

A group of five professionals are gathered around a table in a meeting. A woman in blue scrubs is standing and writing in a notebook. A man in a suit and glasses is looking at a tablet. A woman in a white lab coat is pointing at the tablet. A man in a suit and glasses is looking at the tablet. A woman in a green top is looking at the tablet. The background is a bright, modern office with large windows.

# The Future of HEDIS: New Ideas for 2024 and Digital Content

Cindy Ottone, Director of Measures Policy  
Burke Burnett, Director of Digital Content Services  
February 28, 2023



# The NEW ENGLAND JOURNAL of MEDICINE

Perspective February 1, 2023  
DOI: 10.1056/NEJMp2215539

## Aligning Quality Measures across CMS — The Universal Foundation

Douglas B. Jacobs, M.D., M.P.H., Michelle Schreiber, M.D., Meena Seshamani, M.D., Ph.D., Daniel Tsai, B.A., Elizabeth Fowler, Ph.D., J.D., and Lee A. Fleisher, M.D.

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Article:

<https://urlis.net/nejmuf>

NCQA comment:

[ncqa.org/universal-foundation/](https://ncqa.org/universal-foundation/)



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**70% of preliminary Universal Foundation measures are HEDIS measures—the foundation of The Foundation**



# HEDIS Public Comment



## *Agenda*

### ***PUBLIC COMMENT***

**NCQA.ORG/HEDIS-COMMENT**

***FEBRUARY 13-MARCH 13, 2023***

#### **PROPOSED CHANGES TO EXISTING MEASURES**

- **Diabetes Care**
- **Advancing Gender–Inclusive Measurement in Breast and Cervical Cancer Screening**
- **Expansion of Race and Ethnicity Stratifications in HEDIS**
- **Proposed Measure Retirements**
  - **Care for Older Adults–Pain Assessment Indicator**
  - **NCQA’s Measures Roadmap**



# Proposed Changes to Existing Measures

# Proposed Changes to Existing Measures

Item	Proposed Changes	Commercial	Medicaid	Medicare
Diabetes Care	Revised diabetes denominator <ul style="list-style-type: none"> <li><i>Hemoglobin A1c Control for Patients With Diabetes*</i></li> </ul>	X	X	X
	<ul style="list-style-type: none"> <li><i>Blood Pressure Control for Patients With Diabetes</i></li> </ul>	X	X	X
	<ul style="list-style-type: none"> <li><i>Eye Exam for Patients With Diabetes</i></li> </ul>	X	X	X
	<ul style="list-style-type: none"> <li><i>Kidney Health Evaluation for Patients With Diabetes</i></li> </ul>	X	X	X
	<ul style="list-style-type: none"> <li><i>Statin Therapy for Patients With Diabetes</i></li> </ul>	X	X	X
	<ul style="list-style-type: none"> <li><i>Emergency Department Visits for Hypoglycemia in Older Adults With Diabetes</i></li> </ul>			X
	<ul style="list-style-type: none"> <li><i>Diabetes Monitoring for People With Diabetes and Schizophrenia</i></li> </ul>		X	
	Inclusion of Glucose Management Indicator (GMI) in <i>Hemoglobin A1c (HbA1c) Control for Patients With Diabetes</i>	X	X	X
	Removal of medical record review from <i>Eye Exam for Patients With Diabetes</i>	X	X	X
Gender-Inclusive Measurement in Breast and Cervical Cancer Screening	Implement gender-inclusive language <ul style="list-style-type: none"> <li><i>Breast Cancer Screening*</i></li> </ul>	X	X	X
	<ul style="list-style-type: none"> <li><i>Cervical Cancer Screening</i></li> </ul>	X	X	

\* Measures included in CMS – Universal Foundation Measures for Quality

# Expansion of Race and Ethnicity Stratifications in HEDIS

Domain	Candidate Measure	Commercial	Medicaid	Medicare
Behavioral Health	<i>Follow-Up After Emergency Department Visit for Mental Illness</i>	X	X	X
	<i>Utilization of the PHQ-9 to Monitor Depression Symptoms for Adolescents and Adults</i>	X	X	X
	<i>Depression Screening and Follow-Up for Adolescents and Adults</i>	X	X	X
	<i>Follow-Up After Hospitalization for Mental Illness*</i>	X	X	X
	<i>Prenatal Depression Screening and Follow-Up</i>	X	X	
	<i>Postpartum Depression Screening and Follow-Up</i>	X	X	
	<i>Risk of Continued Opioid Use</i>	X	X	X
	<i>Use of Opioids at High Dosage</i>	X	X	X
	<i>Use of Opioids from Multiple Providers</i>	X	X	X
Prevention & Screening	<i>Cervical Cancer Screening</i>	X	X	
	<i>Childhood Immunization Status*</i>	X	X	
	<i>Prenatal Immunization Status</i>	X	X	
Diabetes	<i>Kidney Health Evaluation for Patients With Diabetes</i>	X	X	
	<i>Eye Exam for Patients with Diabetes</i>	X	X	
Care Coordination	<i>Follow-Up After Emergency Department Visit for People With Multiple High-Risk Chronic Conditions</i>			X

