

March 31, 2021

Dear Colleague:

NCQA is pleased to present the *HEDIS^{®1} Measurement Year (MY) 2021 Volume 2: Technical Update*. With this release, NCQA freezes the Volume 2 technical specifications for MY 2021. This memo contains corrections, policy changes and clarifications to the *HEDIS MY 2020 & MY 2021 Volume 2 Technical Specifications*.

Changes in this memo apply only to MY 2021 reporting and do not apply to MY 2020 reporting. For MY 2021 reporting, organizations must include corrections from this memo and corrections from the *HEDIS MY 2020 Volume 2: Technical Update*, posted to the NCQA website at https://www.ncqa.org/wp-content/uploads/2020/10/20201001_MY_2020_Vol_2_Technical_Update.pdf.

The following measures and stratifications will no longer be collected or used by NCQA:

- Retired measures:
 - *Disease-Modifying Anti-Rheumatic Drug Therapy for Rheumatoid Arthritis*.
 - *Enrollment by State*.
 - *Total Membership*.
- Retired measure stratifications:
 - *Childhood Immunization Status*: Combination rates 2, 4, 5, 6, 8 and 9.
 - *Plan All-Cause Readmissions*: The 18–64 Medicare Skilled Nursing Facility (SNF) reporting strata.
 - *Enrollment by Product Line*: Binary gender stratifications.
 - Rationale: Removing binary gender stratifications will allow a more inclusive count of the organization’s total membership.

The final versions of the Medication List Directory (MLD), Value Set Directory (VSD) and the risk-adjustment tables for MY 2021 reporting are available in the NCQA Store.

- **Obtaining the MLD.** Changes to medications are included in the table below and in the MY 2021 MLD, now available for download. Order it for free from the NCQA Store at <http://store.ncqa.org/index.php/catalog/product/view/id/3764/s/hedis-my-2021-medication-list-directory/>.
- **Obtaining the Risk Adjustment tables.** The MY 2021 Risk Adjustment tables are now available for download. Order them for free from the NCQA Store at <https://store.ncqa.org/index.php/catalog/product/view/id/3762/s/hedis-my-2021-risk-adjustment-tables/>.

¹HEDIS[®] is a registered trademark of the National Committee for Quality Assurance (NCQA).

- **Obtaining the updated VSD.** Changes to codes and value sets are included in the MY 2021 VSD, now available for download.
 - ***If you purchased the Volume 2 e-pub:*** On My NCQA, go to **My Downloads** (<https://my.ncqa.org/Downloads>) and download the *HEDIS MY 2020 & MY 2021 Volume 2 (epub)* zipped folder, which contains the new *HEDIS MY 2021 Volume 2 Value Set Directories (.xlsx)* file.
 - ***If you purchased the Volume 2 hard copy format:*** On My NCQA, go to **My Downloads** (<https://my.ncqa.org/Downloads>). The *HEDIS MY 2021 Volume 2 Value Set Directories (.xlsx)* file will display as a new item available for download.

Changes listed in this document are required for HEDIS MY 2021 reporting. Review all items in the table below and incorporate them into your implementation processes. If information in this memo contradicts a previous My NCQA system response, then the response is obsolete.

If you have questions about information included in the *Technical Update* or about other measure specifications, contact us through My NCQA (<https://my.ncqa.org>). We wish everyone a successful HEDIS data collection season!

Sincerely,

Cindy Ottone, MHA
Director, Performance Measurement

Enclosure

NCQA Copyright Notice and Disclaimer

The HEDIS measure specifications were developed by and are owned by NCQA. The HEDIS measure specifications are not clinical guidelines and do not establish a standard of medical care. NCQA makes no representations, warranties, or endorsement about the quality of any organization or physician that uses or reports performance measures and NCQA has no liability to anyone who relies on such measure specifications. NCQA holds a copyright in these materials and can rescind or alter these materials at any time. These materials may not be modified by anyone other than NCQA. Use of the Rules for Allowable Adjustments of HEDIS to make permitted adjustments of the materials does not constitute a modification. Any commercial use and/or internal or external reproduction, distribution and publication must be approved by NCQA and are subject to a license at the discretion of NCQA. **Any use of the materials to identify records or calculate measure results, for example, requires a custom license and may necessitate certification pursuant to NCQA's Measure Certification Program.** Reprinted with permission by NCQA. © 2021 NCQA, all rights reserved.

