

HEDIS^{®1} for Measurement Year 2023
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
<p><u>Topical Fluoride for Children (TFC)</u></p> <p>Members 1-4 years of age</p> <p>Note: First year measure</p> <p><i>*This measure has been included in and/or adapted for HEDIS with the permission of the Dental Quality Alliance (DQA) and American Dental Association (ADA).</i></p>	<ul style="list-style-type: none"> Members who received at least two fluoride varnish applications during the measurement year (2023). <p>Exclusions:</p> <ul style="list-style-type: none"> Members in hospice or using hospice services any time during the measurement year. Members who died any time during the measurement year.
<p><u>Oral Evaluation, Dental Services (OED)</u></p> <p>Members 21 years of age and younger</p> <p>Note: First year measure</p>	<ul style="list-style-type: none"> Members who received a comprehensive or periodic oral evaluation with a dental provider during the measurement year (2023). <p>Exclusions:</p> <ul style="list-style-type: none"> Members in hospice or using hospice services any time during the measurement year. Members who died any time during the measurement year.
<p><u>Deprescribing of Benzodiazepines in Older Adults (DBO)</u> *Medicare</p> <p>Adults 67 years of age and older</p> <p>Note: First year measure</p>	<ul style="list-style-type: none"> Members who were dispensed benzodiazepines and experienced a 20% decrease or greater in benzodiazepine dose (diazepam milligram equivalent [DME] dose) during the measurement year (2023). <p>Exclusions:</p> <ul style="list-style-type: none"> 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 Members who died any time during the measurement year.

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New Measures	
Measure	Screening, Test, or Care Needed
<p><u>Emergency Department Visits for Hypoglycemia in Older Adults with Diabetes (EDH) *Medicare</u></p> <p>Members 67 years of age or older</p> <p>Note: First year measure</p>	<ul style="list-style-type: none"> Members with diabetes (types 1 and 2) who had an ED visit for hypoglycemia during the measurement year (2023). <p>Two rates are reported:</p> <ol style="list-style-type: none"> Members with diabetes (types 1 and 2) who had an ED visit for hypoglycemia during the measurement year. Members with diabetes (types 1 and 2) who had at least one dispensing event of insulin within each 6-month treatment period from July 1 of the year prior to the measurement year through December 31 of the measurement year. <p>Exclusions:</p> <ul style="list-style-type: none"> Members who do not have a diagnosis of diabetes in any setting, during the measurement year or the year prior to the measurement year and who had a diagnosis of polycystic ovarian syndrome, gestational diabetes, or steroid-induced diabetes, in any setting during the measurement year or the year prior to the measurement year. Members in hospice or using hospice services during the measurement year.
<p><u>Social Need Screening and Intervention (SNS -E)</u></p> <p>Ages: ≤ 17 – 65 years</p> <p>Note: First year measure</p>	<ul style="list-style-type: none"> Members who were screened, using prespecified instruments, at least once during the measurement year (2023) for unmet food, housing, and transportation needs, and received a corresponding intervention within one month if they screened positive. Interventions may include any of the following intervention categories: assistance, assessment, counseling, coordination, education, evaluation of eligibility, provision, or referral <p>Exclusions:</p> <ul style="list-style-type: none"> Members in hospice or using hospice during the measurement year. Medicare members 66 years of age and older by the end of the measurement year who meet either of the following: <ol style="list-style-type: none"> Enrolled in an Institutional SNP (I-SNP) during the measurement year. Living long-term in an institution during the measurement year, as identified by the LTI flag in the Monthly Membership Detail Data File. (Use the run date of the file to determine if a member had an LTI flag during the measurement year.

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Prevention and Screening	
Measure	Screening, Test, or Care Needed
<p>*<u>Lead Screening in Children (Medicaid only)</u></p> <p>Children who turn 2 years old during the measurement year (2023).</p> <p>CPT Code: 83655</p>	<ul style="list-style-type: none"> • At least one capillary or venous lead blood test by their 2nd birthday. <p>Documentation in the record must include both of the following:</p> <ol style="list-style-type: none"> 1. Date the test was performed 2. The result or finding <p>Exclusions:</p> <ul style="list-style-type: none"> ➤ Members in hospice or using hospice services any time during the measurement period ➤ Members who died any time during the measurement year.
<p>*<u>Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents</u></p> <p>Members 3-17 years of age, who had an outpatient visit with a PCP or OB/GYN during the measurement year (2023) and had evidence of the following documented:</p> <ul style="list-style-type: none"> • BMI percentile • Counseling for Nutrition • Counseling for Physical Activity <p>ICD-9 Codes: BMI percentile: Z68.51-Z68.54 Counseling for nutrition: Z71.3 Counseling for physical activity: Z02.5; Z71.82</p> <p>CPT Codes Counseling for nutrition: 97802-97804</p>	<p>BMI Percentile documentation must include date, height, weight and:</p> <ul style="list-style-type: none"> • BMI percentile (may be plotted on age-growth chart) • Weight and height must be taken during the measurement year (2023). <p>Counseling for Nutrition documentation must include a note indicating the date and at least one of the following:</p> <ul style="list-style-type: none"> • 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 • Anticipatory guidance for nutrition • Weight or obesity counseling • Referral to WIC <p>Counseling for Physical Activity documentation includes a note indicating the date and at least one of the following:</p> <ul style="list-style-type: none"> • 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 • Member received educational materials on physical activity during a face-to-face visit • Anticipatory guidance specific to the child's physical activity • Weight or obesity counseling <p>✓ Documentation of meeting Developmental Milestones only does not meet HEDIS[®] criteria for Physical Activity Counseling.</p> <p>✓ Services specific to an acute or chronic condition do not count toward the counseling indicators for either nutrition or physical activity.</p> <p>Exclusions:</p> <ul style="list-style-type: none"> ➤ Members in hospice or using hospice services anytime during the measurement year. ➤ Members who have a diagnosis of pregnancy any time during the measurement year. ➤ Members who died any time during the measurement year.

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Prevention and Screening	
Measure	Screening, Test, or Care Needed
<p>*Childhood Immunization</p> <p>Children who turn 2 years old during the measurement year (2023)</p> <p>Vaccines must be completed on or before the 2nd birthday</p> <p>CPT Codes:</p> <p>Dtap CPT: 90697, 90698, 90700, 90723 IPV CPT: 90697, 90698, 90713, 90723 HiB CPT: 90644, 90647, 90648, 90697, 90698, 90748 Pneumococcal Conjugate CPT: 90670 Rotavirus (2 dose) CPT: 90681 Rotavirus (3 dose) CPT: 90680 VZV CPT: 90710, 90716 MMR CPT: 90707; MMRV CPT 90710 Hepatitis A CPT: 90633 Hepatitis B CPT: 90697, 90723, 90740, 90744, 90747, 90748 Influenza CPT: 90655, 90657, 90661, 90673, 90685, 90686, 90687, 90688, 90689 LAIV CPT:90660, 90672*</p>	<ul style="list-style-type: none"> • 4 DTaP or anaphylaxis or encephalitis due to diphtheria, tetanus or pertussis vaccine (do not count any before 42 days of age) • 3 IPV or anaphylaxis due to the IPV vaccine (do not count any before 42 days of age) • 1 MMR, history of measles, mumps, and rubella, or anaphylaxis due to the MMR vaccine (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) • 3 Hepatitis B, anaphylaxis due to hepatitis B vaccine, positive serology, or history of hepatitis B • 1 VZV, anaphylaxis due to the VZV vaccine, positive serology, or documented history of chicken pox disease • 4 Pneumococcal Conjugates or anaphylaxis due to the pneumococcal conjugate vaccine (do not count any before 42 days of age) • 1 Hepatitis A, anaphylaxis due to the hepatitis A vaccine, or documented Hepatitis A illness • 2 or 3 Rotavirus vaccines-depends on the vaccine administered or documented anaphylaxis due to the rotavirus vaccine (do not count any before 42 days of age) • 2 Influenza with different dates of service or anaphylaxis due to the influenza vaccine. One of the two vaccinations can be an LAIV- live attenuated influenza vaccine- if administered on the child’s 2nd birthday. (<i>Do not</i> count any given prior to 6 months of age) <p>Exclusions:</p> <ul style="list-style-type: none"> ➤ Members in hospice or using hospice services any time during the measurement year. ➤ Members who had any of the following on or before their second birthday: <ul style="list-style-type: none"> – Severe combined immunodeficiency – Immunodeficiency – HIV – Lymphoreticular cancer, multiple myeloma, or leukemia – Intussusception – Members who died any time during the measurement year. <ul style="list-style-type: none"> ✓ Parental refusal is <u>not</u> an exclusion ✓ 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. ✓ For 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.

