



COLORADO
Department of Health Care
Policy & Financing

1570 Grant Street
Denver, CO 80203

Health First Colorado Data Analytics Portal Frequently Asked Questions

Fact Sheet November 2020

What is the purpose of the Data Analytics Portal?

To support the Accountable Care Collaborative's (ACC's) goal of improving member health and reducing costs, the Department has contracted with IBM Watson Health (formerly Truven) to host the Data Analytics Portal (DAP). This data analytics tool for Primary Care Medical Providers (PCMPs) and Regional Accountable Entities (RAEs) includes population and performance information. The portal allows for drill downs and drill ups, data exports, and provider-level comparisons of Key Performance Indicators (KPIs) and the HEDIS (Healthcare Effectiveness Data Information Set) measures used for the Alternative Payment Methodology Program (APM). It also includes patient utilization, cost, and pharmacy information in the Patient Health Record. Recent features include a population summary dashboard for RAEs, APM dashboards for PCMPs, and a member summary for all users.

How does the My Members report in the Data Analytics Portal compare with the other reports PCMPs might receive from their RAE?

The My Members report is updated the second Tuesday of each month. The RAE roster report is updated by the sixth of each month. The monthly 834 report is generated on the last business day of the month and delivered within two business days of generation. The RAEs will have the most current and accurate snapshot from what they get through interChange (DXC Technology) throughout the month.

The My Members report provides a comprehensive and user-friendly way to filter, sort, and drill down to member-specific information. Please note, there is a significant amount of data available on export that is not available on display due to its size. Our recommendation is to export the member lists to .csv or .xls for additional filtering, sorting, and analysis specific to your business needs.

How do PCMPs get their attribution?

Our mission is to improve health care access and outcomes for the people we serve while demonstrating sound stewardship of financial resources.
www.colorado.gov/hcpf



Attribution is calculated by the Department's claims and data warehouse vendors. While enrollment information is updated daily, attribution is available as a monthly snapshot in the My Members report at the beginning of the month. Providers can work with their RAEs to get more up to date and current information throughout the month.

What is the timing of Key Performance Indicators (KPIs)?

KPIs run on a monthly basis looking at utilization for the past 12 months. Because KPIs also require three (3) months of claims run out, they are presented in the portal four (4) months after the last service dates. This run out period is very important to gain accurate data and ensure that KPI measures are correct. More information about the KPI methodology is available on the [Department's Public Reporting website](#).

What trainings are offered?

The trainings are offered exclusively through e-learning at this time and can be accessed via the Department's online learning management system using a temporary license for external partners. These trainings can be accessed through the PCMP Training System and RAE Training System.

The training and user guide can also be accessed by provisioned users within the file sharing application of the portal located in the upper right-hand corner. A copy can also be requested by email. Please contact Emily Ebner at Emily.Ebner@state.co.us with any questions or if you would like a copy.

Why does data differ from the Data Analytics Portal and a practice's Electronic Health Record (EHR)?

Due to the nature of claims data, the Data Analytics Portal and practice EHRs will never reconcile. They work with different populations and systems which prevents the data from matching up. The Data Analytics Portal looks only at the Health First Colorado (Colorado's Medicaid Program) population, and calculates KPIs using claims from the past 12 months, allowing for a three (3) month lookback. EHRs are entered in real-time by providers and capture records from patients across all payers.

When is the Data Analytics Portal refreshed?

The portal is usually refreshed by the eighth of the month but never later than the 12th. An automated email is sent on the first of each month to remind users to pull down their extracts before the data refreshes. The portal does not currently have an archive functionality so you must download your data each month for future reference.



Will the Alternative Payment Model (APM) be included in the Data Analytics Portal?

The portal contains patient and provider level APM reports, for PCMPs only at this time. APM data is refreshed on a quarterly basis in November, February, May, and August by the eighth of the month but never later than the 12th. These reports are refreshed on a rolling year basis with four months of claims run out. For example, in the November 2020 refresh data the reports will have data from 6/30/2019-7/1/2020. In the February 2021 refresh reports will have data from 9/30/2019-10/1/2020.

