



**ikaProHEDIS+**  
Real-Time Clinical Care Reporting  
**Training Guide**

**Third Edition**  
**June 2010**



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# *ikaProHEDIS+* Training Guide: **Getting Started**

## Introduction

Passport Health Plan (PHP) has an exciting online application, **ikaProHEDIS+**, on our web site, [www.passporthealthplan.com/providercenter](http://www.passporthealthplan.com/providercenter). The ikaProHEDIS+ application uses claims data to present real-time preventive and chronic care screening information.

**With ikaProHEDIS+ Real-Time Clinical Care data, you have the ability to:**

- **Monitor Provider Recognition Program\* performance data;**
- **Access important health care information specific to your panel members;**
- **Identify members due for preventive health and chronic care screenings;**
- **Generate reports by type of screening; and,**
- **View current and timely healthcare data - updated every two weeks!**

In this instruction manual, we'll help you understand our methodology and provide easy steps for you to monitor and affect your provider group's scores.

As always, we're here to assist you as you navigate through this new product. If you have any questions, please call Provider Relations at **(502) 585-7943**.

### **Our Hope For the Future**

As providers continue to use ikaProHEDIS+, additional years of preventive and clinical care member data will become available from all provider types. We hope this comprehensive data will assist you in maximizing our members' continuity and coordination of care.

*\*The Passport Health Plan **Provider Recognition Program (PRP)** was designed by the Plan to improve health outcomes and reward providers who demonstrate improvement and/or excellence in performance in the categories of cost containment, member satisfaction, access to care, and health outcomes.*



## ikaProHEDIS+ Training Guide: Getting Started

### Before You Begin

With ikaProHEDIS+, you have access to two different types of data:

1. **Provider Recognition Program (PRP), and**
2. **Clinical Care Gaps.**

Each data type is displayed individually on its own page of the application – separated by two different tabs at the top of the screen. Both tabs of information are visually similar and contain functions which allow you to:

- View and compare group level data,
- View and compare member level data,
- Search for all members within one measure,
- Search for a specific member,
- Customize your view, and
- Submit a consideration.

### Understanding PRP Data

The calculations displayed on the PRP tab are based on specific PRP measurements for members assigned to your panel for at least seven months of the year and highlight your group's performance data for six of the PRP program's eight measures:

- Breast Cancer Screening Rates\*
- Cervical Cancer Screening Rates\*
- ER Utilization\*
- Chlamydia Screening Rates\*
- Early Periodic Screening, Diagnosis, and Treatment (EPSDT) Screening Rates\*\*
- EPSDT Participation Rates\*\*

*\*These are Healthcare Effectiveness Data and Information Set (HEDIS®) measures.*

*\*\*EPSDT data displayed on the PRP page is measured by an annual calculation period of January 1<sup>st</sup> through December 31<sup>st</sup> of each year and **does not** refer to actual EPSDT screens due calculations according to the EPSDT program periodicity schedule.*

For more information regarding program measurement, please visit the "Provider Recognition Program" portion of our web site, [www.passporthealthplan/providercenter.com](http://www.passporthealthplan/providercenter.com).

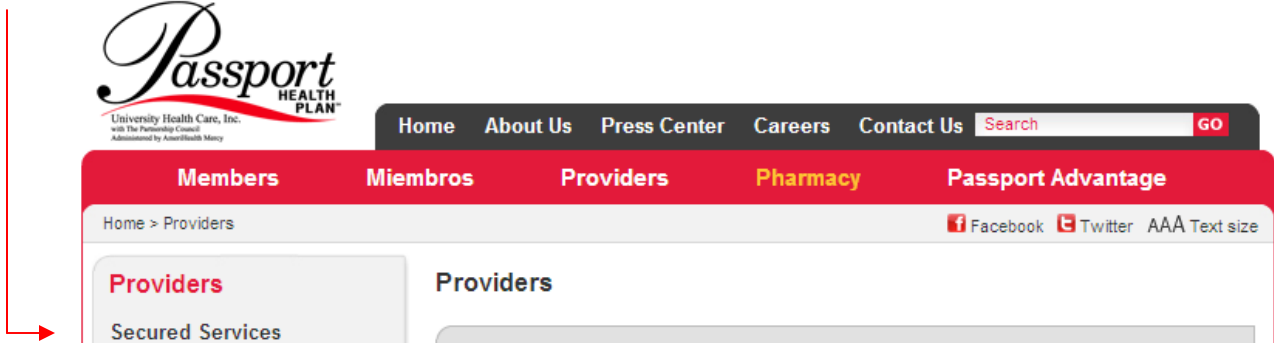
### Understanding Clinical Care Gaps Data

The Clinical Care Gaps tab contains all administrative data currently available to the Plan from all provider types. Clinical Care Gaps data is not restricted based upon the methodologies of the PRP and will therefore display all the information available regarding the preventive or chronic care screenings your members may need.

