

MY 2026 HEDIS® Validations

This document provides an overview of the HEDIS submission validations performed by NCQA's Interactive Data Submission System (IDSS) as part of the HEDIS submission process. It is accompanied by a validation metadata dictionary referenced by a subset of the validations. For cross reference, IDSS validation errors and warnings include the name of the applicable validation rules.

Validation Rules

The tables below specify the validations implemented for the MY2026 IDSS release. They use the common requirements verbiage where violation of a “must” will result in an error that needs to be corrected before submission; and violation of a “should” will result in a warning that should be reviewed before final submission. Validations in Table 1 that are enforced through the XML schema are fatal (see footnote): processing of the XML submission file is aborted. In addition, three other validations in Table 1 are marked as fatal. When encountered, only further validations for the impacted measure are aborted. This means that as fatal errors are resolved further errors and warnings may be identified.

Where the validation specifications refer to “reported”, these include any measure, indicator, or rate for which a plan provided data in the Submission XML file, even if the rate receives a Small Denominator (NA) audit designation or status.

Some validation specifications include references to validation metadata provided in the accompanying dictionary and cross referenced in the appendix; references to specific measures by their MeasureCodes; and references to Variables and Metrics by their names as used in the Submission and Result XML files and Data Dictionaries.

Shared Data Element Validations

In the HEDIS Technical Specifications for Health Plans, the “Data Elements for Reporting” section in each measure specification indicates which data elements are shared across multiple metrics and/or stratifications.

For shared data elements, plans must report the same value for each reported indicator. A different value will result in an IDSS validation error. See the Shared* metadata in the accompanying validation metadata dictionary for all affected indicators.

Table 1: General Validations

Rule	Definition
ConformToSchema	The Submission XML file must conform to the Submission XSD schema.
ConformToDictionary	The Submission XML must conform to the Submission Data Dictionary. Note: To limit complexity, the Submission XSD schema does not validate that all combinations of metrics and stratifications are valid and complete. All metrics and stratifications are defined in the product line specific Data Dictionaries and included in the Submission XML templates. There is no required order of metric sections within a measure, or of stratifications within a <Stratification> section. Only complete measures can be excluded from the Submission XML file to support single measure uploads, etc. See the IDSS documentation for details.
NumericValues[†]	All plan reported values in the <Data></Data> sections must be numeric, except for CollectionMethod.
CollectionMethod[†]	The value of CollectionMethod must be 'A', 'H', or null (blank) [†]. For reported indicators with CollectionMethodAllowed='Admin+Hybrid' the plan must report a CollectionMethod value of 'A' or 'H'. Note: For the Medicare-only TRC measure, indicators with metrics NotificationInpatientAdmission and ReceiptDischargeInformation only allow the Hybrid collection method. If reported, they must report CollectionMethod='H'.
PositiveValues[†]	All plan reported values must be greater than or equal to zero.
Integers[†]	All plan reported numeric values must be Integers, except for OversampleRate, ExpectedCount and CountVariance.
Rounding[†]	OversampleRate, ExpectedCount and CountVariance must be rounded to 4 decimals.
PaddingZeroes[†]	OversampleRate, ExpectedCount and CountVariance must be padded with zeros to 4 decimals.
ScientificNotation[†]	Plan reported values must not use scientific notation (e.g., 1.234E+08).
CompleteDataSection (Fatal)	For reported indicators with CollectionMethodAllowed='Admin+Hybrid' metadata, and CollectionMethod='H', all data elements in a <Data></Data> section must have a value. For reported non-RES indicators with CollectionMethodAllowed='Admin+Hybrid' metadata, and CollectionMethod='A', see the AdministrativeData rule below. For all other reported indicators, all data elements in a <Data></Data> section must have a value. For all unreported indicators, all data elements in a <Data></Data> section must be unreported (blank).
AdministrativeData (Fatal)	For reported indicators with CollectionMethodAllowed='Admin+Hybrid' metadata, and CollectionMethod='A', all Administrative data elements in the <Data></Data> section must have a value and all Hybrid-only variables must be blank. For non-RES indicators:

Rule	Definition
	Administrative data elements (for indicators that allow the Administrative and Hybrid collection method) are: CollectionMethod, InitialPopulation, Denominator, NumeratorByAdmin, and where present: NumeratorBySupplemental and Exclusions. Hybrid-only(!) data elements are: ExclusionEmployeeOrDep, ExclusionValidDataErrors, MinReqSampleSize, NumeratorByAdminDenom, NumeratorByMedicalRecords, OversampleRate, OversampleRecsAdded
IndicatorMetrics (Fatal)	Within a measure all data elements in all <Data></Data> sections that share the same MetricName must all be reported or must all be unreported (blank).
NodeDuplication (Fatal)	For Measures with RES that are missing stratifications but have data will trigger this. The message will state what Measure/Metric/Specific data snippets are duplicated because that data is being confused in IDSS with XML that's part of the base measure that it does not know what to do with. Example: For GSD, if you are missing Unknown RES stratification but the data is included for Collection Method, Denominator, and Numerator for GreaterThan9, the system sees duplicates for GSD for those elements for the missing stratification plus the base measure for GSD GreaterThan9.
NoBenefitNoData	For measures that require a special benefit (e.g., Mental Health, Pharmacy), if a plan reports that they do not provide that benefit, all data elements in the <Data></Data> sections must be unreported (blank). Note: The Benefit metadata element is an XML boolean. Valid values are: true, false, 1, 0. "True" and "False" are not valid XML boolean values.
MedicareStars	All Medicare submissions for reporting to CMS should report the measures required for the CMS MA and SNP specific Star Ratings program (see CMS publications). Note: the logic does not distinguish between "Section 1876 Cost" contracts and others, but does distinguish SNP and MMP HMO Demonstration plans
HPR Measures	All submissions to maintain or achieve HEDIS Health Plan Accreditation should report the measures required for accreditation.
RaceEthnicityStratification	For all reported race and ethnicity stratified metrics, the total values for all data elements (InitialPopulation, Exclusions, Denominator, Numerator) across the race stratifications must match the total values across the ethnicity stratifications and also match the total indicator, which may itself be stratified by e.g., age. For non-ECDS measures, Race and Ethnicity Numerator values are compared to the sums of the NumeratorByAdmin, NumeratorBySupplemental and NumeratorByMedicalRecords, if present, of the total indicator.
CMS Required Measures	CMS must be reported for the current measurement year they are on their required measure list
PBP/MMP Required Measures	COA measure must be reported for PBP/MMP for current measurement year.

† These rules are implemented in the submission XSD schema.

Table 2: Hybrid Measure Validations

Rule	Definition
CYAR	NumeratorByAdminDenom must be less than or equal to the InitialPopulation minus Exclusions.
HybridDenominator	Denominator must be less than or equal to the InitialPopulation minus Exclusions. Note: Hybrid reported SES and RES-indicators are excluded from this rule.
MRSS	MinReqSampleSize should be less than or equal to the InitialPopulation minus Exclusions. For the WCC, TRC, and EED measures this validation only applies to the IDSS calculated total age and total SES stratifications, not to the plan-reported individual stratifications.
OversampleRecsAdded	If OversampleRate is zero then OversampleRecsAdded must be zero.
OversampleRate	If MinReqSampleSize is equal to the InitialPopulation minus Exclusions then OversampleRate should be zero.
SharedDenominator	All reported CollectionMethodAllowed='Admin+Hybrid' indicators within the same measure that are reported with CollectionMethod='H' with the same SharedDenominator=# value must use the same Denominator.
SharedSample	All reported CollectionMethodAllowed='Admin+Hybrid' indicators within the same measure that are reported with CollectionMethod='H' with the same SharedSample=# value must use the same values for the Hybrid sample definition data elements: MinReqSampleSize, OversampleRate, ExclusionValidDataErrors, ExclusionEmployeeOrDep, and OversampleRecsAdded (if specified for the indicator).
NumeratorByAdminDenom	NumeratorByAdminDenom should be greater than or equal to NumeratorByAdmin (with threshold of numbyadmin greater than or equal to 5 of the numbyAdminDenom data element, this error will not appear, if greater than 5 the validation will appear)

Table 3: General Measure Validations

Rule	Definition
Proportions	All reported indicators with Proportion='Y' must have a Rate greater than or equal to 0.0 and less than or equal to 1.0 (100% or 1000‰) or blank if the denominator=0.