The department is currently working on providing these reports to the RAEs in CDAP. Updates will be provided as they become available. If you have any questions about the APM program, please reach out to your RAE representative or the Department at HCPF_PrimaryCarePaymentReform@state.co.us.

DXC is allowing a longer period to enter claims. Will this affect KPI incentives?

Although DXC is allowing a longer period to enter claims, providers will still need to enter claims in a timely manner to meet the requirements to receive incentives.

According to the [KPI Methodology](#): "Incentive Payments are a central component of the ACC Pay-for-Performance. Since the initiation of the ACC Program, the Department has made incentive payments for performance on identified Key Performance Indicators (KPIs) to signal program-level goals and objectives; encourage improved performance at the PCMP and regional level; and reward managed care entities and PCMPs for meeting certain levels of performance. Incentive Payments are a central component of the ACC Pay-for-Performance."

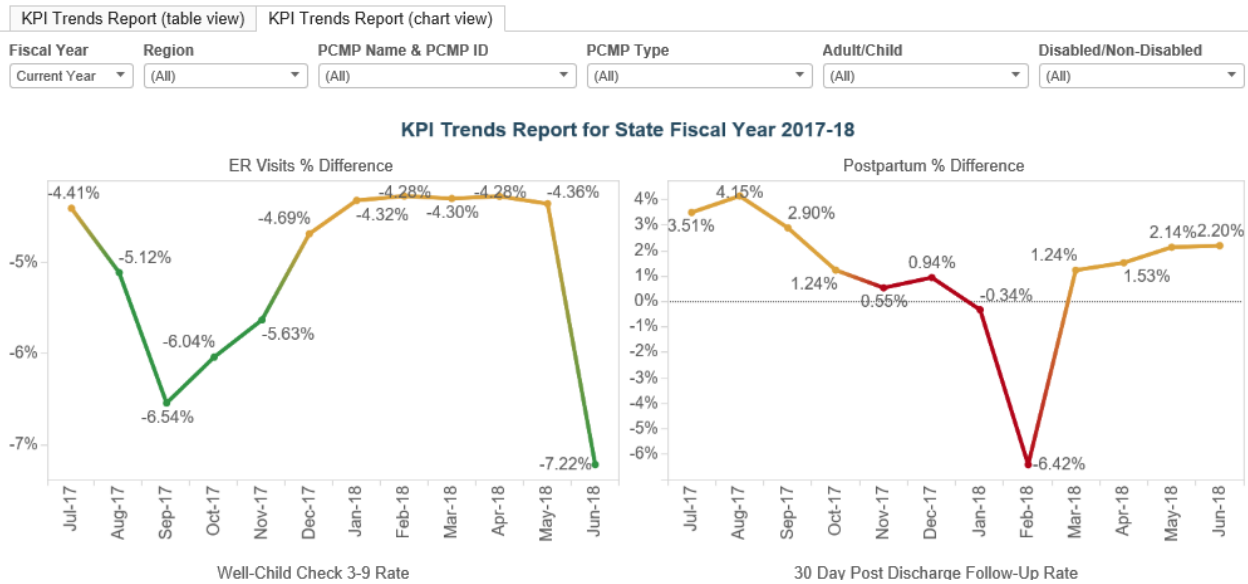
Is there an option to filter data by provider type and region to compare performance?

Yes, users can filter data by provider type and region. There are currently eight filters that users can apply to drill down to specific populations and the update will add Member County, Member Zip, Aggregated Diagnostic Cost Grouper (ADCG) Category, Concurrent Relative Risk Score, ER Visits, Eligible for Well-Child Check, Well-Child Checks, and dual Medicaid/Medicare (MMP) Enrolled. After downloading the report, users will have access to 34 fields. There is also a PCMP Comparison dashboard that RAE users can use to compare the performance of each of the PCMPs within their region with respect to their KPI performance.

Can users look at past months of data?

Results are for the 12-month evaluation period, with the capability to review the previous fiscal year. The KPI trends report, shown in the screenshot below, is a useful tool to view past data.