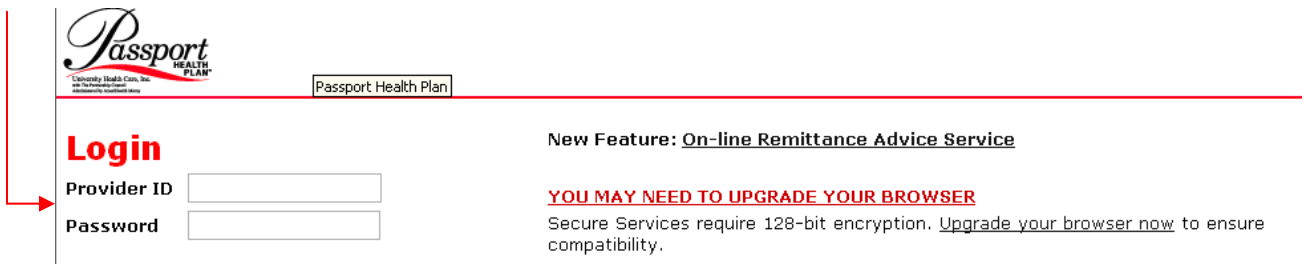
## Accessing ikaProHEDIS+

Follow these easy steps to access the ikaProHEDIS+ Real-Time Clinical Care Reporting:

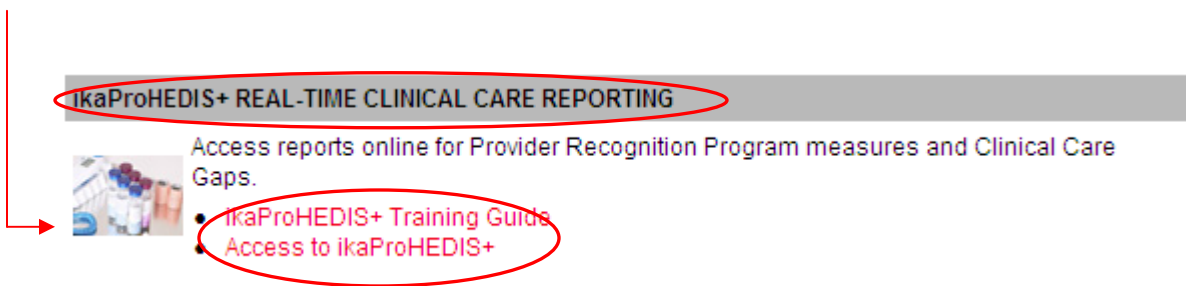
1. Open a web browser and go to the Passport Health Plan provider web site, [www.passporthealthplan.com/provider\\_center](http://www.passporthealthplan.com/provider_center). Click on “Secured Services.”



2. Enter your Provider ID and password.



3. Select the ikaProHEDIS+ heading or subheading. This will lead you directly into the application and will display your provider group's specific data. You may also access the most updated version of this training tool from this page.



## View Your Group's Data

Follow the steps below to view your provider group's current scores and compare them to national averages and Passport Health Plan goals.

1. Select either the **Provider Recognition Program tab** (the default opening tab of the ikaProHEDIS+ application) or the **Clinical Care Gaps tab** at the top of the screen.
2. Locate the first chart, entitled "**Provider Group Level Summary.**" In this chart, each vertical column displays a PRP or Clinical Care Gaps measure (according to which tab you have selected.)
3. The horizontal rows of this chart display:
  - A. Your group's current data, organized by measure;
  - B. The NCQA Medicaid 90<sup>th</sup> Percentile goal (*informational only*); and
  - C. Your group's annual **Improvement Goals** (*updated annually in September*).



**1** Provider Recognition Program | Clinical Care Gaps

**2** Provider Recognition Program Status for Calendar Year 2010  
This tab contains current scoring information for the current year's Provider Recognition Program's measurement cycle. To review care gaps for all measures, click on the Clinical Care Gaps tab.

**3A** Provider ID | Provider Name | ER visits/1000 MM | Breast Cancer Screening | Cervical Cancer Screening | Score

**3B** 1234567 | Sample Provider Group | 84.3 | 40/60 = 66.66% | 221/323 = 68.42% | 8

**3C** NCQA Medicaid 90th Percentile | 90% | 65% | 79% | 9

Improvement Goals | 89,979 | 65.41% | 65.00% | 7

Last Report Run:

TIP: Roll your cursor over the title of a measure to display the timeframe in which screens are to be completed.

For example, "Breast Cancer Screening" will display "(Measurement Period: 01/01/2008 – 12/31/2009)" and screenings should occur during this timeframe.

The ER visits measure is an exception to this function. ER visits display current visits per 1000 members.

### Understanding Your Group's Current Data

The first horizontal row of this chart (**3A**) contains an equation showing how the Plan determined your group's score for each measure. As illustrated below, the numerator (total screenings completed) is divided by the denominator (total screenings required to meet goal) to reach the final percentage (your group's current score).

Provider ID	Provider Name	Cervical Cancer Screening
1234567	Sample Provider Group	7/9 = 77.77%

Annotations: Total Screenings Completed (7), Total Screenings Required (9), Current Score (77.77%)

**NOTE:** PRP data is calculated based on specific program measurement methodologies. Therefore, not all Plan members on a PCP's panel, nor all services rendered, will appear in the "Provider Group Level Summary" on the PRP tab. However, the data on the "Clinical Care Gaps" tab will include services rendered for a member recently added to your panel.

