

HEZ Reporting Requirements (as of December 2014)

Zone Reports

- **Milestones and Deliverables Reports (due every quarter, on July 31, October 31, January 31, and April 30 of each year):** details information regarding jobs added in the Zone (including employer, job title, licensure, number of FTE, date of hire, turnover, relation to HEZ efforts, use of HEZ funding or incentives to support position, and provider productivity); the number of primary care, behavioral health and dental practices/services created in the Zone; the number of patients and patient visits by practice and service; and participation in Zone trainings, outreach and education, and community health resource enhancements such as care coordination, community health worker, disease management, fitness, cooking, and other public health programs.
- **Narrative Reports (due every six months, on October 31 and April 30 of each year):** details progress on all program efforts, hiring, care coordination, CHW programs, data collection and reporting, workforce recruitment, cultural competency efforts, participation of Zone residents and community partners, partnerships with hospitals and payers, perceived barriers to program implementation, successes, and TA provided by the state.
- **Expenditure Reports and Supporting Documentation (due July 31, October 31, January 31, and April 30 of each year).** These should be included in the same submission/email with the Milestones & Deliverables report. HEZs are required to provide the requested supporting documentation.
- **Follow-Up Memos to Zones:** forwarded to the Zones each quarter 2-4 weeks after receipt of the quarterly reports and semi-annual narratives.
- **Zone Responses to the Follow-Up Memos:** due from the Zones to the state within 2 weeks of receipt of Quarterly Report Follow-Up Memo from the state.
- **HEZ Clinical Outcomes Metrics (will now be due annually, on January 31 of each year, for service dates of January 1 through December 31 of each year):** from all 'HEZ practitioners' included in the 'Jobs Added' reporting template. These metrics include a set of 11 National Quality Forum (NQF) endorsed performance measures (or their Uniform Data System, or UDS, equivalent measures) related to diabetes, hypertension, smoking, obesity, asthma and behavioral health (conditions addressed by primary care providers and targeted by the HEZ initiative). These metrics measure and quantify health care processes, outcomes, organizational structure and/or systems associated with the ability to provide high quality care.
- **HEZ Dashboards and Accompanying Narratives and Data Dictionary:** will be re-developed into Zone-level reports that will include some performance metrics, Zone milestones, hospital utilization data, social determinants data, evaluation findings, and clinical outcomes metrics. Some of this data will be updated quarterly and some will be updated annually. Timeline for re-development: December 2014 – January 2015.
- **Zone Year 3 Strategic Plans:** will be due in February/March 2015.
- **Zone Year 3 Budgets:** will be due in February/March 2015.

State HEZ Team Reports

- **StateStat templates for each Zone (due by the 3rd week of each month to DHMH leadership):** include performance metrics, pulled from the Zones' quarterly reports, related to increasing service capacity; reaching patients with services and interventions; assuring clinical provider quality; health improvement; and program milestones.
- **Site Visit Reports (forwarded to the Zones within 30 days of site visit):** the Site Visit Reports include information regarding the participants at the site visit, the site visit process, findings and observations by the state team, required Zone actions following the visit, and next steps for both the state and Zone.
- **Zone Responses to Site Visit Reports (forwarded to the state within 30 days of receipt of the Site Visit Report):** describe progress on 'required items' noted in the Site Visit Reports. Progress on 'next steps' is requested in future quarterly and semi-annual reports.
- **Quarterly Reports to MHQCC (the Maryland Health Quality and Cost Council):** updates regarding the progress of the HEZ Initiative are provided by state HEZ leadership through quarterly presentations at MHQCC meetings.
- **Quarterly Reports to CHRC (the Maryland Community Health Resources Commission):** updates regarding the progress of the HEZ Initiative are provided by state HEZ leadership through quarterly presentations at CHRC meetings. The CHRC reserves the right to invite HEZs to present to the CHRC at meetings of the Commission.
- **Annual Report to MHQCC (November of each year):** an annual report of the Health Enterprise Zones Initiative to MHQCC is required and includes information regarding Zone key interventions, progress, challenges and milestones; state technical assistance to the Zones; and efforts to monitor Zone performance and assess impact.
- **Annual Legislative Report (December of each year):** an annual legislative report of the Health Enterprise Zone (HEZ) Initiative is required under the *Maryland Health Improvement and Disparities Reduction Act of 2012* (Ch. 3 of the Acts of 2012). This legislation requires that on or before December 15 of each year, the CHRC and the Department must submit to the Governor and General Assembly a report that includes: (1) the number and types of incentives granted in each HEZ; (2) evidence of the impact of the incentives in attracting practitioners to the HEZs and in reducing health disparities and improving health outcomes; and (3) evidence of the progress in reducing health costs and hospital admissions and readmissions in HEZs.