

UnitedHealthcare Community Plan HEDIS® 2019 Medical Record Collection Frequently Asked Questions

Key Points

- Beginning in January, UnitedHealthcare or health information organizations working on our behalf may contact you to request Healthcare Effectiveness Data and Information Set (HEDIS®) information to comply with Centers for Medicare & Medicaid Services (CMS) requirements.
- HEDIS® medical record collection plays a critical role in supporting the care you provide to our members. Together we can help them manage existing medical conditions and be more involved with their preventive health.
- The following health information organizations may contact you as part of this review: Advantmed, Change Healthcare and Optum/CiOX.
- Our members are randomly selected for each medical record collection cycle, so your patients may not be included for the HEDIS® 2019 cycle.
- If your facility is contacted, please respond within five business days to indicate your preference for medical record collection.

Overview

UnitedHealthcare Community Plan is required by CMS to collect HEDIS® information each year from our participating care providers. Beginning in January, health information organizations working on our behalf may contact you to request medical record information to comply with federal, state and UnitedHealthcare accreditation requirements. We'll do everything we can to find the collection method that works best for you.

Frequently Asked Questions and Answers

Q1. What is HEDIS®?

A1. HEDIS® is a standardized set of measures developed by the National Committee for Quality Assurance (NCQA) to evaluate consumer health care. By collecting and analyzing medical record information, HEDIS® helps identify improvements in the health care system. By working together, we can help our members be more involved with their preventive health.

Q2. What do you do with the HEDIS® medical records after they're collected?

A2. We're required to send the collected information to NCQA within a certain timeframe. NCQA stores the information in a central database used to analyze and help improve the health care system.

Q3. If I receive a HEDIS® medical record collection notification letter, will I also receive a request for specific medical records?

A3. Not necessarily. Members are randomly selected for inclusion to the HEDIS® medical record collection process. You may receive a notification letter, but if you don't have patients selected for the review, you won't receive a list.

You may receive more than one notification letter if you are a participating network care provider with other UnitedHealthcare plans, since HEDIS® applies to members across all of UnitedHealthcare's health plans. You don't need to take any action unless contacted directly by UnitedHealthcare or one of our health information organization partners.

Q4. Do I need to respond if my office or facility is contacted about HEDIS® medical record collection?

A4. Yes. All UnitedHealthcare Community Plan network care providers are required to provide the requested medical record information to comply with state and federal regulations and UnitedHealthcare accreditation requirements. This requirement is outlined in your participation agreement.

Q5. What do I need to do if my office or facility receives a request for medical records?

A5. You and your staff must respond to the request within the specified timeframe, which is usually five business days. UnitedHealthcare Community Plan or a health information organization working on our behalf will contact you to schedule a date for collection or to explain the process for submitting medical records by fax, mail or electronically. A patient list will be faxed to you the day you are contacted so you can prepare the requested medical records for collection. If a requested patient chart is not available at your facility, or if a patient is listed who has not received services from your practice, please notify the health information organization.

Medical Record Release Permissions

Q6. Does the Health Insurance Portability and Accountability Act (HIPAA) allow me to release these records to UnitedHealthcare Community Plan or your designee?

A6. Yes. You are permitted to disclose protected health information (PHI) to UnitedHealthcare Community Plan and to contracted data collection vendors who are acting on our behalf as business associates. Under the HIPAA privacy rule, a health care provider is permitted to share PHI with a health plan or its vendor/business associate for the plan's HEDIS® purposes without member authorization. In other words, a signed consent form from the member is not required to release the requested information to us or our health information organizations. For more information about the HIPAA privacy rule, go to hhs.gov/ocr/privacy/hipaa/fag.

Q7. Does the American Recovery and Reinvestment Act (ARRA) allow me to release these records to UnitedHealthcare Community Plan or your designee?

A7. Yes. ARRA allows physicians and other care providers to disclose PHI for health care operations purposes.

Q8. Who may contact me to collect medical records on behalf of UnitedHealthcare Community Plan?

A8. UnitedHealthcare Community Plan is working with several health information organizations that meet our high performance and customer service expectations, as well as HIPAA and confidentiality guidelines. If you are contacted by one of these health information organizations, please work with them to arrange the medical record collection method that is most convenient for you – in person, fax, mail or electronically.

The health information organizations include:

- Advantmed
- Change Healthcare
- Optum/CiOX

Q9. Why is UnitedHealthcare Community Plan working with these organizations?

A9. Due to the volume of records we need to collect to meet CMS requirements, we partner with health information organizations to help coordinate onsite collection.

Medical Record Collection Guidelines

Q10. How do I send the records to UnitedHealthcare Community Plan?

A10. We try to identify the most appropriate collection method based on volume by site, HEDIS® measure and geographic location. You'll have several options for submitting the records, including electronic (remote access to electronic medical records and FTP uploads), onsite, fax or mail. These options will be explained when we reach out to you.

Q11. When do I need to submit the medical records?

A11. For onsite review, medical records should be made available on the date of the onsite review. For medical records that are submitted by fax, mail or electronically, they should be submitted within five business days of receipt of the request letter.

Q12. Should I provide medical records for a member who was seen by a care provider who has retired, died or moved?

A12. Yes. HEDIS® medical record collection may include medical records from as far back as 10 years, so you should provide any archived medical records that are requested.

Q13. Could I be asked to provide medical records for a member who is no longer a patient at my practice or facility or member of UnitedHealthcare Community Plan?

A13. Yes. Medical record reviews may require records related to services provided over multiple years. That includes services for patients no longer at your office/facility and those who are no longer UnitedHealthcare members, including individuals who are deceased.

Q14. Will I be reimbursed for copies of materials needed for the medical record review?

A14. We do not generally reimburse for medical record copies required for HEDIS® medical record collection. For additional information on reimbursement, please see your participation agreement or contact your Network Management representative

Q15. Where can I find more HEDIS® information if I have questions?

A15. You can learn more about HEDIS® medical record collection at UHCprovider.com > [Menu](#) > [Resource Library](#) > [Patient Health and Safety Resources](#) > [Healthcare Effectiveness Data and Information Set \(HEDIS®\)](#).

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