EXCLUSION FROM PUBLIC REPORTING POLICY



Purpose of this document

To provide a policy for medical groups and clinics to request exclusion from the public reporting of clinic quality and utilization results on the Oregon Health Care Quality Corporation's (Q Corp's) consumer website, <u>www.q-corp.org/compare-your-care</u>.

For questions or concerns about patient-level data or the accuracy of clinic rates and performance categories, refer to the "Reconsideration Process and Policy" available at: <u>http://q-corp.org/portal</u>

Background

Q Corp's *Compare Your Care* program aims to improve health care quality in Oregon by providing information to help consumers make informed decisions. Public reporting through this program is an important part of quality improvement and it is imperative that those being measured have constructive engagement to ensure data is as accurate and fair as possible.

The data publicly shared on Q Corp's reporting portal is submitted by health plans voluntarily agreeing to share their data to support Q Corp's mission of transparency and quality improvement. **Clinics and medical groups may not opt out, and may only be excluded from public reporting if they meet certain criteria.** This document outlines the criteria Q Corp has developed for excluding medical groups or clinics from public reports.

Important note: Q Corp creates and distributes quality and resource use reports for medical groups and providers quarterly. Scores are updated on Q Corp's public consumer website only once per year.

Medical groups that wish to submit documentation showing that they qualify for an exclusion from public reporting must submit a request prior to the end of review period. This deadline will be posted on Q Corp's reporting portal landing page (<u>http://q-corp.org/portal</u>).

I. CRITERIA FOR PUBLIC REPORTING

- Clinics with three or more primary care providers, at least 30 patients in a measure denominator, and whose groups have been included in at least one round of Q Corp reports will be publicly reported.
- Clinics with fewer than three primary care providers may **opt in** to public reporting by contacting Q Corp staff.

II. ALLOWABLE EXCLUSIONS

Q Corp has identified a limited number of circumstances for which a clinic's results may be excluded from public reporting. Allowable circumstances for requesting exclusion are:

A. Clinic has fewer than three primary care providers

A medical group or clinic may have three or more providers, but fewer than three of those providers are practicing primary care. Alternately, a medical group or clinic may have experienced a loss of

primary care providers that results in its having fewer than three primary care providers. Clinics that meet either of these criteria and wish to be excluded from public reporting should submit a request to be excluded. See Section III, "Exclusion Request Process," below.

B. Providers within a common building do not function as a clinic or medical group

A clinic or medical group with providers who practice independently from each other may request exclusion from public reporting. To be considered independent providers within a common clinic or building, all of the following must apply:

- a. Patient care is not shared.
- b. Administrative staff is not shared.
- c. Health plan contracting is conducted independently.
- d. Medical records and scheduling systems are maintained separately.
- e. Corporate structures are independent.

Clinics that meet these criteria and wish to be excluded from public reporting must submit an exclusion request. See Section III, "Exclusion Request Process", below.

Note: If the criteria above partially apply, providers may request a one-time exclusion from public reporting. Clinics that participate in an affiliated medical group and enjoy the benefits of a medical group, should expect to be publicly accountable for quality measurement as a medical group in the future.

C. Medical group or clinic is not practicing primary care

- Medical groups or clinics that provide care primarily to homebound or hospice patients may request to be excluded from public reporting.
- Medical groups or clinics practicing only complementary or alternative medicine (e.g., naturopathy) may request to be excluded from public reporting.
- Medical groups or clinics that provide only urgent care may request to be excluded from public reporting.
- Medical groups or clinics that practice other care that is not primary care, but is not listed above may request to be excluded from public reporting. As part of its formal request, the medical group should provide information about how the exclusion criterion is met.

Medical groups or clinics that meet one of the above criteria and wish to be excluded from public reporting must submit an exclusion request. See Section III, "Exclusion Request Process."

