

# 2023 Plan Performance Assessment (PPA) Procedure Manual

## Attachment 2: Planned HEDIS and CAHPS Reporting

Planned HEDIS and CAHPS reporting allows OPM to collect information on 2023 expected data. This important information is critical to our planning efforts for the scoring cycle. This document includes the steps and examples of how to submit this information. Please certify this information in Benefits Plus by **December 15, 2022**.

As you go through the process, the page that you are currently on is highlighted in a darker blue than the other pages. For example, if you are entering HEDIS information, the HEDIS button will be dark blue:



If you want to navigate back to this page from another page, it will be lighter blue:



If you have questions, please contact OPM at [FEHBPerformance@opm.gov](mailto:FEHBPerformance@opm.gov).

### STEPS:

- [Step 1](#): Navigate to the PPA Overview page
- [Step 2](#): Select Plan
- [Step 3](#): Select Plan Codes
- [Step 4](#): Enter HEDIS Information
- [Step 5](#): Enter CAHPS Information
- [Step 6](#): Check CAHPS Codes
- [Step 7](#): Enter HEDIS Auditor Information
- [Step 8](#): Enter CAHPS Survey Information
- [Step 9](#): Enter CAHPS Vendor Contact Information
- [Step 10](#): Enter CAHPS Health Carrier Contact Information
- [Step 11](#): Enter CAHPS Invoice Contact Information
- [Step 12](#): Submit & Certify

## Step 1: Navigate to the PPA Overview page

- After logging into Benefits Plus
  - Go to the PPA Header at the top right section of the menu
  - Select the **HEDIS & CAHPS** drop down option

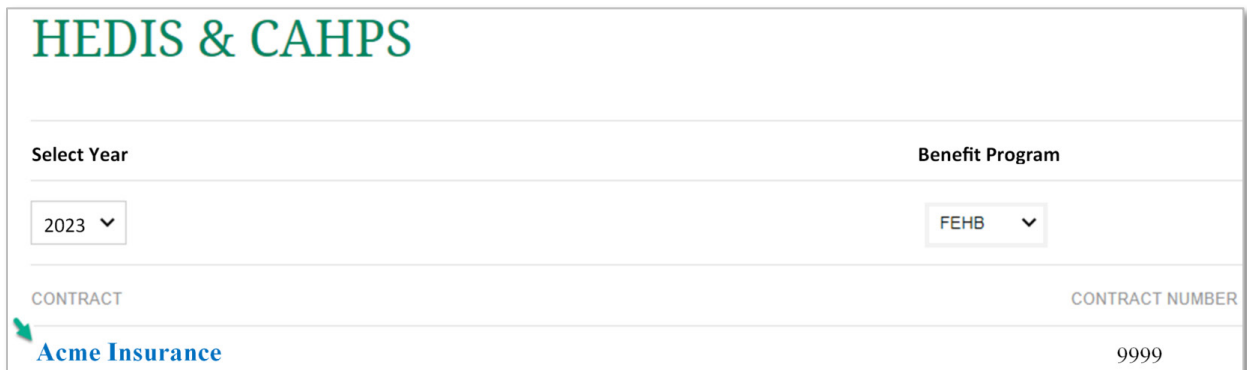
### HEDIS and CAHPS Drop Down Example



## Step 2: Select Plan

- The example below is the Main Screen. If at any point while entering the Planned HEDIS and CAHPS information, you click the **Home** button, it will return you to the screen below
- Once at this screen, click on the Plan to enter the HEDIS and CAHPS information

### Select Plan Example



The screenshot shows the 'HEDIS & CAHPS' main screen. It features two dropdown menus: 'Select Year' with '2023' selected and 'Benefit Program' with 'FEHB' selected. Below these is a table with two columns: 'CONTRACT' and 'CONTRACT NUMBER'. The first row shows 'Acme Insurance' under 'CONTRACT' and '9999' under 'CONTRACT NUMBER'. A green arrow points to the 'Acme Insurance' link.

