



June 26th, 2023, 11:00 AM-12:00 PM PT

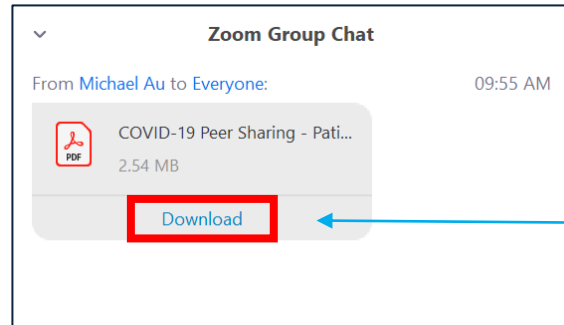
CalHIVE BHI Data Webinar – Test 1



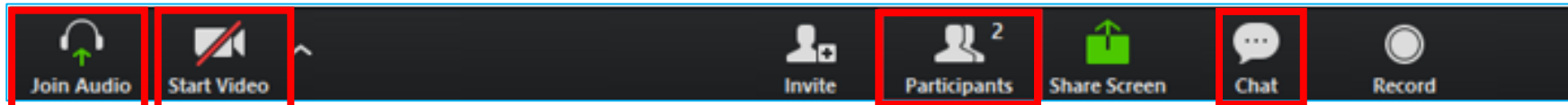
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Tech Tips – Zoom Meetings

For polls, click the blue **submit button** to complete



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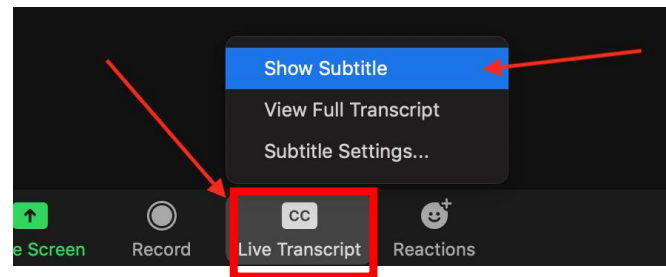


Click to join or mute audio

All attendees have video off upon entry

Click to see who else has joined

Ask questions and insert comments



Request live closed captioning or view full meeting transcript

Meet the CalHIVE BHI Program Team

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Peter Robertson
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Senior Manager,
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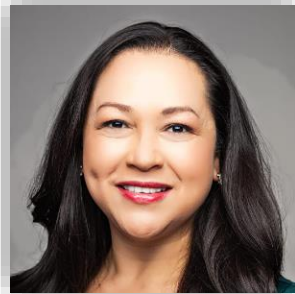
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Clinical Advisor



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Data Reporting



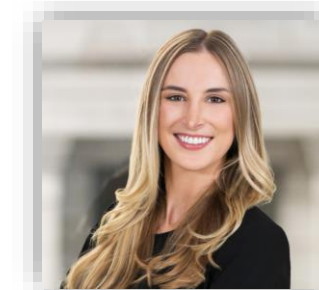
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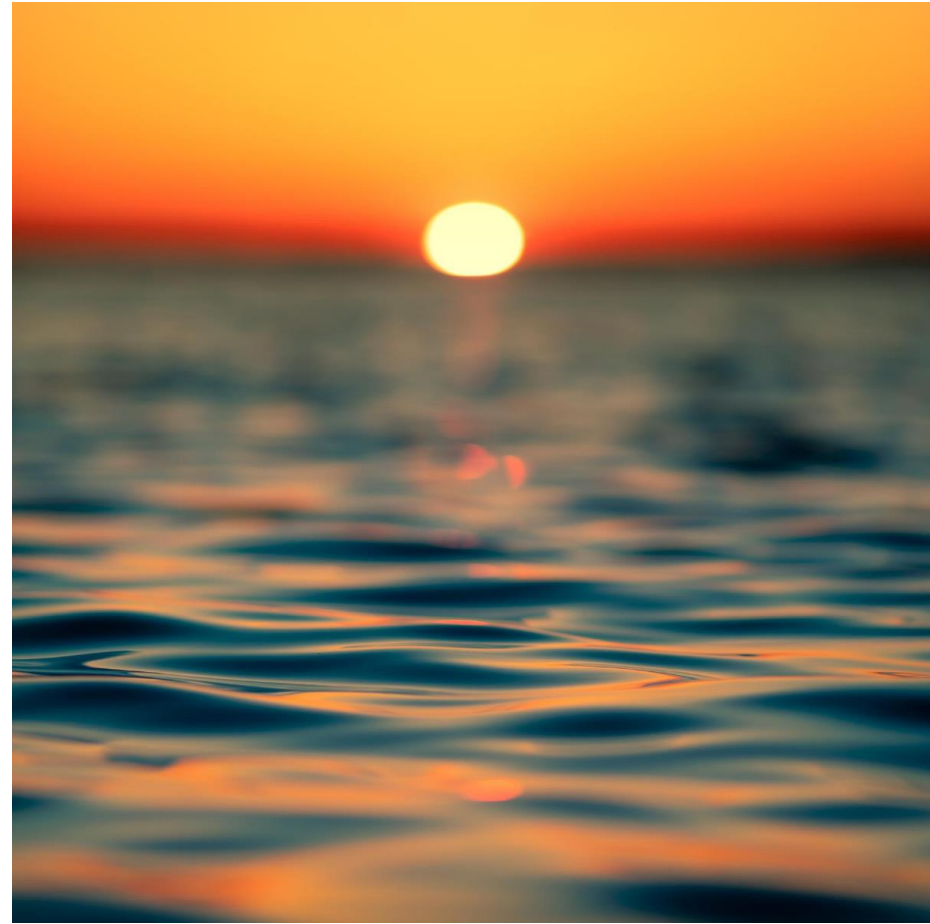


