

HEDIS MY 2020 & MY 2021 Measures	Applicable to:			Changes for HEDIS MY 2020 & MY 2021
	Commercial	Medicaid	Medicare	
General Guidelines for Data Collection and Reporting	✓	✓	✓	<ul style="list-style-type: none"> <li>• Updated General Guideline 3: HEDIS Submission for Organizations Seeking Accreditation.</li> <li>• Replaced references to “CHIP members” with “CHIP products” in General Guideline 8: Reporting HEDIS for CHIP.</li> <li>• Updated deadlines in the HEDIS Audit Timeline in General Guideline 9: Audit Preparation.</li> <li>• Added a note to General Guideline 17: Members in Hospice to indicate how to flag the hospice data for ECDS reporting.</li> <li>• Updated General Guideline 18: Deceased Members to indicate that if organizations can identify members who die during the measurement year, these members must be excluded consistently from all measures and indicators.</li> <li>• Updated the Survey Method section in General Guideline 30: Data Collection Methods.</li> <li>• Clarified in General Guideline 31: Supplemental Data that codes alone do not meet criteria for proof of service.</li> <li>• Revised General Guideline 33: Date of Service for Laboratory Tests (formerly General Guideline 33: Measures That Require Results From the Most Recent Test or Measurement).</li> <li>• Removed General Guideline 35: Indicators That Require the Same Data Collection Method and added a note to the description of the CDC measure; renumbered subsequent guidelines.</li> <li>• Updated General Guideline 36: Measures That Use Medication Lists (formerly General Guideline 37).</li> <li>• Updated General Guideline 38: Member-Collected Samples (formerly General Guideline 39: Member-Collected Samples and Biometric Values).</li> <li>• Updated General Guideline 39: Member-Reported Services and Biometric Values (formerly General Guideline 40: Member-Reported Services).</li> <li>• Updated General Guideline 42: Telehealth (formerly General Guideline 43).</li> <li>• Updated General Guideline 44: Visits that Result in an Inpatient Stay (formerly General Guideline 45).</li> <li>• Updated General Guideline 49: Mapping Proprietary or Other Codes (formerly General Guideline 50) to allow mapping of NDC codes for Immunizations.</li> <li>• Added General Guideline 52: Reporting Tables.</li> </ul>

2 Summary Table of Measures, Product Lines and Changes

HEDIS MY 2020 & MY 2021 Measures	Applicable to:			Changes for HEDIS MY 2020 & MY 2021
	Commercial	Medicaid	Medicare	
Guidelines for Calculations and Sampling	✓	✓	✓	<ul style="list-style-type: none"> <li>Updated Table 1: Sample Size Information for Hybrid Measures.</li> <li>Removed the Population definition from the Guidelines for the Hybrid Method section.</li> <li>Updated Table 2 to reflect the Minimum Required Sample Size (MRSS).</li> <li>Clarified in step 4 of the Systematic Sampling Methodology that the MRSS must be reported as the EM or less than the EM if sample size reduction is applied.</li> </ul>
Guidelines for Allowable Adjustments of HEDIS	✓	✓	✓	<ul style="list-style-type: none"> <li>Updated the Referring to Adjusted HEDIS Measures and Rates section.</li> <li>Added instructions for adjusting palliative care exclusions in Guideline 3: Exclusions.</li> <li>Added Guideline 5: Supplemental Data to clarify when supplemental data may be used for allowable adjustments.</li> </ul>
<b>EFFECTIVENESS OF CARE</b>				
Guidelines for Effectiveness of Care	✓	✓	✓	<ul style="list-style-type: none"> <li>Removed the MMDR file method to determine LIS/DE in the SES stratification guideline.</li> <li>Updated the note for the “Unknown” category in the SES stratification guideline.</li> </ul>
Weight Assessment and Counseling for Nutrition and Physical Activity for Children/ Adolescents (WCC)	✓	✓		<ul style="list-style-type: none"> <li>Removed the exclusion of member-reported biometric values (body mass index, height and weight).</li> <li>Added a <i>Note</i> to clarify that services rendered during a telephone visit, e-visit or virtual check-in meet criteria for the Counseling for Nutrition and Counseling for Physical Activity indicators.</li> </ul>
Childhood Immunization Status (CIS)	✓	✓		<ul style="list-style-type: none"> <li>Added a requirement that LAIV (influenza) vaccination must occur on the child’s second birthday.</li> </ul>
Immunizations for Adolescents (IMA)	✓	✓		<ul style="list-style-type: none"> <li>No changes to this measure.</li> </ul>
Lead Screening in Children (LSC)		✓		<ul style="list-style-type: none"> <li>Removed the limits to the Ages column in the <i>Rules for Allowable Adjustment of HEDIS</i> section.</li> </ul>
Breast Cancer Screening (BCS)	✓	✓	✓	<ul style="list-style-type: none"> <li>Added palliative care as a required exclusion.</li> <li>Added telephone visits, e-visits and virtual check-ins to the advanced illness exclusion.</li> <li>Added <i>Donepezil-memantine</i> to the “Dementia combinations” description in the <u>Dementia Medications List</u>.</li> <li>Added the “Number of required exclusions” data element to the Data Elements for Reporting table.</li> </ul>

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				<ul style="list-style-type: none"> <li>Added guidance adjusting required exclusions criteria in the <i>Rules for Allowable Adjustments</i> section.</li> </ul>
Cervical Cancer Screening (CCS)	✓	✓		<ul style="list-style-type: none"> <li>Added palliative care as a required exclusion.</li> <li>Updated the Hybrid Specification to indicate that sample size reduction is allowed.</li> <li>Clarified that documentation of “vaginal hysterectomy” meets criteria for documentation of hysterectomy with no residual cervix (optional exclusion).</li> <li>Added the “Number of required exclusions” data element to the Data Elements for Reporting table.</li> <li>Added guidance adjusting required exclusions criteria in the <i>Rules for Allowable Adjustments</i> section.</li> </ul>
Colorectal Cancer Screening (COL)	✓		✓	<ul style="list-style-type: none"> <li>Added palliative care as a required exclusion.</li> <li>Added telephone visits, e-visits and virtual check-ins to the advanced illness exclusion.</li> <li>Added Donepezil-memantine to the “Dementia combinations” description in the <u>Dementia Medications List</u>.</li> <li>Added the “Number of required exclusions” data element to the Data Elements for Reporting table.</li> <li>Added guidance adjusting required exclusions criteria in the <i>Rules for Allowable Adjustments</i> section.</li> </ul>
Chlamydia Screening in Women (CHL)	✓	✓		<ul style="list-style-type: none"> <li>No changes to this measure.</li> </ul>
Care for Older Adults (COA)			✓ (SNP and MMP only)	<ul style="list-style-type: none"> <li>Added a <i>Note</i> to clarify that medication review does not require the member to be present.</li> <li>Added a <i>Note</i> to clarify that services rendered during a telephone visit, e-visit or virtual check-in meet criteria for the Advance Care Planning, Functional Status Assessment and Pain Assessment indicators.</li> <li>Removed the fourth bullet in the numerator of the Hybrid Specification of the Functional Status Assessment indicator.</li> </ul>
Appropriate Testing for Pharyngitis (CWP)	✓	✓	✓	<ul style="list-style-type: none"> <li>Updated the instructions for excluding visits that result in an inpatient stay.</li> <li>Deleted step 8; this step is unnecessary because these members are removed in step 5.</li> </ul>