## Find a List of Members by Measure

If your Provider Group Level Summary data is lower than your goal, you may want to consider conducting outreach to improve your group's performance.

ikaProHEDIS+ allows you to pull a list of panel members who are overdue for a required screening. You may even download an Excel file containing member contact information to outreach to those members. You may pull a list of panel members from the PRP tab or the Clinical Care Gaps tab, according to your outreach needs. For EPSDT-related outreach, please use the Clinical Care Gaps tab to conduct your search.


1. To get started, roll your mouse over the **Campaign Management** option and **click on New Member Campaign** when it appears in the drop-down box.



2. **Click on the measure** you want to search for in the "List of Measures" column.
3. **Click the arrow** pointing to the right. This will add the measure to the bottom of the list of selected measures.
4. **Click "Search."**



5. The results of your search will appear at the bottom of the page. **Click on the Excel or Text symbol** to export the member contact information as an Excel or Text document. Follow the prompts to open and/or save the document to your computer.



MEMBERID	MEMBERNAME	DATEOFBIRTH	ADDRESS1	ADDRESS2	CITY	STATE	ZIPCODE	PHONE	MEASURES DUE
222	MEMBER NAME	00/00/0000	NUMBER & STREET		Louisville	KY	40211	0000000000	Adult Chlamydia
223	MEMBER NAME	00/00/0000	NUMBER & STREET		LOUISVILLE	KY	40215	0000000000	Adult Chlamydia
224	MEMBER NAME	00/00/0000	NUMBER & STREET		Louisville	KY	40210	0000000000	Adult Chlamydia
225	MEMBER NAME	00/00/0000	NUMBER & STREET	APT	Louisville	KY	40206	0000000000	Adult Chlamydia
225	MEMBER NAME	00/00/0000	NUMBER & STREET		Louisville	KY	40215	0000000000	Adult Chlamydia

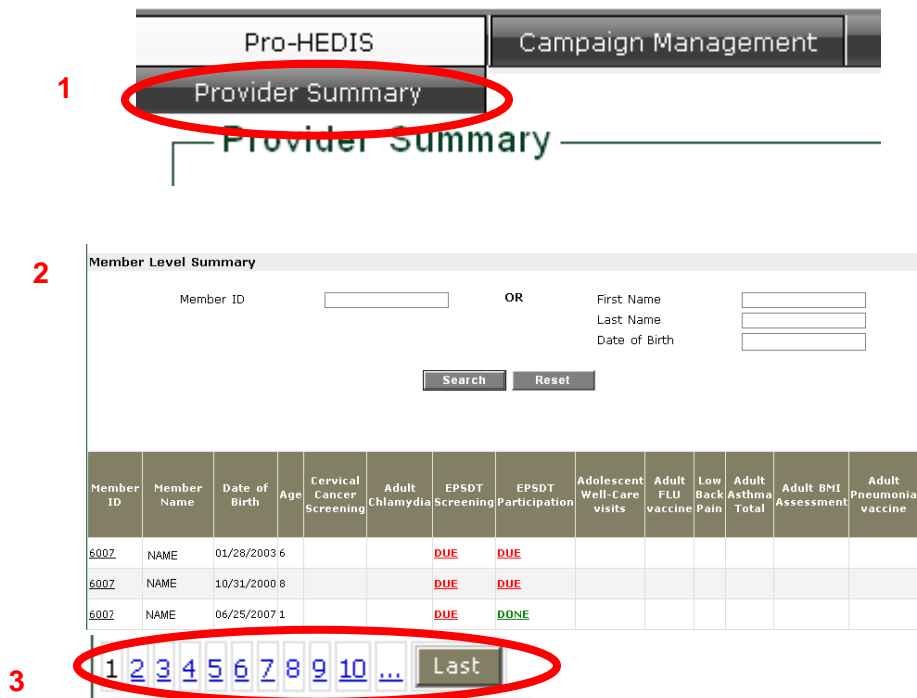
## Find Data for an Individual Member

To locate specific information for individual members, you may use an automated or manual search function.

“**DONE**” or “**DUE**” will display under each measure, according to whether it has been fulfilled or is outstanding for that member. For outstanding measures, the last known screening date will also be displayed. Last known screening dates may also be viewed by clicking on the “**DONE**” or “**DUE**.”

### Manual Search

1. To get started, roll your mouse over the **Pro-HEDIS** tab and **click on Provider Summary** when it appears in the drop-down box. Select the **Provider Recognition Program** tab or the **Clinical Care Gaps** tab, according to the type of data you are seeking.
2. Locate the **Member Level Summary** chart. In this chart each vertical column displays a PRP or Clinical Care Gaps measure (depending on which tab you selected). The horizontal rows of this chart identify whether a measure is “**DONE**” or “**DUE**” for each member.
3. You may search for a member by clicking through the pages listed by number at the lower left portion of the chart.