Limited proprietary coding is contained in the measure specifications for convenience. NCQA disclaims all liability for use or accuracy of any third-party code values contained in the specifications.

The American Medical Association holds a copyright to the CPT® codes contained in the measure specifications.

The American Hospital Association holds a copyright to the Uniform Billing Codes ("UB") contained in the measure specifications. Any use of the UB Codes may require a license from the AHA. Specifically, anyone desiring to use the UB Codes in a commercial product to generate HEDIS results, or for any other commercial use, must obtain a commercial use license directly from the AHA. To inquire about licensing, contact ub04@aha.org.

Some measure specifications contain coding from LOINC® (<http://loinc.org>). The LOINC table, LOINC codes, LOINC panels and form file, LOINC linguistic variants file, LOINC/RSNA Radiology Playbook, and LOINC/IEEE Medical Device Code Mapping Table are copyright © 1995–2021 Regenstrief Institute, Inc. and the Logical Observation Identifiers Names and Codes (LOINC) Committee and are available at no cost under the license at <http://loinc.org/terms-of-use>.

"SNOMED" and "SNOMED CT" are registered trademarks of the International Health Terminology Standards Development Organisation (IHTSDO).

"HL7" is the registered trademark of Health Level Seven International.

No part of this publication may be reproduced or transmitted in any form or by any means, electronic or mechanical, including photocopy, recording or any information storage and retrieval system, without the written permission of NCQA.

NCQA Measure Adjustment and Certification Notices

Unadjusted Certified Measures: A calculated measure result (a "rate") from a HEDIS measure that has been certified via NCQA's Measure Certification Program, and is based on unadjusted HEDIS specifications, may not be called a "Health Plan HEDIS rate" until it is audited and designated reportable by an NCQA-Certified HEDIS Compliance Auditor. Until such time, applicable measure rates shall be designated or referred to as "Unaudited Health Plan HEDIS Rates."

Adjusted Certified Measures: A calculated measure result (a "rate") from a HEDIS measure that has been certified via NCQA's Measure Certification Program, and is based on adjusted HEDIS specifications, may not be called an "Adjusted HEDIS rate" until it is audited and designated reportable by an NCQA-Certified HEDIS Compliance Auditor. Until such time, applicable measure rates shall be designated or referred to as "Adjusted, Unaudited HEDIS Rates."

Unadjusted Uncertified Measures: A calculated measure result (a "rate") from a HEDIS measure that has not been certified via NCQA's Measure Certification Program, and is based on unadjusted HEDIS specifications, may not be called a "Health Plan HEDIS rate" until it is audited and designated reportable by an NCQA-Certified HEDIS Compliance Auditor. Until such time, such measure rates shall be designated or referred to as "Uncertified, Unaudited Health Plan HEDIS Rates" and may only be used for population health purposes within an affiliated health plan network and internal, quality improvement purposes (e.g., trend analysis).

Adjusted Uncertified Measures: A calculated measure result (a "rate") from a HEDIS measure that has not been certified via NCQA's Measure Certification Program, and is based on adjusted HEDIS specifications, may not be called an "Adjusted HEDIS rate" until it is audited and designated reportable by an NCQA-Certified HEDIS Compliance Auditor. Until such time, such measure rates shall be designated or referred to as "Adjusted, Uncertified, Unaudited HEDIS Rates" and may only be used for population health purposes within an affiliated health plan network and internal, quality improvement purposes (e.g., trend analysis).

Uncertifiable Measures: Certain measures are not eligible for certification under NCQA's Measure Certification Program. As such, they should be designated or referred to as "Uncertifiable, Unaudited Health Plan HEDIS Rates" or "Adjusted, Uncertifiable, Unaudited HEDIS Rates," as applicable. A list of Uncertifiable Measures can be found on NCQA's website.