**4 Summary Table of Measures, Product Lines and Changes**

HEDIS MY 2020 & MY 2021 Measures	Applicable to:			Changes for HEDIS MY 2020 & MY 2021
	Commercial	Medicaid	Medicare	
Use of Spirometry Testing in the Assessment and Diagnosis of COPD (SPR)	✓	✓	✓	<ul style="list-style-type: none"> <li>Added telephone visits, e-visits and virtual check-ins to step 1 of the event/diagnosis and removed the requirement to exclude telehealth.</li> <li>Updated the instructions for excluding visits that result in an inpatient stay (step 2).</li> </ul>
Pharmacotherapy Management of COPD Exacerbation (PCE)	✓	✓	✓	<ul style="list-style-type: none"> <li>Moved the instructions from step 1 to step 2 to exclude ED visits that result in an inpatient stay.</li> <li>Added Fluticasone furoate-umeclidinium-vilanterol to the “Bronchodilator combinations” description in the <a href="#">Bronchodilator Medications List</a>.</li> <li>Added Formoterol-acclidinium to the “Bronchodilator combinations” description in the <a href="#">Bronchodilator Medications List</a>.</li> </ul>
Asthma Medication Ratio (AMR)	✓	✓		<ul style="list-style-type: none"> <li>Removed the restriction that only three of the four visits with an asthma diagnosis be an outpatient telehealth, telephone visit, e-visit or virtual check-in when identifying the event/diagnosis.</li> <li>Clarified in step 1 when the diagnosis must be on the discharge claim.</li> <li>Added Dupilumab to the “Anti-interleukin-4” description in the <a href="#">Dupilumab Medications List</a>.</li> <li>Clarified NDC code mapping requirements in the <i>Notes</i>.</li> </ul>
Controlling High Blood Pressure (CBP)	✓	✓	✓	<ul style="list-style-type: none"> <li>Revised the time frame in the event/diagnosis criteria to look for two outpatient visits with a diagnosis of hypertension in the first six months of the measurement year and the year prior to the measurement year.</li> <li>Removed the restriction that only one of the two visits with a hypertension diagnosis be an outpatient telehealth, telephone visit, e-visit or virtual check-in when identifying the event/diagnosis.</li> <li>Added palliative care as a required exclusion.</li> <li>Added telephone visits, e-visits and virtual check-ins to the advanced illness exclusion.</li> <li>Added Donepezil-memantine to the “Dementia combinations” description in the <a href="#">Dementia Medications List</a>.</li> <li>In the Administrative Specification, added telephone visits, e-visits and virtual check-ins as appropriate settings for BP readings.</li> <li>Updated the Hybrid Specification to indicate that sample size reduction is not allowed for MY 2020; sample size reduction is allowed for MY 2021.</li> <li>Removed the requirements for remote monitoring devices to allow BPs taken by any digital device.</li> </ul>

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				<ul style="list-style-type: none"> <li>Removed the exclusion of BP readings reported or taken by the member.</li> <li>Added the “Number of required exclusions” data element to the Data Elements for Reporting table.</li> <li>Added guidance for adjusting required exclusions in the <i>Rules for Allowable Adjustments</i> section.</li> </ul>
Persistence of Beta-Blocker Treatment After a Heart Attack (PBH)	✓	✓	✓	<ul style="list-style-type: none"> <li>Added telephone visits, e-visits and virtual check-ins to the advanced illness exclusion.</li> <li>Added Donepezil-memantine to the “Dementia combinations” description in the <u>Dementia Medications List</u>.</li> </ul>
Statin Therapy for Patients With Cardiovascular Disease (SPC)	✓	✓	✓	<ul style="list-style-type: none"> <li>Removed the restriction that only one of the two visits with an IVD diagnosis be an outpatient telehealth, telephone visit, e-visit or virtual check-in when identifying the event/diagnosis.</li> <li>Added telephone visits, e-visits and virtual check-ins to the advanced illness exclusion.</li> <li>Added palliative care as a required exclusion.</li> <li>Added Donepezil-memantine to the “Dementia combinations” description in the <u>Dementia Medications List</u>.</li> <li>In the <i>Rules for Allowable Adjustments</i> section, clarified that the required exclusions criteria may be adjusted with limits.</li> </ul>
Cardiac Rehabilitation (CRE)	✓	✓	✓	<ul style="list-style-type: none"> <li>First-year measure (MY 2020).</li> </ul>
Comprehensive Diabetes Care (CDC)	✓	✓	✓	<ul style="list-style-type: none"> <li>Retired the “HbA1c control (&lt;7.0%) for a selected population” indicator.</li> <li>Retired the “Medical Attention for Nephropathy” indicator for the commercial and Medicaid product lines.</li> <li>Clarified in the measure description that organizations must use the same data collection method for the HbA1c testing and control indicators (this information was previously included in the General Guidelines).</li> <li>Removed the restriction that only one of the two visits with a diabetes diagnosis be an outpatient telehealth, telephone visit, e-visit or virtual check-in when identifying the event/diagnosis.</li> <li>Added telephone visits, e-visits and virtual check-ins to the advanced illness exclusion.</li> <li>Added palliative care as a required exclusion.</li> <li>Deleted the <u>HbA1c Level 7.0–9.0 Value Set</u>.</li> </ul>