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Prevention and Screening	
Measure	Screening, Test, or Care Needed
<p>*Immunizations for Adolescents</p> <p>Children who turn 13 years old during the measurement year (2023).</p> <p>Note: <i>This measure includes the Human Papillomavirus Vaccine (HPV) for <u>both males and females</u>.</i></p> <p>CPT Codes: Meningococcal CPT- 90619,90733, 90734 Tdap CPT- 90715 HPV-CPT: 90649-90651</p>	<ul style="list-style-type: none"> 1 dose Meningococcal vaccine <u>between the 11th and 13th birthdays</u> or anaphylaxis due to the vaccine anytime on or before the member's 13th birthday and 1 tetanus, diphtheria toxoids and acellular pertussis (Tdap) vaccine <u>between the 10th and 13th birthdays</u> or anaphylaxis or encephalitis due to the vaccine anytime on or before the 13th birthday and 2-dose <u>or 3-dose HPV</u> vaccination series <u>between the 9th and 13th birthdays</u> or anaphylaxis due to the vaccine anytime on or before the 13th birthday <p>✓ All vaccines must be completed on or before the 13th birthday</p> <p>Exclusions:</p> <ul style="list-style-type: none"> ➤ Members in hospice or using hospice services any time during the measurement year. ➤ Members who died any time during the measurement year. <p>✓ Parental refusal is <u>not</u> an exclusion</p> <p>✓ Documentation of "immunizations are up-to-date" is <u>not</u> acceptable.</p> <p>✓ For meningococcal, do not count meningococcal recombinant (serogroup B) (MenB) vaccines.</p> <p>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.</p>
<p>*Cervical Cancer Screening (CCS)</p> <p>Women ages 21-64</p> <p>CPT Codes to identify Cervical Cancer Screening</p> <p>Cervical cytology: 88141-88143; 88147-88148; 88150. 88152,88153; 88164- 88167; 88174-88175</p> <p>HPV tests: 87624-87625</p> <p>Note: <i>Evidence of hrHPV testing within the last 5 years also captures patients who had cotesting; therefore, additional methods to identify cotesting are not necessary.</i></p>	<ul style="list-style-type: none"> A PAP test (cervical cytology) within the last 3 years (2021-2023) for women ages 21-64 Cervical high-risk human papillomavirus (hrHPV) testing within the last 5 years (2019-2023) for women ages 30-64. Cervical cytology/high-risk human papillomavirus (hrHPV) co-testing within the last 5 years (2019-2023) for women ages 30-64. <p>Documentation in the record must include both of the following:</p> <ul style="list-style-type: none"> Date the test was performed The result or finding <p>Exclusions:</p> <ul style="list-style-type: none"> ➤ Members in hospice or using hospice services or receiving palliative care anytime during the measurement year. ➤ Documentation of hysterectomy with no residual cervix, cervical agenesis or acquired absence of cervix: ➤ Members who died during the measurement year.

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Prevention and Screening	
Measure	Screening, Test, or Care Needed
<p>*Colorectal Cancer Screening (COL)</p> <p>Adults ages 45-75</p> <p>CPT Codes for Colorectal Cancer Screening:</p> <p>FOBT: 82270; 82274</p> <p>FIT-DNA: 81528</p> <p>Flexible Sigmoidoscopy: 45330-45335; 45337-45342; 45346,45347; 45349,45350</p> <p>CT Colonography: 74261-74263</p> <p>Colonoscopy: 44388-44394; 44397; 44401-44408; 45355; 45378-45393; 45398</p>	<ul style="list-style-type: none"> • One or more of the following screenings: <ul style="list-style-type: none"> – Fecal occult blood test (iFOBT or gFOBT) annually in the measurement year (2023) – Flexible sigmoidoscopy in the past 5 years (2019 – 2023) – Colonoscopy in past 10 years (2014-2023) – CT Colonography (e.g., virtual colonoscopy) in the past 5 years (2019-2023) – FIT-DNA (e.g., Cologuard) test in the past 3 years (2021-2023) <p>Exclusions:</p> <ul style="list-style-type: none"> ➤ Diagnosis of colorectal cancer or total colectomy any time during the member’s history through the measurement year. ➤ Members in hospice or using hospice services or receiving palliative care anytime during the measurement year. ➤ Members who died any time during the measurement year. <p>✓ Do <i>not count</i> digital rectal exams (DRE), FOBT tests performed in an office setting or performed in a sample collected via DRE.</p>
<p>Care for Older Adults (COA) *Medicare</p> <p>Adults 66 years of age and older</p> <p>CPT Codes for COA:</p> <p>Medication Review: 1160F 90863, 99483, 99605, 99606</p> <p>Medication List: 1159F</p> <p>Transition Care Management: 99495, 99496</p> <p>Functional Status Assessment: 1170F, 99483</p> <p>Pain Assessment: 1125F, 1126F</p>	<ul style="list-style-type: none"> • Members who had each of the following during the measurement year (2023) <ul style="list-style-type: none"> • Medication review-A review of all a member’s medications, including prescription medications, OTC medications and herbal or supplemental therapies. • Functional Status Assessment -A complete functional assessment and the date when it was performed. • Pain Assessment- Notation of a pain assessment and the date it was performed. <p>✓ Do not include pain assessments performed in an acute inpatient setting</p> <p>✓ The Functional Status Assessment and Pain Assessment indicators do not require a specific setting; therefore, services rendered during telephone visit, e-visit, or virtual check-in meet criteria.</p> <p>✓ Notation alone of a pain management or treatment plan does not meet criteria.</p> <p>Exclusions:</p> <ul style="list-style-type: none"> ➤ Members in hospice or using hospice services any time during the measurement year. ➤ Members who died any time during the measurement year.

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Respiratory Conditions

Measure	Screening, Test, or Care Needed
<p><u>Appropriate Testing for Pharyngitis (CWP)</u></p> <p>Ages 3 years and older</p> <p><u>ICD-10 Codes to Identify Pharyngitis:</u> J02.0; J02.8-J02.9; J03.00-J03.01; J03.80-J03.81; J03.90-J03.91</p>	<ul style="list-style-type: none"> • Diagnosis of pharyngitis • Prescribed an antibiotic <p style="text-align: center;">and</p> <ul style="list-style-type: none"> • Received a group A Streptococcus (strep) in the 7-day period from 3 days prior to, through 3 days after the episode date. <p><u>Exclusions:</u></p> <ul style="list-style-type: none"> ➤ Members in hospice or using hospice services anytime during the measurement year. ➤ Members who died any time during the measurement year.
<p><u>Use of Spirometry Testing in the Assessment and Diagnosis of COPD (SPR)</u></p> <p>Adults 40 years and older</p> <p><u>CPT Codes for Spirometry Testing:</u> 94010; 94014-94016; 94060; 94070; 94375; 94620</p>	<ul style="list-style-type: none"> • Diagnosis of a new, or newly active COPD <u>between July 1, 2022 - June 30, 2023</u> <p style="text-align: center;">and</p> <ul style="list-style-type: none"> • Spirometry testing to confirm the diagnosis in the 2 years <u>prior through 6 months after the diagnosis</u> <p><u>Exclusions:</u></p> <ul style="list-style-type: none"> ➤ Members in hospice or using hospice services anytime during the measurement year. ➤ Members who died any time during the measurement year.
<p><u>Pharmacotherapy Management of COPD Exacerbation (PCE)</u></p> <p>Adults 40 years and older</p> <p><u>ICD-10 Codes to identify COPD:</u> J44.0; J44.1; J44.9</p>	<ul style="list-style-type: none"> • Discharged from an acute inpatient admission or an ED visit with a primary diagnosis of COPD <u>on or between January 1 – November 30, 2023</u> <p style="text-align: center;">And</p> <ul style="list-style-type: none"> • Prescribed appropriate medications (or already had an active prescription for): <ol style="list-style-type: none"> 1. A systemic corticosteroid within 14 days of the event 2. A bronchodilator within 30 days of the event <p><u>Exclusions:</u></p> <ul style="list-style-type: none"> ➤ Members in hospice or using hospice services anytime during the measurement year. ➤ Members who died any time during the measurement year.

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Respiratory Conditions	
Measure	Screening, Test, or Care Needed
<p><u>Asthma Medication Ratio (AMR)</u></p> <p>Ages 5 – 64</p> <p><u>ICD10 Codes to Identify Asthma</u> J45.21, J45.22, J45.30, J45.31, J45.32, J45.40, J45.41, J45.42, J45.50, J45.51, J45.52, J45.901, J45.902, J45.909, J45.991, J45.998</p>	<ul style="list-style-type: none"> Members identified as having persistent asthma and had a ratio of controller medications to total asthma medications of 0.50 or greater during the measurement year (2023) <p>Exclusions:</p> <ul style="list-style-type: none"> Members who had any diagnosis of the following during the member’s history through December 31 of the measurement year: emphysema, COPD, obstructive chronic bronchitis, chronic respiratory condition due to fumes or vapors, cystic fibrosis, or acute respiratory failure. Members who had no asthma controller or reliever medications prescribed during the measurement year. Members in hospice or using hospice services any time during the measurement year. Members who died any time during the measurement year.
Cardiovascular	
Measure	Screening, Test, or Care Needed
<p><u>Cardiac Rehabilitation (CRE)</u></p> <p>Adults 18 years and older</p> <p><u>CPT codes:</u> 93797-93798</p>	<ul style="list-style-type: none"> Members who 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). <p>Four rates are reported:</p> <ol style="list-style-type: none"> 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. <p>Exclude members who meet any of the following criteria:</p> <ul style="list-style-type: none"> In hospice or using hospice services, receiving palliative care, had PCI, or died any time during the measurement year. Discharged from an inpatient setting with any of the following on the discharge claim, 180 days after the episode date: MI, CABG, heart or heart/lung transplant, heart valve repair or replacement.