CONTRACT	CONTRACT NUMBER
<a href="#">Acme Insurance</a>	9999

### Step 3: Select Plan Codes

- Once you select a Plan, you will then see the Plan Codes and Options associated with that Plan
- At this point in the process, you are on the **Plan Info** page
- On this page, you can click on one or more of the Plan Codes and Options
- If each Plan Code and Option has a distinct SubID, then you would select them individually. If they share SubIDs, then you can click on as many that share the same SubID
- After filling out the first SubID information, if you wish to return to this page, please click on the **Plan Info** button

### Plan Info Example

CONTRACT NAME: Acme Insurance Inc.  
CONTRACT NUMBER: 9999

**Plan Info** | HEDIS Auditor | CAHPS Survey Info | CAHPS Vendor Contact | CAHPS Health Carrier Contact | CAHPS Invoice Contact

SELECT	PLAN CODES	OPTION	STATE
<input checked="" type="checkbox"/>	AA	High	WA
<input type="checkbox"/>	AA	Standard	OR
<input checked="" type="checkbox"/>	BB	High	WA
<input type="checkbox"/>	BB	Standard	OR

HEDIS | CAHPS | CAHPS Code Check | Home

## Step 4: Enter HEDIS Information

- Once you have selected one or more Plan Code(s) and Option(s), you will click the **HEDIS** button to enter the HEDIS information such as HEDIS Org ID, SubID, etc.
- Required fields must be completed before clicking the **SAVE** button
- Please repeat this process until all HEDIS information has been included for each Plan Code and Option
- Click the **SAVE** button when finished

## HEDIS Information Example

**HEDIS**   **CAHPS**   **CAHPS Code Check**   **Home**

**HEDIS**   \* = Required field

HEDIS OrgID \* ⓘ   1234

HEDIS SubID \* ⓘ   1234

HEDIS Reporting Product \* ⓘ   HMO ▾

HEDIS Reporting Population \* ⓘ   Commercial ▾

HEDIS Reporting \* ⓘ   Yes ▾

Shared Reporting \* ⓘ   AA WA and BB WA Shared   *Note:- Add N/A if not applicable*

Note   N/A

**Save**   **Home**

- Click on the **Plan List** button to continue entering data, the next step is entering the CAHPS information

CONTRACT NAME: Acme Insurance Inc.

CONTRACT NUMBER: 9999

**Plan Info**   **HEDIS Auditor**   **CAHPS Survey Info**   **CAHPS Vendor Contact**   **CAHPS Health Carrier Contact**   **CAHPS Invoice Contact**

## Step 5: Enter CAHPS Information

- Once you are back on the Plan List page, select one or more Plan Code(s) and Option(s)
- You will then click on the **CAHPS** button to enter the CAHPS information such as CAHPS Org ID, SubID, etc.
- Required fields must be completed before clicking the **SAVE** button
- Please repeat this process until all CAHPS information has been included for each Plan Code and Option
- Click the **SAVE** button when finished

### CAHPS Information Example

**HEDIS** **CAHPS** **CAHPS Code Check** **Home**

### CAHPS

\* = Required field

CAHPS OrgID \* ⓘ

CAHPS SubID \* ⓘ

CAHPS Reporting \* ⓘ

CAHPS Reporting Population \* ⓘ

CAHPS Reporting FilingType \* ⓘ

Shared Reporting \* ⓘ  *Note:- Add N/A if not applicable*

Note

**Save** **Home**

## Step 6: Check CAHPS Codes

- After entering the CAHPS information, click the **CAHPS Code Check** button
- The CAHPS code is created with the following breakout: The two-digit carrier code, dash, three-digit product filing type, dash, two-digit state, dash, and three-digit option. For the product filing types, please use: FFS, PPO, HMO, or POS. For option codes, please use the following coding High=000, Standard=001, HDHP=002, CDHP=003, or Basic=004
- The example below is shown as **AA-HMO-WA-000**
- If the CAHPS Code that appears is not correct, please click the **CAHPS** button and correct the CAHPS information. For example, if **AA-HMO-WA-000** should have read **AA-PPO-WA-000**, you can click the **CAHPS** button and correct the data from HMO to PPO.
- If you need to add more CAHPS codes (for example, if you needed to add AA-HMO-ID-000), click the **Add Additional CAHPS Code** button
- The new CAHPS Code will be associated with the Carrier Code and Option near the **Add Additional CAHPS Code** button that you have selected
- If you have clicked the **Add Additional CAHPS Code** button, the following screen will appear
- Enter the Org ID, CAHPS Sub ID, Reporting Filing Type, State and click **SAVE**

## CAHPS Code Check and Add Additional CAHPS Code Example

The screenshot shows a web application interface for CAHPS code management. At the top, there are navigation buttons: HEDIS, CAHPS, CAHPS Code Check (highlighted), and Home. Below this is a section titled "CAHPS CODE CHECK". It contains a table with the following data:

ORG ID	CAHPS SUBID	PLAN CODE	REPORTING FILING TYPE	STATE	OPTION	FULL CAHPS CODE
1234	1234	AA	HMO	WA	000 - High	AA-HMO-WA-000

To the right of the "FULL CAHPS CODE" column, there is a green arrow pointing to a blue button labeled "Add Additional CAHPS Code". Below the table, there is a form for adding a new code with the following fields:

ORG ID	CAHPS SUBID	CAHPS REPORTING FILING TYPE	STATE
<input type="text" value="1234"/>	<input type="text" value="1234"/>	<input type="text" value="HMO"/> <input type="button" value="v"/>	<input type="text" value="WA"/> <input type="button" value="v"/>


At the bottom of the form, there are two buttons: "Save" and "Cancel".

- After you have entered the information for the additional CAHPS Code and clicked **SAVE**, the following screen will appear
- This gives you an opportunity to view the newly created CAHPS Code, shown in the example below as AA-HMO-ID-000
- From this point, you can edit or remove the added CAHPS Codes

ORG ID	CAHPS SUBID	PLAN CODE	REPORTING FILING TYPE	STATE	OPTION	FULL CAHPS CODE	
1234	1234	AA	HMO	WA	000 - High	AA-HMO-WA-000	<a href="#">Add Additional CAHPS Code</a>
1234	1234	AA	HMO	ID	000 - High	AA-HMO-ID-000	<a href="#">Remove</a>

- Once you have completed the CAHPS code section, click on the **HEDIS Auditor** button at the top of the page to continue entering the 2023 cycle information

CONTRACT NAME: **Acme Insurance Inc.**

CONTRACT NUMBER: **9999** 

[Plan Info](#)
[HEDIS Auditor](#)
[CAHPS Survey Info](#)
[CAHPS Vendor Contact](#)
[CAHPS Health Carrier Contact](#)
[CAHPS Invoice Contact](#)

## Step 7: Enter HEDIS Auditor Information

- You will see the following screen after clicking on the **HEDIS Auditor** button
- Required fields must be completed before clicking the **SAVE** button

### HEDIS Auditor Information Example

**HEDIS AUDITOR** \* = Required field

**HEDIS AUDITOR COMPANY NAME\***

**FIRST NAME\***

**LAST NAME\***

**STREET ADDRESS \***

**ADDRESS 2**

**CITY\***

**STATE\***

**ZIP CODE \***  (99999 or 99999-4444)

**PHONE NUMBER\***  (800-123-4567)

**EMAIL ADDRESS\***  (example@mail.com)

**NOTES**

- To continue entering data, click on the **CAHPS Survey Info** button at the top of the page

**CONTRACT NAME:** Acme Insurance Inc.

**CONTRACT NUMBER:** 9999



## Step 8: Enter CAHPS Survey Information

- This will open the section where you verify that you are using the CAHPS® 5.1H Health Plan Survey Adult Commercial Survey
- If the Plan is new to the FEHB Program for 2023, you can indicate that you are not required to report for the 2023 PPA Scoring Cycle
- Required fields must be completed before clicking the **SAVE** button

### Add CAHPS Survey Statement Example

**CAHPS SURVEYS INFO** \* = Required field

Carrier Contract is new to FEHB Program for 2023 and is not required to conduct CAHPS® Surveys in 2023 \*

Carrier will conduct the CAHPS® 5.1H Health Plan Survey Adult Commercial Version following the NCQA requirements set forth in HEDIS Volume 3: Specifications for Survey Measures \*

- To continue entering data, click on the **CAHPS Vendor Contact** button at the top of the page

CONTRACT NAME: Acme Insurance Inc.

CONTRACT NUMBER: 9999

## Step 9: Enter CAHPS Vendor Contact Information

- After clicking on the **CAHPS Vendor Contact** button, you will see the following screen
- Fill in the information to indicate which CAHPS Vendor you are working with and enter their contact information
- Required fields must be completed before clicking the **SAVE** button

### CAHPS Vendor Contact Information Example

#### CAHPS VENDOR CONTACT

\* = Required field

NCQA CAHPS VENDOR*	CAHPS Vendor Inc.
FIRST NAME*	Jennifer
LAST NAME*	Smith
STREET ADDRESS*	145 Example St
ADDRESS 2	Suite B
CITY*	Washington
STATE*	District Of Columbia
ZIP CODE*	20415 (99999 or 99999-4444)
PHONE NUMBER*	123-444-5656 (800-123-4567)
EMAIL ADDRESS*	JSmith@exampleemail.com (example@mail.com)
NOTES	