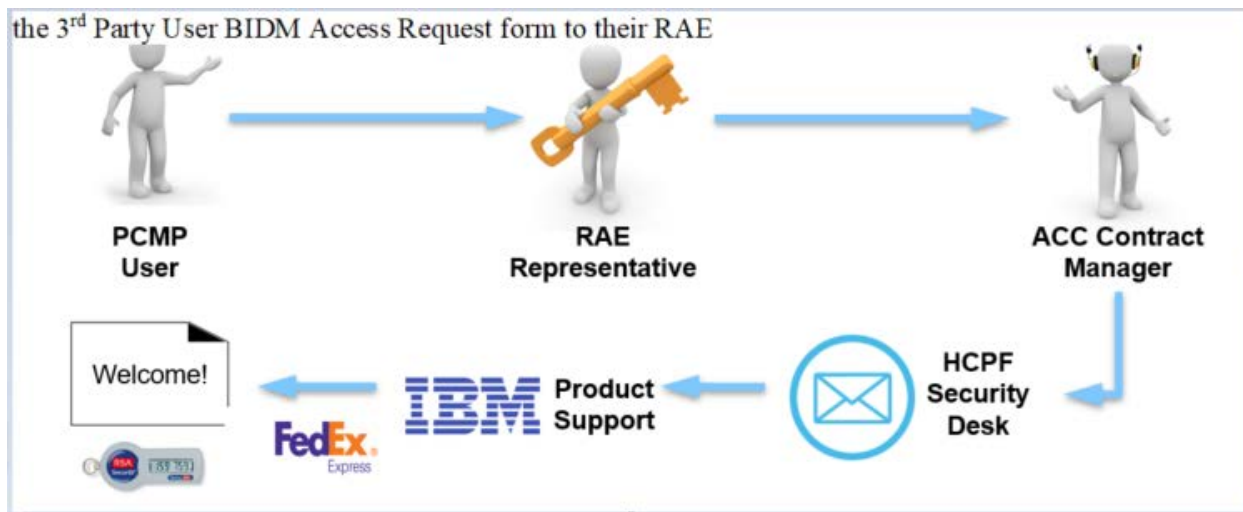


How is the risk score calculated?

The risk score is calculated using IBM/Truven’s Diagnostic Cost Groups (DCG). Like all risk scores, the exact methodology is proprietary to the vendor. Please refer to the [KPI Methodology](#) specifications document for more information.

What is the process and status for provisioning (gaining access)?

To ensure the security of our members, the provisioning process is approved by several state authorities before going to IBM for final approval. The process for PCMP provisioning is shown below. The process is the same for the RAEs except they do not have to do the first step.



- PCMP requests the 3rd Party User BIDM Access Request form from RAE.
- PCMP completes form in its entirety. Failure to do so could cause delays in the provisioning process.
- PCMP user submits the completed 3rd Party User BIDM Access Request form back to their RAE.
- RAE approving authority signs the form where appropriate and sends it to HCPF program staff.
- Program staff reviews the form, signs it, and then submits it to HCPF Information Security.
- HCPF Information Security creates a ticket with IBM to create or modify access.

IBM product support analysts grant access and send the fob “hard token,” used for two-factor authentication, as needed via FedEx Express shipping. Additionally, PCMPs may now opt for a one-time passcode that is sent to their cell phone or email address. Please note that the code may only be sent to the phone number and email address in the profile, found in the settings menu of the CDAP. This functionality is not yet available to RAE or Department users. Provisioning should not take more than two (2) weeks. Please contact your RAE and ACC Contract Manager if you have not been provisioned in a timely manner. IBM and the Department meet weekly to review outstanding tickets and issues to ensure these tickets are expedited.

Where can I get support with the Data Analytics Portal?

For technical problems, including resetting user account credentials, please contact the IBM Product Support team. These tickets are continuously monitored and are escalated to the correct IBM staff as needed. They can be reached by email, prodsupp@US.IBM.com or by phone 1-877-843-6796. The phone uses speech recognition technology. Please use the product name “Colorado Data Analytics Portal” to be connected to an associate. Finally, you may also submit a product support ticket to the online portal at <https://truvenhealth.com/support/portal>. This is particularly helpful when reporting a specific error message because it allows for screenshots to be uploaded to your ticket.

If none of these solutions are helpful, please contact your RAE and ACC Contract Manager for additional support.

For more information contact

Emily Ebner

Emily.ebner@state.co.us