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Cardiovascular	
Measure	Screening, Test, or Care Needed
<p>*Controlling High Blood Pressure (CBP)</p> <p>Adults ages 18-85</p> <p><i>Adequate control</i> is defined as: <140/90</p> <p>ICD-10 Codes to identify HTN: I10</p> <p>CPT II Codes for BP values:</p> <p>Systolic Less than 140: 3074F, 3075F Systolic Greater than/Equal to 140: 3077F Diastolic Less than 80: 3078F Diastolic 80-89: 3079F Diastolic Greater than/Equal to 90: 3080F</p>	<ul style="list-style-type: none"> • Diagnosis of hypertension (HTN) • <u>Most recent blood pressure reading in the medical record for 2023.</u> <p>Exclusions:</p> <ul style="list-style-type: none"> ➤ Members in hospice or using hospice services or receiving palliative care any time during the measurement year. ➤ Members with evidence of end-stage renal disease (ESRD), dialysis, nephrectomy, or kidney transplant any time during the member's history on or prior to December 31 of the measurement year. ➤ Members with a diagnosis of pregnancy any time during the measurement year. <p style="color: red;">Members who died any time during the measurement year.</p>
<p><u>Statin Therapy for Patients with Cardiovascular Disease (SPC)</u></p> <p>Males ages 21-75; Females ages 40-75</p> <p>Moderate or high-intensity statin therapy:</p> <p>Atorvastatin: 10-80mg Amlodipine-atorvastatin: 10-80mg Rosuvastatin: 5-40mg Simvastatin: 20-80mg Ezetimibe-simvastatin: 20-80mg Pravastatin: 40-80mg Lovastatin: 40mg Fluvastatin 40-80mg Pitavastatin 1-4mg</p> <p>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-M60.89; M60.9; M62.82; M79.1-M79.12; M79.18</p>	<ul style="list-style-type: none"> • Identified as having clinical atherosclerotic cardiovascular disease (ASCVD) during the measurement year (2023) • Two rates are reported: <ol style="list-style-type: none"> 1. Received Statin Therapy: Members who were dispensed at least one <i>high or moderate-intensity</i> statin medication during the measurement year 2. Statin Adherence 80%: Members who remained on a high or moderate-intensity statin medication for at least 80% of the treatment period (from prescription date through end of year). <p>Exclude members who meet any of the following criteria:</p> <ul style="list-style-type: none"> ➤ Diagnosis of pregnancy or had IVF during the measurement year or the year prior. ➤ Diagnosis of ESRD, dialysis, or cirrhosis during the measurement year or the year prior. ➤ Diagnosis of myalgia, myositis, myopathy, or rhabdomyolysis during the measurement year. ➤ In hospice or using hospice services or receiving palliative care any time during the measurement year. ➤ Died any time during the measurement year.

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Diabetes	
Measure	Screening, Test, or Care Needed
<p><u>Hemoglobin A1c Control for Patients with Diabetes (HBD)</u></p> <p>Adults 18-75 years</p> <p><u>ICD-10 Codes to identify Diabetes:</u> E10.10, E10.11, E10.21, E10.22, E10.29, E11.00-E11.9; E13.00-E13.9</p> <p><u>CPT/CPT II for HbA1c:</u> 83036, 83037, 3044F, 3046F, 3051F, 3052F</p>	<ul style="list-style-type: none"> • Diagnosis of diabetes (types 1 and 2) whose hemoglobin A1c (HbA1c) was at the following levels from measurement year (2023): <ul style="list-style-type: none"> ➤ HbA1c Control (<8.0%) ➤ HbA1c Poor Control (>9.0%) <p><u>Exclusions:</u></p> <ul style="list-style-type: none"> ➤ Members who did not have a diagnosis of diabetes in any setting, during the measurement year or the year prior but did have <ul style="list-style-type: none"> – Polycystic ovarian syndrome, or – Gestational diabetes, or – Steroid induced diabetes ➤ Members in hospice, using hospice services or palliative care any time during the measurement year. ➤ Members who died any time during the measurement year.
<p><u>Blood Pressure Control for Patients with Diabetes (BPD)</u></p> <p>Adults 18-75 years</p> <p><u>ICD-10 Codes to identify Diabetes:</u> E10.10, E10.11, E10.21, E10.22, E10.29, E11.00-E11.9; E13.00-E13.9</p> <p><u>CPT/CPT II Codes for BP values:</u> Systolic Less than 140: 3074F, 3075F Systolic Greater than/Equal to 140: 3077F Diastolic Less than 80: 3078F Diastolic 80-89: 3079F Diastolic Greater than/Equal to 90: 3080F</p>	<ul style="list-style-type: none"> • Diagnosis of diabetes (types 1 and 2) whose blood pressure (BP) was adequately controlled (<140/90 mm Hg) during the measurement year (2023). <p><u>Exclusions:</u></p> <ul style="list-style-type: none"> ➤ Members who did not have a diagnosis of diabetes in any setting, during the measurement year or the year prior but did have: <ul style="list-style-type: none"> – Polycystic ovarian syndrome, or – Gestational diabetes, or – Steroid induced diabetes ➤ Members in hospice, using hospice services or receiving palliative care any time during the measurement year. ➤ Members who died any time during the measurement year.

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Diabetes	
Measure	Screening, Test, or Care Needed
<p><u>Eye Exam for Patients with Diabetes (EED)</u></p> <p>Adults 18-75 years</p> <p><u>ICD-10 Codes to identify Diabetes:</u> E10.10, E10.11, E10.21, E10.22, E10.29, E11.00-E11.9; E13.00-E13.9</p> <p><u>CPT/CPT II codes for Diabetic retinal Screening:</u> 67028, 67030, 67031, 67036, 67039-67043, 67101, 67105, 67107, 67108, 67110, 67113, 67121, 67141, 67145, 67208, 67210, 67218, 67220, 67221, 67227, 67228, 92002, 92004, 92012, 92014, 92018, 92019, 92134, 92201, 92202, 92225-92228, 92230, 92235, 92240, 92250, 92260, 99203-92205, 99213-99215, 99242-99245, 2022F-2026F, 2033F, 3072F</p>	<ul style="list-style-type: none"> • Diagnosis of diabetes (types 1 and 2) who had one of the following: <ol style="list-style-type: none"> 1. A retinal or dilated eye exam by an eye care professional (optometrist or ophthalmologist) in 2023. 2. A negative retinal or dilated eye exam (negative for retinopathy) by an eye care professional (optometrist or ophthalmologist) in 2022. or 3. Bilateral eye enucleation any time during the member’s history through December 31 of the measurement year. <p><u>Exclusions:</u></p> <ul style="list-style-type: none"> ➤ Members who did not have a diagnosis of diabetes in any setting, during the measurement year or the year prior but did have: <ul style="list-style-type: none"> – Polycystic ovarian syndrome, or – Gestational diabetes, or – Steroid induced diabetes ➤ Members in hospice, using hospice services or receiving palliative care any time during the measurement year. ➤ Members who died any time during the measurement year.
<p><u>Kidney Health Evaluation for Patients with Diabetes</u></p> <p>Adults ages 18-85</p> <p><u>ICD-10 Codes to identify Diabetes:</u> E10.10, E10.11, E10.21, E10.22, E10.29, E11.00-E11.9; E13.00-E13.9</p> <p><u>CPT codes:</u> eGFR: 80047-80048; 80050; 80053; 80069; 82565 uACR: 82043; 82570</p>	<ul style="list-style-type: none"> • Diagnosis of diabetes (type 1 and type 2) who received a kidney health evaluation during the measurement year (2023), defined by: <ol style="list-style-type: none"> 1. An estimated glomerular filtration rate (eGFR) and 2. A urine albumin-creatinine ratio (uACR) <p><u>Exclusions:</u></p> <ul style="list-style-type: none"> ➤ Members who did not have a diagnosis of diabetes in any setting, during the measurement year or the year prior but did have: <ul style="list-style-type: none"> ➤ Polycystic ovarian syndrome, or ➤ Gestational diabetes, or ➤ Steroid induced diabetes ➤ Members with evidence of ESRD or dialysis any time during the member’s history on or prior to December 31 of the measurement year. ➤ Members in hospice or using hospice services or receiving palliative care any time during the measurement year. ➤ Members who died any time during the measurement year.

