcare Common Procedure Coding System)

- Purpose: Additional codes for services, supplies, and non-physician services not covered by CPT
- Used to report certain Medicare & FQHC services, medical equipment, etc.

CPT II Codes (Category II)

- Purpose: Used for performance measurement and quality reporting

Used to report quality – such as HbA1c value, diastolic & systolic BP, preventive care

How We Support Your Patients

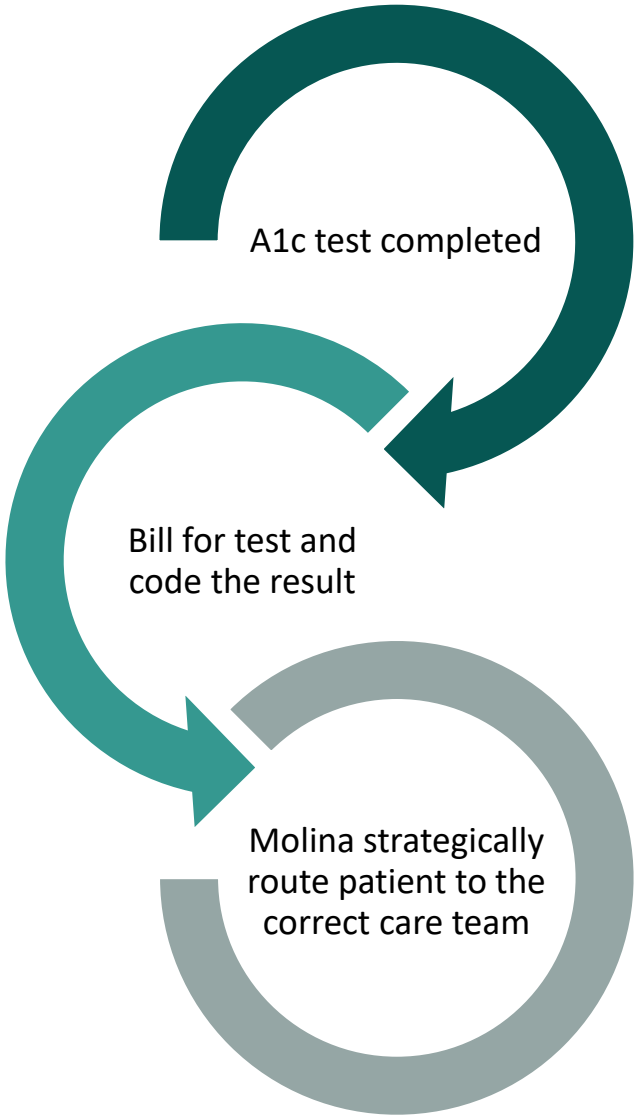
Our team includes:

- Care Management: Supports complex needs, care coordination, and communication
- Transitions of care: Assists members from hospital to home, reducing readmissions
- Community Connectors: Schedule appointments and assist with transportation reminders
- Population health coaching and programs: Promote disease management and preventative care
- Quality Specialists: track gaps in care and partner with your staff to close them

Together, we:

- Reach out to patients due for preventative care or follow-up visits
- Help schedule screenings, labs, and PCP visits
- Provide reminders and education to encourage follow-through
- Support your team by sharing information from these interactions

We are an extension of your care team, helping your patients stay connected and supported between visits



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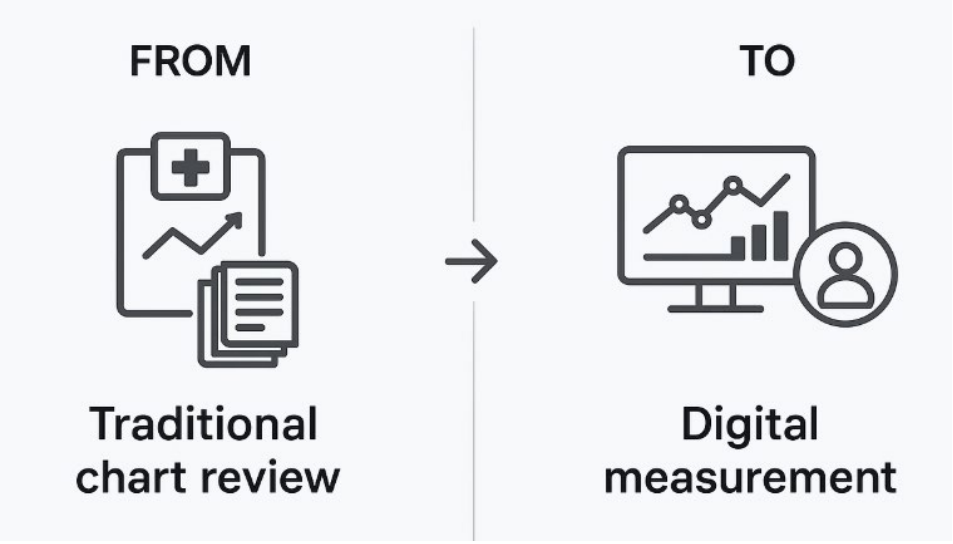
Industry is Shifting

- NCQA is moving away from traditional medical record review in favor of a more digital measurement
- **Less burden on providers:** Fewer manual abstractions, fewer disruptions
- **Population-wide insights:** Real-time, scalable measurement across members
- **Smarter data use:** Structured EHRs and registries improve accuracy
- **Cost and reliability:** Faster audits, less variability, more consistent results
- **Proactive care:** Measurement aligns with outcome-focused interventions



Let’s Improve Patient Health Together

How you can share data:

- Include necessary codes in claims (especially CPT II codes)
- Report to WISHIN or other data aggregators
- Initiate an EMR or lab data feed to:
  - Auto-capture results
  - Reduce manual uploads and faxes
  - Give patients credit for care completed anywhere

Tips for Success

- Use structured fields, not free text
- Apply the D. S. P. Framework for all conditions, especially chronic conditions
  - Diagnosis
  - Status
  - Plan
- Partnering for Better Care: Your engagement ensures accurate, timely data and helps us all improve patient outcomes. Let’s work together to make every interaction count!

Partnering for Better Patient Care

- At Molina Healthcare, we believe that collaboration is key to improving the health outcomes of our members. By working together, we can address the social determinants of health and ensure our community receives the care and resources it deserves
- Let's work together to:
  - Improve access to care
  - Enhance chronic disease management
  - Increase preventive services
  - Reduce healthcare disparities
  - Support proper documentation for HEDIS measures
- HEDIS documentation tip sheets are available in Availity to support accurate reporting. Chronic condition tip sheets are also available upon request.

We value your partnership and look forward to collaborating with you!

Contact us: MHWIquality@molinahealthcare.com