

HEDIS^{®1} for Measurement Year 2022

Healthcare Effectiveness Data and Information Set

*Measures collected with medical record review Red= new/addition to measures Blue= Medicare only

New Measures	
Measure	Screening, test, or care needed
Deprescribing of Benzodiazepines in Older Adults (DBO) *Medicare	Prescribed benzodiazepines who experienced a decrease 20% or more in the average daily benzodiazepine dose during the measurement year.
Adults 67 years of age and older	Exclusions:
Note: First year measure	 Members with a diagnosis of seizure disorder, REM Sleep Behavior disorder, Benzodiazepine withdrawal, or Ethanol Withdrawal on or before January 1 of the year prior to the measurement year and the ITE start date. Members in Hospice or using Hospice services or receiving Palliative Care during the measurement year are also excluded.
Antibiotic Utilization for Respiratory Conditions (AXR)	• Members 3 months of age and older with a diagnosis of a respiratory condition that resulted in an antibiotic dispensing event.
Ages 3 months and older	
Note: First year measure	 Exclusions: Members in Hospice or using Hospice services during the measurement year are also excluded.
Advance Care Planning (ACP) *Medicare	
Adults 66 -80 years of age diagnosed with advanced illness (an indication of frailty) or receiving Palliative care.	 Advanced Care Planning is the discussion or documentation about preferences for resuscitation, life-sustaining treatment, and end of life care.
Note: First year Measure	 Exclusions: Members in hospice or using hospice services anytime during the measurement year.



Prevention and Screening	
Measure	Screening, test, or care needed
*Childhood Immunization Children who turn 2 years old during the	• 4 DTaP, anaphylaxis, or encephalitis due to diphtheria, tetanus or pertussis vaccine (do not count any before 42 days of age)
measurement year (2021).	 3 IPV (do not count any before 42 days of age) 1 MMR or history of measles, mumps, and rubella (do not count any before 42 days of age) 3 HiB or anaphylaxis to HiB vaccine (do not count any before 42 days of age)
Vaccines must be completed <u>on or before the 2</u> nd <u>birthday</u>	 3 Hepatitis B, anaphylaxis due to hepatitis B vaccine, positive serology, or history of hepatitis B 1 VZV, positive serology, or documented history of chicken pox disease
	 4 pneumococcal conjugates (do not count any before 42 days of age) 1 Hepatitis A, or documented Hepatitis A illness
	 2 or 3 Rotavirus vaccines-depends on the vaccine administered (do not count any before 42 days of age), or documented anaphylaxis due to the rotavirus vaccine
	• 2 Influenza with different dates of service. One of the two vaccinations can be an LAIV- live attenuated influenza vaccine- if administered on the child's 2nd birthday. (do not count any given prior to 6 months of age)
	Exclusions: Members in hospice or using hospice services any time during the Measurement Period or
	Any of the following on or before the child's second birthday: – Severe combined immunodeficiency.
	 Immunodeficiency. HIV
	 Lymphoreticular cancer, multiple myeloma, or leukemia. Intussusception
	Documentation of "immunizations are up-to-date" is <u>not</u> acceptable.
	Documentation of an immunization (such as the first Hep B) received "at delivery "or "in the hospital" may be counted.
	Documented history of illness, a seropositive test result or anaphylaxis, there must be a note indicating the date of the event,
	which must have occurred by the member's second birthday.
	Parental refusal is <u>not</u> an exclusion



Prevention and Screening

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Measure	Screening, test, or care needed
 *Immunizations for Adolescents NOTE: This measure includes the Human Papillomavirus Vaccine (HPV) for <u>both males and females</u>. All vaccines must be completed on or before the 13th birthday. Children who turn 13 years old during the measurement year (2021). <u>CPT Codes:</u> Meningococcal: 90734 Tdap: 90715 HPV: 90649-90651 	 1 dose Meningococcal vaccine between the 11th and 13th birthdays or anaphylaxis due to the vaccine anytime on or before the 13th birthday <u>and</u> 1 tetanus, diphtheria toxoids and acellular pertussis (Tdap) vaccine between the 10th and 13th birthdays or anaphylaxis due to the vaccine anytime on or before the 13th birthday <u>and</u> 2-dose <u>or</u> 3-dose HPV vaccination series between the 9th and 13th birthdays or anaphylaxis due to the vaccine anytime on or before the 9th and 13th birthdays or anaphylaxis due to the vaccine anytime on or before the 13th birthday Documentation of "immunizations are up-to-date" is <u>not</u> acceptable. For documented history of anaphylaxis, there must be a note indicating the date of the event, which must have occurred by the member's 13th birthday. Exclusions: Members in hospice or using hospice services any time during the Measurement Period Parental refusal is <u>not</u> an exclusion
 *Lead Screening in Children (Medicaid only) Children who turn 2 years old during the measurement year (2021). CPT Code: 83655 	At least one capillary or venous lead blood test by their 2 nd birthday. Documentation in the record must include <u>both</u> of the following: • Date the test was performed • The result or finding Exclusions: Members in hospice or using hospice services any time during the Measurement Period