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Diabetes	
Measure	Screening, Test, or Care Needed
<p><u>Statin Therapy for Patients with Diabetes (SPD)</u></p> <p>Adults ages 40-75</p> <p><u>ICD-10 codes for myalgia, myositis, myopathy:</u> 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; M79.11-M79.12; M79.18</p>	<ul style="list-style-type: none"> • Identified as having diabetes but do not have clinical atherosclerotic cardiovascular disease (ASCVD) who met the following criteria: <p>Two rates are reported:</p> <ol style="list-style-type: none"> 1. Received Statin Therapy: Members who were dispensed at least one statin medication of any intensity during the measurement year (2023). 2. 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). <p><u>Exclusions:</u></p> <ul style="list-style-type: none"> ➤ Members who did not have a diagnosis of diabetes in any setting, during the measurement year or the year prior but did have: polycystic ovarian syndrome, gestational diabetes, or steroid induced diabetes ➤ Members diagnosed with myalgia, myositis, myopathy, or rhabdomyolysis (in 2023) ➤ Any of the following (in 2022 or 2023): IVD diagnosis, Pregnancy/IVF, Prescribed Clomiphene, ESRD or dialysis, Cirrhosis ➤ Members diagnosed with one of the following during the year prior to the measurement year: MI, CABG, PCI, or other revascularization. ➤ Members in hospice or using hospice services or receiving palliative care any time during the measurement year. ➤ Members who died any time during the measurement year.
Musculoskeletal	
Measure	Screening, Test, or Care Needed
<p><u>Osteoporosis Management in Women who had a Fracture (OMW) *Medicare</u></p> <p>Women ages 67-85</p> <p><u>CPT Codes to identify BMD test:</u> 76977; 77078; 77080-77081; 77085-77086</p> <p><u>HCPCS codes for osteoporosis meds:</u> J0897; J1740; J3110; J3489</p>	<ul style="list-style-type: none"> • Suffered a fracture and had one of the following in the 6 months after the fracture: <ol style="list-style-type: none"> 1. A bone mineral density (BMD) test or 2. A prescription for a drug to treat osteoporosis <p><u>Exclusions:</u></p> <ul style="list-style-type: none"> ➤ Members in hospice or using hospice services anytime during the measurement year ➤ Members who had an encounter for osteoporosis therapy or were prescribed or had an active prescription to treat osteoporosis during the 12 months prior to the episode date. ➤ Members who received palliative care any time during the intake period through the end of the measurement year. ➤ Members who died any time during the measurement year.

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Musculoskeletal	
Measure	Screening, Test, or Care Needed
<p><u>Osteoporosis Screening in Older Women (OSW)</u> *Medicare</p> <p>Women ages 65-75</p> <p>CPT codes: 76977; 77078; 77080-77081; 77085</p>	<ul style="list-style-type: none"> Received one or more osteoporosis screening tests on or between the member's 65th birthday and December 31st of the measurement year (2023). <p>Exclusions:</p> <ul style="list-style-type: none"> Members who had a claim/encounter for osteoporosis therapy any time in the member's history through December 31 of the year prior to the measurement year. Members who were prescribed a prescription to treat osteoporosis any time on or between January 1, 2020 – December 31, 2023. Members in hospice or using hospice services or receiving palliative care anytime during the measurement year Members who died any time during the measurement year.
Behavioral Health	
Measure	Screening, Test, or Care Needed
<p><u>Antidepressant Medication Management (AMM)</u></p> <p>Adults ages 18 and older</p> <p>ICD-10 Codes to identify Major Depression: F32.0-F32.4; F32.9; F33.0- F33.3; F33.41; F33.9</p>	<ul style="list-style-type: none"> Treated with antidepressant medication, diagnosed with major depression, and remained on an antidepressant medication treatment. <p>Two rates are reported:</p> <ol style="list-style-type: none"> Effective Acute Phase Treatment: remained on an antidepressant medication for at least 84 days (12weeks) Effective Continuation Phase Treatment: remained on an antidepressant medication for at least 180 days (6months) <p>Exclusions:</p> <ul style="list-style-type: none"> Members who had an acute or nonacute inpatient stay with any diagnosis of major depression on the discharge claim. Members who had an intensive outpatient encounter or partial hospitalization with any diagnosis of major depression. Members who had a community mental health center visit or transcranial magnetic stimulation visit with any diagnosis of major depression. Members who had a telehealth visit, observation visit, an ED visit, a telephone visit, or an e-visit or virtual check-in with any diagnosis of major depression. Members in hospice or using hospice services anytime during the measurement year. Members who died any time during the measurement year.

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Behavioral Health	
Measure	Screening, Test, or Care Needed
<p><u>Follow-up Care for Children Prescribed ADHD Medication (ADD)</u></p> <p>Ages 6-12 years</p>	<ul style="list-style-type: none"> An initial prescription for ADHD medication who had a least three follow-up care visits within a 10 month period, one of which was within 30 days of when the first ADHD medication was prescribed. <p>Two rates are reported:</p> <ol style="list-style-type: none"> Initiation Phase: one follow-up visit with a prescribing practitioner within 30 days Continuation and Maintenance Phase: remained on the medication for at least 210 days <u>and</u> had two additional visits with a practitioner within 270 days (9 months) after the Initiation Phase ended. <p>Exclusions:</p> <ul style="list-style-type: none"> 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. Members who died any time during the measurement year.
<p><u>Follow-up After Hospitalization for Mental Illness (FUH)</u></p> <p>Ages 6 and over</p>	<ul style="list-style-type: none"> Hospitalized for treatment of selected mental illness or intentional self-harm <u>and</u> One follow-up outpatient visit, intensive outpatient encounter, or partial hospitalization with a mental health provider. <p>Two rates are reported:</p> <ol style="list-style-type: none"> Follow-up visit within 7 days of discharge Follow-up visit within 30 days of discharge <p>Exclusions:</p> <ul style="list-style-type: none"> Members in hospice or using hospice services anytime during the measurement year. Members who died any time during the measurement year.
<p><u>Follow-up After Emergency Department Visit for Mental Illness (FUM)</u></p> <p>Ages 6 years and older</p>	<ul style="list-style-type: none"> Diagnosed with a mental illness or intentional self-harm, who had a follow-up visit for mental illness. <p>Two rates are reported:</p> <ol style="list-style-type: none"> The percentage of ED visits for which the member received follow-up within 7 days of the ED visit (8 total days) The percentage of ED visits for which the member received follow-up within 30 days of the ED visit (31 total days) <p>Exclusions:</p> <ul style="list-style-type: none"> Members in hospice or using hospice services anytime during the measurement year. Members who died any time during the measurement year.

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Behavioral Health	
Measure	Screening, Test, or Care Needed
<p><u>Follow-Up After High-Intensity Care for Substance Use Disorder (FUI)</u></p> <p>Ages 13 and older</p>	<ul style="list-style-type: none"> Acute inpatient hospitalization, residential treatment, or detoxification visit Diagnosis of substance use disorder Follow-up visit or event with any practitioner for a principal diagnosis of substance use disorder <p>Two rates are reported:</p> <ol style="list-style-type: none"> Follow-up within 7 days after the visit or discharge Follow-up within 30 days after the visit or discharge <p>Exclusions:</p> <ul style="list-style-type: none"> Members in hospice or using hospice services anytime during the measurement year. Members who died any time during the measurement year.
<p><u>Follow-Up After Emergency Department Visit for Substance Use (FUA)</u></p> <p>Ages 13 and older</p>	<ul style="list-style-type: none"> ED visit with principal diagnosis of substance use disorder (SUD) or any diagnosis of drug overdose, for which there was a follow up. <p>Two rates are reported:</p> <ol style="list-style-type: none"> Follow-up visit within 7days of the ED visit (8 total days) Follow-up visit within 30 days of the ED visit (31 total days) <p>Exclusions:</p> <ul style="list-style-type: none"> Members in hospice or using hospice services anytime during the measurement year. Members who died any time during the measurement year.
<p><u>Pharmacotherapy for Opioid Use Disorder (POD)</u></p> <p>Ages 16 and older</p>	<ul style="list-style-type: none"> Diagnosis of Opioid Use Disorder Dispensed an opioid use disorder treatment medication (e.g., Naltrexone, Buprenorphine) taken for 180 days or more without a gap in treatment of 8 or more consecutive days. <p>Exclusions:</p> <ul style="list-style-type: none"> Members in hospice or using hospice services anytime during the measurement year. Members who died any time during the measurement year.