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				<ul style="list-style-type: none"> <li>• Updated the Administrative Specification logic and value sets for the Eye Exam indicator.</li> <li>• Added telephone visits, e-visits and virtual check-ins to the Administrative Specification as appropriate settings for BP readings.</li> <li>• Added Nebivolol-valsartan to the “Antihypertensive combinations” description in the <a href="#">ACE inhibitor and ARB Medications List</a>.</li> <li>• Added Donepezil-memantine to the “Dementia combinations” description in the <a href="#">Dementia Medications List</a>.</li> <li>• Added polycystic ovarian syndrome to the optional exclusions.</li> <li>• Added a <i>Note</i> to the <i>Denominator-Sample Size Reduction</i> section in the Hybrid Specification.</li> <li>• Clarified that documentation of “HB1c” meets criteria for the Hybrid Specification of the HbA1c testing indicator.</li> <li>• Clarified that eye exam results read by a system that provides an artificial intelligence (AI) interpretation meet criteria.</li> <li>• Removed the requirements for remote monitoring devices to allow BPs taken by any digital device.</li> <li>• Removed the exclusion of BP readings reported or taken by the member.</li> <li>• Revised the Data Elements for Reporting tables.</li> <li>• In the <i>Rules for Allowable Adjustments</i> section, clarified that the required exclusions criteria may be adjusted with limits.</li> </ul>
Kidney Health Evaluation for Patients With Diabetes (KED)	✓	✓	✓	<ul style="list-style-type: none"> <li>• First-year measure (MY 2020).</li> </ul>
Statin Therapy for Patients With Diabetes (SPD)	✓	✓	✓	<ul style="list-style-type: none"> <li>• Added polycystic ovarian syndrome to the optional exclusions.</li> <li>• Removed the restriction that only one of the two visits with a diabetes diagnosis be an outpatient telehealth, telephone visit, e-visit or virtual check-in when identifying the event/diagnosis.</li> <li>• Removed the restriction that only one of the two visits with an IVD diagnosis be an outpatient telehealth, telephone visit, e-visit or virtual check-in when identifying the event/diagnosis, step 2 required exclusions.</li> <li>• Added telephone visits, e-visits and virtual check-ins to the advanced illness exclusion.</li> <li>• Added palliative care as a required exclusion.</li> </ul>

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				<ul style="list-style-type: none"> <li>Added Donepezil-memantine to the “Dementia combinations” description in the <a href="#">Dementia Medications List</a>.</li> <li>Added Pitavastatin 1 mg to the <a href="#">Pitavastatin Moderate Intensity Medications List</a> and deleted the <a href="#">Pitavastatin Low Intensity Medications List</a>.</li> <li>In the <i>Rules for Allowable Adjustments</i> section, clarified that the required exclusions criteria may be adjusted with limits.</li> </ul>
Disease-Modifying Anti-Rheumatic Drug Therapy for Rheumatoid Arthritis (ART)			✓	<ul style="list-style-type: none"> <li>Removed the restriction that only one of the two visits with a rheumatoid arthritis diagnosis be an outpatient telehealth, telephone visit, e-visit or virtual check-in when identifying the event/diagnosis.</li> <li>Added telephone visits, e-visits and virtual check-ins to the advanced illness exclusion.</li> <li>Added Upadacitinib to the “Janus kinase (JAK)” description in the <a href="#">DMARD Medications List</a>.</li> <li>Added Donepezil-memantine to the “Dementia combinations” description in the <a href="#">Dementia Medications List</a>.</li> <li><b>This measure is retired for MY 2021.</b></li> </ul>
Osteoporosis Management in Women Who Had a Fracture (OMW)			✓	<ul style="list-style-type: none"> <li>Updated the instructions for excluding visits that result in an inpatient stay (steps 1 and 2).</li> <li>Added telephone visits, e-visits and virtual check-ins to the advanced illness exclusion.</li> <li>Added palliative care as a required exclusion.</li> <li>Added Donepezil-memantine to the “Dementia combinations” description in the <a href="#">Dementia Medications List</a>.</li> <li>In the <i>Rules for Allowable Adjustments</i> section, clarified that the required exclusions criteria may be adjusted with limits.</li> </ul>
Osteoporosis Screening in Older Women (OSW)			✓	<ul style="list-style-type: none"> <li>First-year measure (MY 2020).</li> </ul>
Antidepressant Medication Management (AMM)	✓	✓	✓	<ul style="list-style-type: none"> <li>Added e-visits and virtual check-ins to the event/diagnosis (step 2 required exclusion).</li> </ul>
Follow-Up Care for Children Prescribed ADHD Medication (ADD)	✓	✓		<ul style="list-style-type: none"> <li>Clarified in step 4 (of both rates) when the diagnosis must be on the discharge claim.</li> <li>Added telehealth and telephone visits to the Rate 1 numerator.</li> <li>Added e-visits and virtual check-ins to the Rate 2 numerator and modified the telehealth restrictions.</li> </ul>

8 Summary Table of Measures, Product Lines and Changes

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	Commercial	Medicaid	Medicare	
Follow-Up After Hospitalization for Mental Illness (FUH)	✓	✓	✓	<ul style="list-style-type: none"> <li>• Replaced “mental health practitioner” with “mental health provider.”</li> <li>• Removed the mental health provider requirement for follow-up visits for intensive outpatient encounters, partial hospitalizations, community mental health centers and electroconvulsive therapy settings.</li> <li>• Added visits in a behavioral healthcare setting to the numerator.</li> <li>• Added telephone visits to the numerator.</li> <li>• Deleted the <u>Mental Health Practitioner Value Set</u>.</li> <li>• Revised the instructions in the <i>Notes</i> for identifying mental health providers.</li> </ul>
Follow-Up After Emergency Department Visit for Mental Illness (FUM)	✓	✓	✓	<ul style="list-style-type: none"> <li>• Added telephone visits, e-visits and virtual check-ins to the numerator.</li> </ul>
Follow-Up After High Intensity Care for Substance Use Disorder (FUI)	✓	✓	✓	<ul style="list-style-type: none"> <li>• Clarified the Episode Date when detoxification occurs during an acute inpatient or residential treatment stay.</li> <li>• Clarified when the diagnosis must be on the discharge claim (event/diagnosis).</li> <li>• Added value sets to the numerators.</li> <li>• Added the <i>Rules for Allowable Adjustments of HEDIS</i> section.</li> </ul>
Follow-Up After Emergency Department Visit for Alcohol and Other Drug Abuse or Dependence (FUA)	✓	✓	✓	<ul style="list-style-type: none"> <li>• Added value sets to the numerators.</li> </ul>
Pharmacotherapy for Opioid Use Disorder (POD)	✓	✓	✓	<ul style="list-style-type: none"> <li>• Added value sets to the Opioid Use Disorder Treatment Medications table.</li> <li>• Added the <i>Rules for Allowable Adjustments of HEDIS</i> section.</li> </ul>
Diabetes Screening for People With Schizophrenia or Bipolar Disorder Who Are Using Antipsychotic Medications (SSD)		✓		<ul style="list-style-type: none"> <li>• Added telephone visits, e-visits and virtual check-ins to step 1 of the event/diagnosis.</li> <li>• Removed the restriction that only one of the two visits with a diabetes diagnosis be an outpatient telehealth, telephone visit, e-visit or virtual check-in when identifying the event/diagnosis, step 2 required exclusions.</li> </ul>
Diabetes Monitoring for People With Diabetes and Schizophrenia (SMD)		✓		<ul style="list-style-type: none"> <li>• Added telephone visits, e-visits and virtual check-ins to step 1 of the event/diagnosis.</li> <li>• Removed the restriction that only one of the two visits with a diabetes diagnosis be an outpatient telehealth, telephone visit, e-visit or virtual check-in when identifying the event/diagnosis.</li> </ul>