Prevention and Screening

Measure	Screen, Test, Care needed
*Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents	 BMI Percentile documentation must include date, height, weight and: BMI percentile (may be plotted on age-growth chart) Weight and height must be taken during the measurement year (2021).
 Members 3-17 years of age, who had an outpatient visit with a PCP or OB/GYN during 2021 and had evidence of the following documented: BMI percentile Counseling for Nutrition Counseling for Physical Activity <u>MCD-9 Codes:</u> BMI percentile: Z68.51-Z68.54 Counseling for nutrition: Z71.3 Counseling for physical activity: Z02.5; Z71.82 <u>CPT Codes</u> Counseling for nutrition: 97802-97804 	 Counseling for Nutrition documentation must include a note indicating the date and at least <u>one</u> of the following: Discussion of current nutrition behaviors (e.g., eating habits, dieting behaviors) Checklist indicating nutrition was addressed Counseling or referral for nutrition education Member received educational materials on nutrition during a face-to-face visit Anticipatoryguidance for nutrition Weight or obesity counseling Referral to WIC Counseling for Physical Activity documentation includes a note indicating the date and at least <u>one</u> of the following: Discussion of current physical activity behaviors (e.g., exercise routine, participation in sports activities, exam for sports participation) Checklist indicating physical activity was addressed Counseling or referral for physical activity was addressed Counseling or referral for physical activity was addressed Counseling or referral for physical activity Member received educational materials on physical activity during a face-to-face visit Anticipatory guidance specific to the child's physical activity during a face-to-face visit Anticipatory guidance specific to the child's physical activity during a face-to-face visit Anticipatory guidance specific to the child's physical activity during a face-to-face visit Anticipatory guidance specific to the child's physical activity Weight or obesity counseling Documentation of meeting Developmental Milestones only does <u>not</u> meet HEDIS[®] criteria for Physical Activity Counseling. Services specific to an acute or chronic condition do <u>not</u> count toward the counseling indicators for either nutrition or physical activity. Exclusions: Members in hospice or using hospice services anytime during the measurement year.



Prevention and Screening	
Measure	Screen, Test, Care needed
*Cervical Cancer Screening Women ages 21-64	 A PAP test (cervical cytology) within the last 3 years (2019-2021) for women ages 21-64 Cervical high-risk human papillomavirus (hrHPV) testing
<u>CPT Codes to identify Cervical Cancer</u> <u>Screening</u>	 within the last 5 years (2017-2021) for women ages 30-64. Cervical cytology/high-risk human papillomavirus (hrHPV) co-testing within the last 5 years (2017-2021) for women ages 30-64.
Cervical cytology: 88141-88143; 88147-88148; 88150. 88152-88154; 88164- 88167; 88174- 88175	 Exclusion: Members in hospice or using hospice services anytime during the measurement year.
HPV tests: 87620-87622; 87624-87625	 Members receiving palliative care during the measurement year. Documentation of hysterectomy with <u>no residual cervix is required:</u> "Complete", "total" or "radical hysterectomy (abdominal, vaginal or unspecified) "Vaginal hysterectomy"
Note: Evidence of hrHPV testing within the last 5 years also captures patients who had cotesting; therefore, additional methods to identify cotesting are not necessary.	 "Vaginal pap smear" in conjunction with "hysterectomy" "Hysterectomy" in combination with documentation that member no longer needs pap test/cervical cancer screening Documentation of "hysterectomy" alone does not meet the criteria.
Non-Recommended Cervical Cancer Screening in Adolescent Females	screened unnecessarily for cervical cancer.
Adolescent females ages 16-20	 <u>Note</u>: A lower rate indicates better performance <u>Exclusion</u>: History of cervical cancer, HIV, or immunodeficiency Members in hospice or using hospice services anytime during the measurement year



Prevention and Screening	
Screen, Test, Care needed	
 At least one test for Chlamydia during the measurement year (2021). <u>Exclusion</u> :	
 A pregnancy test <i>alone</i> during the measurement year <u>and either</u>: A prescription for isotretinoin on the date of the pregnancy test or six days after the pregnancy test. An x-ray on the date of pregnancy test or the six days after the pregnancy test Members in hospice or using hospice services anytime during the measurement year. 	
 A mammogram (screening, diagnostic, digital or digital breast tomosynthesis) on or between October 1, 2019 -December 31, 2021. NOTE: MRI's, ultrasounds or biopsies <i>alone</i> do not count- a mammogram is also required. 	
 Exclusion: Bilateral Mastectomy Members in hospice or using hospice services anytime during the measurement year Members receiving palliative care during the measurement year 	
Screened unnecessarily for prostate cancer Exclusions:	
 Prostate cancer diagnosis Dysplasia of the prostate A PSA test during the year <i>prior to</i> the measurement year (2020) where laboratory data indicate an elevated result or abnormal finding. Dispensed prescription for a 5-alpha reductase inhibitor during the measurement year (2021). 	

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Measure	Screen, Test, Care Needed
Colorectal Cancer Screening	One or more of the following screenings:
Adults ages 50-75	Colonoscopy in past 10 years (2012-2021)
CPT Codes for Colorectal Cancer Screening:	 Flexible sigmoidoscopy in past 5 years (2017-2021) CT Colonography (e.g., virtual colonoscopy) in the past 5 years (2017-2021)
FOBT: 82270; 82274	• FIT-DNA (e.g., Cologuard) test in the past 3 years (2019-2021)
FIT-DNA: 81528	Fecal occult blood test (iFOBT or gFOBT) annually (2021)
Flexible Sigmoidoscopy: 45330-45335; 45337-45342; 45345-45347; 45349-45350	Exclusion:
CT Colonography: 74261-74263	Diagnosis of colorectal cancer or total colectomy.
<i>Colonoscopy</i> : 44388-44394; 44397; 44401-44408; 45355; 45378-45393; 45398	Members in hospice or using hospice services anytime during the measurement year.
Utilization and Risk Adjusted Utilizati Measure	
Measure	on Screening, test or care needed
Measure Well-child Exams in the	
Measure Well-child Exams in the First 30 Months of Life Children who turned 15 months	Screening, test or care needed
Utilization and Risk Adjusted Utilizati Measure Well-child Exams in the First 30 Months of Life Children who turned 15 months or 30 months during 2021	Screening, test or care needed Well-care visits with a PCP/Pediatrician.
Measure Well-child Exams in the First 30 Months of Life Children who turned 15 months	Screening, test or care needed Well-care visits with a PCP/Pediatrician. Two rates are reported:



Screening, test or care needed
• At least <u>one</u> (1) comprehensive well-care visit with a PCP or OB/GYN practitioner during the measurement year (2021).
Exclusion:
 Members in hospice or using hospice services anytime during the measurement year.
Screening, Test, Care Needed
 Diagnosis of pharyngitis Prescribed an antibiotic and
Received a group A streptococcus (strep) test in the 7-day period from 3 days <i>prior to</i> , through 3 days <i>after</i> , the prescription date.
 Exclusion: Members in hospice or using hospice services anytime during the measurement year.
• Diagnosis of Upper Respiratory Infection (URI), and <u>Not</u> prescribed an antibiotic.
 Exclusion: Members in hospice or using hospice services anytime during the measurement year.