**1**

Pro-HEDIS Campaign Management  
**Provider Summary**

**2**

Member Level Summary

Member ID  OR First Name   
Last Name   
Date of Birth

Member ID	Member Name	Date of Birth	Age	Cervical Cancer Screening	Adult Chlamydia	EPSDT Screening	EPSDT Participation	Adolescent Well-Care visits	Adult FLU vaccine	Low Back Pain	Adult Asthma Total	Adult BMI Assessment	Adult Pneumonia vaccine
6007	NAME	01/28/2003	6			<b>DUE</b>	<b>DUE</b>						
6007	NAME	10/31/2000	8			<b>DUE</b>	<b>DUE</b>						
6002	NAME	06/25/2007	1			<b>DUE</b>	<b>DONE</b>						

**3**

1 2 3 4 5 6 7 8 9 10 ... Last

**NOTE:** Since the PRP tab only displays total actual expected EPSDT screens and participation and does not display member details (such as “**DONE**” and “**DUE**”), **providers are encouraged to review the Clinical Care Gaps tab to determine member EPSDT Screens Due details.** It is anticipated the Clinical Care Gaps tab will mirror and eventually replace the current “Screens Due” paper reports.

**At this time, providers must review medical history and use the EPSDT program Periodicity Schedule and Screens Due Calculator to determine appropriate delivery of EPSDT services.** The Screens Due Calculator is accessible by visiting our web site. [www.passporthealthplan.com/providercenter/provcom/references/](http://www.passporthealthplan.com/providercenter/provcom/references/), and selecting *EPSDT Program FAQs* from the list.

## Automated Search

1. A faster search method is the application's automated search function. Start by **entering the Passport Health Plan member's ID number or the member's name and date of birth.**

Note: *Birth dates must be entered as MMDDYYYY.*

2. Click "Search."

**Member Level Summary**

Member ID  OR First Name   
 Last Name   
 Date of Birth

**Search** **Reset**

3. The results of your search will display at the bottom of the page. **Click on the Member ID number** located in the first column on the left.

Member ID	Member Name	Date of Birth
1234567	Sample Member	02/15/2007

4. This will bring you to the **Member Details** page, where you can view information regarding:
  - A. **Member demographics;**
  - B. **Completed and outstanding measures** (including known screening dates) – select the magnifying glass icon on the left to see more details regarding each measure;
  - C. **Utilization based upon member claims** (including ER services, prescriptions, inpatient/ICU services, and lab/x-rays); and,
  - D. **Clinical Care Guidelines** (see the following page for more information).

**Member Details**

Member ID:

**A**

First Name: SUSAN Last Name:   
 Gender: F Date Of Birth: 01/12/19  
 Provider Group ID: 10 Provider Group Name: FAMILY PRACTICE


**Member Claims**

**C** **D**

ER	Rx	Inpatient/ICU	Lab/X-Rays	Clinical Care Guidelines
Claim ID	Date of Service	Procedure Code	Attending Provider Name	
0920873446	07/17/2009	87210		
0921671837	07/17/2009	88142	DIAGNOSTICS	
0921671837	07/17/2009	87591	DIAGNOSTICS	
0921671837	07/17/2009	87491	DIAGNOSTICS	

**Completed Measures**

**B**

Measure Name	Measure Description	SERVICE DATE
 AAP1	Adults Access to Preventive/Ambulatory Health Services (20 - 44 Years)	07/17/2009
 CCS	Cervical Cancer Screening	

TIP: Click the magnifying glass icon to see details regarding the completion of each measure.

## Using Clinical Care Guidelines

The information represented in the Clinical Care Guidelines on the Member Details page is based on Passport Health Plan's *Clinical Practice Guidelines*.

In this area of the ikaProHEDIS+ application, providers are encouraged to enter information into the following two categories:

- A. Screening:** to provide additional information regarding recommended screenings.
- B. Counseling:** to suggest additional guidance for preventive activities.

ER	Rx	Inpatient/ICU	Lab/X-Rays	Clinical Care Guidelines
----	----	---------------	------------	--------------------------

### **A** Screening

Service	Status	Service Date	Result
Height	<input type="text"/>	<input type="text"/>	<input type="text"/>
Weight	<input type="text"/>	<input type="text"/>	<input type="text"/>
BMI (Body Mass Index)	<input type="text"/>	<input type="text"/>	<input type="text"/>

### **B** Counseling

Service	Status	Service Date	Name	Credentials
Smoking Cessation	<input type="text"/>	<input type="text"/>	<input type="text"/>	Physician <input type="button" value="v"/>
Secondhand smoke	<input type="text"/>	<input type="text"/>	<input type="text"/>	Physician <input type="button" value="v"/>
Nutritional Counseling	<input type="text"/>	<input type="text"/>	<input type="text"/>	Physician <input type="button" value="v"/>

## Generate Health Care Reminder Letters

Using the "Generate Letters" feature of the application, your office may quickly and easily conduct member outreach. This feature automatically produces individualized reminder letters to your panel members who are **"DUE"** for one or more of the following health services:

- Breast Cancer Screening
- Cervical Cancer Screening
- Adult or Pediatric Chlamydia Screening
- ER Follow-Up Visit
- Early and Periodic Screening, Diagnosis, and Treatment (EPSDT) Screening

To begin using this feature, **click on the Pro-HEDIS tab** and **choose Generate Letters** from the drop down menu.