Specification Updates

This document contains corrections, policy changes and clarifications to the *HEDIS MY 2020 & MY 2021 Volume 2: Technical Specifications*. NCQA has identified the appropriate page number, measure/guideline and head/subtitle for each item.

PAGE	MEASURE/GUIDELINE	HEAD/SUBTITLE	UPDATE
			Apply all corrections from the <i>HEDIS MY 2020 Volume 2: Technical Update</i> posted to the NCQA website at: https://www.ncqa.org/wp-content/uploads/2020/10/20201001_MY_2020_Vol_2_Technical_Update.pdf .
81	Childhood Immunization Status	Description	Replace the last sentence with the following text: The measure calculates a rate for each vaccine and three combination rates.
84	Childhood Immunization Status	Administrative Specification— Numerators, Combination rates	Replace the sentence with the following text: Calculate the following rates for Combinations 3, 7 and 10.
84	Childhood Immunization Status	Combination Vaccinations for Childhood Immunization Status table	Remove the “Combination 2,” “Combination 4,” “Combination 5,” “Combination 6,” “Combination 8,” “Combination 9” rows.
87	Childhood Immunization Status	Table CIS-1/2: Data Elements for Childhood Immunization Status	Replace all references to “ <i>Each of the 19 rates</i> ” with “ <i>Each of the 13 rates.</i> ”
142	Pharmacotherapy Management of COPD Exacerbation	Bronchodilator Medications table	In the “Bronchodilator combinations” row, delete “Dyphylline-guaifenesin.”
190	Comprehensive Diabetes Care	Administrative Specification— Numerators, Eye Exam	Delete the bullet that reads: <ul style="list-style-type: none"> Any code in the <u>Diabetic Retinal Screening Value Set</u> billed by an eye care professional (optometrist or ophthalmologist) during the year prior to the measurement year, with a negative result (negative for retinopathy).
190	Comprehensive Diabetes Care	Administrative Specification— Numerators, Eye Exam	Replace the bullet that reads: <ul style="list-style-type: none"> Any code in the <u>Eye Exam With Evidence of Retinopathy Value Set</u> or <u>Eye Exam Without Evidence of Retinopathy Value Set</u> billed by any provider type during the measurement year. with the following: <ul style="list-style-type: none"> Any code in the <u>Eye Exam With Evidence of Retinopathy Value Set</u>, <u>Eye Exam Without Evidence of Retinopathy Value Set</u> or <u>Automated Eye Exam Value Set</u> billed by any provider type during the measurement year.

PAGE	MEASURE/GUIDELINE	HEAD/SUBTITLE	UPDATE
220	Disease-Modifying Anti-Rheumatic Drug Therapy for Rheumatoid Arthritis	Entire Measure Specification	Remove this measure and its specification in its entirety from Volume 2.
342	Use of Imaging Studies for Low Back Pain	Corticosteroid Medications table	In the “Corticosteroid” row, replace “Betamethasone” with “Betamethasone/Betamethasone acetate.”
366	Use of Opioids at High Dosage	Table HDO-A: Opioid Medications	In the Levorphanol row, delete the <u>Levorphanol 1 mg Medications List</u> from the “Medication Lists” column; delete “1 mg” from the “Strength” column.
367	Use of Opioids at High Dosage	Table HDO-A: Opioid Medications	In the “Meperidine” row that contains medication lists for Meperidine as a single ingredient: <ul style="list-style-type: none"> • Add <u>Meperidine 75 mg Medications List</u> to the “Medication Lists” column; add “75 mg” to the “Strength” column. • Add <u>Meperidine 150 mg Medications List</u> to the “Medication Lists” column; add “150 mg” to the “Strength” column.
367	Use of Opioids at High Dosage	Table HDO-A: Opioid Medications	In the “Morphine” row that contains medication lists for Morphine as a single ingredient: <ul style="list-style-type: none"> • Delete the <u>Morphine 70 mg Medications List</u> from the “Medication Lists” column; delete “70 mg” from the “Strength” column. • Delete the <u>Morphine 130 mg Medications List</u> from the “Medication Lists” column; delete “130 mg” from the “Strength” column. • Delete the <u>Morphine 150 mg Medications List</u> from the “Medication Lists” column; delete “150 mg” from the “Strength” column.
368	Use of Opioids at High Dosage	Table HDO-A: Opioid Medications	In the “Oxycodone” row that contains Acetaminophen Oxycodone: <ul style="list-style-type: none"> • Add <u>Acetaminophen Oxycodone 1 MGPML Medications List</u> to the “Medication Lists” column; add “1 mg” to the “Strength” column. • Add <u>Acetaminophen Oxycodone 2 MGPML Medications List</u> to the “Medication Lists” column; add “2 mg” to the “Strength” column.
368	Use of Opioids at High Dosage	Table HDO-A: Opioid Medications	In the “Tramadol” row that contains medication lists for Tramadol as a single ingredient: Add <u>Tramadol 5 MGPML Medications List</u> to the “Medication Lists” column; add “5 mg” to the “Strength” column.
505	Plan All-Cause Readmissions	Definitions—Plan population	Add the following text as the second paragraph*: Members must be 18 and older as of the earliest Index Discharge Date. *The plan population definition was revised in the <i>HEDIS MY 2020 Technical Update</i> . The <i>HEDIS MY 2020 Technical Update</i> changes must be made prior to making this change.
510	Plan All-Cause Readmissions	Reporting: Number of Members in Plan Population	Replace the text in Step 1 with the following text: Determine the member’s age as of the earliest Index Discharge Date.