Erika Lind
Manager,
Care Transformation
Events and Learning

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Let's Get to Know You!

1. Please chat in your name
2. Organization
3. What brings you joy during the summer season?



Our Agenda

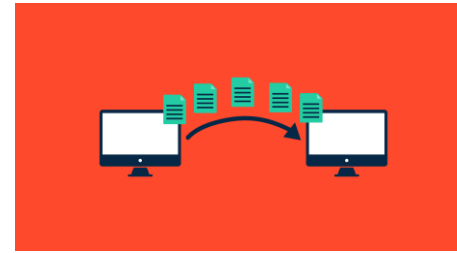
Today, we will:



Review Test 1 data submission timeline, deliverables and requirements



Understand differences between the enrollment and measurement file



Learn how to submit data for CalHIVE BHI



Review data validation and resubmission



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CalHIVE BHI Data Submission- Test 1

CalHIVE BHI Measure Set

Measure	Required Measure	Medicare (QPP/MIPS)	IHA A.M.P Commercial HMO	Medi-Cal Managed Care Accountability Set MY2023
Enrollment (number of patients enrolled to the PO and attributed to a clinician)	Yes			
Depression Screening and Follow-Up for Adolescents and Adults (DSF)	Yes		X	X
Depression Remission or Response for Adolescents and Adults (DRR)	Yes			X
Unhealthy Alcohol Use Screening and Follow-up (ASF)	Yes	X		
Hemoglobin A1c Control for Patients with Diabetes – HbA1c Poor Control (> 9%)	Yes	X	X	X
Emergency Department Visits	Yes		X	X

Test 1 Data Deliverables

Enrollment File

- identifies enrolled clinicians and their practice locations where they provide care.

Measurement File

- Reports performance data across the CalHIVE BHI measures. Data will be reported at the clinician level (numerators/ denominators) with their corresponding practice locations and payer-product mix.

CalHIVE BHI Test 1 Timeline

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
July 2023						
						1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29
30	31					
August 2023						
		1	2	3	4	5

Enrollment File Due Date

Measurement File Due Date

Enrollment or Measurement File Resubmission Due Date

Select a Method to Identify Your Practice Locations

Enrollment File

Measurement File

1. Practice NPI (Type 2)

2. Practice TIN

**3. Internal Identifier
("not_npi_XXX")**

Use the same practice identifiers across both files

Measurement File Data Requirements

Cycle Test 1 Measurement Periods (Required):

- 1/1/2022 – 12/31/2022 (12/31/2022) | Calendar Year

Payer-Product (report on the payer/product mix agreed during onboarding calls):

- Commercial: HMO/POS and PPO
- Medicare: Medicare Advantage and Medicare Fee for Service
- Medi-Cal: Managed Medi-Cal and Medi-Cal Fee for Service
- Dual: Medi-Medi
- Uninsured
- VA/Military
- Other or Unknow

Note: Future data submissions will require to report rolling 12-months measurement periods.