Respiratory Conditions

Measure	Screening, Test, Care Needed
Avoidance of Antibiotic Treatment for Bronchitis/Bronchiolitis Ages 3 months and older	Diagnosis of acute bronchitis/bronchiolitis, and Not dispensed an antibiotic prescription <u>Exclusion</u> :
ICD-10 Codes to identify Acute Bronchitis: J20.3-J20.9; J21.0-J21.1; J21.8-J21.9	 Members in hospice or using hospice services anytime during the measurement year. Members with a diagnosis of any of the following comorbid conditions: Emphysema; COPD; Immune system disorder; HIV; Malignant neoplasm
Use of Spirometry Testing in the Assessment and Diagnosis of COPD Adults ages 40 and older	 Diagnosis of new, or newly active, COPD between July 1, 2020-June 30, 2021 <u>and</u> Spirometry testing to confirm the diagnosis in the 2 years prior through 6 months after the diagnosis.
<u>CPT Codes for Spirometry Testing:</u> 94010; 94014-94016; 94060; 94070; 94375; 94620	 <u>Exclusion</u>: Members in hospice or using hospice services anytime during the measurement year.
Pharmacotherapy Management of COPD Exacerbation Adults ages 40 and older ICD-10 Codes to identify COPD: J44.0; J44.1; J44.9	Discharged from an acute inpatient admission or an ED visit with a primary diagnosis of COPD on or between January 1 – November 30, 2021 and 1. Dispensed appropriate medications (or already had an active prescription for) both: 2. A systemic corticosteroid within 14 days of the event 3. A bronchodilator within 30 days of the event Exclusion: • Members in hospice or using hospice services anytime during the measurement year.



Measure	Screening, test, care needed
*Controlling High Blood Pressure	Diagnosis of hypertension
Adults ages 18-85	Most recent blood pressure reading in the medical record for 2021.
dequate control is defined as: <140/90	Exclusions: Evidence of any of the following during 2021:
CD-10 Codes to identify HTN: 110	 End Stage Renal Disease (ESRD), or dialysis Kidney transplant
CPT II Codes for BP values:	- Pregnancy
Systolic Less than 140: 3074F, 3075F	 Nonacute inpatient admission Members in hospice or using hospice services anytime during the measurement year.
Systolic Greater than/Equal to 140: 3077F Diastolic Less	 Members in hospice of using hospice services anythine during the measurement year. Members receiving palliative care during the measurement year.
than 80: 3078F	- Members receiving panative care during the measurement year.
Diastolic 80-89: 3079F	
Diastolic Greater than/Equal to 90: 3080F	
Statin Therapy for Patients	
with Cardiovascular Disease	Identified as having clinical atherosclerotic cardiovascular disease (ASCVD) Two rates are reported:
Males ages 21-75; Females ages 40-75	1. Received Statin Therapy: Members who were dispensed at least one <i>high or moderate-intensity</i> statin medication during the measurement year (2021).
Moderate or high-intensity statin therapy:	
Atorvastatin: 10-80mg	2. Statin Adherence 80%: Members who remained on a high or moderate-intensity statin medication for
Amlodipine-atorvastatin: 10-80mg	at least 80% of the treatment period (from prescription date through end of year).
Rosuvastatin: 5-40mg Simvastatin: 20-80mg	
Ezetimibe-simvastatin: 20-80mg	Exclusions:
Pravastatin: 40-80mg	 Pregnancy/IVF
Lovastatin: 40mg	 ESRD or dialysis
Fluvastatin 40-80mg	– Cirrhosis
Pitavastatin 2-4mg	 Myalgia, myositis, myopathy, or rhabdomyolysis
ICD-10 codes for myalgia/myositis/myopathy:	 Dispensed a Dementia medication
G72.0; G72.2; G72.9; M60.80-M60.812; M60.819;	 Members in hospice or using hospice services anytime during the measurement year.
M60.821-M60.822; M60.829; M60.831-M60.832;	 Members receiving palliative care during the measurement year.
M60.839; M60.841-M60.842; M60.849; M60.851-	
M60.852; M60.859; M60.861-M60.862;M60.869;	
M60.871-M60.872; M60.879; M60.88-M60.89;	
M60.9; M62.82; M79.1-M79.12; M79.18	



Cardiovascular

Measure	Screening, test, care needed
Cardiac Rehabilitation 18 years and older	Attended cardiac rehabilitation following a qualifying cardiac event (myocardial infarction, percutaneous coronary
	intervention, coronary artery bypass grafting, heart and heart/lung transplantation or heart valve repair/replacement).
<u>CPT codes</u> : 93797-93798	Four rates are reported:
	 Initiation: percentage of members who attended 2 or more sessions of cardiac rehabilitation within 30 days after a qualifying
	event.
	• Engagement 1: percentage of members who attended 12 or more sessions of cardiac rehabilitation within 90 days after a
	 qualifying event. Engagement 2: percentage of members who attended 24 or more sessions of cardiac rehabilitation within 180 days after a
	qualifying event
	Achievement: percentage of members who attended 36 or more sessions of cardiac rehabilitation within 180 days after a qualifying event.
	<i>Exclusion:</i> Members in hospice or using hospice services anytime during the measurement year.
Diabetes	
*Comprehensive Diabetes Care has been revised	1. <u>Blood Pressure Control for Patients with Diabetes (BPD)</u> examines members 18-75 years of age with
into three standalone Measures	diabetes (types 1 and 2) whose blood pressure (BP) was controlled (<140/90 mm Hg) during the
Adults ages 18-75 with diagnosis of diabetes	measurement year. (most recent date and result from 2021)
(type 1 <u>or</u> type 2) <u>or</u> who have been	2. <u>Hemoglobin A1c Control for Patients with Diabetes (HBD)</u> examines members 18-75 years of age with
prescribed insulin or	Diabetes (type 1 and 2) whose Hb A1c was at the following levels during the measurement year. (Most
hypoglycemic/antihyperglycemics.	recent result from 2021)
	HbA1c control (<8.0%) HbA1c poor control (>9.0%)
ICD-10 Codes to identify Diabetes:	
E10.10-E10.9; E11.00-E11.9; E13.00-E13.9	3. <u>Eye Exam for Patients with Diabetes (EED)</u> examines members 18-75 years of age with diabetes (types 1
CPT II codes for Diabetic retinal Screening:	and 2) who had a retinal eye exam. (Most recent date and result from 2020 or 2021 or bilateral eye
3072F; 2022F; 2023F; 2024F;	enucleation anytime through 2021).
2025F; 2026F; 2033F	Exclusions:
	Members without a diagnosis of diabetes in any setting, but did have:
CPT II Codes for BP values:	Gestational Diabetes
Systolic Less than 140: 3074F, 3075F Systolic Greater	Steroid Induced Diabetes or
than/Equal to 140: 3077F Diastolic Less than 80: 3078F	Polycystic ovarian syndrome (during 2020 or 2021)
Diastolic 80-89: 3079F	Members in Hospice or using Hospice services during the measurement year.
Diastolic Greater than/Equal to 90: 3080F	Members receiving palliative care during the measurement year.