Rule	Definition
BlankCombos	For all indicators with Combo=#, if any indicator within the same measure with a matching InCombo=# value is not reported, the Combo must be not reported.
SmallerCombos	For all reported indicators with Combo=#, the Rate must be smaller than or equal to the Rates of all indicators within the same measure with a matching InCombo=#.
StrictFollowUp	For all reported indicators with NumeratorIsDenominator=#, the Numerator must be equal to the Denominator of the indicator within the same measure with a matching DenominatorIsNumerator=# value.
ScreeningFollowUp	For all reported indicators with Screening=#, the Numerator must be greater than or equal to the Denominator of the indicator within the same measure with a matching FollowUp=#.
InitialPopulationSubset	For all reported indicators with InitialPopulationLTE=#, the InitialPopulation must be Less Than or Equal to the InitialPopulation of the indicator(s) within the same measure with a matching InitialPopulationGTE=#.
DenominatorSubset	For all reported indicators with DenominatorLTE=#, the Denominator must be Less Than or Equal to the Denominator of the indicator(s) within the same measure with a matching DenominatorGTE=#.
ExclusionsSubset	For all reported indicators with ExclusionsLTE=#, the Exclusions[By*] must be Less Than or Equal to the Exclusions[By*] of the indicator(s) within the same measure with a matching ExclusionsGTE=#.
NumeratorSubset	For all reported indicators with NumeratorLTE=#, the Numerator must be Less Than or Equal to the Numerator of the indicator(s) within the same measure with a matching NumeratorGTE=#. Note: for Admin/Hybrid measures the Numerator is the sum of the NumeratorByAdmin, NumeratorBySupplemental and NumeratorByMedicalRecords, if present.
NumeratorSubsetWarning	For all reported indicators with NumeratorWarningLTE=#, the Numerator should be Less Than or Equal to the Numerator of the indicator(s) within the same measure with a matching NumeratorWarningGTE=#.
DenomInitPopExclusions	For all reported indicators with DenomEqualsInitPopMinusExclusion='Y', the Denominator must equal the InitialPopulation minus Exclusions.
LdmCompleteness	For the LDM measure, the sum of MemberCounts reported for the <WrittenPreferred> metric must be equal

Rule	Definition
	to the sum of MemberCounts reported for the <SpokenPreferred> metric and the <OtherPreferred> metric.
RdmCompleteness	For the RDM measure, the sum of the MemberCounts reported for the <RaceEthnicity> metric must be equal to the sum of the MemberCounts reported for the <RaceSource> metric and for the <EthnicitySource> metric.
EnpMissingMeasure	ENP measure must be reported for all submissions (Except Medicare SNP/MMP, MACQRS, and LTSS)
LdmRdmMatch	The sum of MemberCounts reported for any of the LDM <WrittenPreferred>, <SpokenPreferred> or <OtherPreferred> metrics should be equal to the sum of MemberCounts reported for any of the RDM metrics.
EnpMissingMeasure	The ENP measure must be reported for all submissions.
SharedCollectionMethod	All reported indicators within the same measure with the same SharedCollectionMethod=# must use the same CollectionMethod.
SharedInitialPopulation	All reported indicators within the same measure with the same SharedInitialPopulation=# value must use the same value for each InitialPopulation[By*].
SharedExclusions	All reported indicators within the same measure with the same SharedExclusions=# value must use the same value for each Exclusions[By*].
TotalAndSESCountMisMatch	For all metrics within a measure that are stratified by SES, the total values for all data elements across the SES stratifications must match the total values for all data elements in other stratifications for that metric, like Age. IDSS example:<data element> must be equal to the SES stratification Count for same field Metric Name <BCS-E or COL-E>. Total measure value – X value and SES total value – Y value
ENPTotalZero (added late MY2025)	If the health plan has membership, the ENP measure should not total zero.
RequireCombos (added late MY2025)	If all related component indicators are reported, the combo indicator should be reported

