

## Align. Measure. Perform. (AMP) Questions and Appeals Submission Form – Updated Measurement Year 2018 AMP Commercial HMO Appropriate Resource Use & Cost Reports

### **Directions**

Complete this form to submit your question or appeal about AMP MY 2018 Commercial HMO Appropriate Resource Use and Cost reports re-released May 29, 2020. Only provider organizations contracted with HEALTH NET, SHARP HEALTH PLAN, and WESTERN HEALTH ADVANTAGE in 2018 may submit questions and appeals for MY 2018 results. POs in this category have been notified by IHA staff.

1. Complete submission form below **for each health plan** you are submitting a question or appeal for.
  - a. You should include measure-specific information about your questions and appeals in the table.
  - b. All **questions** must include enough detail for AMP staff to investigate and resolve.
  - c. All **appeals** must include enough detail and documentation for AMP staff to investigate and to support the appeal. All documentation must be attached to your email submission.
  - d. **PROTECTED HEALTH INFORMATION (PHI) WILL NOT BE ACCEPTED. If you attach PHI, your email will be discarded, and you will need to restart the appeals process.**
2. Save completed form(s) and email to [appeals@iha.org](mailto:appeals@iha.org) with the following Subject Line: [Your Organization Name] Question & Appeals Submission.

### **Submission Form**

1. **Organization Information** (enter the PO name, followed by the 5-digit DMHC ID and 2-digit Sub ID)

PO Name:

DMHC ID and Sub ID:

2. **Submitter Information** (enter the name of the submitter and contact information)

Submitter Name:

Email and phone number:

3. **Data source** (select the appropriate health plan/reporting entity for your inquiry):

4. **Summary of Question/Appeal** (type a short summary of the data concerns. A detailed explanation of the issue should be included in the table on the following pages)

**Questions & Appeals: MY 2018 AMP Commercial HMO Appropriate Resource Use and Total Cost of Care**

**Only provider organizations contracted with HEALTH NET, SHARP HEALTH PLAN, and WESTERN HEALTH ADVANTAGE in 2018 may submit questions and appeals for MY18 ARU/TCOC results. POs in this category have been notified by IHA staff.**

In the table below, please indicate the measure to which the question or appeal applies. *Each row should reference one measure only.* A complete list of eligible measures is included in the appendix of this form.

	<b>Measure</b> <i>List one measure per row including measure indicator as needed (e.g. age band).</i>	<b>Product Line</b>	<b>Data Concern</b>	<b>Detailed explanation of the issue</b> <i>Please include:</i> <ul style="list-style-type: none"> <li>● <i>Specific results affected (e.g. numerator, denominator, rate).</i></li> <li>● <i>A description of any data inconsistencies (e.g. does it differ from year to year, compared to other plans or to internal systems).</i></li> <li>● <i>Summary of any evidence supporting appeal (e.g. confirmation of supplemental data sent &amp; received).</i></li> </ul>	<b>Question or Appeal?</b>
1		HMO			
2		HMO			
3		HMO			
4		HMO			
5		HMO			

<b>6</b>		HMO			
<b>7</b>		HMO			
<b>8</b>		HMO			
<b>9</b>		HMO			
<b>10</b>		HMO			
<b>11</b>		HMO			
<b>12</b>		HMO			

### Measure List: MY 2018 AMP Appropriate Resource Use and Total Cost of Care Domains

- **Ambulatory Care: ED Visits – Observed**
- **Emergency Department Utilization – Risk Adj.**
- **Frequency of Selected Procedures (inc. all indicators):**
  - Frequency of Selected Procedures: Back Surgery
  - Frequency of Selected Procedures: Bariatrics Weight Loss Surgery
  - Frequency of Selected Procedures: Coronary Artery Bypass Graft (CABG)
  - Frequency of Selected Procedures: Cardiac Catheterization
  - Frequency of Selected Procedures: Carotid Endarterectomy
  - Frequency of Selected Procedures: Total Hip Replacement
  - Frequency of Selected Procedures: Total Knee Replacement
  - Frequency of Selected Procedures: Angioplasty (PCI)
  - Frequency of Selected Procedures: Tonsillectomy
  - Frequency of Selected Procedures: Prostatectomy
  - Frequency of Selected Procedures: Mastectomy
  - Frequency of Selected Procedures: Lumpectomy
  - Frequency of Selected Procedures: Cholecystectomy (Laparoscopic)
  - Frequency of Selected Procedures: Cholecystectomy (Open)
  - Frequency of Selected Procedures: Hysterectomy (Abdominal)
  - Frequency of Selected Procedures: Hysterectomy (Vaginal)
- **Generic Prescribing (inc. all indicators):**
  - Generic Prescribing Rate: Antidepressants
  - Generic Prescribing Rate: Antihyperlipidemics
  - Generic Prescribing Rate: Anti-Migraine
  - Generic Prescribing Rate: Anti-Ulcer Agents
  - Generic Prescribing Rate: Cardiac – Hypertension and Cardiovascular
  - Generic Prescribing Rate: Diabetes
  - Generic Prescribing Rate: Nasal Steroids
  - Generic Prescribing Rate: Overall (All Prescriptions)
- **Acute Hospital Utilization (inc. all indicators):**
  - Acute Hospital Utilization: Total Inpatient
  - Acute Hospital Utilization: Medicine
  - Acute Hospital Utilization: Surgery
- **Inpatient Utilization (inc. all indicators):**
  - Inpatient Utilization-General Hospital/Acute Care: Total Inpatient Care, excl. Maternity
  - Inpatient Utilization-General Hospital/Acute Care: Maternity
  - Inpatient Utilization-General Hospital/Acute Care: Medicine
  - Inpatient Utilization-General Hospital/Acute Care: Surgery
- **Outpatient Procedures Utilization: Percent Done in Preferred Facility**
- **All Cause Readmissions**
  - All-Cause Readmissions: Male and Female: All Ages (18-64) - Observed
  - All-Cause Readmissions: Male and Female: All Ages (18-64) – Risk Adjusted
- **Total Cost of Care**
  - Total Cost of Care PMPY (250K, Observed)
  - Total Cost of Care PMPY (250K, Risk-Adjusted)
  - Total Cost of Care PMPY (250K, Geography & Risk-Adjusted)
  - Total Cost of Care Trend (250K, Observed)
  - Total Cost of Care Trend (250K, Risk-Adjusted)

### Measure List: MY 2018 AMP Clinical Quality Domain

- **Concurrent Use of Opioids & Benzodiazepines**
- **Use of Opioids at High Dosage**