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HEDIS Task Planning, Quarter by Quarter

Success with the Healthcare Information Effectiveness Data and Information Set—or HEDIS—requires year-round attention. Use this quarter-by-quarter guide to stay organized, align with NCQA deadlines, and keep your value-based care efforts on track.

Q1: JANUARY–MARCH

Goal: Prepare Systems, Teams, and Data for the HEDIS Reporting Cycle.

- ☐ **Validate Claim Mappings**
  Validate coding accuracy (e.g., ICD-10, CPT, LOINC) used in measure calculations. Ensure accuracy of mappings from claims to HEDIS measures in alignment with current NCQA specifications before loading data into the IDSS.
- ☐ **Optimize Patient Attribution Logic**
  Confirm patients are accurately assigned to providers and care teams to reflect responsibility for care and are aligned with payer or internal attribution models.
- ☐ **Audit + Correct Care Gap Data**
  Run mock reports to identify data quality issues—missing screenings, immunizations, or lab results—and coordinate remediation with clinical teams.
- ☐ **Assess Supplemental Data Sources**
  Ensure external data sources (e.g., registries, health information exchanges) meet audit requirements.
- ☐ **Develop a Submission Project Plan + Timeline**
  Align internal teams and vendors on deliverables, milestones, and submission responsibilities. Build in time for dry runs and audit remediation.

Q2: APRIL–JUNE

Goal: Finalize Data, Lock Audits, and Prepare for NCQA Submission.

- ☐ **Conduct Internal Audit Readiness Reviews**
  Assess documentation, processes, and data submission capabilities before the plan lock and final audits.
- ☐ **Engage Auditors + Finalize Medical Record Review (MRR)**
  Ensure abstraction is complete and fully documented. Respond to auditor queries quickly to avoid delays in Plan Lock or submission.
- ☐ **Submit + Validate HEDIS Data on Time**
  Work with auditors to complete final submissions and attestation of results by June 13, 2025.

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Q3: JULY–SEPTEMBER

Goal: Reflect, Retool, and Review Measure Updates.

- ☐ **Review Final Audit Reports + Identify Improvement Areas**
  Analyze auditor feedback and submission outcomes to plan performance improvement.
- ☐ **Update HEDIS Reporting Periods + Measure Versions**
  Implement NCQA's updated specifications released in early August to prepare systems for next year's cycle.
- ☐ **Benchmark + Trend Performance**
  Compare year-over-year measure trends, identify systemic documentation or coding issues, and evaluate alignment with value-based care goals.

Q4: OCTOBER–DECEMBER

Goal: Plan Ahead and Educate Staff.

- ☐ **Identify Training Gaps + Educate Staff on HEDIS Changes**
  Conduct education and training based on upcoming measure updates or performance shortfalls.
- ☐ **Review Payer Contracts + Value-Based Agreements**
  Reassess contracts to understand HEDIS expectations and financial implications.
- ☐ **Pre-Load Test Data (if Feasible)**
  Prepare systems to run early test extracts or mock submissions to identify data completeness or logic translation issues.

Stay proactive, not reactive.

Refer to this guide throughout the year to streamline HEDIS tasks and support better performance outcomes.

Need help navigating HEDIS or optimizing your value-based care strategy? **Get in touch with Tegria to learn how we can support your goals.**