Examples:

- **2/1/2022 – 1/31/2023**
- **3/1/2022 – 2/18/2023**
- **4/1/2022 – 3/31/2023**



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Enrollment File

Enrollment File Template

- You are required to report 1 practice Identifier (refer to your data onboarding calls):
 - If you selected a TIN number, please report it under “Practice TIN”
 - If you selected a NPI (Type 2), please report it under “Practice NPI (Type 2)”
 - If you selected an internal identifier, please report it under “Practice NPI (Type 2)”
- All internal practice identifiers should be modified to begin with “not_npi_”
 - Example:** If the internal identifier for a practice is “V0230”, modify it to “not_npi_V0230”.
- Examples of Eligible Profession and Primary Care Types are in the enrollment file template’s tab “**Data Fields**”

PO Identifier	Clinician First Name	Clinician Last Name	Clinician NPI (Type 1)	Eligible Profession Type	Primary Care Type	Practice Name	Practice TIN	Practice NPI (Type 2)	Practice Street Address	Practice Suite/Floor Number	Practice City	Practice State	Practice Zip Code
31110	Carol	Flores	1234567890	Doctor of Medicine	Internal Medicine	CF Care Inc.	012345678	1234543210	506 Battery Street	4	Berkeley	CA	94805
31110	Jose	Ordonez	1234567899	Nurse Practitioner	Internal Medicine	CF Care Inc.	012345678	1234543210	506 Battery street	4	Berkeley	CA	94805
31110	Carol	Flores	1234567890	Doctor of Medicine	Internal Medicine	Community Clinic Inc.	012345678	1994563278	304 Real Way		Alameda	CA	94816

Eligible Profession and Primary Care Types

NPPES NPI Registry

NPPES Downloads API Help

Search NPI Records

1. 

NPI Number **NPI Type** **Taxonomy Description**

for individuals

Provider First Name **Provider Last Name**

for organizations

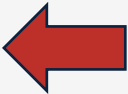
Organization Name (LBN, DBA, Former LBN or Other Name) **Authorized Official First Name** **Authorized Official Last Name** Enrollment File

City **State** **Country** **Postal Code** **Address Type**

Check this box to search for Exact Matches only ⓘ

** This search page is by default set to return similar and close results to your search keywords. You can check the box above if you only want the exact matches for your keywords to be returned in the search results.

Note: The NPI Registry limits searches to the first 2100 results. If you cannot find the NPI that you are looking for, please refine the search.

 2.

- The **NPPES NPI Registry** is a resource that can support your validation of NPIs Type 1 and 2 and search for your clinicians' eligible profession and primary care type

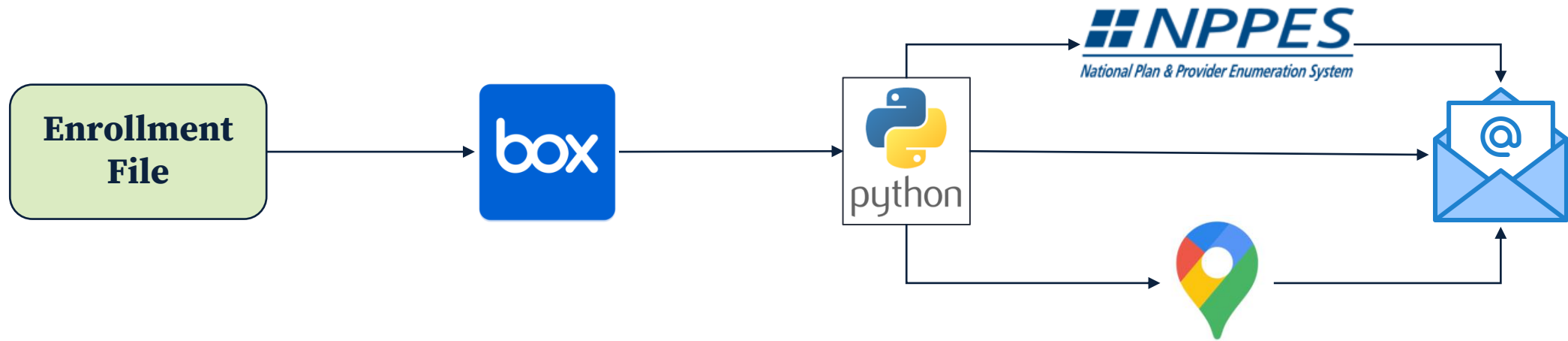
- **Website:** <https://npiregistry.cms.hhs.gov/search>

