

**SUMMARY OF UPDATES TO THE ADULT CORE SET MEASURES
TECHNICAL SPECIFICATIONS AND RESOURCE MANUAL
MARCH 2022**

Overall Changes

- Updated reporting year to FFY 2022, and data collection timeframe to 2021.
- Updated specifications, value set codes, copyright, and table source information to HEDIS MY 2021 Vol. 2 for all HEDIS measures.
- Updated specifications, value set codes, and copyright information to correspond to calendar year 2021 for non-HEDIS measures.
- Added specifications for two new measures:
 - Measure AAB-AD: Avoidance of Antibiotic Treatment for Acute Bronchitis/Bronchiolitis
 - Measure COL-AD: Colorectal Cancer Screening
- Retired one measure:
 - Measure PC01-AD: Elective Delivery
- Removed two appendices:
 - Appendix C: Interpreting Rates for Contraceptive Care Measures, and inserted external link to updated resource in the CCP-AD and CCW-AD measure specifications
 - Appendix G: Additional Information on Data Elements for Measure PC-01: Elective Delivery
 - Renumbered appendices and updated hyperlinks in the Technical Specifications and Resource Manual

I. The Core Set of Adult Health Care Quality Measures

- Inserted information about updates to the 2022 Adult Core Set.

II. Data Collection and Reporting of the Adult Core Set

- Clarified that beneficiaries in hospice should be removed as states determine measure's eligible population. For hybrid measures, states should remove beneficiaries in hospice prior to drawing the sample.
- Added guidance that states should exclude beneficiaries who die during the measurement year if the state can identify these beneficiaries. The state should attempt to remove these beneficiaries as it determines the eligible population and prior to drawing the sample for hybrid measures. This guidance applies to the following HEDIS measures in the Adult Core Set: AAB-AD, AMM-AD, AMR-AD, BCS-AD, CBP-AD, CCS-AD, CHL-AD, COL-AD, CPA-AD, FUA-AD, FUH-AD, FUM-AD, FVA-AD, HPC-AD, HPCMI-AD, IET-AD, MSC-AD, PPC-AD, SAA-AD, and SSD-AD.

III. Technical Specifications

Measure CBP-AD: Controlling High Blood Pressure

- Updated the hybrid specification to indicate that sample size reduction is allowed using the current year's administrative rate (FFY 2022 Core Set reporting) or the prior year's rate (FFY 2021 Core Set reporting).

Measure CCP-AD: Contraceptive Care - Postpartum Women Ages 21 to 44

- Removed diaphragm as a moderately effective method of contraception.
- Updated value set directory including:
 - Updated codes indicating a miscarriage, ectopic pregnancy, stillbirth, or induced abortion.
 - Updated codes used to identify provision of a most or moderately effective contraceptive.
 - Updated codes used to identify use of a long-acting reversible contraception method.

Measure CCW-AD: Contraceptive Care - All Women Ages 21 to 44

- Removed diaphragm as a moderately effective method of contraception.
- Updated value set directory including:
 - Updated codes indicating sterilization for non-contraceptive reasons.
 - Updated codes indicating a miscarriage, ectopic pregnancy, stillbirth, or induced abortion.
 - Updated codes used to identify provision of a most or moderately effective contraceptive.
 - Updated codes used to identify use of a long-acting reversible contraception method.

Measure CDF-AD: Screening for Depression and Follow-Up Plan: Age 18 and Older

- Added Guidance for Reporting:
 - The intent of the measure is to screen for depression in beneficiaries who have never had a diagnosis of depression or bipolar disorder prior to the eligible encounter used to evaluate the numerator. Beneficiaries who have ever been diagnosed with depression or bipolar disorder will be excluded from the measure.
 - The measure assesses the most recent depression screening completed either during the eligible encounter or within the 14 days prior to that encounter. Therefore, a clinician would not be able to complete another screening at the time of the encounter to count toward a follow-up, because that would serve as the most recent depression screening. In order to satisfy the follow-up requirement for a beneficiary screening positively, the eligible clinician would need to provide one of the specified follow-up actions, which does not include use of a standardized depression screening tool.
 - Should a beneficiary screen positive for depression, a clinician could opt to complete a suicide risk assessment when appropriate and based on individual beneficiary characteristics. However, for the purposes of this measure, a suicide risk assessment will not qualify as a follow-up plan.
- Updated Screening definition to note that the depression screening can be either a clinical or diagnostic tool, and that the depression screening must be reviewed and addressed in the office of the provider on the date of the encounter.

- Updated Follow-up Plan definition to remove additional evaluation for depression and suicide risk assessment as requirements for documenting follow-up for a positive depression screening.
- Updated the exclusion language to clarify that the measure excludes beneficiaries who have been diagnosed with depression or bipolar disorder.
- Updated codes to identify outpatient visits.

Measure COB-AD: Concurrent Use of Opioids and Benzodiazepines

- Added palliative care as an exclusion.

Measure HVL-AD: HIV Viral Load Suppression

- Added additional codes to Table HVL-C. CPT Codes to Identify Medical Visits.

Measure OUD-AD: Use of Pharmacotherapy for Opioid Use Disorder

- Updated value set directory including:
 - Updated codes for approved pharmacotherapy for Opioid Use Disorder (OUD).

Measure OHD-AD: Use of Opioids at High Dosage in Persons Without Cancer

- Added palliative care as an exclusion.

Measure PCR-AD: Plan All-Cause Readmissions

- Updated the Medicaid Population definition to note that beneficiaries must be ages 18 to 64 as of the earliest Index Discharge Date.
- Updated Step 1 in “Reporting: Count of Beneficiaries in Medicaid Population” to note that the state should determine the beneficiary’s age as of the earliest Index Discharge Date.
- Updated Step 1 in “Reporting: Number of Outliers” to note that the state should determine the beneficiary’s age as of the earliest Index Discharge Date.

Measure PPC-AD: Prenatal and Postpartum Care: Timeliness of Prenatal Care

- Updated the hybrid specification to indicate that sample size reduction is allowed using the current year’s administrative rate (FFY 2022 Core Set reporting) or the prior year’s rate (FFY 2021 Core Set reporting).

Appendix F: Guidance for Conducting the National Core Indicators® (NCI®) In-Person Survey (IPS)

- Added Steps to Prepare for Survey Administration: (1) understand state requirements for gathering consent from individuals with guardians, (2) determine a strategy to engaging interpreters and/or using the translations of the NCI surveys, and (3) understand how the state will address systemic disparities in the populations that have access to, and respond to the survey.