Table 4: Risk-Adjusted Utilization (RAU) Measure Specific Validations

Rule	Definition
CompleteMeasures	RAU measures must be completely reported or completely unreported.
PersonCountSubset	For all RAU indicators with PersonCountLTE=#, the PersonCount must be Less Than or Equal to the PersonCount of the indicator with a matching PersonCountGTE=#. Note: For EDH, ensures the insulin PersonCount is Less Than or Equal to the diabetes PersonCount.
PcrOutlierRates	For the PCR measure, the OutlierRate must be greater than or equal to 0.0 and should be less than or equal to 1.0 (1000‰). Note: an inconsistency in the date specified to determine a member's age between the plan population and outlier logic may in rare cases result in outlier rates exceeding 1.0 (1000‰).
RauProportions	For all reported PCR and HFS indicators, the ObservedRate and ExpectedRate must be less than or equal to 1.0 (100%).
RauMinimumExpectedRate	For all reported RAU indicators, the ExpectedRate must be null or must be greater than the value of MinimumExpectedRate. Note: ExpectedRate is null if it involves a division by zero.
RauMinimumCountVariance	For all reported RAU indicators with an ExpectedCount greater than 0, the CountVariance must be larger than the value of MinimumCountVariance. Note: $CVR \text{ (count variance rate)} = \text{CountVariance} / \text{NonOutlierPersonCount}$ for AHU, EDU, HPC. $CVR = \text{CountVariance} / \text{PersonCount}$ for EDH.
RauZeroDenominator	For all reported PCR and HFS indicators with Denominator=0, the ObservedCount, ExpectedCount and CountVariance must be 0.
RauZeroPersons	For all reported AHU, EDU and HPC indicators with NonOutlierPersonCount=0, the ObservedCount, ExpectedCount and CountVariance must be 0.
RauZeroTotalObservedCount	For all reported RAU measures where the totals are not small denominator (NA) indicators, the total ObservedCount should be greater than zero. This validation only operates at the IDSS calculated total-age/ indicators, except for PCR where the 18-64 and 65+ subtotals are validated separately.

RauNonZeroExpectedCount	For all reported AHU, EDU and HPC indicators with ExpectedCount>0, the NonOutlierPersonCount must be greater than 0.
PcrNonZeroExpectedCount	For all reported PCR indicators with ExpectedCount>0, (PersonCount – OutlierPersonCount) should be greater than 0. Note: an inconsistency in the date specified to determine a member's age between the plan population and outlier logic may in rare cases result in the violation of this rule. Note: This validation will not appear if PCR is NA (small denominator)
PcrSesDenominators	For all reported Medicare PCR measures, the sum of the Denominators for the <SES> metric in the Age=18-64 stratification must be equal to the sum of the Denominators for the <PlanAllCauseReadmissions> metric in the Age=18-44,45-54 and 55-64 stratifications. And the sum of the Denominators for the <SES> metric in the Age=65+ stratification must be equal to the sum of the Denominators for the <PlanAllCauseReadmissions> metric in the Age=65-74,75-84 and 85+ stratifications.
PcrSesObservedCount	For all reported Medicare PCR measures, the sum of the ObservedCounts for the <SES> metric in the Age=18-64 stratification must be equal to the sum of the ObservedCounts for the <PlanAllCauseReadmissions> metric in the Age=18-44,45-54 and 55-64 stratifications. And the sum of the ObservedCounts for the <SES> metric in the Age=65+ stratification must be equal to the sum of the ObservedCounts for the <PlanAllCauseReadmissions> metric in the Age=65-74,75-84 and 85+ stratifications.
PcrSesExpectedCount	For all reported Medicare PCR measures, the sum of the ExpectedCounts for the <SES> metric in the Age=18-64 stratification must be within 0.001 (inclusive) of the sum of the ExpectedCounts for the <PlanAllCauseReadmissions> metric in the Age=18-44,45-54 and 55-64 stratifications. And the sum of the ExpectedCounts for the <SES> metric in the Age=65+ stratification must be within 0.001 (inclusive) of the sum of the ExpectedCounts for the <PlanAllCauseReadmissions> metric in the Age=65-74,75-84 and 85+ stratifications.
PcrSesCountVariance	For all reported Medicare PCR measures, the sum of the CountVariances for the <SES> metric in the Age=18-64 stratification must be within 0.001 (inclusive) of the sum of the CountVariances for the <PlanAllCauseReadmissions> metric in the Age=18-44,45-54 and 55-64 stratifications. And the sum of the CountVariances for the <SES> metric in the Age=65+ stratification must be within 0.001 (inclusive) of the sum of the CountVariances for the <PlanAllCauseReadmissions> metric in the Age=65-74,75-84 and 85+ stratifications.
HpcPersonCount	For all reported HPC measures, the sum of NonOutlierPersonCount and OutlierPersonCount must be the same for matching Age/ stratifications across the <Acute>, <Chronic> and <Total> metrics.

