Endocrinology Quality Program
Guide to supplemental data for gap closure

Correct coding is the most accurate way to submit clinical quality gap closure data. When the gap is not closed via claims, supplemental data can also be submitted. To be HIPAA compliant, please provide only the necessary documentation required to close the gap in care. All supplemental data must include:

- Patient's name
- Patient's date of birth (if not officially on progress note, must be written on documentation and signed by physician or a demographic cover sheet should be included with the submission)
- Date of Service (month, day, year)
- Provider identified by name and credentials (if paper chart, provider signature)

HEDIS Measures	Documentation Requirements	Plan/Product
Comprehensive Diabetes Care: HbA1c Testing (CDCH)	1. Any HbA1c test within the measurement year meets the HbA1c testing metric. 2. A dated progress note documenting date and result of HbA1c test. 3. When lab results are imported into the EHR by interface, a dated medical record documentation of the HbA1c test can be submitted. **Note:** In-office, point-of-care testing performed during the measurement year also will meet the metric when documented in the medical record and includes: date and result, or bill with administrative claim codes.	Medicare Advantage Horizon NJ Health FIDE-SNP
Comprehensive Diabetes Care: HbA1c Control <=9 (CDCC) <8 (CDC8)	1. A dated progress note documenting the date of collection and result of the most recent HbA1c test. 2. Lab report with resulted or reported date and result. 3. When lab results are imported into the EHR, a dated medical record documentation of the most recent HbA1c test in the measurement year. **Notes**: In-office, point-of-care testing performed during the measurement year will also meet the metric when documented in medical record. Include: date and result or bill with administrative claim codes. Every HbA1c performed during the measurement year should be submitted; however, the most current HbA1c test result will be captured for this metric.	Horizon NJ Health HbA1c <8: Medicare, FIDE-SNP HbA1c <=9:

HEDIS Measures	Documentation Requirements	Plan/Product
Comprehensive Diabetes Care: Eye Exam (CDCE)	1. A signed and dated report/progress note with a result (negative or positive for diabetic retinopathy) from an eye care professional indicating appropriate eye exam was completed in the measurement year. A negative eye exam from the prior year is also acceptable. 2. A dated progress note from a Primary Care Physician, Ophthalmologist or Optometrist indicating that the patient had a retinal eye exam with date, eye care professional's name and result of exam. 3. Fundoscopic photo that is read by an eye care professional is also eligible if signed and dated with result. **Note:** Results that were read by a system that provides an artificial intelligence (AI) interpretation, is acceptable.	Horizon NJ Health Medicare Advantage FIDE-SNP
Comprehensive Diabetes Care: Medical Attention for Nephropathy (CDCN)	1. A dated progress note documenting laboratory test and result for nephropathy can be submitted. In-office urine tests also meet this metric (e.g., urine for microalbumin, protein). 2. A dated progress note indicating that an ACE or ARB was ordered within the measurement year and the ACE or ARB is on the current medication list. The prescription for the ACE/ARB must be written within the measurement year. 3. A dated progress note indicating documentation of nephropathy (e.g., ARF, RI, CKD, CRF, ESRD, renal transplant). 4. A dated progress note from a nephrologist can be submitted.	Medicare Advantage
Comprehensive Diabetes Care: Blood Pressure Control (CDCB)	1. A dated progress note documenting the most recent BP in the measurement year 2. A vital sign flowsheet with name, date of birth and date of service **Notes:** The last BP reading for the measurement year will determine compliance. The lowest systolic and lowest diastolic BP reading on the same date is considered the representative BP. BP readings performed or taken by member with a digital device, is acceptable.	Horizon NJ Health
Controlling High Blood Pressure (CBP)	1. A dated progress note documenting the most recent BP in the measurement year. 2. A vital sign flowsheet with name, date of birth and date of service. **Notes:** The last BP reading for the measurement year will determine compliance. The lowest systolic and lowest diastolic BP reading on the same date is considered the representative BP. BP readings performed or taken by member with a digital device, is acceptable.	Horizon NJ Health

How to Submit Supplemental Data to Horizon BCBSNJ

1. Scan/image the required medical record documentation and name the file as follows:

   – Member HorizonID#_3 or 4 letter acronym for measure_MMDDYYYY (date of the submission of the supplemental data)_Practice acronym. Please use ALL CAPS with an underscore between each element

     example: 3HZN12345678_ABA_01012020_XYZ
     example: 87654321_ABA_01012020_XYZ

   – If additional documentation is required for the same patient and for the same measure, the date needs to be changed to reflect the new date of submission. This will eliminate confusion when additional information is requested.

   – If the same document meets multiple measures, the name of the file may include all acronyms satisfied by the document (example: 3HZN12345678_ABABCSCOLCDCH_07012020_XYZ). This file name would indicate the document will satisfy BMI, Breast Cancer Screening, Colorectal Cancer Screening and HbA1c testing.

2. Save the file as a PDF, JPEG, GIF or PNG.

   – If unable to save all documentation as a single file, please add underscore 01, 02, etc., to the name of the file to denote multiple parts for the same member, measure and submission date

     example: 3HZN12345678_ABA_01012020_XYZ_01

3. Multiple files may be saved as a zip file separately for each program:

   – Naming convention for zip file should be:

Medicaid	TIN_MMDDYYY_MCD.zip
Medicare Advantage	TIN_MMDDYYY_MA.zip
FIDESNP	TIN_MMDDYYY_SNP.zip

4. Upload thru the MFT (Managed File Transfer).

   – Save the documentation to the "Medicare Supplemental Files" or "Medicaid Supplemental Data" sub-folder in the "Partner to Horizon" folder on the MFT site

5. Submit supplemental data to Horizon BCBSNJ via Secured Blue email.

Upload as an attachment through the Secure Blue Email site (https://mailgate.HorizonBlue.com).
Emails will be sent to the MedicaidSuppData@HorizonBlue.com or MASuppData@HorizonBlue.com
(MA and SNP) email

   – No supplemental data can be sent via unsecure email

   – All documentation that satisfies a measure for a single patient should be saved as a single file

   – The maximum file size to attach to the email should not exceed 1MB

6. Please see Secure Blue Messaging Instructions for step by step instructions on how to email to Horizon BCBSNJ.

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