

Process for Closing Care Gaps with Medical Records

We understand that incomplete claims data may result in misinformation. If you believe your information is incorrect or have concerns about your reports, you can send a request for correction. The Provider Quality Member Detail Report shows both current and prospective gaps. Utilizing this information, we would anticipate that most care gaps will be closed by claims submission. For those gaps that you want to close with medical records, please utilize the following process.

Based on HEDIS Specifications, Only the following measures** utilized in Provider Quality Reporting will allow closure by Medical Records:

HEDIS Measure Abbreviation	Measure Name
ABA	Adult BMI Assessment
ART	Disease Modifying AntiRheumatic Drug Therapy for Rheumatoid Arthritis
BCS	Breast Cancer Screening
CCS	Cervical Cancer Screening
CIS	Childhood Immunization Status
CDC	Comprehensive Diabetes Care_ HBA1c Screening, HBA1c Poor Control >9.0 (Medicare reporting), Diabetes Control <8.0 (non-Medicare reporting), Eye Exam, Medical Attention for Nephropathy.
CHL	Chlamydia Screening in Women (16-24 years of age)
COL	Colorectal Cancer Screening
IMA	Immunizations for Adolescents
MRP	Medication Reconciliation Post Discharge
OMW	Osteoporosis Management in Women Who Had a Fracture
PPC	Prenatal and Postpartum Care
WCC	Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents

****For details on these measures including what must be included in the Medical Records, please refer to the following document - 2019 Provider Quality Pocket Guide.****

Process to submit medical records for potential gap closures:

1. Please utilize your Provider Quality Member Detail Report (excel spreadsheet) to document your requests for care gap closure.
2. Add an additional 3 columns at the end of the spreadsheet (columns R, S, and T) with the headers as below:
 - "DATE"
 - "RESULT"
 - "MEDICAL RECORDS PROVIDED"

O	P	Q	R	S	T	U
	Measure Name	Current/Prospective	Date	Result	Medical Record Provided	
	Body Mass Index (BMI) *	CURRENT	5/25/2015	34	YES	
	Diabetes HbA1c Poor Control *	CURRENT				
	Body Mass Index (BMI) *	CURRENT				
	Diabetes HbA1c Poor Control *	CURRENT	6/1/2015	6	YES	
	Colorectal Cancer Screening *	PROSPECTIVE				
	Breast Cancer Screening	PROSPECTIVE				
	Diabetes HbA1c Poor Control *	PROSPECTIVE				
	Colorectal Cancer Screening *	CURRENT	1/23/2008		YES	
	Diabetes - Eye Exam *	PROSPECTIVE				
	Colorectal Cancer Screening *	PROSPECTIVE				

3. For your convenience, you may utilize the “Hide” excel functionality; however, please do not delete any columns on your provider Quality Member Detail Report.
4. If a patient has a gap on more than one measure, please document corrections separately utilizing the applicable line for each measure.
5. Adult BMI, Childhood BMI, and CDC 2 (HbA1c poor control) require that a result be entered. For all other measures this is not a required field.
6. Prospective gaps should be closed with claims when the service is rendered.
7. Submitted claims may take up to 90 days to fully process. Gaps will remain on the Provider Quality Report until the claim has processed.
8. Corrections must fall in the appropriate measurement period to close gaps.
9. The completed corrections spreadsheet should be emailed to: Quality.management@bcbsnc.com
10. Medical record documentation will be required for each care gap closure. Please send only what is needed to document gap closure. Each record should be sent individually and in pdf format if possible. The following naming convention should be used "last name_first name_date of birth" ex. smith_john_10101975. The Medical Record MUST show patient name and date of birth. Medical records can be sent in one of two ways:
 - Email scanned records to Quality.management@bcbsnc.com or directly to your Quality Management Consultant.
 - Fax to **919.287.5459**, Attention: Quality Management. Fax should clearly identify your practice name as it appears on your Quality Performance Reports.
11. Correction spreadsheets will not be processed until supporting medical records have been received.
12. You will be notified once corrections have been processed. Once the gap closure is processed it will be captured on the next reporting cycle (i.e. any corrections processed in January will be captured on the report that will be published in early March).

Please follow your practices' normal encryption processes for all PHI sent via Email.

Please contact Quality Management at (919) 765-4809 or email at Quality.management@bcbsnc.com, for any questions.