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Measure	Screening test or care needed
Kidney Health Evaluation for Patients with Diabetes	 Diagnosis of diabetes (type 1 and type 2) Received a kidney health evaluation, defined by:
Adults ages 18-85	• an estimated glomerular filtration rate (eGFR)
<u>CPT codes</u> : eGFR: 80047-80048; 80050; 80053; 80069; 82565 uACR: 82043; 82570	 A urine albumin-creatinine ratio (uACR) Exclusions: Members in hospice or using hospice services anytime during the measurement year Members receiving palliative care during the measurement year. ESRD Dialysis
Statin Therapy for Patients with Diabetes	Identified as having diabetes and do not have ASCVD (clinical atherosclerotic cardiovascular disease) who met the following criteria:
Adults ages 40-75	Two rates are reported:
ICD-10 codes for myalgia, myositis, myopathy: G72.0; G72.2; G72.9; M60.80-M60.812; M60.819; M60.821-M60.822; M60.829; M60.831-M60.832; M60.839; M60.841- M60.842; M60.849; M60.851- M60.852; M60.859; M60.861-M60.862;M60.869; M60.871-M60.872; M60.879; M60.88-60.89; M60.9; M62.82; M79.1-M79.12; M79.18	 Received Statin Therapy: Members who were dispensed at least one statin medication of any intensity during the measurement year (2021). Statin Adherence 80%: Members who remained on a statin medication of any intensity for at least 80% of the treatment period (from prescription date through end of year).
	 Myalgia, myositis, myopathy, or rhabdomyolysis (in 2021) Any of the following (in 2020 or 2021): Polycystic ovarian syndrome; Pregnancy/IVF; Prescribed clomiphene; ESRD or dialysis; Cirrhosis Members in hospice or using hospice services anytime during the measurement year Members receiving palliative care during the measurement year.

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Musculoskeletal				
Measure	Screening test or care needed			
Osteoporosis Screening in Older Women Women ages 65-75	• Received one or more osteoporosis screening tests between their 65 th birthday and December 31 st of the measurement year (2021).			
Women ages 05 75	Exclusions:			
<u>CPT codes</u> : 76977; 77078; 77080-77081; 77085	History of osteoporosis medication therapy			
	Filled prescription for medication to treat osteoporosis			
	 Members in hospice or using hospice services anytime during the measurement year 			
	Members receiving palliative care during the measurement year.			
Osteoporosis Management in Women who had				
a Fracture	Suffered a fracture and had one of the following in the 6 months after the fracture:			
Women ages 67-85	A bone mineral density (BMD) test			
<u>CPT Codes to identify BMD test</u> : 76977; 77078; 77080-77081; 77085-77086	Or A prescription for a drug to treat osteoporosis			
HCPCS codes for osteoporosis meds: J0897; J1740; J3110; J3489	 Exclusions: Members in hospice or using hospice services anytime during the measurement year 			
Use of Imaging Studies for Low	Primary diagnosis of low back pain who			
Back Pain <mark>(Revised)</mark>	• <u>did not</u> have an imaging study (x-ray, MRI, CT) within 28 days of the diagnosis.			
Adults ages 18- 75	 A <u>higher score</u> indicates <u>appropriate treatment</u> of low back pain 			
	Exclusions: An imaging study in the presence of low back pain is considered clinically indicated in patients with a diagnosis of:			
ICD-10 Codes to identify Uncomplicated Low Back Pain: M47.26-M47.28; M47.816-M47.898; M48.06-M48.08; M51.16-M51.17; M51.26- M51.87; M53.2X6-M53.2X8- M53.88; M54.16-M54.9; M99.03-M99.84 S33.100A-	Lumbar surgerySpondylopathyFragility fracturePalliative care/Advanced illness frailtyOsteoporosisCancerRecent TraumaIV Drug UseNeurologic ImpairmentProlonged Use of CorticosteroidsMajor Organ TransplantSpinal InfectionHIV			
S33.9XXA; S39.002A-S39.92XS	Members in hospice or using hospice services anytime during the measurement year			