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				<ul style="list-style-type: none"> <li>Added polycystic ovarian syndrome to the optional exclusions.</li> </ul>
Cardiovascular Monitoring for People With Cardiovascular Disease and Schizophrenia (SMC)		✓		<ul style="list-style-type: none"> <li>Clarified in step 2 when the diagnosis must be on the discharge claim.</li> <li>Added telephone visits, e-visits and virtual check-ins to step 1 of the event/diagnosis.</li> <li>Removed the restriction that only one of the two visits with an IVD diagnosis be an outpatient telehealth, telephone visit, e-visit or virtual check-in when identifying the event/diagnosis.</li> </ul>
Adherence to Antipsychotic Medications for Individuals With Schizophrenia (SAA)	✓	✓	✓	<ul style="list-style-type: none"> <li>Relabeled step 2 to “Required exclusions” and moved the exclusions for members with advanced illness, frailty, enrolled in an I-SNP or living long-term in an institutional setting to a new step 3 labeled as “exclusions.”</li> <li>Added telephone visits, e-visits and virtual check-ins to step 1 of the event/diagnosis.</li> <li>Added telephone visits, e-visits and virtual check-ins to the advanced illness exclusion.</li> <li>Added Donepezil-memantine to the “Dementia combinations” description in the <u>Dementia Medications List</u>.</li> </ul>
Metabolic Monitoring for Children and Adolescents on Antipsychotics (APM)	✓	✓		<ul style="list-style-type: none"> <li>Clarified in the <i>Rules for Allowable Adjustments of HEDIS</i> that when adjusting ages, the upper age range may be expanded or there may be no upper age limit.</li> </ul>
Transitions of Care (TRC)			✓	<ul style="list-style-type: none"> <li>Revised the time frame for the <i>Notification of Inpatient Admission and Receipt of Discharge Information</i> indicators to the day of admission/discharge through 2 days after the admission/discharge.</li> <li>Clarified how to handle observation visits that precede the inpatient stay when identifying the event/diagnosis.</li> <li>Added e-visits and virtual check-ins to the Patient Engagement After Inpatient Discharge numerator.</li> <li>Updated the Hybrid Specification to indicate that sample size reduction is not allowed for MY 2020; sample size reduction is allowed for MY 2021.</li> <li>Revised the “one medical record” requirement to allow reporting from the outpatient medical record that is accessible to the PCP or ongoing care provider.</li> <li>Revised the sixth bullet of the <i>Receipt of Discharge Information</i> indicator of the hybrid specification.</li> <li>Added a <i>Note</i> to clarify that medication reconciliation does not require the member to be present.</li> </ul>

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				<ul style="list-style-type: none"> <li>In the Data Elements for Reporting table, in the “Numerator events by supplemental data” row of the Hybrid column, replaced <i>Each of the 2 rates, for each age stratification and total</i> with <i>Each of the 4 rates, for each age stratification and total</i> because supplemental data may now be used.</li> </ul>
Follow-Up After Emergency Department Visit for People With Multiple High-Risk Chronic Conditions (FMC)			✓	<ul style="list-style-type: none"> <li>Clarified that ED visits that result in an inpatient stay are excluded (step 2).</li> <li>Added telephone visits, e-visits and virtual check-ins to the event/diagnosis when identifying visits with chronic condition diagnoses, step 3.</li> <li>Added e-visits and virtual check-ins to the numerator.</li> </ul>
Non-Recommended Cervical Cancer Screening in Adolescent Females (NCS)	✓	✓		<ul style="list-style-type: none"> <li>No changes to this measure.</li> </ul>
Non-Recommended PSA-Based Screening in Older Men (PSA)			✓	<ul style="list-style-type: none"> <li>No changes to this measure.</li> </ul>
Appropriate Treatment for Upper Respiratory Infection (URI)	✓	✓	✓	<ul style="list-style-type: none"> <li>Updated the instructions for excluding visits that result in an inpatient stay.</li> <li>In the <i>Rules for Allowable Adjustments</i> section, clarified that the numerator criteria may be adjusted with limits.</li> </ul>
Avoidance of Antibiotic Treatment for Acute Bronchitis/Bronchiolitis (AAB)	✓	✓	✓	<ul style="list-style-type: none"> <li>Updated the instructions for excluding visits that result in an inpatient stay.</li> <li>In the <i>Rules for Allowable Adjustments</i> section, clarified that the numerator criteria may be adjusted with limits.</li> </ul>
Use of Imaging Studies for Low Back Pain (LBP)	✓	✓		<ul style="list-style-type: none"> <li>In the <i>Rules for Allowable Adjustments</i> section, clarified that the numerator criteria may be adjusted with limits.</li> </ul>
Potentially Harmful Drug-Disease Interactions in Older Adults (DDE)			✓	<ul style="list-style-type: none"> <li>Replaced references to “anticonvulsants” with “antiepileptics.”</li> <li>Clarified in the IESD definition for nonacute inpatient encounters identified only by a professional claim that the IESD is the date of service.</li> <li>Added palliative care as a required exclusion.</li> <li>Added Donepezil-memantine to the “Dementia combinations” description in the <a href="#">Dementia Medications List</a>.</li> <li>Updated the “Number of required exclusions” data element in the Data Elements for Reporting Table.</li> </ul>