D. Medical group or clinic has other special circumstances

Medical groups or clinics may submit a formal request to be excluded from one round of public reporting if there are special circumstances that would make public reporting of results inaccurate or inappropriate. As part of its formal request, the medical group should provide an explanation of any special circumstances. See Section III, "Exclusion Request Process," below.

Q Corp will not exclude a medical group or clinic from public reporting of measurement results based solely on:

a. A clinic or medical group's desire not to have the data publicly reported;



- b. Disagreement with publicly reported quality scores;
- c. Disagreement with a measurement specification, or with the data collection process and/or method;
- d. Differences between Q Corp measurement results and results from a medical group's or clinic's internal registry.

III. EXCLUSION REQUEST PROCESS

Prior to the public reporting of results on the *Compare Your Care* website, medical groups will be given a defined period ("medical group reconsideration period") to review their quality results. The medical group review period begins when refreshed data become available to medical groups on Q Corp's secure online portal. As all groups with access to the portal have an email on file, Q Corp will send an email message announcing when refreshed data are available.

If a medical group or one of its clinics meets one or more of the criteria for exclusion from public reporting, it must communicate its concern(s) to Q Corp staff within the timeline specified. The steps for requesting an exclusion from public reporting are as follows:

- A. A medical group or clinic must submit a Public Reporting Exclusion Request Form (see below) before the stated deadline, in which it indicates how it meets the exclusion criteria. The request form must be signed by an appropriate authority for the medical group or clinic.
- B. Q Corp staff will review all requests for completeness and confirm receipt within five business days of receipt. Staff may call the medical group or clinic contact to obtain additional information.
- C. Once a formal exclusion request has been received, Q Corp will respond with a decision within 30 days and will attempt to resolve the request before public data are posted. If a request is not resolved before public data are posted, quality results for the clinic(s) will be noted on the website as "Results Under Review."
- D. Q Corp's Executive Director will review all requests and make a decision based on the Public Reporting Exclusion Request Form and evidence submitted.
- E. The decision will be communicated to the medical group in a written letter within 30 days of the deadline for submitting requests for exclusion from public reporting.
- F. If the decision is not in the medical group's favor, the medical group may submit a written appeal to the Q Corp / HealthInsight board of directors for determination.
- G. The Q Corp / HealthInsight board of directors will determine if additional information is needed. During this process, any appellant who wishes to make a presentation to the Q Corp / HealthInsight board of directors will be granted the opportunity to do so.
- H. The Q Corp / HealthInsight board of directors will make a decision about the dispensation of the appeal by majority vote and their decision will be communicated to the appellant in a written letter from the Executive Director within 45 days of receipt of the written appeal.
- I. When a request for exclusion from public reporting has been granted, the notification letter will indicate whether the medical group or clinic needs to reapply for exclusions from subsequent rounds of public reporting.



IV. ADMINISTRATIVE PROCESS

- A. Q Corp staff will record all exclusion requests upon receipt, will track all stages of the process, and will maintain complete records.
- B. For the duration of an exclusion request, the medical group or clinic's status in Q Corp's Provider Directory will be changed to reflect "no public reporting."
- C. When necessary, once an appeal has been settled, the Q Corp Provider Directory will be changed to reflect the decision.



PUBLIC REPORTING EXCLUSION REQUEST FORM



ledical Group Name:	Title:
	me
ddress:	
hone: Email	:
XCLUSION INFORMATION	
lame of clinic(s) for which exclusion from public reporting is r	requested:
Reasons(s) for exclusion request:	
Providers within a common building who do not function	n as a clinic or medical group.
Please check all that apply:	
Patients are not shared	Administrative staff not shared
Independent contracting with health plans	Independent medical records & scheduling systems
Independent corporate structures	Other:
Clinic/medical group/provider not practicing primary ca	re. Please state the number of providers in your clinic or medical

By signing this form, the applicant agrees that all of the above information is a correct reflection of the medical group's, clinic's or provider's characteristics, and that the applicant is authorized to make this request on behalf of the medical group or clinic.

Applicant Signature, Title