\* Measures included in CMS – Universal Foundation Measures for Quality

Confidential - Do Not Distribute



# Proposed Measure Retirements

# Proposed Retirements

Proposed Measure Retirements	Commercial	Medicaid	Medicare
<i>Ambulatory Care</i>		X	
<i>Inpatient Utilization - General Hospital/Acute Care</i>		X	
<i>Non-Recommended Cervical Cancer Screening in Adolescent Females</i>			
<i>Antidepressant Medication Management</i>	X	X	X
<i>Medical Assistance with Smoking and Tobacco Use Cessation</i>	X	X	X
<i>Use of Spirometry Testing in the Assessment and Diagnosis of COPD</i>	X	X	X
<i>Care for Older Adults– Pain Assessment Indicator</i>			X



# Notification of Changes for HEDIS

# Notification of Changes for HEDIS

## *Measure Changes for HEDIS MY 2024 & HEDIS MY 2025*

HEDIS MY	Measure	Notification
HEDIS MY 2024	<p><i>Follow-Up Care for Children Prescribed ADHD Medication*</i></p> <p><i>Metabolic Monitoring for Children and Adolescents on Antipsychotics</i></p>	Measures will transition to ECDS-only reporting.
HEDIS MY 2025	<p><i>Well-Child Visits in the First 30 Months of Life*</i></p> <p><i>Child and Adolescent Well-Care Visits*</i></p>	Remove services provided via telehealth.
HEDIS MY 2025	<p><i>Childhood Immunization Status*</i></p> <p><i>Immunizations for Adolescents*</i></p> <p><i>Cervical Cancer Screening</i></p>	NCQA is <i>considering</i> transitioning these measures to ECDS-only reporting.

*\* Measures included in CMS – Universal Foundation Measures for Quality*

# HEDIS Measure Templates

## *Changes for HEDIS MY 2025*



- Template changes include:
  - Simplifying the specification language
  - Moving the General Guidelines into the measures
  - Basing the narrative on digital measures and FHIR specifications
- Aligns with NCQA's digital direction
- Streamlines the specifications to be more modular
- Does not change measure intent

# HEDIS Measure Templates

## Changes for HEDIS MY 2025

Current  
Format

<b>Breast Cancer Screening (BCS)</b>	
<b>SUMMARY OF CHANGES TO HEDIS 2020</b>	
<ul style="list-style-type: none"> <li>Modified value sets to make them compatible with digital measure formatting.</li> <li>Updated value sets used to identify advanced illness.</li> <li>Deleted value set combinations for unilateral mastectomy where laterality (bilateral, left, right) is not specified.</li> <li>Added the <i>Rules for Allowable Adjustments of HEDIS</i> section.</li> </ul>	
<b>Description</b>	
The percentage of women 50–74 years of age who had a mammogram to screen for breast cancer.	
<b>Eligible Population</b>	
<i>Note: Members in hospice are excluded from the eligible population. Refer to General Guideline 17: Members in Hospice.</i>	
<b>Product lines</b>	Commercial, Medicaid, Medicare (report each product line separately).
<b>Stratification</b>	For only Medicare, report the following SES stratifications and total: <ul style="list-style-type: none"> <li>Non-LIS/DE, Nondisability.</li> <li>LIS/DE.</li> <li>Disability.</li> <li>LIS/DE and Disability.</li> <li>Other.</li> <li>Unknown.</li> <li>Total Medicare.</li> </ul> <i>Note: The stratifications are mutually exclusive, and the sum of all six stratifications is the Total population.</i>
<b>Ages</b>	Women 52–74 years as of December 31 of the measurement year.
<b>Continuous enrollment</b>	October 1 two years prior to the measurement year through December 31 of the measurement year.
<b>Allowable gap</b>	No more than one gap in enrollment of up to 45 days for each full calendar year of continuous enrollment (i.e., the measurement year and the year prior to the measurement year). To determine continuous enrollment for a Medicaid beneficiary for whom enrollment is verified monthly, the member may not have more than a 1-month gap in coverage during each year of continuous enrollment.