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				<ul style="list-style-type: none"> <li>In the <i>Rules for Allowable Adjustments</i> section, clarified that the required exclusions and numerator criteria may be adjusted with limits.</li> </ul>
Use of High-Risk Medications in Older Adults (DAE)			✓	<ul style="list-style-type: none"> <li>Added a definition for “IPSD.”</li> <li>Revised the continuous enrollment to the measurement year and the year prior to the measurement year.</li> <li>Updated the age of Medicare members in the eligible population to reflect the extended continuous enrollment period.</li> <li>Added palliative care as a required exclusion.</li> <li>Added Rate 2: High-Risk Medications to Avoid Except for Appropriate Diagnosis.</li> <li>Revised Rate 1 to specify that two dispensing events for the same high-risk medication drug class meets numerator criteria.</li> <li>Removed the days supply requirement for nonbenzodiazepine hypnotic medications.</li> <li>Added a Total rate.</li> <li>Updated the <i>Note</i> section.</li> <li>Added the “Number of required exclusions” data element to the Data Elements for Reporting table.</li> <li>In the <i>Rules for Allowable Adjustments</i> section, clarified that the required exclusions and numerator criteria may be adjusted with limits.</li> </ul>
Use of Opioids at High Dosage (HDO)	✓	✓	✓	<ul style="list-style-type: none"> <li>Clarified the instructions for calculating covered days for the numerator.</li> <li>Clarified the instructions for treatment period.</li> <li>Added palliative care as a required exclusion.</li> <li>Added medication lists for acetaminophen benzhydrocodone, aspirin codeine and codeine phosphate.</li> <li>In the <i>Rules for Allowable Adjustments</i> section, clarified that the event/diagnosis, required exclusions and numerator criteria may be adjusted with limits.</li> </ul>
Use of Opioids From Multiple Providers (UOP)	✓	✓	✓	<ul style="list-style-type: none"> <li>Added the <u>Aspirin Codeine Medications List</u>, the <u>Codeine Phosphate Medications List</u> and the <u>Acetaminophen Benzhydrocodone Medications List</u>.</li> <li>Clarified the instructions for calculating covered days.</li> <li>In the <i>Rules for Allowable Adjustments</i> section, clarified that the event/diagnosis and numerator criteria may be adjusted with limits.</li> </ul>

12 Summary Table of Measures, Product Lines and Changes

HEDIS MY 2020 & MY 2021 Measures	Applicable to:			Changes for HEDIS MY 2020 & MY 2021
	Commercial	Medicaid	Medicare	
Risk of Continued Opioid Use (COU)	✓	✓	✓	<ul style="list-style-type: none"> <li>Added the Aspirin Codeine Medications List, the Codeine Phosphate Medications List and the Acetaminophen Benzhydrocodone Medications List.</li> <li>Clarified the instructions for calculating covered days.</li> <li>Added palliative care as a required exclusion.</li> <li>In the <i>Rules for Allowable Adjustments</i> section, clarified that the event/diagnosis, required exclusions and numerator criteria may be adjusted with limits.</li> </ul>
Medicare Health Outcomes Survey (HOS)			✓	<ul style="list-style-type: none"> <li>This measure is collected using survey methodology. Detailed specifications and summary of changes are contained in <i>HEDIS Volume 6: Specifications for the Medicare Health Outcomes Survey</i>.</li> </ul>
Fall Risk Management (FRM)			✓	<ul style="list-style-type: none"> <li>This measure is collected using survey methodology. Detailed specifications and summary of changes are contained in <i>HEDIS Volume 6: Specifications for the Medicare Health Outcomes Survey</i>.</li> </ul>
Management of Urinary Incontinence in Older Adults (MUI)			✓	<ul style="list-style-type: none"> <li>This measure is collected using survey methodology. Detailed specifications and summary of changes are contained in <i>HEDIS Volume 6: Specifications for the Medicare Health Outcomes Survey</i>.</li> </ul>
Physical Activity in Older Adults (PAO)			✓	<ul style="list-style-type: none"> <li>This measure is collected using survey methodology. Detailed specifications and summary of changes are contained in <i>HEDIS Volume 6: Specifications for the Medicare Health Outcomes Survey</i>.</li> </ul>
Flu Vaccinations for Adults Ages 18-64 (FVA)	✓	✓		<ul style="list-style-type: none"> <li>No changes to this measure.</li> </ul>
Flu Vaccinations for Adults Ages 65 and Older (FVO)			✓	<ul style="list-style-type: none"> <li>No changes to this measure.</li> </ul>
Medical Assistance With Smoking and Tobacco Use Cessation (MSC)	✓	✓	✓	<ul style="list-style-type: none"> <li>No changes to this measure.</li> </ul>
Pneumococcal Vaccination Status for Older Adults (PNU)			✓	<ul style="list-style-type: none"> <li>No changes to this measure.</li> </ul>

HEDIS MY 2020 & MY 2021 Measures	Applicable to:			Changes for HEDIS MY 2020 & MY 2021
	Commercial	Medicaid	Medicare	
<b>ACCESS/AVAILABILITY OF CARE</b>				
<b>Guidelines for Access/ Availability of Care</b>				<ul style="list-style-type: none"> <li>No changes to these guidelines.</li> </ul>
Adults' Access to Preventive/ Ambulatory Health Services (AAP)	✓	✓	✓	<ul style="list-style-type: none"> <li>No changes to this measure.</li> </ul>
Annual Dental Visit (ADV)		✓		<ul style="list-style-type: none"> <li>No changes to this measure.</li> </ul>
Initiation and Engagement of Alcohol and Other Drug Abuse or Dependence Treatment (IET)	✓	✓	✓	<ul style="list-style-type: none"> <li>Clarified the Episode Date when detoxification occurs during an acute inpatient stay.</li> <li>Updated the step 3 instructions for ED and observation visits that result in an inpatient stay, to make them consistent with instructions in the <i>Definitions</i> section.</li> <li>Added value sets for opioid treatment services that are billed weekly or monthly to the denominator and numerators.</li> <li>Updated the continuous enrollment period.</li> </ul>
Prenatal and Postpartum Care (PPC)	✓	✓		<ul style="list-style-type: none"> <li>Revised the definition of last enrollment segment.</li> <li>Clarified that visits that occur prior to the enrollment start date (during the pregnancy) meet criteria.</li> <li>Added telephone visits (<u>Telephone Visits Value Set</u>) e-visits and virtual check-ins (<u>Online Assessments Value Set</u>) to the <u>Timeliness of Prenatal Care</u> rate (administrative specification) and clarified in the <i>Notes</i> that services provided via telephone, e-visit or virtual check-in are eligible for use in reporting both rates.</li> <li>Updated the Hybrid Specification to indicate that sample size reduction is allowed using only the current year's administrative rate for MY 2020; for MY 2021, organizations may reduce the sample size using the current year's administrative rate or the prior year's audited, product line-specific rate.</li> <li>Added examples of "pregnancy diagnosis" in the Hybrid Specification of the Timeliness of Prenatal Care indicator.</li> </ul>
Use of First-Line Psychosocial Care for Children and Adolescents on Antipsychotics (APP)	✓	✓		<ul style="list-style-type: none"> <li>Added telephone visits and e-visits or virtual check-ins to the event/diagnosis (step 4 required exclusions).</li> <li>Clarified in the <i>Rules for Allowable Adjustments</i> that the required exclusions may not be adjusted.</li> </ul>

