



February 25, 2026

Dear Provider,

As we continue to support accurate and timely **Healthcare Effectiveness Data and Information Set (HEDIS®)** reporting, we want to clarify an important documentation requirement regarding proof-of-service submission. HEDIS requires documentation from the source system of record. Proof-of-service must come directly from the system where the service was originally documented and maintained, typically the provider's **Electronic Health Record (EHR)**. This ensures that the documentation used for HEDIS abstraction is complete, validated, and reflective of the original clinical record.

Continuity of Care Documents (CCD) are received from the **Delaware Health Information Network (DHIN)** using the **Consolidated Clinical Document Architecture (C-CDA)** framework. C-CDAs, including CCDs received from the DHIN, are electronically generated clinical summaries and are not considered primary source records. These documents are structured summaries created to support information exchange and care coordination, not the original medical record where care was documented. Because they are summaries rather than the original documentation, they do not meet HEDIS requirements for proof-of-service.

In addition, C-CDA documents may be incomplete or filtered and may not contain all required elements necessary for HEDIS abstraction, such as provider signatures, full service context, or detailed clinical documentation. Certain data elements may also be truncated or formatted differently from the original EHR entry. For these reasons, C-CDAs cannot serve as standalone HEDIS evidence.

While C-CDA and **Fast Healthcare Interoperability Resources (FHIR®)** files received through DHIN are valuable tools that support care coordination and data exchange, **Health Information Exchange (HIE)** data is considered supplemental only. If HIE data identifies a potential gap closure, the corresponding documentation must still be obtained from the provider's system of record to be considered compliant for HEDIS reporting.

When submitting documentation for HEDIS purposes, please provide records directly from your EHR and ensure all required elements are included. Submitting documentation from the source system helps prevent audit findings, reduces rework, and supports accurate HEDIS reporting. If you have questions regarding acceptable documentation or submission requirements, please contact our HEDIS Operations Team at DFHHEDISInbox@delawarefirsthealth.com.

Sincerely,

Delaware First Health
Quality Improvement