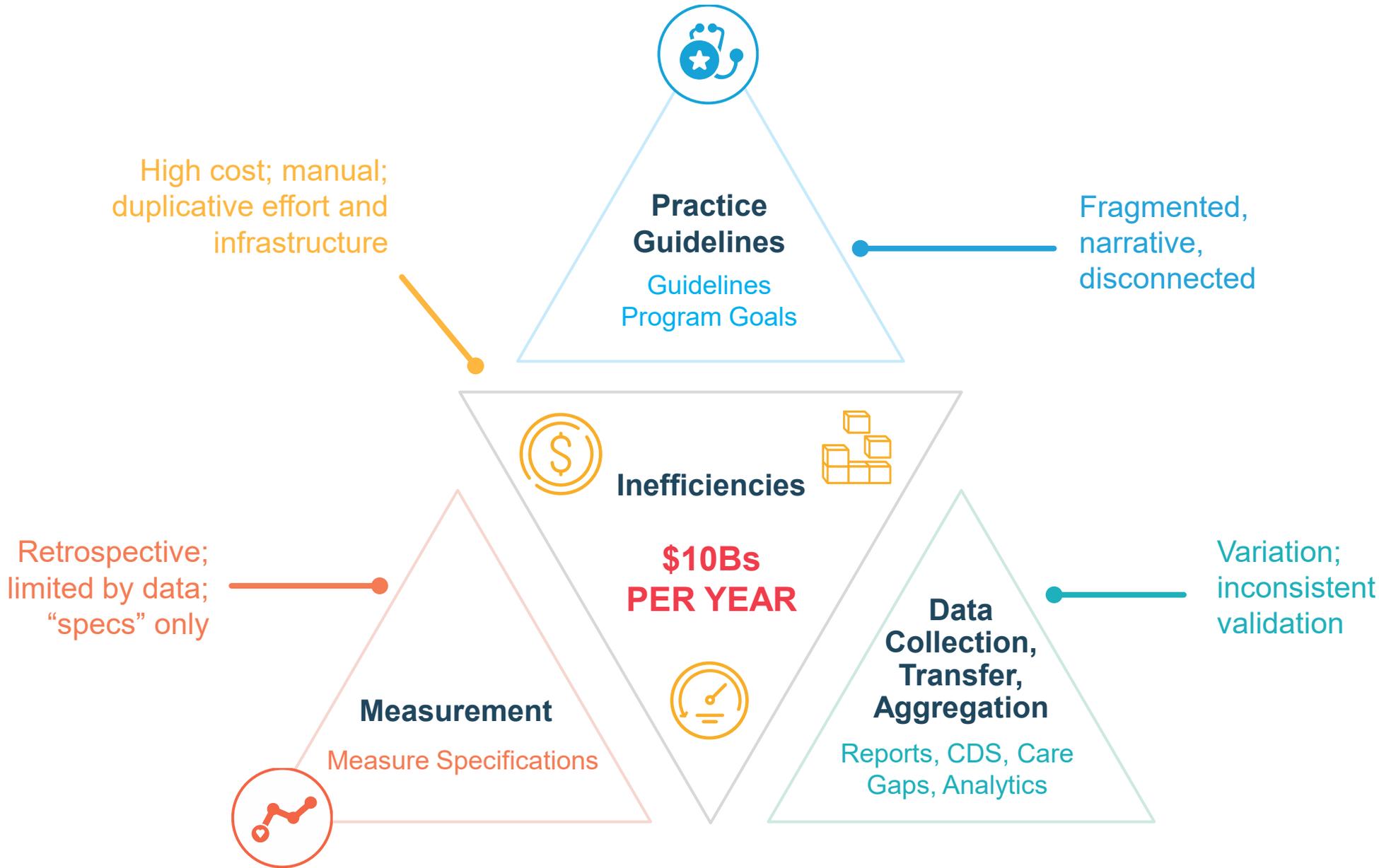
New  
Format

Measure title	Breast Cancer Screening	Measure ID	BCS-E
<b>Description</b>	The percentage of women 50–74 years of age who had a mammogram to screen for breast cancer.		
<b>Measurement period</b>	January 1–December 31.		
<b>Copyright and disclaimer notice</b>	This measure was adapted with financial support from the Centers for Medicare and Medicaid Services (CMS). For complete copyright information see the first page of HEDIS Volume 2: Technical Specifications for Health Plans.		
<b>Clinical recommendation statement</b>	The U.S. Preventive Services Task Force recommends screening women 50–74 years of age for breast cancer every 2 years. (B recommendation)		
<b>Citations</b>	U.S. Preventive Services Task Force. 2016. "Screening for Breast Cancer: U.S. Preventive Services Task Force Recommendation Statement." <i>Ann Intern Med</i> 164(4):279–95.		
<b>Characteristics</b>			
<b>Scoring</b>	Proportion.		
<b>Type</b>	Process.		
<b>Stratification</b>	<ul style="list-style-type: none"> <li>Product line.               <ul style="list-style-type: none"> <li>Commercial.</li> <li>Medicaid.</li> <li>Medicare.</li> </ul> </li> <li>SES (Medicare only)               <ul style="list-style-type: none"> <li>SES – Non-LIS/DE, <u>Nondisability</u>.</li> <li>SES – LIS/DE.</li> <li>SES – Disability.</li> <li>SES – LIS/DE and Disability.</li> <li>SES – Other.</li> <li>SES – Unknown.</li> </ul> </li> </ul>		
