# REPORTS AVAILABLE TO PRIMARY CARE PRACTICES & PROVIDERS ON THE HUSKY HEALTH WEBSITE SECURE PROVIDER PORTAL

Community Health Network of Connecticut, Inc. (CHNCT) provides primary care practices and providers with valuable information to assist with the management of HUSKY Health patients attributed to them.

For more information on registering for secure portal and report access, <u>click here</u>. Below are summaries of each report available to you. Once you've registered for access, you can view more detailed information about these reports which can be found in the "Report Help Guides" located on your "Patient Reports" page. Each report excludes dual eligible (Medicare/Medicaid) and opt-out members.

For reports labeled as a "Gaps in Care Report," claims data is used to determine if a member has a gap in care or service. If there is a gap identified, this means the member has not received the service or screening in the appropriate amount of time regardless of whether the service or screening was performed by their attributed Primary Care Provider (PCP) or any other provider in the Connecticut Medical Assistance Program (CMAP) network.

## ADULT DIABETES SCREENING TESTS – GAPS IN CARE REPORT

This report details members 18 to 75 years of age with a diabetes diagnosis or diabetic prescription reported within the last two years and who are attributed to PCPs for the specified Federal Tax ID.

These members are considered to have Type 1 or Type 2 diabetes. The report details the last service dates for HbA1c, nephropathy testing, and retinal eye exam with an eye care professional.

#### ADULT PREVENTIVE VISITS AGE 21-49 - GAPS IN CARE REPORT

This report details the last preventive service date, if applicable, for members 21 to 49 years of age attributed to PCPs for the specified Federal Tax ID.

#### ADULT PREVENTIVE VISITS AGE 50-64 - GAPS IN CARE REPORT

This report details the last preventive service date, if applicable, for members 50 to 64 years of age attributed to PCPs for the specified Federal Tax ID.

#### **ASTHMA CONTROLLER MEDICATIONS REPORT**

NEW!

This report provides a medication adherence value based on submitted information from paid pharmacy claims for asthma controller medications. The report includes members 5 through 64 years of age attributed to PCPs for the specified Federal Tax ID, with an asthma diagnosis and prescription claims for asthma controller medications.

The values displayed are based on a **Proportion of Days Covered (PDC)** measurement. This is an estimate of the percentage of the time when a member has a supply of medication available for administration. The measurement is a calculation of the number of days in the period that are "covered" by medication, divided by the number of days in the period.

#### **BREAST CANCER SCREENING – GAPS IN CARE REPORT**

This report provides the breast cancer screening status for female members 50 to 74 years of age attributed to PCPs for the specified Federal Tax ID.

A member's last screening date is provided in the report if that data is available and the member is not excluded.\* Members whose last screening was over two years ago, or have no record of a previous screening based on Medicaid claims data, are considered "Due."

## **CERVICAL CANCER SCREENING – GAPS IN CARE REPORT**

This report provides the cervical cancer screening status for female members 24 to 64 years of age attributed to PCPs for the specified Federal Tax ID.

A member's last screening date is provided in the report if that data is available and the member is not excluded.\* Members who have no record of a previous screening based on Medicaid claims data or based on the type of screening performed, if outside of the recommended timeframe, are considered "Due."

Screening types and recommended time frames:

- Cervical cytology within the last three years for members 24 to 64 years of age
- Cervical cytology/Human Papillomavirus (HPV) co-testing within the last five years for members 35 to 64 years of age

## **CHILD DIABETES SCREENING TESTS - GAPS IN CARE REPORT**

This report details members 4 to 17 years of age with a diabetes diagnosis or diabetic prescription reported within the last two years who are attributed to the PCPs for the specified Federal Tax ID.

These members are considered to have Type 1 or Type 2 diabetes. The report details the last service date for HbA1c and/or a retinal eye exam with an eye care professional.

#### CHILD WELL-CARE VISITS - GAPS IN CARE REPORT

This report details the last service date for well-child visits and developmental screenings for members ages 0 to 21 attributed to PCPs for the specified Federal Tax ID. Child well-care visits include children through age 21.

<u>Child Well-Care Visits</u>: Members 0 to 15 months old are considered "Due" if the member's last well-visit was over two months ago or if there is no record of a visit. Members 16 months to 21 years old are considered "Due" if the member's last well visit was over a year ago or if there is no record of a visit.

#### **COLORECTAL CANCER SCREENINGS – GAPS IN CARE REPORT**

This report provides the colorectal cancer screening status for members 51 to 75 years of age attributed to PCPs for the specified Federal Tax ID.

A member's last screening date is provided in the report if that data is available and the member is not excluded.\*

Screening types and recommended time frames:

- Colonoscopy within the last ten years
- Flexible sigmoidoscopy within the last five years
- Fecal occult blood test within the last year

## **DAILY ADMISSION AND DISCHARGE REPORT**

This report details members attributed to PCPs for the specified Federal Tax ID currently admitted to a facility, or for whom discharge information was received within the last seven days.

#### **ED UTILIZATION REPORT**

This report details members attributed to PCPs for the specified Federal Tax ID who had at least one trip to the Emergency Department (ED) in the last six months, for either emergent or non-emergent care, which was paid in the prior month.

It also details the last time members had a preventive or office visit.

#### **INPATIENT CLAIMS REPORT**

This report details all inpatient hospital claims paid within the last three months with a date of service within the last 12 months for members attributed to PCPs for the specified Federal Tax ID.

## **PATIENT PANEL REPORT**

This report details the HUSKY Health members attributed to PCPs for the specified Federal Tax ID.

OTHER REPORTS COMING SOON!

Behavioral and Developmental Screenings

\*Exclusions may be found in the Help Guides located on the Reports page in the secure portal. You can access this page once you have registered.