Enrollment File Examples

PO Identifier	Clinician First Name	Clinician Last Name	Clinician NPI (Type 1)	Eligible Profession Type	Primary Care Type	Practice Name	Practice TIN	Practice NPI (Type 2)	Practice Street Address	Practice Suite/Floor Number	Practice City	Practice State	Practice Zip Code
31121	Peter	Robertson	1234567777	Doctor of Medicine	Internal Medicine	PR MD		not_npi_345	1000 Battery Street	6	Berkeley	CA	94805
31121	Michael	Au	1234567799	Nurse Practitioner	Internal Medicine	PR MD		not_npi_345	1000 Battery street	6	Berkeley	CA	94805
31121	Peter	Robertson	1234567777	Doctor of Medicine	Internal Medicine	CCC Care		not_npi_666	3000 Real Way		Alameda	CA	94816

PO Identifier	Clinician First Name	Clinician Last Name	Clinician NPI (Type 1)	Eligible Profession Type	Primary Care Type	Practice Name	Practice TIN	Practice NPI (Type 2)	Practice Street Address	Practice Suite/Floor Number	Practice City	Practice State	Practice Zip Code
33456	Carmen	Lopez	1234588444	Doctor of Medicine	Internal Medicine	PR MD	069874535		895 Battery Street		Berkeley	CA	94805
33456	Jennifer	Mah	1234567985	Nurse Practitioner	Internal Medicine	PR MD	069874535		895 Battery street		Berkeley	CA	94805
33456	Carmen	Lopez	1234588444	Doctor of Medicine	Internal Medicine	CCC Care	978456318		999 Real Way		Alameda	CA	94816

Enrollment File Validation



- An Enrollment File from your organization will be submitted through your assigned Box link.
- A python script will validate your file by going through a list of checks to identify if you are using the correct template, file format, recognition of null values and identifiers, state and zip codes.
- The National Plan & Provider Enumeration System API connection will validate Clinician and Practice NPIs.
- Google Maps API connection will validate practices' addresses and provide geolocations.

Measurement File

Measurement File Template

Measurement Period Last Date	PO Identifier	Clinician NPI (Type 1)	Practice TIN	Practice NPI (Type 2)	Product	Measure Identifier	Denominator	Numerator
12/31/2022	31110	1234567890	012345678	1234543210	MA	HPC	20	10
12/31/2022	31110	1234567890	012345678	1234543210	HMOPOS	HPC	30	2
6/30/2023	31110	1234567890	012345678	1234543210	MA	HPC	25	10
6/30/2023	31110	1234567890	012345678	1234543210	HMOPOS	HPC	30	2

- **Report the last date of each measurement period to differentiate one from another:**

- Example: (1/1/2022 – 12/31/2022) = 12/31/2022 | Calendar Year
- Example: (7/1/2022 – 6/30/2023) = 6/30/2023 | Rolling 12 Months

- **Report the following payer-product list:**

- Commercial: HMO/POS and PPO
- Medicare: Medicare Advantage and Medicare Fee for Service
- Medi-Cal: Managed Medi-Cal and Medi-Cal Fee for Service
- Dual: Medi-Medi
- Uninsured
- VA/Military
- Other or Unknow

Measurement File Example and Connection to the Enrollment File

Enrollment File													
PO Identifier	Clinician First Name	Clinician Last Name	Clinician NPI (Type 1)	Eligible Profession Type	Primary Care Type	Practice Name	Practice TIN	Practice NPI (Type 2)	Practice Street Address	Practice Suite/Floor Number	Practice City	Practice State	Practice Zip Code
31110	Carol	Flores	1234567890	Doctor of Medicine	Internal Medicine	CF Care Inc.	012345678	1234543210	506 Battery Street	4	Berkeley	CA	94805
31110	Jose	Ordonez	1234567899	Nurse Practitioner	Internal Medicine	CF Care Inc.	012345678	1234543210	506 Battery street	4	Berkeley	CA	94805
31110	Carol	Flores	1234567890	Doctor of Medicine	Internal Medicine	Community Clinic Inc.	012345678	1994563278	304 Real Way		Alameda	CA	94816