<b>Risk adjustment</b>	None.		
<b>Improvement notation</b>	A higher rate indicates better performance.		
<b>Guidance</b>	<p><b>Programming Guidance:</b></p> <p>For Medicare plans, I-SNP and LTI exclusions are not included in the measure calculation logic and need to be programmed manually. Administrative data must be used for these exclusions.</p> <p>Identification of hospice using the monthly membership detail data files is not included in the measure calculation logic and needs to be programmed manually.</p> <p>SES and product line stratifications are not included in the measure calculation logic and need to be programmed manually.</p> <p><b>General Rules:</b></p> <p>When using claims, include all paid, suspended, pending and denied claims.</p> <p>When using SNOMED-CT codes to identify a person has a history of a procedure, the date of the procedure must be available.</p> <p>Dates must be specific enough to determine the event occurred in the period being measured.</p> <p>Unless otherwise noted exclude claims from laboratories (POS 81).</p> <p><b>Reporting:</b></p> <p>For Medicare plans, the SES stratifications are mutually exclusive. NCQA calculates a total rate for Medicare plans by adding all six Medicare stratifications.</p>		
<b>Definitions</b>			



# Digital Content Services

# Quality Ecosystem of the Past



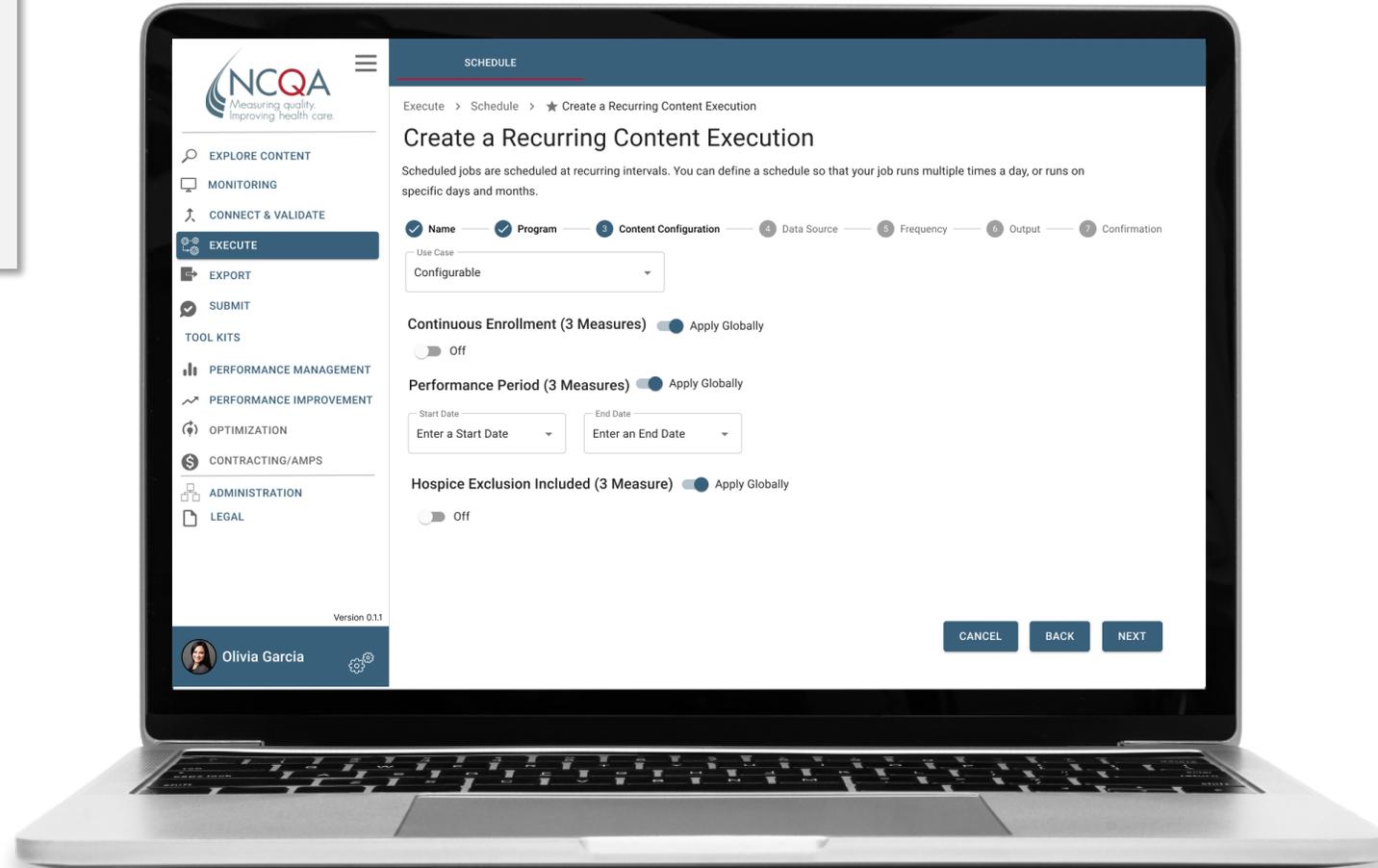
What if NCQA could help you better  
integrate quality into your  
workstreams?