SharedDenominator	All HFS indicators with the same SharedDenominator=# value must use the same Denominator. Note: ensures matching Denominators for the 30-Day and 60-Day indicators at matching age stratifications.
ObservedCountSubset	For all indicators with ObservedCountLTE=#, the ObservedCount must be Less Than or Equal to the ObservedCount of the indicator with a matching ObservedCountGTE=#.
OutlierLimit	For all reported AHU and EDU indicators the ObservedRate must be less than or equal to the value of OutlierLimit.
LowerUpperLimit	For all reported HPC and EDH indicators that are not small denominator (NA) indicators, the ObservedRate should be less than or equal to the value of ObservedRateUpperLimit. For all reported AHU, EDU and HPC indicators that are not small denominator (NA) indicators, the ExpectedRate should be less than or equal to the value of ExpectedRateUpperLimit.

Appendix: Validation Metadata

The table below provides a crosswalk between validation metadata provided in the accompanying validation dictionary and the validation rules that reference them.

Key	Value(s)	Table	Rule
CollectionMethodAllowed	Admin+Hybrid	1 2	CollectionMethod SharedSample
Combo	#	3	BlankCombos, SmallerCombos, RequireCombos
DenomEqualsInitPopMinusExclusions	Y	3	DenomInitPopExclusions
DenominatorGTE	#	3	DenominatorSubset
DenominatorLTE	#	3	DenominatorSubset
InitialPopulationGTE	#	3	InitialPopulationSubset
InitialPopulationIsNumerator	#	3	StrictFollowUp
InitialPopulationLTE	#	3	InitialPopulationSubset
ExclusionsGTE	#	3	ExclusionsSubset
ExclusionsLTE	#	3	ExclusionsSubset
ExpectedRateUpperLimit	#	4	LowerUpperLimit
FollowUp	#	3	ScreeningFollowUp
InCombo	#[,#,#,...]	3	BlankCombos, SmallerCombos
MemberCountGTE	#	4	MemberCountSubset

Key	Value(s)	Table	Rule
MemberCountLTE	#	4	MemberCountSubset
MinimumCountVariance	#.####	4	RauMinimumCountVariance
MinimumExpectedRate	#.####	4	RauMinimumExpectedRate
NumeratorGTE	#[, #, #, ...]	3	NumeratorSubset
NumeratorIsEligiblePopulation	#	3	StrictFollowUp
NumeratorLTE	#	3	NumeratorSubset
NumeratorWarningGTE	#	3	NumeratorSubsetWarning
NumeratorWarningLTE	#	3	NumeratorSubsetWarning
ObservedCountGTE	#	4	ObservedCountSubset
ObservedCountLTE	#	4	ObservedCountSubset
ObservedRateUpperLimit	#	4	LowerUpperLimit
OutlierLimit	#	4	OutlierLimit
Proportion	Y	3	Proportions
Screening	#	3	ScreeningFollowUp
SharedCollectionMethod	#	3	SharedCollectionMethod
SharedDenominator	#	3	SharedDenominator
SharedExclusions	#	3	SharedExclusions
SharedInitialPopulation	#	3	SharedInitialPopulation
SharedSample	#	2	SharedSample

Changelog

- **AdministrativeData(Fatal)** – Definition change
- **RaceEthnicityStratification** – Definition change
- **CYAR** – Definition change
- **HybridDenominator** – Definition change
- **HybridDenominatorWarning** – Removed
- **MRSS** – Definition change
- **Oversamplerate** – Definition change
- **NumeratorByAdminElig** is now **NumeratorByAdminDenom**
- **Table 4 ECDS specific validations** transitioned into **Table 3**.
- **StrictFollowUp** – Definition change
- **EligiblePopulationSubset** is now **InitialPopulationSubset**
- **SharedEligiblePopulation** is now **SharedInitialPopulation**
- **DDETotalEligiblePopulation**, **DDETotalExclusionsAdminRequired**, **DDETotalNumeratorByAdmin** Removed
- **Added ENPTotalZero** validation
- **Added RequireCombos** validation
- **Table 5 RAU** is now **Table 4**.
- **MemberCountSubset** is now **PersonCountSubset**
- **RAUMinimumCountVariance** – Definition change
- **RauZeroMembers** is now **RauZeroPersons**
- **RauNonZeroExpectedCount** – Definition change
- **PcrNonZeroExpectedCount** – Definition change
- **HpcMemberCount** is now **HpcPersonCount**
- **Table 6** removed
- **Updated Appendix Keys, Tables, Rules**