Behavioral Health

Measure	Screening test or care needed			
Follow-up Care for Children Prescribed	 An initial prescription for ADHD medication (or first fill in >120 days) 			
ADHD Medication	Remained on the medication			
	Had appropriate follow up care visits			
Ages 6-12 years				
	Two rates are reported:			
	1. Initiation Phase:			
	 one follow-up visit with a prescribing practitioner within 30 days 			
	2. Continuation and Maintenance Phase:			
	 remained on the medication for at least 210 days and 			
	had two additional visits with a practitioner within 270 days			
	(9 months after the Initiation Phase ended).			
	 Exclusions: Members in hospice or using hospice services anytime during the measurement year. 			
	 Members with a diagnosis of narcolepsy anytime during their history through the measurement year. 			
Metabolic Monitoring for Children and	• At least 2 antipsychotic prescriptions (same or different medications) on different dates during the			
Adolescents on antipsychotics	measurement year (2021)			
Children/Adolescents ages 1-17	 Blood glucose <u>or</u> HbA1c test during the measurement year (2021) 			
	and			
	LDL-C <u>or</u> cholesterol test during the measurement year (2021)			
CPT Codes to identify cholesterol tests				
other than LDL: 82465; 83718; 83722; 84478	<i>Exclusion:</i> Members in hospice or using hospice services anytime during the measurement year.			
Antidepressant Medication Management	Were treated with antidepressant medication			
	Had a diagnosis of major depression and			
Adults ages 18 and older	Remained on antidepressant medication treatment.			
	Two rates are reported:			
ICD-10 Codes to identify Major Depression:	 Effective acute phase: remained on an antidepressant medication for at least 84 days (12weeks) Effective continuation phase: remained on an antidepressant medication for at least 180 days (6months) 			
F32.0-F32.4; F32.9; F33.0- F33.3; F33.41;				
F33.9	<i>Exclusion:</i> Members in hospice or using hospice services anytime during the measurement year.			



Behavioral Health	
Measure	Screen, Test, care needed
Adherence to Antipsychotic Medications for Individuals with Schizophrenia Ages 18 and older	 Diagnosis of Schizophrenia/schizoaffective disorder Dispensed an antipsychotic medication <u>and r</u>emained on the medication for at least 80% of their <i>treatment period</i> (days between the earliest prescription fill in 2021 and the end of the year) <i>Exclusion:</i> Members in hospice or using hospice services anytime during the measurement year.
Diabetes Screening for People with Schizophrenia or Bipolar Disorder Who are Using Antipsychotic Medications Adults ages 18-64	 Diagnosis of Schizophrenia, Schizoaffective Disorder or Bipolar Disorder Dispensed an Antipsychotic medication on an ambulatory basis Diabetes screening (glucose or HbA1c) test during the measurement year (2021)
ICD-10 Codes to identify diagnosis: Bipolar: F30.10- F30.13; F30.2-F30.4; F30.8- F30.9; F31.0; F31.10-F31.13; F31.2; F31.30-F31.32; F31.4-F31.5; F31.60- F31.64; F31.70-F31.78; F31.81; F31.89; F31.9 Schizophrenia: F20.0-F20.3; F20.5; F20.81; F20.89; F20.9; F25.0-F25.1; F25.8- F25.9 Diabetes Monitoring for People with Diabetes and Schizophrenia Adults ages 18-64	CPT Codes to Identify Diabetes Screening: Glucose tests: 80047, 80048, 80050, 80053, 80069, 82947, 82950, 82951 HbA1c tests: 83036,83037 Exclusion: Members in hospice or using hospice services anytime during the measurement year. • Diagnosis of Schizophrenia/schizoaffective disorder and Diabetes • HbA1c test during the measurement year (2021) and LDL-C test (direct or calculated) during the measurement year (2021) Exclusion: Members in hospice or using hospice services anytime during the measurement year (2021)
Cardiovascular Monitoring for People with Cardiovascular Disease and Schizophrenia Adults ages 18-64	 Diagnosis of Schizophrenia/schizoaffective disorder <u>and</u> Cardiovascular Disease LDL-C test (direct or calculated) during the measurement year (2021) <u>CPT Codes to Identify LDL-C Screening</u>: 80061; 83700; 83701; 83704; 83721
	<i>Exclusion:</i> Members in hospice or using hospice services anytime during the measurement year.



Measure	Screening, Test, Care Needed
Follow-Up After Emergency Department Visit for Substance Use	ED visit with principal diagnosis of substance use disorder SUD) or any diagnosis of drug overdose, for which there was a follow up.
Revised measure name from Follow Up After Emergency Department Visit for Alcohol and other Drug Abuse or	Two rates are reported: 1. Follow-up visit within 7days of the ED visit (8 total days)
Dependence)	2. Follow-up visit within 30 days of the ED visit (31 total days)
	<i>Exclusion:</i> Members in hospice or using hospice services anytime during the measurement year.
Ages 13 and older	
Follow-up After Hospitalization for mental Illness	 Hospitalized for treatment of selected mental illness or intentional self-harm <u>and</u>
Ages 6 and over	 One follow-up outpatient visit, intensive outpatient encounter, or partial hospitalization with a mental health provider.
	Two rates are reported:
	1. Follow-up visit within 7days of discharge
	2. Follow-up visit within 30 days of discharge
	<i>Exclusion:</i> Members in hospice or using hospice services anytime during the measurement year.
Follow-Up After High-Intensity Care for	Acute inpatient hospitalization, residential treatment, or detoxification visit
Substance Use Disorder	Diagnosis of substance use disorder
	Follow-up visit or event with any practitioner for a principal diagnosis of substance use disorder
Ages 13 and older	Two rates are reported:
	1. Follow-up within 7 days after the visit or discharge
	2. Follow-up within 30 days after the visit or discharge
	Exclusion: Members in hospice or using hospice services anytime during the measurement year.
Pharmacotherapy for Opioid Use Disorder	Diagnosis of opioid use disorder
	 Dispensed an opioid use disorder treatment medication (e.g., Naltrexone, Buprenorphine)
Ages 16 and older	Taken for 180 days
	<i>Exclusion:</i> Members in hospice or using hospice services anytime during the measurement year.



