

# CarePlus supplemental data checklist



**Supplemental data records that comply with the Healthcare Effectiveness Data and Information Set (HEDIS) audit review will be credited and calculated into your overall Star score.**

CarePlus accepts medical record information regarding the following measures through supplemental data:

- **Colorectal Cancer Screening (COL)**
- **Breast Cancer Screening (BCS)**
- **Comprehensive Diabetes Care – Dilated/Retinal Eye Exam (DRE)**
- **Osteoporosis Management in Women Who Had a Fracture (OMW)**
- **Disease-Modifying Anti-Rheumatic Drug Therapy for Rheumatoid Arthritis (ART)**

## Medical record requirements:

- Two patient identifiers (such as the patient's name, date of birth or CarePlus member ID) must be included in the medical record(s).
- A legible and acceptable health care provider signature, credentials and date must be included (may be electronic).
- Handwritten patient information on medical records (e.g. procedure dates or CarePlus member ID) need to be initialed and dated by the physician within the current measurement year.
- Medical records/documents in a foreign language are accepted; however, the HEDIS clinical opportunity measure elements must be translated into English.

## You may submit your supplemental data records using one of two methods:

- **Via secure provider web portal (instructions below)**
- **Via fax to 1-800-317-9903**

**Note:** Prior to supplemental data records submission, please reference your practice's current HEDIS gap report and verify your submission meets the criteria listed.

## Upload medical records directly to CarePlus using the secure provider portal by following these five steps:

1. Go to the secure upload site at [www.submitrecords.com/careplus](http://www.submitrecords.com/careplus) and enter the secure **password: careplus5s69**
2. Click the **"Add files"** button, and choose the medical records from your internet browser, then choose **"Open."** You can upload single records as PDFs or TIFFs. In addition, you can batch upload a zip file of all records as PDFs or TIFFs. You can add records to a maximum of 100 MB of data per upload.
3. Add any information regarding the medical record(s) in the notes section.
4. Click **"Upload,"** and the selected medical records will be electronically routed to the CarePlus repository system.
5. Provide contact name and phone number in case there are issues with the file upload.

**Helpful hint:** A reference number is generated after each successful upload of medical records. CarePlus recommends logging or capturing the reference number as the reference number can be used for provider submission research as needed.

For technical assistance with the provider upload portal, please call 1-801-984-4540, Monday through Friday, 6 a.m. to 5 p.m. Mountain time. This website, [www.submitrecords.com/careplus](http://www.submitrecords.com/careplus), has been verified by Entrust®, an identity-based security software. All transactions are protected by 128-bit secure sockets layer (SSL).

## Breast Cancer Screening (BCS)

- **Completed mammography report** with a date of service between Oct. 1 two years prior to the measurement year and Dec. 31 of the measurement year.
- **Completed digital breast tomosynthesis** report between Oct. 1 two years prior to the measurement year and Dec. 31 of the measurement year.

Patient-reported mammogram (screening, diagnostic, film, digital or digital breast tomosynthesis) information that is documented in the medical record by the primary care physician while taking the patient's history is acceptable.

A documented date of the procedure within the measure compliance time frame is required.

**Exclusions:** Please submit documentation of exclusion due to bilateral mastectomy; unilateral mastectomy with a bilateral modifier; two unilateral mastectomies (left and right not documented) with service dates 14 days or more apart, unilateral mastectomy with a right-side modifier, unilateral mastectomy with a left-side modifier, left unilateral mastectomy and right unilateral mastectomy; unilateral mastectomy without a modifier and a left mastectomy with service dates 14 days or more apart; unilateral mastectomy without a modifier and a right mastectomy with service dates 14 days or more apart.

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## Colorectal Cancer Screening (COL)

- **Colonoscopy:** The measurement timeframe is the current measurement year or the previous nine years.
- **Flexible sigmoidoscopy or computed tomography (CT) colonography:** The measurement timeframe is the current measurement year or the previous four years.
- **FIT-DNA test (Cologuard):** The measurement timeframe is the current measurement year or the previous two years.
- **Fecal occult blood test (FOBT):** The measurement timeframe is the current measurement year.

CarePlus needs the procedure report from the healthcare provider who performed the procedure above, along with the results/findings.

Patient-reported colorectal cancer screening information that is documented in the medical record by the primary care physician while taking the patient's history is acceptable. A documented date of the procedure within the measure compliance timeframe is required.

**Exclusions:** Please submit documentation of exclusion due to total colectomy or diagnosis of colorectal cancer anytime before Dec. 31 of the measurement year.

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## Comprehensive Diabetes Care – Dilated/Retinal Eye Exam (DRE)

- **Documentation of a diabetic retinal or dilated eye exam** performed between Jan. 1 and Dec. 31 of the measurement year by an eye-care specialist (optometrist or ophthalmologist)
- **Documentation of a diabetic retinal or dilated eye exam (with negative retinopathy results)** performed between Jan. 1 and Dec. 31 the year prior to the measurement year by an eye-care specialist
- **Bilateral eye enucleation** anytime during the member's history through Dec. 31 of the measurement year

Patient-reported retinal eye exam information, performed by an eye-care specialist, that is documented in the medical record by the primary care physician while taking the patient's history is acceptable. A documented date of the procedure within the measure compliance timeframe is required.

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## Disease-Modifying Anti-Rheumatic Drug Therapy for Rheumatoid Arthritis (ART)

- **Documentation of at least one ambulatory prescription** dispensed for a disease-modifying anti-rheumatic drug (DMARD) during the measurement year.

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## Osteoporosis Management in Women Who Had a Fracture (OMW)

- **Documentation of a bone mineral density (BMD) test** completed in any setting in the 180-day (6-month) period after the fracture date.
- **Documentation of a dispensed prescription** to treat osteoporosis in the 180-day (6-month) period after the fracture date.

**Exclusions:** Please submit documentation of exclusion due to a BMD test during the 730 days (24 months) prior to the fracture; a claim/encounter for osteoporosis therapy during the 365 days (12 months) prior to the fracture; a dispensed prescription or an active prescription to treat osteoporosis during the 365 days (12 months) prior to the fracture.

For more detailed information of HEDIS measures, please reference the Quality Indicator Physician Medicare Measures Guide or contact your assigned CarePlus clinical stars improvement professional.