To produce letters, select PRP or Clinical Care Gaps from the **"Select an Option"** box (remember to use Clinical Care Gaps for ESPDT outreach). Then select the measure you want to target from the **"Select a Measure"** box and click **"Search."** Your results will display as shown below:

### Generate Letters

Select an Option:

Select a Measure :

Member ID	First Name	Last Name	Date of Birth	Address 1	Address 2	State	Zip Code	Phone	Generate Letter
222	FIRST	LAST	00/00/0000	NUMBER & STREET		KY	40211	0000000000	
223	FIRST	LAST	00/00/0000	NUMBER & STREET		KY	402151884	0000000000	
224	FIRST	LAST	00/00/0000	NUMBER & STREET		KY	40210	0000000000	
225	FIRST	LAST	00/00/0000	NUMBER & STREET		KY	40206	0000000000	
225	FIRST	LAST	00/00/0000	NUMBER & STREET		KY	40215	0000000000	
226	FIRST	LAST	00/00/0000	NUMBER & STREET		KY	402035305	0000000000	
226	FIRST	LAST	00/00/0000	NUMBER & STREET		KY	40203	0000000000	
227	FIRST	LAST	00/00/0000	NUMBER & STREET		KY	402162888	0000000000	
227	FIRST	LAST	00/00/0000	NUMBER & STREET		KY	402072538	0000000000	
227	FIRST	LAST	00/00/0000	NUMBER & STREET		KY	40215	0000000000	

For a printable PDF of an individual letter, select a **single PDF icon** in the far right column called **"Generate Letter."** Or, select **"Generate Letters on Current Page"** below your results to produce and print letters for all members listed on the current page.

## View Member Rx Opportunities

Inside this feature, you will see 60 days of rolling prescription history for the members on your panel. The data indicates those members on your panel with a prescription claim for any of the "top five" medications identified by the Plan as potential opportunities for best value alternatives. *Please note, these medications will be re-evaluated and may change every six months.*

To begin using this feature, **click on the Pro-HEDIS tab** and **choose Member Rx Opportunities** from the drop down menu.



Use the applications search criteria to view a specific panel member, or run a generic search to pull data for all the members on your panel.

Your results will display as shown below:

**Rx Opportunities**

Member Last Name  Member First Name

Date Run:12/01/2009 RX fill dates used:10/02/2009-12/01/2009

Provider Name	Member Name	Current Rx				Suggested Rx				Avoidance
		Drug Name	Dosage Form	Strength	Cost	Drug Name	Dosage Form	Strength	Cost	
PROVIDER NAME	MEMBER NAME	NASONEX	SUSP	50MCG/ACT	85	FLUTICASONE PROPIONATE	SUSP	50MCG/ACT	46	\$39
PROVIDER NAME	MEMBER NAME	NASONEX	SUSP	50MCG/ACT	85	FLUTICASONE PROPIONATE	SUSP	50MCG/ACT	46	\$39
PROVIDER NAME	MEMBER NAME	NASONEX	SUSP	50MCG/ACT	85	FLUTICASONE PROPIONATE	SUSP	50MCG/ACT	46	\$39
PROVIDER NAME	MEMBER NAME	NASONEX	SUSP	50MCG/ACT	85	FLUTICASONE PROPIONATE	SUSP	50MCG/ACT	46	\$39

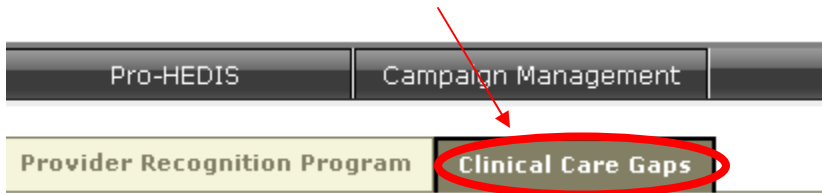
Your results may be **printed** or **saved in a Excel format**, using the icons to the upper right corner of your results.

*Please note, in accordance with HIPAA privacy regulations, behavioral health, HIV, and substance abuse medications will not appear in this application unless a member has signed a Release of Information form (ROI).*

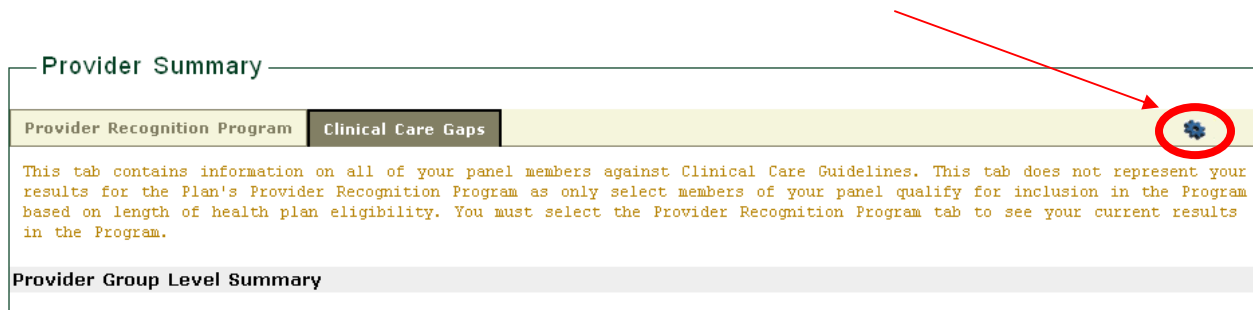
## Customize Your View

The ikaProHEDIS+ application also allows you to customize your view. Follow these steps to get to the application's **customization screen**.