Care Coordination				
Measure	Screen, Test, Care Needed			
Follow-Up After ED Visit for People with Multiple High-Risk Chronic Conditions	 ED Visit Multiple (2 or more different) high-risk chronic conditions (e.g., COPD/asthma; dementia; CKD; major depression; heart failure; MI; atrial fibrillation; stroke) 			
Ages 18 and older	Follow-Up service within 7 days of the ED visit			
	Exclusion: Members in hospice or using hospice services anytime during the measurement year.			
Transitions of Care	Documentation in the PCP record of the following in 2021:			
Adults ages 18 and older	Notification of Inpatient Admission on the day of admission through 2 days after			
	Receipt of Discharge Information on the day of discharge through 2 days after			
CPT codes for Transitional Care	Patient Engagement After Inpatient Discharge (e.g., office visits, home visits, telehealth) provided within 30 days			
Management Services and Medication	after discharge.			
Reconciliation: 99483, 99495, 99496, 1111F	 Medication Reconciliation conducted by a prescribing practitioner, clinical pharmacist or registered nurse on the date of discharge through 30 days after discharge (documentation of review of <u>both</u> a list of the member's current outpatient medications and the discharge medications, or notation that no medications were prescribed upon discharge). 			
	<u>Exclusions:</u> Members in Hospice or using Hospice services during the measurement year are also excluded.			
Overuse/Appropriateness				
Measure	Screen, Test, care needed			
Risk of Continued Opioid Use	A new episode of opioid use that puts them at risk for continued opioid use			
Ages 18 and older	Two rates are reported: 1. The percentage of members with at least 15 days of prescription opioids in a 30-day period 2. The percentage of members with at least 31 days of prescription opioids in a 62-day period			
	NOTE: A lower rate indicates better performance.			
	<i>Exclusion:</i> Members in hospice or using hospice services anytime during the measurement year.			



Overuse/Appropriateness			
Measure	Screen, Test, care needed		
Use of Opioids at High Dosage Ages 18 and older	 Received prescription opioids at a high dosage (average morphine milligram equivalent dose [MME] ≥90mg) for ≥15 days during measurement year (2021) 		
	NOTE: Reported as the rate per 1,000. A <i>lower</i> rate indicates better performance. Exclusion: Members in hospice or using hospice services anytime during the measurement year.		
Use of Opioids from Multiple Providers	Received prescription opioids for ≥15 days during 2021		
Ages 18 and older	Three rates are reported: Above prescriptions received from and/or filled at:		
	 Multiple Prescribers (four or more different prescribers) Multiple Pharmacies (four or more different pharmacies) Multiple Prescribers and Multiple Pharmacies (<i>both</i> four or more prescribers <u>and</u> four or more pharmacies) 		
	<i>Exclusion:</i> Members in hospice or using hospice services anytime during the measurement year.		
Potentially Harmful Drug- Disease Interactions in Older Adults	 Evidence of an underlying disease, condition, or health concern Dispensed an ambulatory prescription for a potentially harmful medication, concurrent with or after the diagnosis 		
Ages 65 and older	Three rates are reported:		
NOTE: A <i>lower</i> rate represents <i>better performance</i> for	 A history of falls and a prescription for antiepileptics, antipsychotics, benzodiazepines, non-benzodiazepine hypnotics, or antidepressants (SSRI's, tricyclic antidepressants, SNRI's) Dementia and a prescription for antipsychotics, benzodiazepines, non-benzodiazepine hypnotics, tricyclic antidepressants, or anticholinergic agents. Chronic kidney disease and a prescription for Cox-2 Selective NSAIDs or non-aspirin NSAIDs 		
<i>all</i> rates.	 Exclusion: Members in hospice or using hospice services anytime during the measurement year. Members receiving palliative care during the measurement year. Members with a diagnosis of psychosis, schizophrenia, schizoaffective disorder, or bipolar disorder on or between January 1, 2020, to December 1, 2021. 		



Overuse/Appropriateness		
Measure	Screen, test, care needed	
Use of High-Risk Medications in Older Adults	 Received at least <u>two dispensing events</u> for high-risk medications to avoid from the same drug class (except for appropriate diagnoses). 	
Ages 67 and older		
	 Exclusion: Members in hospice or using hospice services anytime during the measurement year. 	
NOTE: A <i>lower</i> rate represents <i>better performance</i> .	Members receiving palliative care during the measurement year.	

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Measure	Screen, tests, care needed
Use of First-Line Psychosocial Care for Children and Adolescents on Antipsychotics Ages 1-17 years	 A <i>new</i> prescription (4-month negative medication history) for an antipsychotic medication Documentation of psychosocial care as first-line treatment during the period from 90 days prior to 30 days after the prescription fill.
<u>Codes to identify psychosocial care: CPT:</u> 90832-90834; 90836-90840; 90845-90847; 90849; 90853; 90875-90876; 90880	 Exclusions: At least one acute inpatient encounter, or at least 2 visits in an outpatient, intensive outpatient or partial hospitalization setting with a diagnosis of <i>schizophrenia, schizoaffective disorder, bipolar disorder, other psychotic disorder, autism, or other developmental disorder</i> during the measurement year (2021) Members in hospice or using hospice services anytime during the measurement year.
Adult Access to Preventive/ Ambulatory Health Services Adults ages 20 and over	 An ambulatory or preventive care visit in the measurement year (2021) <i>for Medicaid and Medicare members</i> in the measurement year or two years prior (2019-2021) <i>for Commercial members</i> <i>Exclusion:</i> Members in hospice or using hospice services anytime during the measurement year.



Access/Availability of Care			
Measure	Screen, test, care needed		
*Prenatal/Postpartum Care Pregnant Women who delivered a live infant between <u>October 8, 2020 and</u> <u>October 7, 2021</u>	 Prenatal visit within first trimester (on or before the enrollment start date or within 42 days of enrollment) Postpartum visit on or between 7 and 84 days after delivery Exclusion: Members in hospice or using hospice services anytime during the measurement year. 		
Initiation and Engagement of Substance Use Disorder Treatment	A new episode (194 days negative diagnosis history) of substance use disorder (SUD) that result in treatment initiation and engagement		
Ages 13 and older <u>Codes to identify AOD visits</u> : 98960- 98962; 99078; 99201-99205; 99211- 99215; 99241-99245; 99341-99345; 99347- 99350; 99384-99387; 99394-99397; 99401- 99404; 99408-99409; 99411-99412; 99483; 99510	 Initiation of SUD treatment within 14 days of the diagnosis through an inpatient SUD admission, outpatient visit, intensive outpatient encounter or partial hospitalization, telehealth, or medication treatment. Engagement of SUD treatment evidence of treatment engagement within 34 days of the initiation. Exclusion: Members in hospice or using hospice services anytime during the measurement year.		