# Introducing Digital Content Services

*Participants welcome to join our Early Adopter Program*

**Out-of-the-box, configurable quality measures with a built-in measure engine**

Brought to you by the most widely trusted evaluators of quality.



# Introducing Digital Content Services

*Purpose-built for healthcare delivery organizations and vendors*



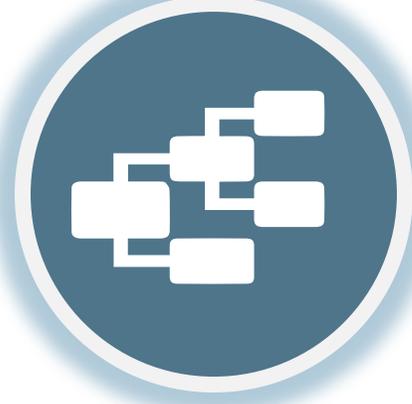
## **Reduce Cost & Burden**

*Updated, configurable digital measures and measure engine mean less overhead spent on building and maintenance*



## **Support Expanded Use Cases**

*More timely results can be used to support a wide range of quality initiatives, including care gap closure, clinical decision support, contracting and analytics.*



## **Broader Access Across Levels of Accountability**

*Configurability means the ability to leverage a measurement system for all of healthcare.*

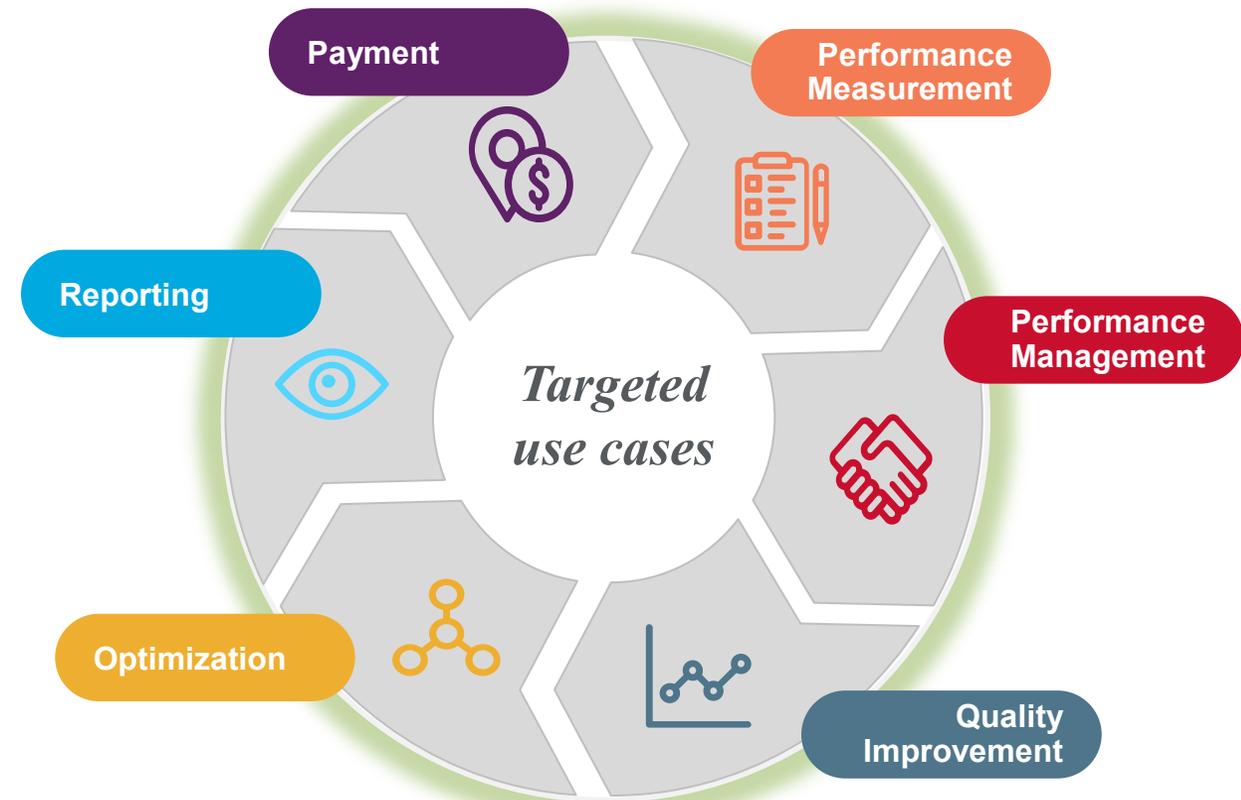
# Measures available to Early Adopters

*Value-based care starter pack*

*A cloud-based solution to enable a growing range of healthcare use cases*

- **Digital quality measures** that are expanded and executable
- **Measure processing software system** to help you flow new measures through your technologies

Use Case Focus: Long-Term



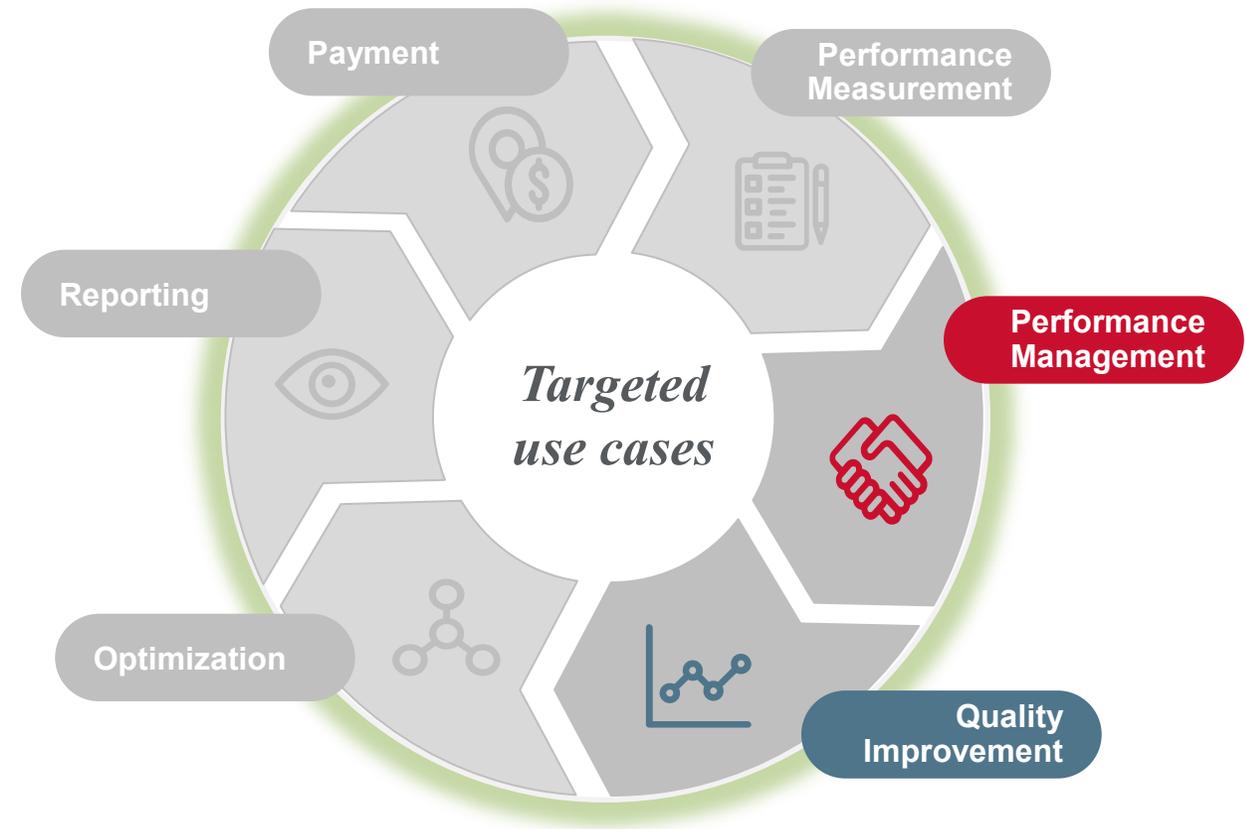
# Measures available to Early Adopters

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Use Case Focus: Early Adopter Program