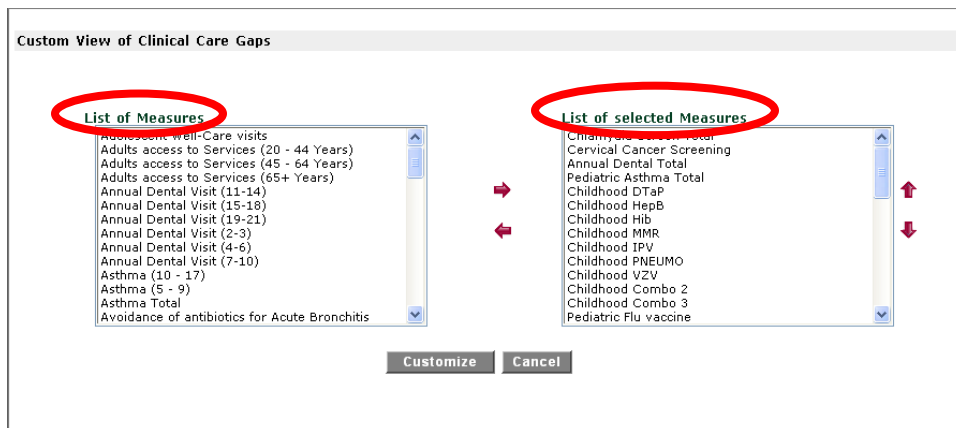
1. Click on the link to **“Clinical Care Gaps”** tab.



2. Under the **“Provider Summary”** heading, select the **Custom View** button in the upper right.



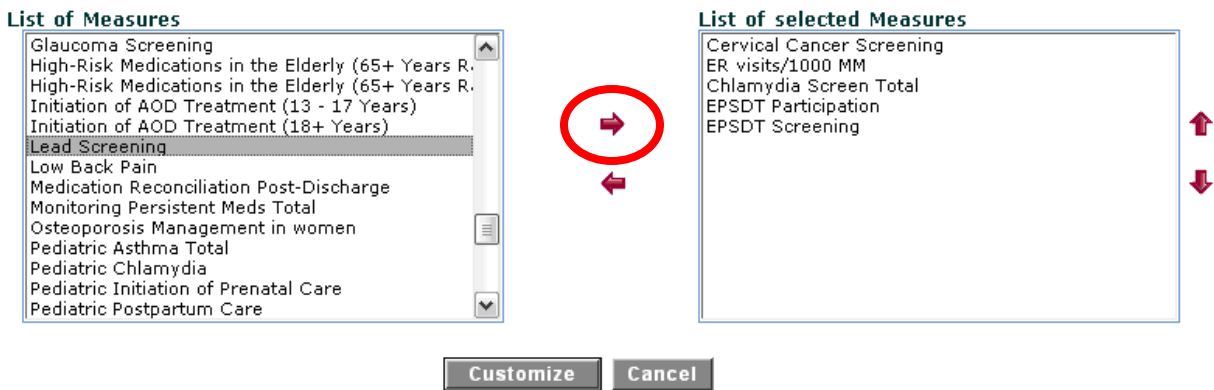
This will bring you to a **customization screen**. The left-hand column shows the list of all measures available for you to view, and the right-hand column shows the list of measures selected to appear in your Provider Group Level Summary.



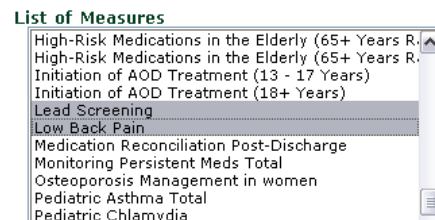
## How to Add a Measure to Your View

To add a measure to your Provider Group Level Summary, follow these steps on the customization screen:

1. **Highlight the measure you want to add** by clicking on it in the “List of Measures” column.
2. **Click the arrow** pointing right. This will add the measure to the bottom of your list of selected measures.



TIP: You can move two or more measures by holding down the **SHIFT** key as you click on each measure. Then click the arrows until they move to your desired location.



3. **Click customize** to save your changes.