Measurement File								
Measurement Period Last Date	PO Identifier	Clinician NPI (Type 1)	Practice TIN	Practice NPI (Type 2)	Product	Measure Identifier	Denominator	Numerator
12/31/2022	31110	1234567890	012345678	1234543210	MA	HPC	30	15
12/31/2022	31110	1234567890	012345678	1234543210	HMOPOS	HPC	60	30
12/31/2022	31110	1234567890	012345678	1234543210	MA	ENR	90	
12/31/2022	31110	1234567890	012345678	1234543210	HMOPOS	ENR	100	
12/31/2022	31110	1234567890	012345678	1994563278	MA	HPC	32	14
12/31/2022	31110	1234567890	012345678	1994563278	HMOPOS	HPC	65	25
12/31/2022	31110	1234567890	012345678	1994563278	MA	ENR	90	
12/31/2022	31110	1234567890	012345678	1994563278	HMOPOS	ENR	105	

Another Example of a Measurement File

Measurement File								
Measurement Period Last Date	PO Identifier	Clinician NPI (Type 1)	Practice TIN	Practice NPI (Type 2)	Product	Measure Identifier	Denominator	Numerator
12/31/2022	31110	1234567890	012345678	1234543210	MA	HPC	30	15
12/31/2022	31110	1234567890	012345678	1234543210	HMOPOS	HPC	60	30
12/31/2022	31110	1234567890	012345678	1234543210	MA	ENR	90	
12/31/2022	31110	1234567890	012345678	1234543210	HMOPOS	ENR	100	
12/31/2022	31110	1234567890	012345678	1994563278	MA	HPC	32	14
12/31/2022	31110	1234567890	012345678	1994563278	HMOPOS	HPC	65	25
12/31/2022	31110	1234567890	012345678	1994563278	MA	ENR	90	
12/31/2022	31110	1234567890	012345678	1994563278	HMOPOS	ENR	105	
6/30/2023	31110	1234567890	012345678	1234543210	MA	HPC	32	16
6/30/2023	31110	1234567890	012345678	1234543210	HMOPOS	HPC	61	29
6/30/2023	31110	1234567890	012345678	1234543210	MA	ENR	100	
6/30/2023	31110	1234567890	012345678	1234543210	HMOPOS	ENR	110	
6/30/2023	31110	1234567890	012345678	1994563278	MA	HPC	40	20
6/30/2023	31110	1234567890	012345678	1994563278	HMOPOS	HPC	65	30
6/30/2023	31110	1234567890	012345678	1994563278	MA	ENR	91	
6/30/2023	31110	1234567890	012345678	1994563278	HMOPOS	ENR	110	

Measurement File Validation



- Measurement data should be reported for all enrolled clinicians (**exception: NPs and PAs that may report under their main PCPs**).
- Measurement File will be submitted and validated quarterly.
- A Python script will scan the file for use of template, null values, format, identifier's numbers and length, product codes, measure identifier codes and numerator/denominator logic.
- Clinicians NPIs and Practice Identifiers submitted in the enrollment file will be used to validate the measurement file (provider a rate of how many clinicians are reporting data).



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Box Data Submission

How to Name Your Files Before Submission or Resubmission?

Test 1 Example:

Organization Name: Long Beach IPA

First Submission:

- Long Beach IPA Enrollment File
- Long Beach IPA Measurement File

First Resubmission (validation failed the 1st time):

- Long Beach IPA Enrollment File res1
- Long Beach IPA Measurement File res1

Second Resubmission (validation failed the 2nd time):

- Long Beach IPA Enrollment File res2
- Long Beach IPA Measurement File res2

Test 2 Example:

Organization Name: Long Beach IPA

First Submission:

- Long Beach IPA Enrollment File
- Long Beach IPA Measurement File

First Resubmission (validation failed the 1st time):

- Long Beach IPA Enrollment File res1
- Long Beach IPA Measurement File res1

Second Resubmission (validation failed the 2nd time):

- Long Beach IPA Enrollment File res2
- Long Beach IPA Measurement File res2

CalHIVE BHI Participant Data Submission Box URLs

Hello CalHIVE BHI Participant,

The box link below has been assigned to your organization to submit data for the CalHIVE BHI program.

Data Submission Link: <https://pbgh.app.box.com/f/6e25911f7989423cba580f6b84cc5f57>

If you encounter any difficulties with your data submission, please contact Jose Ordonez at jordonez@pbgh.org.