# Helping you to receive, understand, and use digital measures...



Alignment with common standards, including USCDI, Carin for Blue Button and Gravity



A library of configurable digital quality measures



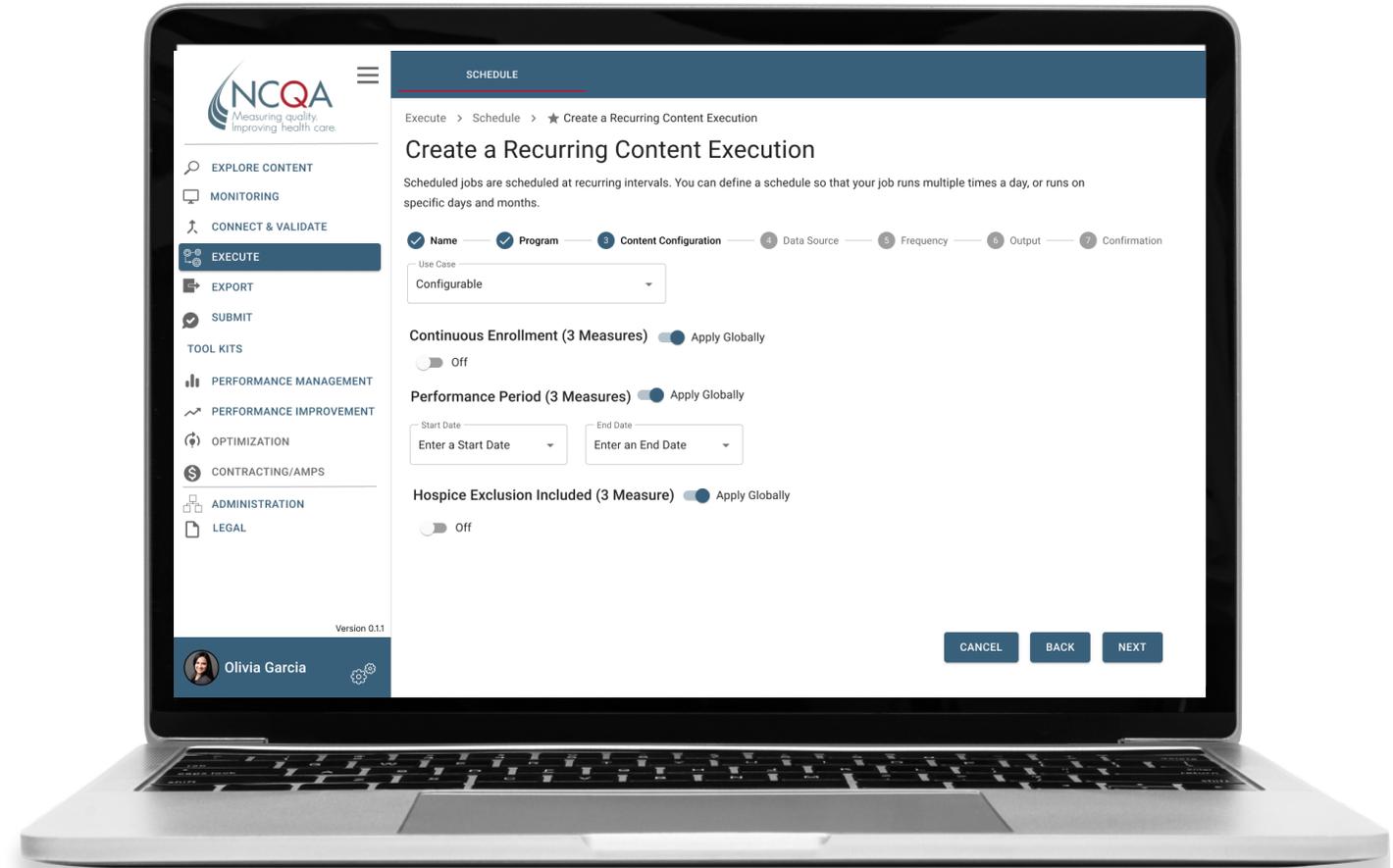
Interactive breakdowns of measure details; including programming, allowable adjustments, and more



