



Q M E T R I C S

QMetrics Winter Newsletter

Welcome to Winter Edition of our Newsletter!

QMetrics has kicked off the New Year with several exciting activities for our partners and clients. Is your encounter data in order? QMetrics has launched a program applying our strong expertise in this critical area of your organization. Are you taking advantage of the Advanced Access delegation guidelines? Find out how these impact health plans and provider groups and how we can assist.

Below you will find California-specific updates including new regulatory updates that may impact your business directly. We hope you find these quarterly updates of interest. Thank you for taking time to read this and for being an important part of our QMetrics family.

Cheers!

~Suzan Mora Dalen & the QMetrics team



REGULATORY & COMPLIANCE

New Laws Impacting Health Plans and Delegated Entities in 2020

Many new laws have been recently enacted and are already or will become effective in 2020 that will have operational impacts in 2020. **QMetrics is available to review your operational processes for compliance and help you to develop an implementation plan for full operational compliance and help you with your regulatory filing due to the DMHC on March 6, 2020.**

- The DMHC issued an All Plan Letter on January 15, 2020 outlining its expectations for Plans to submit a filing demonstrating compliance with the newly effective requirements by March 6, 2020.
- Covered California issued a news release on December 23, 2019, summarizing the New Health Laws for 2020 to Start on Jan. 1, Including Requirement That Californians Have Health Insurance.

New Law: Health Insurance Mandatory in California

QMetrics is available to review your Policies and Procedures for compliance and help you to develop an implementation plan for full operational compliance. As of January 1, 2020, California has mandated that California residents will be required to have health insurance or pay a penalty. This law will have implications on individuals, health insurance carriers, and employers.

Penalties:

- California residents who do not have coverage for themselves and their dependents in 2020, and who do not qualify for an exemption, will pay

a penalty of \$695/adult or more and \$347.50/minor, or 2.5% of their or gross income over the filing threshold for their filing status, whichever is higher.

Insurance:

- Insurance carriers must report insurance information to the California Tax Board (FTB) by March 31, 2020. There will be a penalty of \$50/person for not reporting.

Employers:

- Employers are required to report insurance information to FTB by March 31, 2020; but only if their insurance carrier does not report to FTB.

Reporting:

- The FTB will be providing a new Form 3895, California Health Insurance Marketplace Statement to report the required insurance information. The FTB will also accept Federal forms 1095-B, Health Coverage, and 1095-C, Employer-Provided Health Insurance Offer and Coverage in the interim.

Schedule your FREE consultation



SURVEYS

QMetrics Offers Prevalidation Services to Ensure

Survey Accuracy

Did you know that QMetrics offers a thorough Prevalidation process to confirm the accuracy of contact lists prior to survey administration?

Prevalidation includes:

- Comparison of the contact list to DMHC specifications
- Reconciliation of Contact Lists to Network Filing ('G' Data)

This critical step ensures compliance with DMHC specifications and improves efficiency of the process, reducing errors that are often found in later stages of the project. Prevalidation can be used as a stand-alone service or in addition to survey administration and/or validation. We look forward to helping you meet your needs in 2020.

Implementation of the 2019 Timely Access surveys (PAAS, Provider Satisfaction, and After Hours) is complete and it was another successful year for QMetrics and our health plan partners! We used state-of-the-art technology for each mode of survey implementation, including use of an online portal for the real-time tracking and QA of phone calls.

Are you taking advantage of the Advanced Access delegation guidelines? This allows for health plans to designate Primary Care Providers as compliant if the health plan's Access and Availability Quality Assurance System verifies the advanced access programs. To reduce the fielding burden for health plans and provider groups in 2020, QMetrics is pursuing efforts and seeking partners who are interested in Advanced Access programs. This

aligns with statewide efforts by the ICE DMHC Access Workgroup to increase the use of Advanced Access programs.

If you are a health plan or provider group outside of California, we can help you too. **QMetrics will collaborate with your team to apply our survey expertise and established infrastructure to develop tailored programs that meet your state regulatory and quality improvement needs.**



ENCOUNTER DATA

QMetrics Offers Prevalidation Services to Ensure Survey Accuracy

Did you know QMetrics provides solutions in Encounter Data Improvement? The team recently completed a one-year engagement at a California-based Managed Services Organization (MSO). After analyzing the MSO claims processing software system, QMetrics improved the Encounter Data submission rate by over 62%. Data leakage points were also identified and the team corrected process breakdowns causing these issues. As a result, QMetrics corrected over 80,000 Rejection Errors in the organization's claims processing system and enabled the MSO to track Health Plan requirements and proactively monitor compliance. QMetrics also provided the organization with the ability to prevent future sanctions and Corrective Actions Plans (CAPs) and required encounter data, claims and

quality requirements from Health Plans. QMetrics established an Enterprise Encounter Data team for the MSO including defining an organizational chart and job descriptions and managed the training and knowledge transfer to the new team once they were hired.

According to RISE, For CY 2021, CMS plans to calculate risk scores by increasing the mix and using 75 percent of the risk score calculated with the 2020 CMS-HCC model and 25% of the risk score calculated with the 2017 CMS-HCC model. The agency also plans to increase its use of encounter data to calculate MA risk scores. **CMS proposes to determine risk scores for MA payment in CY 2021 by using 75 percent of the encounter data-based risk score** and 25 percent of the risk-adjustment processing system (RAPS)-based risk score. For 2020, CMS used a 50-50 blend of the encounter data and RAPS.

“While other consultants may have repackaged or recycled content, QMetrics provided nuanced and tailored deliverables based on their intimate and thorough understanding of our organization.” -- Vice President of California Market for a Managed Services Organization (MSO), a QMetrics Encounter Data client



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OUR FOLLOWERS SAVE 15% WITH CODE
QMETRICS15

Attending RISE Nashville in March? Make sure to stop by our booth! We are a sponsor this year and looking forward to seeing you.

QMetrics will be attending **American's Physician Group (AGP) Conference** in our hometown of San Diego in May. We hope to see you there!



[View Full List of QMetrics Services](#)



Q M E T R I C S

QMetrics is a consulting firm designed to provide healthcare payers and providers trusted and actionable solutions that support value-based decision making, while delivering excellent customer experience.



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