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Behavioral Health	
Measure	Screening, Test, or Care Needed
<p><u>Diabetes Screening for People with Schizophrenia or Bipolar Disorder Who are Using Antipsychotic Medications (SSD)</u></p> <p>Adults ages 18-64</p> <p>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</p> <p>Schizophrenia: F20.0-F20.3; F20.5; F20.81; F20.89; F20.9; F25.0-F25.1; F25.8- F25.9</p> <p>CPT Codes to Identify Diabetes Screening: Glucose tests: 80047, 80048, 80050, 80053, 80069, 82947, 82950, 82951 HbA1c tests: 83036,83037</p>	<ul style="list-style-type: none"> • 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 (2023) <p>Exclusions:</p> <ul style="list-style-type: none"> ➤ Members with diabetes or who were dispensed insulin or oral hypoglycemics/antihyperglycemics during the measurement year or the year prior to the measurement year. ➤ Members who had no antipsychotic medications dispensed during the measurement year. ➤ Members in hospice or using hospice services any time during the measurement year. ➤ Members who died any time during the measurement year.
<p><u>Diabetes Monitoring for People with Diabetes and Schizophrenia (SMD)</u></p> <p>Adults ages 18-64</p> <p>CPT Codes to Identify: HbA1c tests: 83036,83037 LDL-C Screening: 80061; 83700; 83701; 83704; 83721</p>	<ul style="list-style-type: none"> • Members with a diagnosis of Schizophrenia or schizoaffective disorder and Diabetes who had both an LCL-C test and an HbA1c test during the measurement year (2023) <p>Exclusions:</p> <ul style="list-style-type: none"> ➤ Members who did not have a diagnosis of diabetes in any setting, during 2022 or 2023 ➤ Members in hospice or using hospice services any time during the measurement year. ➤ Members who died any time during the measurement year.
<p><u>Adherence to Antipsychotic Medications for Individuals with Schizophrenia (SAA)</u></p> <p>Adults 18 and older</p>	<ul style="list-style-type: none"> • Diagnosis of Schizophrenia or schizoaffective disorder who were prescribed and remained on an antipsychotic medication for at least 80% of their treatment period (days between the earliest prescription fill in 2023 and the end of the year. <p>Exclusions:</p> <ul style="list-style-type: none"> ➤ A diagnosis of dementia ➤ <i>Did not</i> have at least two antipsychotic medication dispensing events. ➤ Members in hospice or using hospice services during the measurement year. ➤ Members who died any time during the measurement year.

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Behavioral Health	
Measure	Screening, Test, or Care Needed
<p><u>Metabolic Monitoring for Children and Adolescents on antipsychotics (APM)</u></p> <p>Children and Adolescents ages 1-17</p> <p><u>CPT Codes to identify cholesterol tests other than LDL:</u> 82465; 83718; 83722; 84478</p>	<ul style="list-style-type: none"> At least 2 antipsychotic prescriptions (same or different medications) on different dates and had metabolic testing during the measurement year (2023) <ol style="list-style-type: none"> Blood glucose <u>or</u> HbA1c test during the measurement year (2023) and LDL-C <u>or</u> cholesterol test during the measurement year (2023) <p><u>Exclusions:</u></p> <ul style="list-style-type: none"> Members in hospice or using hospice services anytime during the measurement year. Members who died any time during the measurement year.
Care Coordination	
Measure	Screening, Test, or Care Needed
<p><u>Advance Care Planning (ACP) *Medicare</u></p> <p>Adults ages 66-80 with advanced illness, an indication of frailty or receiving palliative care, and adults ages 81 years and older who had advanced care planning during the measurement year (2023)</p> <p><u>CPT Codes to Identify Advance Care Planning:</u> 99483,99497</p>	<ul style="list-style-type: none"> Advance Care Planning is the discussion or documentation about preferences for resuscitation, life-sustaining treatment, or end of life care. <p><u>Exclusions:</u></p> <ul style="list-style-type: none"> Members in hospice or using hospice services anytime during the measurement year. Members who died any time during the measurement year.
<p><u>Follow-Up After Emergency Department Visit for People with Multiple High-Risk Chronic Conditions (FMC) *Medicare</u></p> <p>Ages 18 and older</p>	<ul style="list-style-type: none"> Members with emergency department (ED) visits who have multiple (2 or more) high-risk chronic conditions such as COPD/asthma; dementia; CKD; major depression; heart failure; MI; atrial fibrillation; stroke who had a follow-up service within 7 days of the ED visit (8 total days). <p><u>Exclusions:</u></p> <ul style="list-style-type: none"> Members in hospice or using hospice services anytime during the measurement year. Members who died any time during the measurement year.

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Care Coordination	
Measure	Screening, Test, or Care Needed
<p>Transitions of Care (TRC) *Medicare</p> <p>Adults ages 18 and older</p> <p><u>CPT codes for Transitional Care Management Services and Medication Reconciliation:</u> 99483, 99495, 99496, 111F</p>	<ul style="list-style-type: none"> • Documentation in the PCP record of the following in 2023: <ul style="list-style-type: none"> ➤ 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 ➤ Patient Engagement After Inpatient Discharge (e.g., office visits, home visits, telehealth) provided within 30 days after discharge. ➤ Medication Reconciliation Post-Discharge conducted by a prescribing practitioner, clinical pharmacist, Physician assistant 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). <p>Exclusions:</p> <ul style="list-style-type: none"> ➤ Members in hospice or using hospice services during the measurement year. ➤ Members who died during the measurement year.
Overuse/Appropriateness	
Measure	Screening, Test, or Care Needed
<p><u>Non-Recommended Cervical Cancer Screening in Adolescent Females (NCS)</u></p> <p>Adolescent females ages 16-20</p> <p><u>CPT Codes to identify Cervical Cancer Screening:</u> Cervical cytology: 88141-88143; 88147-88148; 88150. 88152,88153; 88164- 88167; 88174-88175 HPV tests: 87624-87625</p>	<ul style="list-style-type: none"> • Screened unnecessarily for cervical cancer during the measurement year (2023). <p>Exclusion:</p> <ul style="list-style-type: none"> ➤ History of cervical cancer, HIV, or immunodeficiency anytime during the member’s history through December 31 of the measurement year. ➤ Members in hospice or using hospice services anytime during the measurement year. ➤ Members who died any time during the measurement year

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Overuse/Appropriateness	
Measure	Screening, Test, or Care Needed
<p><u>Non-Recommended PSA-Based Screening in Older Men (PSA) *Medicare</u></p> <p>Men age 70 and older</p> <p><u>CPT codes for PSA-based Screening:</u> 84152-84154</p>	<ul style="list-style-type: none"> Screened unnecessarily for prostate cancer using prostate-specific antigen (PSA)-based screening during the measurement year (2023). <p><u>Exclusions:</u></p> <ul style="list-style-type: none"> Prostate cancer diagnosis any time during the member’s history through December 31 of the measurement year. Dysplasia of the prostate any time during the measurement year or the year prior to the measurement year A PSA test during the year <i>prior to</i> the measurement year (2022) where laboratory data indicate an elevated (>4.0 ng/ml) or abnormal result. Dispensed prescription for a 5-alpha reductase inhibitor during the measurement year. Members in hospice or using hospice services anytime during the measurement year. Members who died any time during the measurement year.
<p><u>Appropriate Treatment for Upper Respiratory Infection (URI)</u></p> <p>Ages 3 months and older</p> <p><u>ICD-10 Codes to identify URI:</u> J00; J06.0; J06.9; J40</p> <p><u>Pharyngitis:</u> J02.0, J02.8, J02.9, J03.00, J03.01, J03.80, J03.81, J03.90, J03.91</p>	<ul style="list-style-type: none"> Diagnosis of Upper Respiratory Infection (URI), <i>and not</i> prescribed an antibiotic. <p><u>Exclusions:</u></p> <ul style="list-style-type: none"> Members in hospice or using hospice services anytime during the measurement year. Members who died any time during the measurement year.
<p><u>Avoidance of Antibiotic Treatment for Acute Bronchitis/Bronchiolitis (AAB)</u></p> <p>Ages 3 months and older</p> <p><u>ICD-10 Codes to identify Acute Bronchitis:</u> J20.3-J20.9; J21.0-J21.1; J21.8-J21.9</p>	<ul style="list-style-type: none"> Diagnosis of acute bronchitis/bronchiolitis and <i>not</i> prescribed an antibiotic. <p><u>Exclusions:</u></p> <ul style="list-style-type: none"> 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 Neoplasms Members who died any time during the measurement year.