14 Summary Table of Measures, Product Lines and Changes

HEDIS MY 2020 & MY 2021 Measures	Applicable to:			Changes for HEDIS MY 2020 & MY 2021
	Commercial	Medicaid	Medicare	
<b>EXPERIENCE OF CARE</b>				
CAHPS Health Plan Survey 5.0H, Adult Version (CPA)	✓	✓		<ul style="list-style-type: none"> <li>This measure is collected using survey methodology. Detailed specifications and summary of changes are contained in <i>HEDIS Volume 3: Specifications for Survey Measures</i>.</li> </ul>
CAHPS Health Plan Survey 5.0H, Child Version (CPC)		✓		<ul style="list-style-type: none"> <li>This measure is collected using survey methodology. Detailed specifications and summary of changes are contained in <i>HEDIS Volume 3: Specifications for Survey Measures</i>.</li> </ul>
Children With Chronic Conditions (CCC)		✓		<ul style="list-style-type: none"> <li>This measure is collected using survey methodology. Detailed specifications and summary of changes are contained in <i>HEDIS Volume 3: Specifications for Survey Measures</i>.</li> </ul>
<b>UTILIZATION AND RISK ADJUSTED UTILIZATION</b>				
<b>Guidelines for Utilization</b>	✓	✓	✓	<ul style="list-style-type: none"> <li>Deleted <i>Guideline 15: Data Element Tables</i>; refer to <i>General Guideline 53: Reporting Tables</i>.</li> </ul>
Well-Child Visits in the First 30 Months of Life (W30)	✓	✓		<ul style="list-style-type: none"> <li>Revised the measure name to Well-Child Visits in the First 30 Months of Life.</li> <li>Retired the 0, 1, 2, 3, 4 and 5 well-child visit rates.</li> <li>Added Rate 2 for children who turned 30 months old during the measurement year and had two or more well-child visits in the last 15 months.</li> <li>Removed the Hybrid Data Collection Method.</li> <li>Removed the telehealth exclusion.</li> <li>Revised the Data Elements for Reporting table.</li> <li>Revised the Ages criteria in the Rules for Allowable Adjustments section to only allow ranges within the specified age range of the measure.</li> </ul>
Child and Adolescent Well-Care Visits (WCV)	✓	✓		<ul style="list-style-type: none"> <li>This measure is a combination measure that replaces the former “Well-Child Visits in the Third, Fourth, Fifth and Sixth Years of Life” and “Adolescent Well-Care Visits” HEDIS measures.</li> <li>Added members age 7–11 years.</li> <li>Added age stratifications.</li> <li>Removed the Hybrid Data Collection Method.</li> <li>Removed the telehealth exclusion.</li> <li>Revised the Data Elements for Reporting table.</li> </ul>

HEDIS MY 2020 & MY 2021 Measures	Applicable to:			Changes for HEDIS MY 2020 & MY 2021
	Commercial	Medicaid	Medicare	
				<ul style="list-style-type: none"> <li>Revised the Ages criteria in the Rules for Allowable Adjustments section to only allow ranges within the specified age range.</li> </ul>
Frequency of Selected Procedures (FSP)	✓	✓	✓	<ul style="list-style-type: none"> <li>Updated the “Count as one procedure...” definition in the Calculations section.</li> </ul>
Ambulatory Care (AMB)		✓		<ul style="list-style-type: none"> <li>No changes to this measure.</li> </ul>
Inpatient Utilization—General Hospital/Acute Care (IPU)		✓		<ul style="list-style-type: none"> <li>No changes to this measure.</li> </ul>
Identification of Alcohol and Other Drug Services (IAD)	✓	✓	✓	<ul style="list-style-type: none"> <li>Added value sets to identify outpatient or medication treatment.</li> </ul>
Mental Health Utilization (MPT)	✓	✓	✓	<ul style="list-style-type: none"> <li>Deleted the Mental Health Practitioner Value Set.</li> <li>Replaced references to “mental health practitioner” with “mental health provider.”</li> <li>Added telephone visits (Telephone Visits Value Set), e-visits and virtual check-ins (Online Assessments Value Set) to the <i>Telehealth</i> section.</li> <li>Deleted redundant value sets from the <i>Telehealth</i> section.</li> <li>Revised the instructions in the <i>Notes</i> for identifying mental health providers.</li> </ul>
Antibiotic Utilization (ABX)	✓	✓	✓	<ul style="list-style-type: none"> <li>No changes to this measure.</li> </ul>
<b>Guidelines for Risk Adjusted Utilization</b>	✓	✓	✓	<ul style="list-style-type: none"> <li>Removed the MMDR file method to determine LIS/DE in <i>Guideline 7: SES stratification</i>.</li> <li>Updated the note for the “Unknown” category in <i>Guideline 7: SES stratification</i>.</li> <li>Deleted <i>Guideline 8: Data Element Tables</i>; refer to <i>General Guideline 53: Reporting Tables</i>.</li> <li>Renamed the <i>Utilization Risk Adjustment Determination</i> section to <i>Risk Adjustment Comorbidity Category Determination</i>.</li> <li>Added telephone visits to Risk Adjustment Comorbidity Category Determination.</li> <li>Replaced references to “encounters” with “denominator units” in the <i>Risk Adjustment Comorbidity Category Determination</i> section.</li> <li>Replaced references to “Table CC-Comorbid” with “Table CC-Mapping” in the <i>Risk Adjustment Comorbidity Category Determination</i> section.</li> <li>Replaced references to “HCC column” with “Comorbid HCC columns” in step 5 in the <i>Risk Adjustment Comorbidity Category Determination</i> section.</li> </ul>

HEDIS MY 2020 & MY 2021 Measures	Applicable to:			Changes for HEDIS MY 2020 & MY 2021
	Commercial	Medicaid	Medicare	
				<ul style="list-style-type: none"> <li>Updated the Example: Table HCC—Comb in step 5 in the <i>Risk Adjustment Comorbidity Category Determination</i> section.</li> </ul>
Plan All-Cause Readmissions (PCR)	✓	✓	✓	<ul style="list-style-type: none"> <li>Revised the measure description.</li> <li>Added a <i>Note</i> to the definition of “plan population” to clarify that it should be used as a denominator for the outlier rate.</li> <li>Removed “Risk Adjustment Tables” from the Definitions.</li> <li>Replaced references to “Table HCC-Surg” with references to the “<u>Surgery Procedure Value Set</u>” in the <i>Risk Adjustment Determination</i> section.</li> <li>Replaced references to “Table PCR-DischCC” with “Table CC_Mapping” in the <i>Risk Adjustment Determination</i> section.</li> <li>Updated the <i>Note</i> in the <i>Risk Adjustment Weighting</i> section for IHS that are discharged or transferred to skilled nursing care.</li> <li>Removed references to specific risk weight tables in the <i>Risk Adjustment Weighting</i> section.</li> <li>Clarified rounding rules in step 8 of the <i>Risk Adjustment Weighting</i> section.</li> <li>Revised the data element tables to separate the Medicaid and commercial product lines from the Medicare product line.</li> </ul>
Hospitalization Following Discharge from a Skilled Nursing Facility (HFS)			✓	<ul style="list-style-type: none"> <li>Revised measure description.</li> <li>Revised the age requirements to 65 years and older.</li> <li>Replaced references to “Table HFS-DischCC” with “Table CC_Mapping” in the <i>Risk Adjustment Determination</i> section.</li> <li>Clarified in the <i>Risk Adjustment Determination</i> section that diagnoses that cannot be mapped to Table CC_Mapping are excluded.</li> <li>Removed references to specific risk weight tables in the <i>Risk Adjustment Weighting</i> section.</li> <li>Clarified rounding rules in step 7 of the <i>Risk Adjustment Weighting</i> section.</li> <li>Updated step 3 of the numerator to specify that diagnoses must be found on the discharge claim.</li> </ul>
Acute Hospital Utilization (AHU)	✓		✓	<ul style="list-style-type: none"> <li>Removed references to specific risk weight tables in the <i>Risk Adjustment Weighting</i> section.</li> <li>Clarified that for categories with a single member the covariance should be set to zero in step 4 of the Expected Count of Hospitalization calculation.</li> </ul>