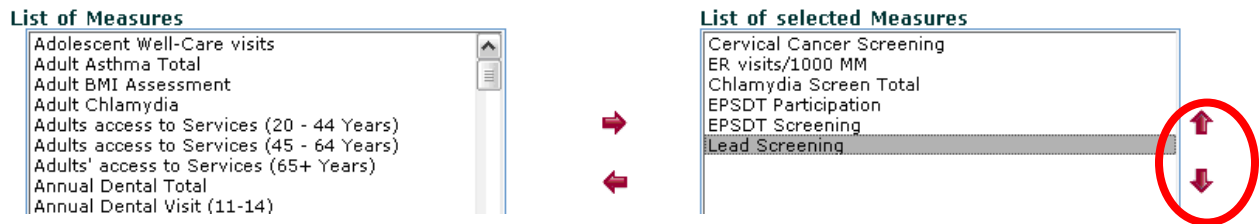
4. You will be automatically redirected to your updated Provider Group Level Summary. This chart will appear in the order you have selected each time you log into ikaProHEDIS+.

Provider ID	Provider Name	Cervical Cancer Screening	ER visits/1000 MM	Chlamydia Screen Total	EPSDT Participation	EPSDT Screenin	Lead Screening
1234567	Sample Provider Group	7/9= 77.77%	35.96	12/86= 13.95%	622 / 10595 = 5.87	622 / 882.9 = 70.44	178/228= 78.07%

## How to Reorder Measures

To reorder how the selected measures appear in your Provider Group Level Summary, follow these steps on the “Customizing Your View” page:

1. **Highlight the measure you want to move** in the “List of Selected Measures” column.
2. **Click the arrow** pointing up or down until the measure is in your desired location.



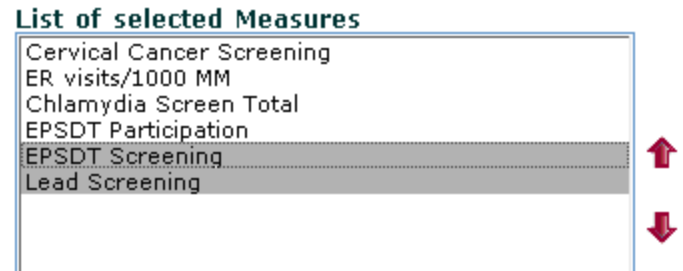
**List of Measures**

- Adolescent Well-Care visits
- Adult Asthma Total
- Adult BMI Assessment
- Adult Chlamydia
- Adults access to Services (20 - 44 Years)
- Adults access to Services (45 - 64 Years)
- Adults' access to Services (65+ Years)
- Annual Dental Total
- Annual Dental Visit (11-14)

**List of selected Measures**

- Cervical Cancer Screening
- ER visits/1000 MM
- Chlamydia Screen Total
- EPSDT Participation
- EPSDT Screening
- Lead Screening

TIP: You can move two or more measures by holding down the **SHIFT** key as you click on each measure. Then click the arrows until they move to your desired location.



**List of selected Measures**

- Cervical Cancer Screening
- ER visits/1000 MM
- Chlamydia Screen Total
- EPSDT Participation
- EPSDT Screening
- Lead Screening

3. **Click customize** to save your changes.



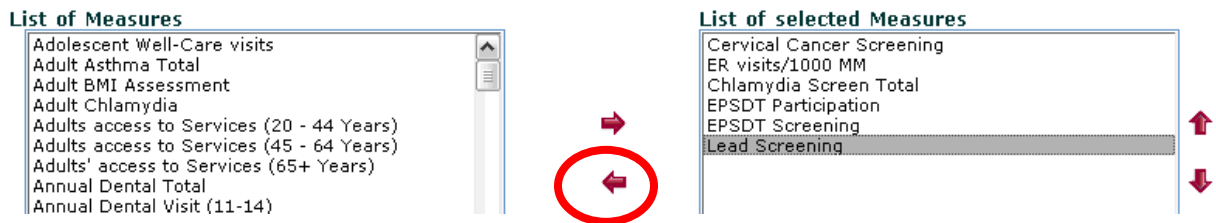
4. You will be automatically redirected to your updated Provider Group Level Summary. This chart will reflect your changes each time you log into ikaProHEDIS+.

Provider ID	Provider Name	Lead Screening	Cervical Cancer Screening	ER visits/1000 MM	Chlamydia Screen Total	EPSDT Participation	EPSDT Screening
1234567	Sample Provider Group	178/228 = 78.07%	7/7 = 100.00%	35.96	12/86 = 13.95%	622 / 10595 = 5.87	622 / 882.91 = 70.44

## How to Remove a Measure

To remove\* a measure from your view on the Provider Group Level Summary, follow these steps on the “Customizing Your View” page:

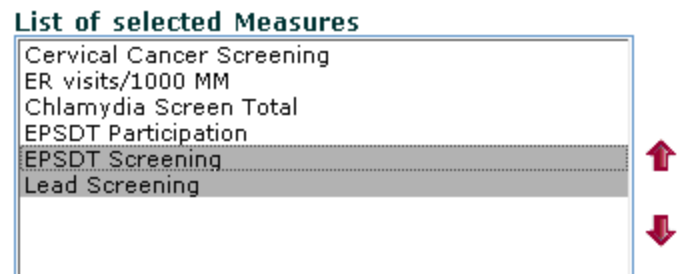
1. **Highlight the measure you want to remove** in the “List of Selected Measures” column.
2. **Click the arrow pointing left.**



3. **Click customize** to save your changes.