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Overuse/Appropriateness	
Measure	Screening, Test, or Care Needed
<p><u>Use of Imaging Studies for Low Back Pain (LBP)</u></p> <p>Adults ages 18- 75</p> <p>Note: <i>A higher score indicates appropriate treatment of low back pain</i></p> <p><u>ICD-10 Codes to identify Uncomplicated Low Back Pain:</u> M47.26-M47.28; M47.816- M47.818; M47.896- M47.898; M48.061-M48.07, M48.08; M51.16-M51.17; M51.26, M51.27,-M51.36, M51.37, M51.86, M51.87; M53.2X6-M53.2X8-M53.88; M54.16-M54.9; M99.03-M99.84 S33.100A-S33.9XXA; S39.002A-S39.92XS</p>	<ul style="list-style-type: none"> Primary diagnosis of low back pain who did not have an imaging study (plain X-ray, MRI, CT) within 28 days of the diagnosis. <p>Exclusions:</p> <ul style="list-style-type: none"> An imaging study in the presence of low back pain is considered <u>clinically indicated</u> in patients with a diagnosis of: <ul style="list-style-type: none"> -Fragility fracture - Palliative care/Advanced illness frailty - Osteoporosis -Cancer -Recent Trauma - IV Drug Use - HIV - Lumbar Surgery -Neurologic Impairment -Prolonged Use of Corticosteroids -Major Organ Transplant - Spinal Infection -Spondylopathy Members in hospice or using hospice services any time during the measurement year. Members who died any time during the measurement year.
<p><u>Potentially Harmful Drug- Disease Interactions in Older Adults (DDE) *Medicare</u></p> <p>Ages 65 and older</p> <p>NOTE: <i>A lower rate represents better performance for all rates.</i></p>	<ul style="list-style-type: none"> Evidence of an underlying disease, condition, or health concern and who were dispensed an ambulatory prescription for a potentially harmful medication, concurrent with or after the diagnosis <p>Three rates are reported:</p> <ol style="list-style-type: none"> 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 <p>Exclusions:</p> <ul style="list-style-type: none"> 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, 2022 to December 1, 2023. Members who died any time during the measurement year.

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Overuse/Appropriateness	
Measure	Screening, Test, or Care Needed
<p>Use of High-Risk Medications in Older Adults (DAE) *Medicare</p> <p>Ages 67 and older</p> <p><i>Note: A lower rate represents a better performance</i></p>	<ul style="list-style-type: none"> Received at least two dispensing events for high-risk medications to avoid from the same drug class (except for appropriate diagnoses). <p>Exclusions:</p> <ul style="list-style-type: none"> Members in hospice or using hospice services anytime during the measurement year. Members receiving palliative care during the measurement year. Members who died any time during the measurement year.
<p>Use of Opioids at High Dosage (HDO)</p> <p>Adults ages 18 and older</p> <p><i>Note: A lower rate indicates better performance.</i></p>	<ul style="list-style-type: none"> Received a prescription for opioids at a high dosage (average morphine milligram equivalent dose [MME] ≥ 90) for ≥ 15 days during the measurement year (2023). <p>Exclusions:</p> <ul style="list-style-type: none"> Members with cancer or sickle cell disease anytime during the measurement year. Members in hospice or using hospice services, or receiving palliative care any time during the measurement year. Members who died any time during the measurement year.
<p>Use of Opioids from Multiple Providers (UOP)</p> <p>Ages 18 and older</p> <p><i>Note: A lower rate indicates better performance.</i></p>	<ul style="list-style-type: none"> Received prescription opioids for ≥ 15 days from multiple providers during the measurement year (2023). <p>Three rates are reported: Opioid prescriptions received from and/or filled at:</p> <ol style="list-style-type: none"> 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 different prescribers <i>and</i> four or more different pharmacies) <p>Exclusions:</p> <ul style="list-style-type: none"> Members in hospice or using hospice services anytime during the measurement year. Members who died any time during the measurement year.
<p>Risk of Continued Opioid Use (COU)</p> <p>Ages 18 and older</p>	<ul style="list-style-type: none"> A new episode of opioid use that puts them at risk for continued opioid use. <p>Two rates are reported:</p> <ol style="list-style-type: none"> The percentage of members with at least 15 days of prescription opioids in a 30-day period The percentage of members with at least 31 days of prescription opioids in a 62-day period <p>Exclusions:</p> <ul style="list-style-type: none"> Members in hospice or using hospice services anytime during the measurement year. Members who had at least one of the following during the 12 months (1 year) prior to the prescription start date through 61 days after the prescription start date: cancer, sickle cell disease, or palliative care. Members who died any time during the measurement year.

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Measures Collected through Medicare Health Outcomes Survey (HOS)

Measure	Screening, Test, or Care Needed
<p>Fall Risk Management (FRM) *Medicare</p> <p>Adults ages 65 and older</p>	<ul style="list-style-type: none"> • Two components of this measure that assess different facets of fall risk management: <ol style="list-style-type: none"> 1. <i>Discussing Fall Risk</i> <ul style="list-style-type: none"> – Seen by a practitioner in the past 12 months – Discussed falls or problems with balance or walking with their current practitioner 2. <i>Managing Fall Risk</i> <ul style="list-style-type: none"> – Had a fall or problems with balance or walking in the past 12 months – Seen by a practitioner in the past 12 months – Received a recommendation for how to prevent falls or treat problems with balance or walking from their current practitioner
<p>Physical Activity in Older Adults (PAO) *Medicare</p> <p>Adults ages 65 and older</p>	<ul style="list-style-type: none"> • Two components of this measure that assess different facets of promoting physical activity in older adults: <ol style="list-style-type: none"> 1. <i>Discussing Physical Activity</i> <ul style="list-style-type: none"> – Had a doctor’s visit in the past 12 months – Spoke with a doctor or other health care provider about their level of exercise or physical activity 2. <i>Advising Physical Activity</i> <ul style="list-style-type: none"> – Had a doctor’s visit in the past 12 months – Received advice to start, increase or maintain their level of exercise or physical activity
<p>Management of Urinary Incontinence in Older Adults (MUI) *Medicare</p> <p>Adults ages 65 and older</p>	<ul style="list-style-type: none"> • Three components that assess the management of urinary incontinence in older adults: <ol style="list-style-type: none"> 1. <i>Discussing Urinary Incontinence</i> <ul style="list-style-type: none"> – Reported having urine leakage in the past 6 months – Discussed their urinary leakage problem with a healthcare provider 2. <i>Discussing Treatment of Urinary Incontinence</i> <ul style="list-style-type: none"> – Reported having urine leakage in the past 6 months – Discussed treatment options for their current urine leakage problem 3. <i>Impact of Urinary Incontinence</i> <ul style="list-style-type: none"> – Reported having urine leakage in the past 6 months – Reported that urine leakage made them change their daily activities or interfered with their sleep a lot

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Measures Collected through the CAHPS Survey (Consumer Assessment of Healthcare Providers and Systems)

Measure	Screening, Test, or Care Needed
<p><u>Medical Assistance with Smoking Cessation and Tobacco Use Cessation (MSC)</u></p> <p>Current Smoker/Tobacco user ages 18 and older</p>	<ul style="list-style-type: none"> • This measure assesses three different components of providing medical assistance with smoking and tobacco use cessation: <ol style="list-style-type: none"> 1. <i>Advising Smokers and Tobacco Users to Quit</i> <ul style="list-style-type: none"> – Received advice to quit during the measurement year (2023). 2. <i>Discussing Cessation Medications</i> <ul style="list-style-type: none"> – Discussed or were recommended cessation medications during the measurement year (2023). 3. <i>Discussing Cessation Strategies</i> <ul style="list-style-type: none"> – Discussed or were provided cessation methods or strategies during the measurement year (2023).
Access/Availability of Care	
Measure	Screening, Tests, or Care Needed
<p><u>Adults' Access to Preventive/ Ambulatory Health Services (AAP)</u></p> <p>Adults ages 20 and over</p>	<ul style="list-style-type: none"> • An ambulatory or preventive care visit <ul style="list-style-type: none"> – in the measurement year (2023) for Medicaid and Medicare members – in the measurement year or two years prior (2021-2023) for Commercial members <p>Exclusions:</p> <ul style="list-style-type: none"> ➤ Members in hospice or using hospice services anytime during the measurement year. ➤ Members who died any time during the measurement year.
<p><u>Initiation and Engagement of Substance Use Disorder Treatment (IET)</u></p> <p>Ages 13 and older</p> <p>Codes to identify AOD visits: 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</p>	<ul style="list-style-type: none"> • New substance use disorder (SUD) episodes (194 days negative diagnosis history) that results in treatment initiation and engagement. <p>Two rates are reported:</p> <ol style="list-style-type: none"> 1. <i>Initiation of SUD Treatment</i> within 14 days of the diagnosis through an inpatient SUD admission, outpatient visit, intensive outpatient encounter or partial hospitalization, telehealth, or medication treatment. 2. <i>Engagement of SUD Treatment</i> evidence of treatment engagement within 34 days of the initiation. <p>Exclusions:</p> <ul style="list-style-type: none"> ➤ Members in hospice or using hospice services any time during the measurement year. ➤ Members who died any time during the measurement year.