Measures Collected through CAHPS Survey (Consumer Assessment of Healthcare Providers and Systems)			
Measure	Screen, test care needed		
Medical Assistance with Smoking Cessation	 Received <u>advice to quit</u> during the measurement year (2021). Discussed or were <u>recommended cessation medications</u> during the measurement year (2021). 		
Current Smoker/Tobacco user ages 18 and older	Discussed or were <i>provided cessation methods or strategies</i> during the measurement year (2021).		
Flu Vaccinations for Adults (ages 18-64) Flu Vaccinations for Adults (ages 65+)	Received an influenza vaccination after July 1, 2021.		
Pneumococcal Vaccination Status for Older Adults	Have <u>ever received</u> one or more pneumococcalvaccinations		
Ages 65 and older			



leasure	Screen, test, care needed
Fall Risk Management Adults ages 65 and older	 Discussing Fall Risk Seen by a practitioner in the past 12months Discussed falls or problems with balance or walking with their current practitioner Managing Fall Risk Had a fall or problems with balance or walking in the past 12months Seen by a practitioner in the past 12months Seen by a practitioner in the past 12months Received a recommendation for how to prevent falls or treat problems with balance or walking from their current practitioner
Management of Urinary Incontinence in Older Adults Adults ages 65 and older	 Discussing Urinary Incontinence Reported having urine leakage in the past 6 months Discussed their urinary leakage problem with a healthcare provider Discussing Treatment of Urinary Incontinence Reported having urine leakage in the past 6 months Discussed treatment options for their current urine leakage problem Impact of Urinary Incontinence Reported having urine leakage in the past 6 months Discussed treatment options for their current urine leakage problem Impact of Urinary Incontinence Reported having urine leakage in the past 6 months Reported having urine leakage in the past 6 months Reported having urine leakage in the past 6 months Reported having urine leakage made them change their daily activities or interfered with their sleep a lot.
Physical Activity in Older Adults Adults ages 65 and older	 Had a doctor's visit in the past 12 months 1. <i>Discussing</i> Physical Activity: Spoke with a doctor or other health provider about their level of exercise or physical activity 2. <i>Advising</i> Physical Activity: Received advice to start, increase or maintain their level of exercise or physical activity



Measures Collected through Electronic Clinical Data Systems (ECDS)		
Measure	Screen, test, care needed	
Childhood Immunization Status	• 4 DTaP, anaphylaxis, or encephalitis due to diphtheria, tetanus or pertussis vaccine (do not count any before 42 days of age)	
Newly Specified for ECDS Reporting	 3 IPV (do not count any before 42 days of age) 1 MMR or history of measles, mumps, and rubella (do not count any before 42 days of age) 	
Children who turn 2 years old during the measurement year	 3 HiB or anaphylaxis to HiB vaccine (do not count any before 42 days of age) 3 Hepatitis B, anaphylaxis due to hepatitis B vaccine, positive serology, or history of hepatitis B 	
measurement year	1 VZV, positive serology, or documented history of chicken pox disease	
	 4 pneumococcal conjugates (do not count any before 42 days of age) 1 Hepatitis A, or documented Hepatitis A illness 	
	• 2 or 3 Rotavirus vaccines-depends on the vaccine administered (do not count any before 42 days of age), or documented anaphylaxis due to the rotavirus vaccine	
	 2 Influenza with different dates of service. One of the two vaccinations can be an LAIV- live attenuated influenza vaccine- if administered on the child's 2nd birthday. (do not count any given prior to 6 months of age) 	
Note: Vaccines must be completed on or before on or before the 2nd birthday	Exclusions: Members in hospice or using hospice services any time during the Measurement Period <u>or</u>	
Documented history of illness, a seropositive test	Any of the following on or before the child's second birthday: – Severe combined immunodeficiency.	
result or anaphylaxis, there must be a note	– Immunodeficiency.	
indicating the date of the event, which must have occurred by the member's second birthday.	 HIV Lymphoreticular cancer, multiple myeloma, or leukemia. 	
	- Intussusception	
Immunizations for Adolescents	1 dose Meningococcal vaccine between the 11thand 13thbirthdays and	
Newly Specified for ECDS Reporting	 1 tetanus, diphtheria toxoids and acellular pertussis (Tdap) vaccine between the 10th and 13th birthdays and 2-dose or 3-dose HPV vaccination series between the 9th and 13thbirthdays 	
Adolescents who turn 13 years old during the measurement year	NOTE: All vaccines must be completed on or before the 13th birthday	
NOTE: This measure includes the Human	Exclusions: Members in hospice or using hospice services anytime during the measurement year	
Papillomavirus Vaccine (HPV) for both males and females.		



Measure	Screen, test care needed
Metabolic Monitoring for Children and Adolescents on Antipsychotics	Children and adolescents 1–17 years of age who had two or more antipsychotic prescriptions and had metabolic testing during the measurement year.
Newly Specified for ECDS Reporting	Three rates are reported:
Children/Adolescents ages 1-17	 Blood glucose or HbA1c test during the measurement year (2021) LDL-C or cholesterol test during the measurement year (2021) The percentage of children and adolescents on antipsychotics who received blood glucose testing. Blood glucose or HbA1c test and LDL-C or cholesterol test during the measurement year (2021). Exclusions: Members in hospice or using hospice services anytime during the measurement year. Members with a diagnosis of narcolepsy any time during the member's history through the end of the Measurement Period (January 1 through December 31, 2021).
Adult Immunization Status	Received recommended routine vaccines:
Adults 19 years of age and older CPT Codes: Influenza: 90655; 90657; 90661; 90673; 90685- 90689 Td or Tdap: 90714-91705; 90718 Zoster: 90736 Pneumococcal: 90732	 Influenza vaccine on or between July 1, 2020 - June 30, 2021 Td or Tdap on or between January 1, 2012-December 31, 2021 Zoster (one dose of herpes zoster live vaccine or two doses of the herpes zoster recombinant vaccine, at least 28 days apart anytime on or after the member's 50th birthday Pneumococcal vaccine on or after the member's 60th birthday Exclusions: Members in hospice or using hospice services anytime during the measurement year. Members with bone marrow transplant or on active chemotherapy during the measurement year (2021) Members with a history of immunocompromising conditions, cochlear implants, anatomic or functional asplenia, sickle cell anemia and HB-S disease, or cerebrospinal fluid leaks anytime during the members history through the en of the measurement year (2021).