Thank You,

Jose Ordonez

Manager, Data Analytics

Purchaser Business Group on Health

1611 Telegraph Avenue #210, Oakland, CA. 94612.

Tel: 415-615-6321. **Web:** www.pbgh.org




Box Data Submission



Provider Organization Data Submission

Hello, In the space below, please upload your measurement and enrollment files for Cycle 1. Before you upload your files, make sure that you are using the CalHIVE Data Templates. If you experience any trouble uploading your files, please contact Jose Ordonez at jordonez@pbgh.org.

Upload files *



Drag and drop files

Select Files

Email address *

Staff Member Full Name *



Submit

Box Data Submission (Continue)

Provider Organization Data Submission

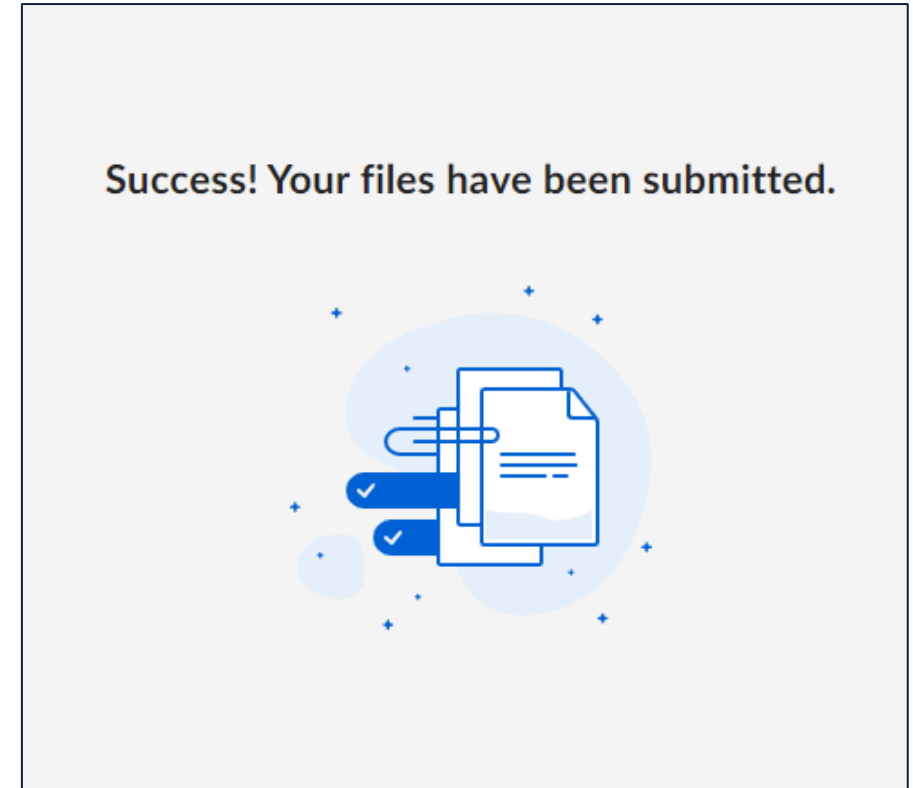
Hello, In the space below, please upload your measurement and enrollment files for Cycle 1. Before you upload your files, make sure that you are using the CalHIVE Data Templates. If you experience any trouble uploading your files, please contact Jose Ordonez at jordonez@pbgh.org.

Upload files *

 CalHIVE Enrollment File Template.xlsx	29.6 KB	×
 CalHIVE Measurement File Template.xlsx	11.8 KB	×

[Add another file](#)

Email address *

Staff Member Full Name *




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Enrollment and Measurement Validation Email

Enrollment and Measurement Files' Validation Email

Data Validation Results:

An automated validation email will be sent to your organization's data team indicating whether your file passed or failed validation.