PAGE	MEASURE/GUIDELINE	HEAD/SUBTITLE	UPDATE
510	Plan All-Cause Readmissions	<i>Reporting:</i> Number of Outliers	Replace the text in Step 1 with the following text: Determine the member's age as of the earliest Index Discharge Date.
510	Plan All-Cause Readmissions	<i>Reporting:</i> Skilled Nursing Care Stratification (Medicare only)	Replace the reporting instructions header with the following text: <i>Reporting:</i> Skilled Nursing Care Stratification (Medicare 65+ only).
510	Plan All-Cause Readmissions	<i>Reporting:</i> Skilled Nursing Care Stratification (Medicare only)	Replace the first paragraph in Step 1 with the following text: For Medicare nonoutlier members 65 years of age and older, determine if the IHS was discharged or transferred to skilled nursing care (<u>Skilled Nursing Stay Value Set</u>).
513	Plan All-Cause Readmissions	Table PCR-E-3: Plan All-Cause Readmissions Rates Among Nonoutlier Members Discharged or Transferred to Skilled Nursing Care by Age (Medicare, 18+)	Replace the table name with the following text: Table PCR-E-3: Plan All-Cause Readmissions Rates Among Nonoutlier Members Discharged or Transferred to Skilled Nursing Care by Age (Medicare, 65+)
513	Plan All-Cause Readmissions	Table PCR-E-3: Plan All-Cause Readmissions Rates Among Nonoutlier Members Discharged or Transferred to Skilled Nursing Care by Age (Medicare, 18+)	Remove the "18-44," "45-54," "55-64" and "18-64 Total" rows from the table.
551	Enrollment by Product Line	Description	Replace the description with the following text: The total number of members enrolled in the product line, stratified by age.
551	Enrollment by Product Line	Calculations—Product lines	Replace the first sentence with the following text: Report the following tables for each applicable product line, stratified by age:
554	Enrollment by Product Line	Table ENP-1/2/3: Member Years of Enrollment by Product Line	Delete the entire "Male" and "Female" columns for "Member Months" and "Member Years." This table should only include "Total" columns for "Member Months" and "Member Years."
554	Enrollment by Product Line	Table ENP-1/2/3: Member Years of Enrollment by Product Line	In the remaining "Total" column for the "Member Months" column, remove the shading from all "Age" rows, starting at "<1" age range through the "Unknown." The only shading in the table should be for the "Member Years" column and the "Total" row for "Member Months" and "Member Years."
555	Enrollment by State	Entire Measure Specification	Remove this measure and its specification in its entirety from Volume 2.
564	Total Membership	Entire Measure Specification	Remove this measure and its specification in its entirety from Volume 2.