Ability to connect and pull from your proprietary cloud data



Data profiling and validation to check for errors or omissions



# Digital Content Services product overview

Participant



Standardized  
Clinical & Claims Data

Pre-processing  
(transform to NCQA  
FHIR profile)



Data Profiling  
& Validation



Processing  
Engine

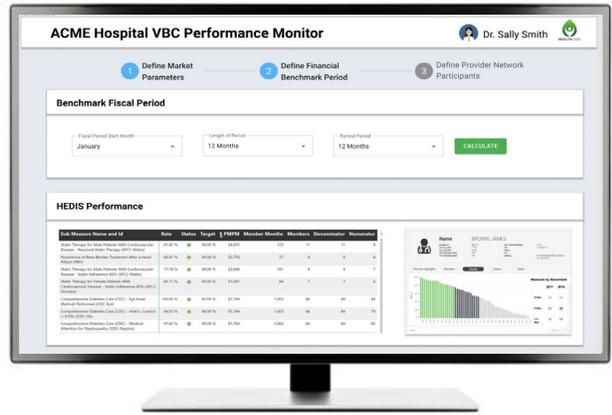


Post-  
processing

Member-level  
FHIR files



Results Integration  
to External Reporting,  
Performance Management and  
Quality Improvement Systems



NCQA

- Measure Logic
- Value Sets
- Use Case Content

Allowable  
adjustments &  
configurations

# Pilot program participants

*Launched Spring 2022*



**1upHealth,  
Inc.**



**Aetna  
Life Insurance  
Company**



**Apollo Medical  
Holdings,  
Inc**



**Change Healthcare  
Technologies,  
LLC**



**Health Care  
Service  
Corporation**

# Early Adopter Program

*What you get*



## Digital Content Services Software

Software, including configurable digital quality measures and measure engine.



## Premium Support

Access to NCQA experts for help with setup and implementation, as well as hands-on technical and strategic account management.

Access to premium training.



## Promotional Support

You'll get to call yourself an early adopter and NCQA will develop a case study on your digital quality work.



## Peer Learning

Access to a user's group to learn from peers.

# Early Adopters

## *Formula for Success*



**You are cloud enabled**  
*Cloud types supported:*  
*Azure • AWS • Google*  
*Cloud*



**FHIR capabilities**  
*Ability to provide data in*  
*accordance with*  
*NCQA's FHIR*  
*Implementation*  
*Guidelines*



**A vested interest in**  
**available VBC**  
**measures**  
*Especially valuable for*  
*quality improvement*  
*initiatives*

# Measures available to Early Adopters

## *Value-based care starter pack*

### Available for two Measurement Years (MY 2022 and MY 2023)

Preventative Measures	
BCS-E	Breast Cancer Screening
CCS-E	Cervical Cancer Screening
COL-E	Colorectal Cancer Screening
AIS-E	Adult Immunization Status
CIS-E	Childhood Immunization Status
IMA-E	Immunizations for Adolescents
Chronic Disease Measures	
DSF-E	Depression Screening and Follow-Up
APM-E	Metabolic Monitoring for Children and Adults
DRR-E	Depression Remission or Response for Adolescents and Adults
DMS-E	Utilization of the PHQ-9 to Monitor Depression Symptoms for Adolescents and Adults
Appropriateness of Care Measures	
AAB	Avoidance of Antibiotic Treatment for Acute Bronchitis/Bronchiolitis
CWP	Appropriate Testing for Pharyngitis
URI	Appropriate Treatment for Upper Respiratory Infection
UOP	Use of Opioids from Multiple Providers

Measures noted with an “E” are specified for Electronic Clinical Data Systems (ECDS) reporting. CCS is only available for ECDS reporting for MY 2023.

# Requirements Checklist

## *Formula for Success*

- ✓ Adheres to the NCQA FHIR Implementation Guide
- ✓ Possesses either of the following cloud environments and cloud storage buckets to host our software:
  - Amazon Web Services (AWS) / AWS 3
  - Azure cloud / Azure Blob Storage
  - Google Cloud Platform (GCP) / GCP Cloud Storage
- ✓ Manages patient/member-level JSON FHIR outputs generated by our software
- ✓ Integration of an OpenID identity management system
- ✓ Security approval and sign off prior to software deployment
- ✓ Expert resources assigned (ex. Dev Ops, Cloud engineering, or other meaningful equivalent or substitute) to conduct software deployment tasks and run system updates.



*Questions*