[Save](#) [Home](#)

- To continue entering data, click on the **CAHPS Health Carrier Contact** button at the top of the page

CONTRACT NAME: Acme Insurance Inc.  
CONTRACT NUMBER: 9999

[Plan Info](#) [HEDIS Auditor](#) [CAHPS Survey Info](#) [CAHPS Vendor Contact](#) **[CAHPS Health Carrier Contact](#)** [CAHPS Invoice Contact](#)

## Step 10: Enter CAHPS Health Carrier Contact Information

- You will see the following page after clicking on the **CAHPS Health Carrier Contact** button
- Required fields must be completed before clicking the **SAVE** button

### CAHPS Health Carrier Information Example

**CAHPS HEALTH CARRIER CONTACT** \* = Required field

FIRST NAME\*

LAST NAME\*

STREET ADDRESS

ADDRESS 2

CITY\*

STATE\*

ZIP CODE\*  (99999 or 99999-4444)

PHONE NUMBER\*  (800-123-4567)

EMAIL ADDRESS\*  (example@mail.com)

NOTES

[Save](#) [Home](#)

- To continue entering data, click on the **CAHPS Invoice Contact** button at the top of the page

CONTRACT NAME: Acme Insurance Inc.

CONTRACT NUMBER: 9999

Plan Info HEDIS Auditor CAHPS Survey Info CAHPS Vendor Contact CAHPS Health Carrier Contact **CAHPS Invoice Contact**

### Step 11: Enter CAHPS Invoice Contact Information

- The following page will appear after clicking on the **CAHPS Invoice Contact** button
- If this information is the same as the **CAHPS Health Carrier Contact** Information, select the **Yes** button by that question and the information will populate from the **CAHPS Health Carrier Contact** Page
- Required fields must be completed before clicking the **SAVE** button

### CAHPS Invoice Contact Information Example

**CAHPS INVOICE CONTACT**

IS THIS CAHPS INVOICE CONTACT SAME AS CAHPS HEALTH CARRIER CONTACT?  Yes  No

\* = Required field

FIRST NAME\* Janice

LAST NAME\* Meyers

STREET ADDRESS 145 Test St. NW

ADDRESS 2 Suite 400

CITY\* Washington

STATE\* District of Columbia

ZIP CODE\* 20415 (99999 or 99999-4444)

PHONE NUMBER\* 123-444-5656 (800-123-4567)

EMAIL ADDRESS\* JMeyers@exampleemail.com (example@mail.com)

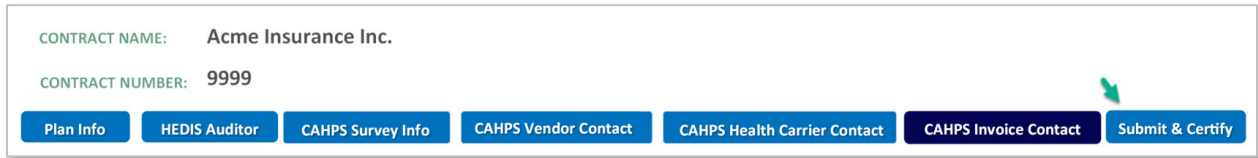
NOTES

Save Home

## Step 12: Submit & Certify

- After the information for each tab is complete, the **Submit & Certify** Button will become visible
- Click on the **Submit & Certify** Button after you have verified that all of the info has been entered
- Click the **SAVE** button

## Submit & Certify Example



The screenshot shows a web interface with the following elements:

- CONTRACT NAME: Acme Insurance Inc.
- CONTRACT NUMBER: 9999
- A row of seven blue navigation tabs: Plan Info, HEDIS Auditor, CAHPS Survey Info, CAHPS Vendor Contact, CAHPS Health Carrier Contact, CAHPS Invoice Contact, and Submit & Certify. A green arrow points to the Submit & Certify tab.

- After completing the Submit & Certify section, you have completed the 2023 HEDIS and CAHPS planned reporting information.
- Thank you for providing the information, it is helpful in building the foundation for the 2023 PPA Scoring Cycle
- If there are questions on this process, please email [FEHBPerformance@opm.gov](mailto:FEHBPerformance@opm.gov) and include your Health Insurance Specialist on the email.