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Access/Availability of Care	
Measure	Screening, Tests, or Care Needed
<p>*Prenatal/Postpartum Care (PPC)</p> <p>Members who delivered a live infant between <u>October 8, 2022, and October 7, 2023</u></p> <p>Codes to Identify Timeliness of Prenatal Care CPT: 99201-99205, 99211-99215, 99241-99245, 99483</p> <p>Postpartum Care CPT: 57170, 58300, 59430, 99501</p>	<ul style="list-style-type: none"> Two components to assess prenatal and postpartum care: <ol style="list-style-type: none"> Timeliness of Prenatal Care – received a prenatal care visit in the <u>first trimester</u>, on or before the enrollment start date, or within 42 days of enrollment. Postpartum Care – had a postpartum visit <u>on or between 7 and 84 days</u> after delivery. <p>Exclusions:</p> <ul style="list-style-type: none"> Members in hospice or using hospice services any time during the measurement year. Members who died any time during the measurement year.
<p>Use of First-Line Psychosocial Care for Children and Adolescents on Antipsychotics (APP)</p> <p>Ages 1-17 years</p> <p>Codes to identify psychosocial care: CPT: 90832-90834; 90836-90840; 90845-90847; 90849; 90853; 90875-90876; 90880</p>	<ul style="list-style-type: none"> Members who had a new prescription (4-month negative medication history) for an antipsychotic medication and had documentation of psychosocial care as first-line treatment during the period from 90 days prior to 30 days after the prescription fill. <p>Exclusions:</p> <ul style="list-style-type: none"> At least one acute inpatient encounter <u>or</u> 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 (2023) Members in hospice or using hospice services anytime during the measurement year. Members who died any time during the measurement year.
Utilization and Risk Adjusted Utilization	
Measure	Screening, Test or Care Needed
<p>Antibiotic Utilization for Respiratory Conditions (AXR)</p> <p>Ages 3 months and older</p>	<ul style="list-style-type: none"> Diagnosis of a respiratory condition that resulted in a prescription for an antibiotic medication (AXR) on or 3 days after the episode <u>from July 1, 2022 – June 30, 2023</u>. <p>Exclusions:</p> <ul style="list-style-type: none"> Members in hospice or using hospice services during the measurement year.

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Utilization and Risk Adjusted Utilization	
Measure	Screening, Test or Care Needed
<p><u>Well-child Visits in the First 30 Months of Life (W30)</u></p> <p>Children who turned 15 months or 30 months during 2023</p> <p><u>CPT Codes to Identify Well-Child Visits:</u> 99381-99385; 99391-99395; 99461</p> <p><u>ICD-10 Codes:</u> Z00.00-Z00.01; Z00.110-Z00.111; Z00.121; Z00.129; Z00.2; Z00.3; Z00.5; Z76.1-Z76.2</p>	<ul style="list-style-type: none"> Well-child visits with a PCP/Pediatrician during the last 15 months. <p>Two rates are reported:</p> <ol style="list-style-type: none"> Six (6) or more well-child visits on different dates of service on or before the 15-month birthday Two (2) or more well-child visits on different dates of service between the child's 15-month birthday plus one day and the 30-month birthday <p><u>Exclusions:</u></p> <ul style="list-style-type: none"> Members in hospice or using hospice services anytime during the measurement year. Members who died any time during the measurement year.
<p><u>Child and Adolescent Well-Care Visits (WCV)</u></p> <p>Ages 3-21 years</p> <p><u>CPT Codes to Identify Well-Child Visits</u> 99381-99385; 99391-99395; 99461</p> <p><u>ICD-10 Codes:</u> Z00.00-Z00.01; Z00.110-Z00.111; Z00.121; Z00.129; Z00.2; Z00.3; Z00.5; Z76.1-Z76.2</p>	<ul style="list-style-type: none"> At least one (1) comprehensive well-care visit with a PCP or OB/GYN practitioner during the measurement year (2023). ✓ The well-care visit must occur with a PCP or an OB/GYN practitioner. <p><u>Exclusions:</u></p> <ul style="list-style-type: none"> Members in hospice or using hospice services anytime during the measurement year. Members who died any time during the measurement year.
Measures Collected through Electronic Clinical Data Systems (ECDS)	
Measure	Screening, Test, or Care Needed
<p><u>Breast Cancer Screening (BCS-E)</u></p> <p>Women ages 50-74</p>	<ul style="list-style-type: none"> A mammogram to screen for breast cancer <u>on or between October 1, 2021 -December 31, 2023.</u> <p><u>Exclusions:</u></p> <ul style="list-style-type: none"> Members in hospice or using hospice services any time during the measurement year. Bilateral mastectomy any time during the member's history through the end of the measurement year. Members receiving palliative care any time during the measurement year.

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Measures Collected through Electronic Clinical Data Systems (ECDS)	
Measure	Screening, Test, or Care Needed
<p>Childhood Immunization Status (CIS-E)</p> <p>Children who turn 2 years old during the measurement year</p> <p>Note: Vaccines must be completed <u>on or before the 2nd birthday</u></p> <p>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.</p>	<ul style="list-style-type: none"> • 4 DTaP or anaphylaxis or encephalitis due to diphtheria, tetanus or pertussis vaccine (do not count any before 42 days of age) • 3 IPV or anaphylaxis due to the IPV vaccine (do not count any before 42 days of age) • 1 MMR, history of measles, mumps, and rubella, or anaphylaxis due to the MMR vaccine (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) • 3 Hepatitis B, anaphylaxis due to hepatitis B vaccine, positive serology, or history of hepatitis B • 1 VZV, anaphylaxis due to the VZV vaccine, positive serology, or documented history of chicken pox disease • 4 Pneumococcal Conjugates or anaphylaxis due to the pneumococcal conjugate vaccine (do not count any before 42 days of age) • 1 Hepatitis A, anaphylaxis due to the hepatitis A vaccine, or documented Hepatitis A illness • 2 or 3 Rotavirus vaccines-depends on the vaccine administered or documented anaphylaxis due to the rotavirus vaccine (do not count any before 42 days of age) • 2 Influenza with different dates of service or anaphylaxis due to the influenza vaccine. One of the two vaccinations can be an LAIV- live attenuated influenza vaccine- if administered on the child's 2nd birthday. (<i>Do not</i> count any given prior to 6 months of age) <p>Exclusions:</p> <ul style="list-style-type: none"> ➤ Members in hospice or using hospice services any time during the measurement year. ➤ Members who had any of the following on or before their second birthday: <ul style="list-style-type: none"> – Severe combined immunodeficiency – Immunodeficiency – HIV – Lymphoreticular cancer, multiple myeloma, or leukemia – Intussusception
<p>Immunizations for Adolescents (IMA-E)</p> <p>Adolescents who turn 13 years old in 2023</p> <p>All vaccines must be completed <u>on or before 13th birthday</u></p> <p>NOTE: This measure includes the Human Papillomavirus Vaccine (HPV) for both males and females.</p>	<ul style="list-style-type: none"> • 1 dose Meningococcal vaccine <u>between the 11th and 13th birthdays</u> or anaphylaxis due to the vaccine anytime on or before the member's 13th birthday and • 1 tetanus, diphtheria toxoids and acellular pertussis (Tdap) vaccine <u>between the 10th and 13th birthdays</u> or anaphylaxis or encephalitis due to the vaccine anytime on or before the 13th birthday and • 2-dose or 3-dose HPV vaccination series <u>between the 9th and 13th birthdays</u> or anaphylaxis due to the vaccine anytime on or before the 13th birthday <p>Exclusion: Members in hospice or using hospice any time during the measurement year.</p>

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Measures Collected through Electronic Clinical Data Systems (ECDS)

Measure	Screening, Test, or Care Needed
<p>Cervical Cancer Screening (CCS-E)</p> <p>*Newly Specified for ECDS Reporting</p>	<ul style="list-style-type: none"> • A PAP test (cervical cytology) within the last 3 years (2021-2023) for women ages 21-64 • Cervical high-risk human papillomavirus (hrHPV) testing within the last 5 years (2019-2023) for women ages 30-64. • Cervical cytology/high-risk human papillomavirus (hrHPV) co-testing within the last 5 years (2019-2023) for women ages 30-64. <p>✓ Documentation in the record must include both of the following:</p> <ul style="list-style-type: none"> • Date the test was performed • The result or finding <p>Exclusions:</p> <ul style="list-style-type: none"> ➤ Members in hospice or using hospice services anytime during the measurement year. ➤ Documentation of hysterectomy with <u>no residual cervix, cervical agenesis or acquired absence of cervix.</u> ➤ Members receiving palliative care any time during the measurement year.
<p>Colorectal Cancer Screening (COL-E)</p> <p>Adults ages 45-75</p>	<ul style="list-style-type: none"> • One or more of the following screenings: <ul style="list-style-type: none"> – Fecal occult blood test (iFOBT or gFOBT) annually in the measurement year (2023) – Flexible sigmoidoscopy in the past 5 years (2019 – 2023) – Colonoscopy in past 10 years (2014-2023) – CT Colonography (e.g., virtual colonoscopy) in the past 5 years (2019-2023) – FIT-DNA (e.g., Cologuard) test in the past 3 years (2021-2023) <p>Exclusions:</p> <ul style="list-style-type: none"> ➤ Diagnosis of colorectal cancer or total colectomy any time during the member’s history through the measurement year. ➤ Members in hospice or using hospice services or receiving palliative care anytime during the measurement year.