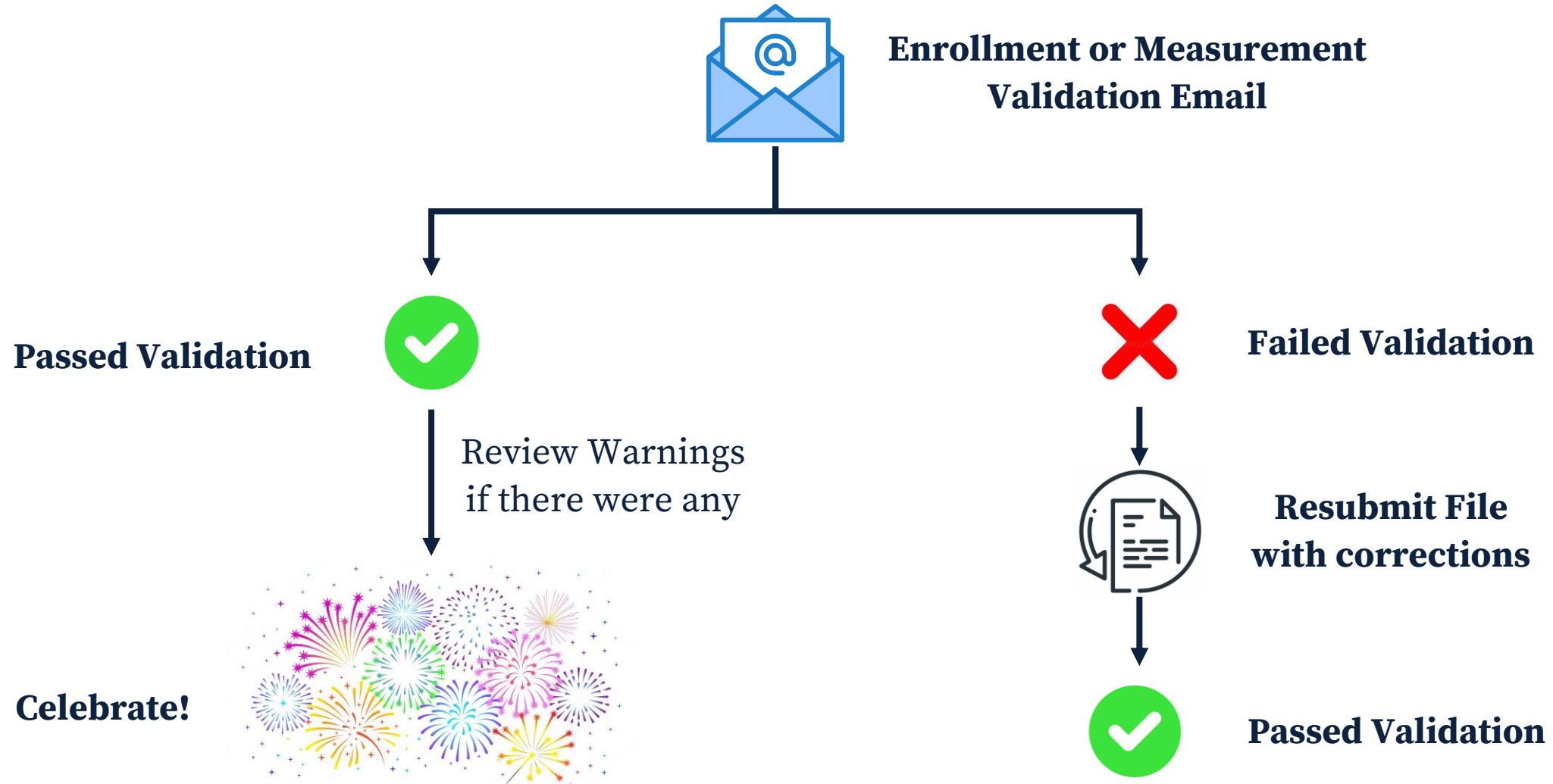
Note: During our data analysis we may find inconsistencies with your measurement data logic. **Jose Ordonez** will reach out if any corrections are necessary.

What will you find in your validation email:

Errors: An error will make your file fail validation.

Warning: A warning will make your file pass validation, but you should review your file and confirm that you have reported on everything that was agreed with CalHIVE BHI's data team.

Next Steps After Validation Email



How to Resubmit an Enrollment or Measurement File?



1. Review the validation email provided by **Jose Ordonez**.
2. Fix the errors provided in the validation email and review any warnings (corrections might be necessary).
3. Rename your file (e.g., 'Long Beach IPA Measurement File res1')
4. **Resubmit your entire enrollment or measurement file (not just the rows that had errors) using your box URL.**
5. Wait for the next validation email confirming whether your resubmission passed or failed validation.

Note: in the renaming process, 'res#' will be an indicator of your resubmission draft. (e.g., first resubmission draft = 'res1', second resubmission draft = 'res2'...)