TIP: You can move two or more measures by holding down the **SHIFT** key as you click on each measure. Then click the arrows until they move to your desired location.



4. You will be automatically redirected to your updated Provider Group Level Summary. This chart will reflect your changes each time you log into ikaProHEDIS+.

Provider Group Level Summary

Provider ID	Provider Name	Cervical Cancer Screening	ER visits/1000 MM	Chlamydia Screen Total	Pa
1234567	Sample Provider Group	7/9= 77.77%	35.96	12/86= 13.95%	622 5.87
<b>NCQA Medicaid 90th Percentile</b>		79%	90%	90%	90%

\*To add a removed measure back into your Provider Group Level Summary view, simply follow the steps on page 10 of this *Training Guide*.

### How to Dispute a Reported Measure

The ikaProHEDIS+ application displays a “**DONE**” or “**DUE**” status as determined by claims/encounter data or pharmacy data. Because of this, **providers are encouraged to examine a member’s medical history and to dispute the reported measure status** if:

- a) The screening is not required based on the Plan’s guidelines; or,
- b) The screening has already occurred but is not reflected in the application.

To dispute a measure’s status, follow these steps:

1. **Locate the member** using one of the search functions described on pages 6 or 7.
2. Find the DUE status of the disputed measure, and **click on “DUE.”**
3. Once the screen appears, **review the Required Documentation field** and gather any requested information.

**Update Measure :**

Measure Name : CCS

Measure Description : Cervical Cancer Screening

Service Date\* :

Measure Value\* :

Entered By\* :

Notes :

**Required Documentation :**

Documentation in medical record must include the date the pap test was completed and the result OR the date of a hysterectomy with no residual cervix. Enter a date of service for the current year or the two previous years.

4. **Submit an electronic copy of this medical record documentation by scanning and using the "Upload" button. Or, submit paper documentation with a completed *ikaProHEDIS+ Medical Record Documentation Cover Sheet* (Appendix A) to:**

**MAIL:**  
Passport Health Plan  
Attn: Quality Manager  
305 West Broadway, 3<sup>rd</sup> Floor  
Louisville, KY 40202

or

**FAX:**  
(502) 585-7950  
Attn: Quality Manager

*Note: Please use blue or black ink only, and refrain from using red ink and/or highlighting which affects the legibility of the fax.*

**Requests not supplemented with a submission of medical record documentation within 10 business days will automatically be rejected.**

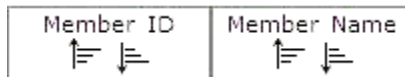
5. **Proceed by entering the information requested on the ikaProHEDIS+ page.** Information with a red asterisk (\*) is required to complete the electronic submission of your dispute.
6. Once all the information is entered, select **Update** at the bottom of the page.

## Helpful Tips for Using ikaProHEDIS+

- Logging-out of the application returns you to the Passport Health Plan Provider Center.
- To go "Back" when inside the application, please use the application controls and **not** the "Back" button on your browser's menu.
- Occasionally the application will appear to be temporarily frozen. You may see a red "**Processing**" sign appear in the upper right corner of the application to indicate it is working.

During these times the application is loading large amounts of data. Please **do not** select any additional functions until the application has completed its current function.

- To sort data, look for and **click** the icons below:



- Remember, when conducting EPSDT outreach or data searches, please use the **Clinical Care Gaps data only**.



## ikaProHEDIS+ Training Guide: Appendix A

Passport Health Plan  
Quality Department  
ATTN: Quality Manager  
305 W. Broadway, 3<sup>rd</sup> Floor  
Louisville, Kentucky 40202

Fax: (502) 585-7950

# ikaProHEDIS+

## Medical Record Documentation Cover Sheet

### **HOW TO SUBMIT**

Please fill in the information below and submit this cover sheet with your ikaProHEDIS+ Medical Record Documentation by mail or fax to:

#### **MAIL**

Passport Health Plan  
Quality Department  
ATTN: Quality Manager  
305 W. Broadway, 3<sup>rd</sup> Floor  
Louisville, Kentucky 40202

#### **FAX**

(502) 585-7950  
ATTN: Quality Manager

## INFORMATION NEEDED

Provider Name: \_\_\_\_\_ Provider ID: \_\_\_\_\_

Contact's Name: \_\_\_\_\_ Contact's Telephone: \_\_\_\_\_

Number of Pages: \_\_\_\_\_ Contact's E-mail\*: \_\_\_\_\_

Submission Date: \_\_\_\_\_ Notes: \_\_\_\_\_

- \*Check here if the e-mail address provided is secure and HIPAA compliant. Please include a secure e-mail address to receive rapid electronic confirmation of your submission.

Attached Medical Record Documentation Concerns the Following Clinical Care Measure(s):

- Breast Cancer Screening  
 Cervical Cancer Screening  
 Chlamydia Screening  
 Other – please specify \_\_\_\_\_

**NOTE:** Please fax only documents with blue or black ink, and refrain from using red ink and/or highlighting which affects the legibility of the fax.