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Measures Collected through Electronic Clinical Data Systems (ECDS)

Measure	Screening, Test, or Care Needed
<p><u>Unhealthy Alcohol Use Screening and Follow-Up (ASF-E)</u></p> <p>Adults ages 18 and older</p>	<ul style="list-style-type: none"> Screened for unhealthy alcohol use using a standardized tool (AUDIT, Single-Question Screen) and If screened 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). <p>Exclusions:</p> <ul style="list-style-type: none"> Members with alcohol use disorder that starts during the year prior to the measurement year. Members with a history of dementia any time during the member’s history through the end of the measurement year. Members in hospice or using hospice services any time during the measurement year.
<p><u>Depression Screening and Follow-Up for Adolescents and Adults (DSF-E)</u></p> <p>Ages 12 years and older</p>	<ul style="list-style-type: none"> Screened for clinical depression using a standardized tool and, if screened positive received <u>follow-up care within 30 days</u> (e.g., an outpatient or telephone follow-up visit; a depression case management encounter; a behavioral health encounter; dispensed antidepressant medication) of a positive depression screen finding <p>Exclusions:</p> <ul style="list-style-type: none"> Members in hospice or using hospice services anytime during the measurement year (2023). Members with a history of bipolar disorder any time during the member’s history through the end of the year prior to the measurement year (2022). Members with depression that starts in the prior year (2022) through the measurement year (2023).
<p><u>Depression Remission or Response for Adolescents and Adults (DRR-E)</u></p> <p>Ages 12 and older</p>	<ul style="list-style-type: none"> Diagnosis of major depression with an elevated PHQ-9 (total score ≥ 9) or dysthymia who had evidence of response or remission within 4-8 months of the elevated score. <p>Three rates are reported:</p> <ol style="list-style-type: none"> Follow-Up PHQ-9 within 4-8 months after the initial elevated PHQ-9 score Depression Remission: achieved remission within 4-8 months after the initial elevated PHQ-9 score of <5 Depression Response: showed a response within 4-8 months after the initial elevated PHQ-9 score with PHQ-9 score reduction of at least 50% <p>Exclusions:</p> <ul style="list-style-type: none"> Members with any of the following any time during the member’s history through the end of the measurement year: Bipolar Disorder, Personality Disorder, Psychotic Disorder, or Pervasive Developmental Disorder Members in hospice or using hospice services any time during the measurement year.

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Measures Collected through Electronic Clinical Data Systems (ECDS)

Measure	Screening, Test, or Care Needed
<p><u>Utilization of the PHQ-9 to Monitor Depression Symptoms for Adolescents and Adults (DMS-E)</u></p> <p>Ages 12 and older</p> <p><u>ICD-10 Codes to identify Major Depression and Dysthymia:</u> F32.0-F32.5; F32.9; F33.0-F33.3; F43.40-F43.42; F33.9; F34.1</p> <p><u>CPT Codes to identify Interactive Outpatient Encounters:</u> 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</p> <p><u>LOINC Codes to identify PHQ administered:</u> 44261-6; 89204-2</p>	<ul style="list-style-type: none"> • Diagnosis of major depression or dysthymia and had an outpatient encounter with a PHQ-9 score present in their record in the same assessment period as the encounter. <p>Two rates are reported:</p> <ol style="list-style-type: none"> 1. 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). 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. <p>Exclusions:</p> <ul style="list-style-type: none"> ➤ Members with any of the following any time during the member’s history through the end of the measurement year: Bipolar Disorder, Personality Disorder, Psychotic Disorder, or Pervasive Developmental Disorder ➤ Members in hospice or using hospice services any time during the measurement year.
<p><u>Depression Remission or Response for Adolescents and Adults (DRR-E)</u></p> <p>Ages 12 and older</p> <p><u>ICD-10 Codes to identify Major Depression and Dysthymia:</u> F32.0-F32.5; F32.9; F33.0-F33.3; F43.40-F43.42; F33.9; F34.1</p> <p><u>CPT Codes to identify Interactive Outpatient Encounters:</u> 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</p>	<ul style="list-style-type: none"> • Diagnosis of major depression with an elevated PHQ-9 (total score ≥ 9) or dysthymia who had evidence of response or remission within 4-8 months of the elevated score. <p>Three rates are reported:</p> <ol style="list-style-type: none"> 4. Follow-Up PHQ-9 within 4-8 months after the initial elevated PHQ-9 score 5. Depression Remission: achieved remission within 4-8 months after the initial elevate PHQ-9 score of <5 6. Depression Response: showed a response within 4-8 months after the initial elevated PHQ-9 score with PHQ-9 score reduction of at least 50% <p>Exclusions:</p> <ul style="list-style-type: none"> ➤ Members with any of the following any time during the member’s history through the end of the measurement year: Bipolar Disorder, Personality Disorder, Psychotic Disorder, or Pervasive Developmental Disorder ➤ Members in hospice or using hospice services any time during the measurement year.

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Measures Collected through Electronic Clinical Data Systems (ECDS)

Measure	Screening, Test, or Care Needed
<p><u>Adult Immunization Status (AIS-E)</u></p> <p>Adults ages 19 and older</p>	<ul style="list-style-type: none"> • Received recommended routine vaccines: <ul style="list-style-type: none"> – Influenza vaccine on or between July 1, 2022 - June 30, 2023 or members with anaphylaxis due to influenza any time before or during the measurement year. – Td or Tdap on or between January 1, 2014 - December 31, 2023 or members with a history of anaphylaxis or encephalitis due to diphtheria, tetanus, or pertussis vaccine. – Zoster (one dose of herpes zoster live vaccine or two doses of the herpes zoster recombinant vaccine, at least 28 days apart any time on or after the member’s 50th birthday and before or during 2023 or had anaphylaxis due to herpes zoster vaccine any time before or during 2023. – Pneumococcal vaccine on or after the member’s 19th birthday or had anaphylaxis due to pneumococcal vaccine. <p><u>Exclusions:</u></p> <ul style="list-style-type: none"> ➤ Members in hospice or using hospice services any time during the measurement period.
<p><u>Prenatal Immunization Status (PRS-E)</u></p> <p>Deliveries in the measurement year (2023)</p>	<ul style="list-style-type: none"> • Received the following recommended vaccines during the measurement year (2023): <ul style="list-style-type: none"> – Influenza – Tetanus, diphtheria toxoids and acellular pertussis (Tdap) during the pregnancy (including on the delivery date) <p><u>Exclusions:</u></p> <ul style="list-style-type: none"> ➤ 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.
<p><u>Prenatal Depression Screening and Follow- up (PND-E)</u></p>	<ul style="list-style-type: none"> • Screened for clinical depression while pregnant and, if screening is positive, received follow-up care. <p>Two rates are reported:</p> <ol style="list-style-type: none"> 1. <i>Depression Screening</i>: Screened for clinical depression during pregnancy using a standardized instrument. 2. <i>Follow up on Positive Screen</i>: Received follow-up care within 30 days of a positive depression screening finding. <p><u>Exclusions:</u></p> <ul style="list-style-type: none"> ➤ 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.

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Measures Collected through Electronic Clinical Data Systems (ECDS)

Measure	Screening, Test, or Care Needed
<p><u>Post-Partum Depression Screening and Follow-up (PDS-E)</u></p>	<ul style="list-style-type: none"> Screened for clinical depression during the postpartum period, and if screened positive, received follow-up care. <p>Two rates are reported:</p> <ol style="list-style-type: none"> <i>Depression Screening:</i> Screened for clinical depression using a standardized instrument during the postpartum period (7-84 days following date of delivery). <i>Follow-up on Positive Screen:</i> Received follow-up care within 30 days of a positive depression screen finding. <p>Exclusions:</p> <ul style="list-style-type: none"> Deliveries in which members were in hospice or using hospice services any time during the measurement period.
<p><u>Follow-Up Care for Children Prescribed ADHD Medication (ADD-E)</u></p> <p>Ages 6 and over</p>	<ul style="list-style-type: none"> An initial prescription for ADHD medication who had a least three follow-up care visits within a 10-month period, one of which was within 30 days of when the first ADHD medication was prescribed. <p>Two rates are reported:</p> <ol style="list-style-type: none"> Initiation Phase: one follow-up visit with a prescribing practitioner within 30 days Continuation and Maintenance Phase: remained on the medication for at least 210 days <u>and</u> had two additional visits with a practitioner within 270 days (9 months) after the Initiation Phase ended. <p>Exclusions:</p> <ul style="list-style-type: none"> 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.
<p><u>Follow-Up Care for Children Prescribed ADHD Medication (ADD-E)</u></p> <p>Ages 6 and over</p>	<ul style="list-style-type: none"> An initial prescription for ADHD medication who had a least three follow-up care visits within a 10-month period, one of which was within 30 days of when the first ADHD medication was prescribed. <p>Two rates are reported:</p> <ol style="list-style-type: none"> Initiation Phase: one follow-up visit with a prescribing practitioner within 30 days Continuation and Maintenance Phase: remained on the medication for at least 210 days <u>and</u> had two additional visits with a practitioner within 270 days (9 months) after the Initiation Phase ended. <p>Exclusions:</p> <ul style="list-style-type: none"> 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.

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