Measures Collected through Electronic Clinical Data Systems (ECDS)		
Measure	Screen, test, or care needed	
Prenatal Immunization Status Deliveries in the measurement year (2021)	 Received recommended vaccines: Influenza (between July 1, 2020 and delivery date in 2021) Tetanus, diphtheria toxoids and acellular pertussis (Tdap) during the pregnancy (including on the delivery date) Exclusions: Deliveries in which members were in hospice or using hospice services any time during the Measurement Period. Deliveries that occurred at less than 37 weeks gestation. 	
Prenatal Depression Screening and Follow- up	 Screened for clinical depression while pregnant. If screening is positive, received follow-up care. Two rates are reported: Depression Screening: Screened for clinical depression during pregnancy using a standardized instrument. Follow up on Positive Screen: Received follow-up care within 30 days of a positive depression screening finding. Exclusions: Deliveries in which members were in hospice or using hospice services any time during the Measurement Period. Deliveries that occurred at less than 37 weeks gestation. 	
Post-Partum Depression Screening and Follow-up	 Screened for clinical depression postpartum. If screening is positive, received follow-up care. Two rates are reported: Depression Screening: Screened for clinical depression using a standardized instrument during the postpartum period (7-84 days following date of delivery). Follow-up on Positive Screen: Received follow-up care within 30 days of a positive depression screen finding. Exclusions: Deliveries in which members were in hospice or using hospice services any time during the Measurement Period. 	



Measures Collected through Electronic Clinical Data Systems (ECDS)		
Measure	Screen, test, care needed	
Depression Screening and Follow-Up for Adolescents and Adults Ages 12 years and older	 Screened for depression using a standardized tool If screening was positive, received follow-up care within 30 days (e.g., an outpatient or telephone follow-up visit; a depression case management encounter; a behavioral health encounter; dispensed antidepressant medication) 	
	 Exclusions: Members in hospice or using hospice services anytime during the measurement year. Members with bipolar disorder in the prior measurement year (2020). Members with depression that starts in the prior year (2020) through the measurement year (2021). 	
Unhealthy Alcohol Use Screening and Follow-Up Adults ages 18 and older	 Screened for unhealthy alcohol use using a standardized tool (AUDIT, Single-Question Screen) If screening was positive, received brief counseling or other follow-up care within 2 months (e.g., feedback on alcohol use and harms; identification of high-risk situations for drinking and coping strategies; development of a personal plan to reduce drinking; documentation of receiving alcohol misuse treatment). 	
	Exclusions: Members in hospice or using hospice services anytime during the measurement year	
Depression Remission or Response for Adolescents and Adults Ages 12 and older ICD-10 Codes to identify Major Depression and Dysthymia:	 Diagnosis of major depression or dysthymia An elevatedPHQ-9 (total score >9) Evidence of response or remission within 4-8 months of the elevated score Four rates are reported: 1. ECDS Coverage: Health plan can receive any electronic clinical quality data 	
F32.0-F32.5; F32.9; F33.0-F33.3; F43.40-F43.42; F33.9; F34.1 CPT Codes to identify Interactive Outpatient Encounters:	 Follow-Up PHQ-9 within 4-8 months of the elevated score Depression Remission: PHQ-9 score of <5 Depression Response: a PHQ-9 score reduction of at least 50% 	
90791; 90792; 90832; 90834; 90837; 98960-98962; 99078; 99201-99205; 99211- 9215;99217-99220; 99241-99245; 99341-99345;99347-99350; 99381- 99387; 99391-99397;99401-99404; 99411-99412; 99483; 99510	 Exclusions: Bipolar disorder; Personality disorder; Psychotic disorder, Pervasive Developmental disorder Members in hospice or using hospice services anytime during the measurement year. 	

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Measures Collected through Electronic Clinical Data Systems (ECDS)		
Measure	Screen, test, or care needed	
Utilization of the PHQ-9 to Monitor Depression Symptoms for Adolescents and Adults	 Diagnosis of major depression or dysthymia Had a PHQ-9 or PHQ-A tool administered during an outpatient encounter at least once during a four-month period 	
Ages 12 and older		
ICD-10 Codes to identify Major Depression and Dysthymia:	 Two rates are reported: Inclusion in ECDS Rate: The percentage of members 12 and older with a diagnosis of major depression or dysthymia, who are included in an electronic clinical data system (ECDS). 	
F32.0-F32.5; F32.9; F33.0-F33.3; F43.40-F43.42; F33.9; F34.1 CPT Codes to identify Interactive Outpatient Encounters:	2. Utilization of PHQ-9 Rate: The percentage of PHQ utilization. Members with a diagnosis of major depression or dysthymia who are covered by an ECDS and, if they had an outpatient encounter, have a PHQ-9 score present in their record.	
90791; 90792; 90832; 90834; 90837; 98960-98962; 99078; 99201-99205; 99211-99215;99217- 99220; 99241-99245; 99341-99345;99347- 99350; 99381-99387; 99391-99397; 99401- 99404; 99411-99412; 99483; 99510	 Exclusions: Bipolar disorder; Personality disorder; Psychotic disorder, Pervasive Developmental disorder Members in hospice or using hospice services anytime during the measurement year. 	
LOINC Codes to identify PHQ administered: 44261-6; 89204-2		