Poll: Test 1 Knowledge Check

What deliverables are required to be submitted during Test 1?

- Enrollment File
- Measurement File
- Enrollment and Measurement File



CalHIVE BHI Data Cycles' Timeline and Reporting Periods

Data Cycle	Data Webinar & Office Hours	Enrollment File	Measurement File	Measurement File Resubmission	Measurement File Reporting Periods
Test 1	DW: Mon. 6/26/2023	Fri. 7/21/2023	Fri. 7/28/2023	Fri. 8/4/2023	• 1/1/2022 – 12/31/2022
Test 2	DW: Thurs. 9/21/2023 OOH: Thurs. 10/5/2023	X	Fri. 10/13/2023	Fri. 10/20/2023	• 7/1/2022 – 6/30/2023
Baseline	DW: Thurs. 3/14/2024 OOH: Thurs. 4/4/2024	Fri. 4/5/2024	Fri. 4/12/2024	Fri. 4/19/2024	• 1/1/2023 – 12/31/2023
1	DW: Thurs. 6/13/2024 OOH: Thurs. 7/2/2024	X	Fri. 7/12/2024	Fri. 7/19/2024	• 2/1/2023 – 1/31/2024 • 3/1/2023 – 2/29/2024 • 4/1/2023 – 3/31/2024
2	DW: Thurs. 9/12/2024 OOH: Thurs. 10/3/2024	X	Fri. 10/11/2024	Fri. 10/18/2024	• 5/1/2023 – 4/30/2024 • 6/1/2023 – 5/31/2024 • 7/1/2023 – 6/30/2024
3	DW: Thurs. 12/12/2024 OOH: Thurs. 1/6/2025	X	Fri. 1/10/2025	Fri. 1/17/2025	• 8/1/2023 – 7/31/2024 • 9/1/2023 – 8/31/2024 • 10/1/2023 – 9/30/2024
4	DW: Thurs. 3/13/2025 OOH: Thurs. 4/3/2025	X	Fri. 4/11/2025	Fri. 4/18/2025	• 11/1/2023 – 10/31/2024 • 12/1/2023 – 11/30/2024 • 1/1/2024 – 12/31/2024

CalHIVE BHI Data Cycles' Timeline and Reporting Periods

Data Cycle	Data Webinar & Office Hours	Enrollment File	Measurement File	Measurement File Resubmission	Measurement File Reporting Periods
5	DW: Thurs. 6/12/2025 OOH: Thurs. 7/1/2025	X	Fri. 7/11/2025	Fri. 7/18/2025	<ul style="list-style-type: none"> • 2/1/2024 – 1/31/2025 • 3/1/2024 – 2/28/2025 • 4/1/2024 – 3/31/2025
6	DW: Thurs. 9/11/2025 OOH: Thurs. 10/2/2025	X	Fri. 10/10/2025	Fri. 10/17/2025	<ul style="list-style-type: none"> • 5/1/2024 – 4/30/2025 • 6/1/2024 – 5/31/2025 • 7/1/2024 – 6/30/2025
7	DW: Thurs. 12/11/2025 OOH: Thurs. 1/5/2026	X	Fri. 1/9/2026	Fri. 1/16/2026	<ul style="list-style-type: none"> • 8/1/2024 – 7/31/2025 • 9/1/2024 – 8/31/2025 • 10/1/2024 – 9/30/2025
8	DW: Thurs. 3/12/2026 OOH: Thurs. 4/2/2026	X	Fri. 4/10/2026	Fri. 4/17/2026	<ul style="list-style-type: none"> • 11/1/2024 – 10/31/2025 • 12/1/2024 – 11/30/2025 • 1/1/2025 – 12/31/2025
9	DW: Thurs. 6/11/2026 OOH: Thurs. 6/30/2026	X	Fri. 7/10/2026	Fri. 7/17/2026	<ul style="list-style-type: none"> • 2/1/2025 – 1/31/2026 • 3/1/2025 – 2/28/2026 • 4/1/2025 – 3/31/2026
10	DW: Thurs. 9/10/2026 OOH: Thurs. 10/1/2026	X	Fri. 10/9/2026	Fri. 10/16/2026	<ul style="list-style-type: none"> • 5/1/2025 – 4/30/2026 • 6/1/2025 – 5/31/2026 • 7/1/2025 – 6/30/2026

Questions?





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Thank you!