HEDIS MY 2020 & MY 2021 Measures	Applicable to:			Changes for HEDIS MY 2020 & MY 2021
	Commercial	Medicaid	Medicare	
Emergency Department Utilization (EDU)	✓		✓	<ul style="list-style-type: none"> <li>• Added definitions for “outlier” and “non-outlier.”</li> <li>• Revised step 1 in the calculation of observed events to exclude ED visits that result in an observation stay.</li> <li>• Added step 3 in the calculation of observed events to remove discharges for outlier members.</li> <li>• Removed references to specific risk weight tables in the <i>Risk Adjustment Weighting</i> section.</li> <li>• Specified separate PPV and PUCV risk adjustment weight tables for the Medicare population age 18-64 and the Medicare population age 65 and older.</li> <li>• Removed step 3 to identify the base risk weight from the calculation of PPV and PUCV; renumbered subsequent steps.</li> <li>• Clarified that for categories with a single member the covariance should be set to zero in step 4 of the Expected Count of Visits calculation.</li> <li>• Added instructions to report outliers separate from non-outliers.</li> <li>• Revised the data elements tables and added reporting columns for outliers.</li> </ul>
Hospitalization for Potentially Preventable Complications (HPC)			✓	<ul style="list-style-type: none"> <li>• Removed the toe amputation exclusion from step 3 of Chronic ACSC Observed Events.</li> <li>• Removed the “acute bronchitis with COPD diagnosis” bullet from step 3 of Chronic ACSC Observed Events.</li> <li>• Removed references to specific risk weight tables in the <i>Risk Adjustment Weighting and Calculation of the Expected Events</i> section.</li> <li>• Clarified that for categories with a single member the covariance should be set to zero in step 4 of the Expected Count of Hospitalization calculation.</li> </ul>
<b>HEALTH PLAN DESCRIPTIVE INFORMATION</b>				
Enrollment by Product Line (ENP)	✓	✓	✓	<ul style="list-style-type: none"> <li>• Revised the Data Elements for Reporting table.</li> </ul>
Enrollment by State (EBS)	✓	✓	✓	<ul style="list-style-type: none"> <li>• No changes to this measure.</li> </ul>
Language Diversity of Membership (LDM)	✓	✓	✓	<ul style="list-style-type: none"> <li>• Revised the Data Elements for Reporting tables.</li> </ul>
Race/Ethnicity Diversity of Membership (RDM)	✓	✓	✓	<ul style="list-style-type: none"> <li>• Revised the note referring to total member counts.</li> <li>• Revised the Data Elements for Reporting tables.</li> </ul>

HEDIS MY 2020 & MY 2021 Measures	Applicable to:			Changes for HEDIS MY 2020 & MY 2021
	Commercial	Medicaid	Medicare	
Total Membership (TLM)	✓	✓	✓	<ul style="list-style-type: none"> <li>No changes to this measure.</li> </ul>
<b>MEASURES REPORTED USING ELECTRONIC CLINICAL DATA SYSTEMS</b>				
Guidelines for Measures Reported Using ECDS	✓	✓	✓	<ul style="list-style-type: none"> <li>Revised the title of the ECDS guidelines.</li> <li>Replaced references to “EHR” with “EHR/PHR.”</li> <li>Updated <i>Guideline 2: Data Collection Methods</i> to indicate that data collection for the SSoRs must be completed by the supplemental data collection deadline and an SSoR can be refreshed.</li> <li>Updated the Member-reported data and EHR/PHR definitions in <i>Guideline 4: Types of ECDS data</i>.</li> <li>Revised <i>Guideline 5: Member Allocation to HEDIS ECDS Measures</i>.</li> <li>Updated <i>Guideline 6: HEDIS ECDS Digital Measure Format</i> to indicate that a Technical Release Notes file will be included in the digital measure packages with the list of measure updates.</li> <li>Added <i>Guideline 8: Disclaimer for HEDIS ECDS Measure Specifications</i>.</li> </ul>
Breast Cancer Screening (BCS-E)	✓	✓	✓	<ul style="list-style-type: none"> <li>Added a palliative care exclusion.</li> <li>Added telephone visits, e-visits and virtual check-ins to the advanced illness exclusion.</li> <li>Restructured the Data Elements for Reporting tables.</li> <li>Replaced references to “continuous enrollment,” “allowable gap” and “anchor date” with “allocation” in the <i>Eligible Population</i> section of the Rules for Allowable Adjustments.</li> <li>Clarified the exclusion criteria in the <i>Rules for Allowable Adjustments</i> section.</li> <li>Refer to the Technical Release Notes file in the Digital Measures Package for a comprehensive list of changes.</li> </ul>
Colorectal Cancer Screening (COL-E)	✓		✓	<ul style="list-style-type: none"> <li>Added a palliative care exclusion.</li> <li>Restructured the Data Elements for Reporting tables.</li> <li>Replaced references to “continuous enrollment,” “allowable gap” and “anchor date” with “allocation” in the <i>Eligible Population</i> section of the Rules for Allowable Adjustments.</li> <li>Clarified the exclusion criteria in the <i>Rules for Allowable Adjustments</i> section.</li> <li>Refer to the Technical Release Notes file in the Digital Measures Package for a comprehensive list of changes.</li> </ul>

HEDIS MY 2020 & MY 2021 Measures	Applicable to:			Changes for HEDIS MY 2020 & MY 2021
	Commercial	Medicaid	Medicare	
Follow-Up Care for Children Prescribed ADHD Medication (ADD-E)	✓	✓		<ul style="list-style-type: none"> <li>Added online assessments to the Rate 2 numerator and modified the telehealth restrictions.</li> <li>Restructured the Data Elements for Reporting tables.</li> <li>Replaced references to “continuous enrollment,” “allowable gap” and “anchor date” with “allocation” in the <i>Eligible Population</i> section of the Rules for Allowable Adjustments.</li> <li>Clarified the exclusion criteria in the <i>Rules for Allowable Adjustments</i> section.</li> <li>Refer to the Technical Release Notes file in the Digital Measures Package for a comprehensive list of changes.</li> </ul>
Depression Screening and Follow-Up for Adolescents and Adults (DSF-E)	✓	✓	✓	<ul style="list-style-type: none"> <li>Revised the thresholds for determining a “positive screen” across depression screening tools that identify members to receive follow-up care.</li> <li>Combined the 18–44 years and 45–64 years age strata.</li> <li>Added online assessments to Numerator 2 (added online assessment codes to the <u>Follow Up Visits Value Set</u>).</li> <li>Restructured the Data Elements for Reporting tables.</li> <li>Replaced references to “continuous enrollment,” “allowable gap” and “anchor date” with “allocation” in the <i>Eligible Population</i> section of the Rules for Allowable Adjustments.</li> <li>Clarified that the hospice exclusion may be adjusted in the <i>Exclusions</i> section of the Rules for Allowable Adjustments.</li> <li>Refer to the Technical Release Notes file in the Digital Measures Package for a comprehensive list of changes.</li> </ul>
Utilization of the PHQ-9 to Monitor Depression Symptoms for Adolescents and Adults (DMS-E)	✓	✓	✓	<ul style="list-style-type: none"> <li>Added telephone visits and online assessment codes to the <u>Interactive Outpatient Encounter Value Set</u>.</li> <li>Restructured the Data Elements for Reporting tables.</li> <li>Replaced references to “continuous enrollment,” “allowable gap” and “anchor date” with “allocation” in the <i>Eligible Population</i> section of the Rules for Allowable Adjustments.</li> <li>Clarified that the hospice exclusion may be adjusted in the <i>Exclusions</i> section of the Rules for Allowable Adjustments.</li> <li>Refer to the Technical Release Notes file in the Digital Measures Package for a comprehensive list of changes.</li> </ul>
Depression Remission or Response for Adolescents and Adults (DRR-E)	✓	✓	✓	<ul style="list-style-type: none"> <li>Restructured the Data Elements for Reporting tables.</li> </ul>

HEDIS MY 2020 & MY 2021 Measures	Applicable to:			Changes for HEDIS MY 2020 & MY 2021
	Commercial	Medicaid	Medicare	
				<ul style="list-style-type: none"> <li>Replaced references to “continuous enrollment,” “allowable gap” and “anchor date” with “allocation” in the <i>Eligible Population</i> section of the Rules for Allowable Adjustments.</li> <li>Clarified that the hospice exclusion may be adjusted in the <i>Exclusions</i> section of the Rules for Allowable Adjustments.</li> <li>Refer to the Technical Release Notes file in the Digital Measures Package for a comprehensive list of changes.</li> </ul>
Unhealthy Alcohol Use Screening and Follow-Up (ASF-E)	✓	✓	✓	<ul style="list-style-type: none"> <li>Revised the timing for the AUD diagnosis exclusion to remove members with a diagnosis during the year prior to the measurement year.</li> <li>Restructured the Data Elements for Reporting tables.</li> <li>Replaced references to “continuous enrollment,” “allowable gap” and “anchor date” with “allocation” in the <i>Eligible Population</i> section of the Rules for Allowable Adjustments.</li> <li>Clarified that the hospice exclusion may be adjusted in the <i>Exclusions</i> section of the Rules for Allowable Adjustments.</li> <li>Refer to the Technical Release Notes file in the Digital Measures Package for a comprehensive list of changes.</li> </ul>
Adult Immunization Status (AIS-E)	✓	✓	✓	<ul style="list-style-type: none"> <li>Revised the numerator requirements for Rate 4: Immunization Status-Pneumococcal.</li> <li>Removed the composite rate.</li> <li>Restructured the Data Elements for Reporting tables.</li> <li>Replaced references to “continuous enrollment,” “allowable gap” and “anchor date” with “allocation” in the <i>Eligible Population</i> section of the <i>Rules for Allowable Adjustments</i>.</li> <li>Clarified that the hospice exclusion may be adjusted in the <i>Exclusions</i> section of the Rules for Allowable Adjustments.</li> <li>Refer to the Technical Release Notes file in the Digital Measures Package for a comprehensive list of changes.</li> </ul>
Prenatal Immunization Status (PRS-E)	✓	✓		<ul style="list-style-type: none"> <li>Restructured the Data Elements for Reporting tables.</li> <li>Replaced references to “continuous enrollment,” “allowable gap” and “anchor date” with “allocation” in the <i>Eligible Population</i> section of the Rules for Allowable Adjustments.</li> <li>In the <i>Rules for Allowable Adjustments</i> section, clarified that the exclusions criteria may be adjusted with limits.</li> <li>Clarified that the hospice exclusion may be adjusted in the <i>Exclusions</i> section of the Rules for Allowable Adjustments.</li> </ul>

HEDIS MY 2020 & MY 2021 Measures	Applicable to:			Changes for HEDIS MY 2020 & MY 2021
	Commercial	Medicaid	Medicare	
				<ul style="list-style-type: none"> <li>Refer to the Technical Release Notes file in the Digital Measures Package for a comprehensive list of changes.</li> </ul>
Prenatal Depression Screening and Follow-Up (PND-E)	✓	✓		<ul style="list-style-type: none"> <li>Raised the thresholds for determining a “positive screen” across depression screening tools that identify members to receive follow-up care.</li> <li>Added online assessments to Numerator 2 (added online assessment codes to the <a href="#">Follow Up Visits Value Set</a>).</li> <li>Restructured the Data Elements for Reporting tables.</li> <li>Added the <i>Rules for Allowable Adjustments of HEDIS</i> section.</li> <li>Refer to the Technical Release Notes file in the Digital Measures Package for a comprehensive list of changes.</li> </ul>
Postpartum Depression Screening and Follow-Up (PDS-E)	✓	✓		<ul style="list-style-type: none"> <li>Revised the thresholds for determining a “positive screen” across depression screening tools that identify members to receive follow-up care.</li> <li>Revised the screening period to assess screening that occurs 7 to 84 days after delivery.</li> <li>Added online assessments to Numerator 2 (added online assessment codes to the <a href="#">Follow Up Visits Value Set</a>).</li> <li>Restructured the Data Elements for Reporting tables.</li> <li>Added the <i>Rules for Allowable Adjustments of HEDIS</i> section.</li> <li>Refer to the Technical Release Notes file in the Digital Measures Package for a comprehensive list of changes.</li> </ul>