# SUMMARY TABLE OF MEASURES, PRODUCT LINES AND CHANGES

		Applicable to:		
HEDIS 2012 Measures	Commercial	Medicaid	Medicare	Changes to HEDIS 2012
General Guidelines for Data Collection and Reporting	<b>✓</b>	<b>√</b>	<b>√</b>	<ul> <li>Clarified in General Guideline 11 that the <i>Guidelines for Advertising and Marketing</i> are posted on the NCQA Web site and are no longer published in the volume.</li> <li>Updated the measures eligible for rotation in General Guideline 14.</li> <li>Revised the Medicare submission deadline date in General Guideline 35 from June 30 to June 15, 2012.</li> <li>Clarified the definition of "Hybrid Method" in General Guideline 38.</li> <li>Removed the PPO Reporting for HEDIS section from General Guideline 38 because there are no longer separate requirements for PPOs.</li> <li>Clarified General Guideline 39 and General Guideline 40.</li> <li>Revised General Guideline 46.</li> <li>Clarified in General Guideline 47 that October 1, 2011, ICD-9 code updates are not included in LEDIS 2012.</li> </ul>
Guidelines for Calculations and Sampling	<b>√</b>	<b>√</b>	<b>√</b>	<ul> <li>Added Human Papillomavirus Vaccine for Female Adolescents to Membership-dependent denominators and Table 1: Sample Size Information for Hybrid Measures.</li> <li>Added a new section, Organization responsibility for chart review, in the Guidelines for the Hybrid Method section.</li> <li>Clarified that any nonstandard oversampling rate must be approved by NCQA.</li> <li>Clarified the Hybrid Method: Three Approaches section.</li> </ul>
Effectiveness of Care				
Adult BMI Assessment	<b>√</b>	<b>√</b>	<b>√</b>	<ul> <li>Deleted ICD-9 Diagnosis codes V70.0, V70.3, V70.5, V70.6, V70.8, V70.9 from Table ABA-A.</li> <li>Deleted HCPCS codes G8417–G8420 from Table ABA-B.</li> <li>Revised the <i>Hybrid Specification</i> to include a requirement that weight must be documented during the measurement year or the year prior to the measurement year.</li> </ul>
Weight Assessment and Counseling for Nutrition and Physical Activity for Children/ Adolescents	<b>✓</b>	<b>√</b>		<ul> <li>Deleted ICD-9 Diagnosis codes V20.2, V70.0, V70.3, V70.5, V70.6, V70.8, V70.9 from Table WCC-A.</li> <li>Clarified that members with a diagnosis of pregnancy during the measurement year must be excluded from the denominator for all rates, if optional exclusions are applied.</li> <li>Revised the <i>Hybrid Specification</i> to include a requirement that height and weight must be taken during the measurement year.</li> <li>Clarified that documentation related solely to screen time is not compliant for the <i>Counseling for physical activity</i> indicator.</li> <li>Removed the <i>Note</i> regarding member-reported BMIs. Refer to General Guideline 39 for additional information about member-reported data.</li> </ul>

		Applicable to:						
HEDIS 2012 Measures	Commercial	Medicaid	Medicare	Changes to HEDIS 2012				
Effectiveness of Care								
Childhood Immunization Status	<b>✓</b>	✓		No changes to this measure.				
Immunizations for Adolescents	✓	✓		No changes to this measure.				
Human Papillomavirus Vaccine for Female Adolescents	✓	✓		First-year measure.				
Lead Screening in Children		✓		No changes to this measure.				
Breast Cancer Screening	✓	✓	<b>√</b>	<ul> <li>Deleted ICD-9 Diagnosis codes V76.11, V76.12 from Table BCS-A.</li> <li>Replaced "Modifier .50" with "Modifier 50" in Table BCS-B.</li> </ul>				
Cervical Cancer Screening	✓	✓		Deleted ICD-9 Diagnosis codes V72.32, V76.2 from Table CCS-A.				
Colorectal Cancer Screening	<b>✓</b>		✓	<ul> <li>Deleted ICD-9 Diagnosis code V76.51 from Table COL-A.</li> <li>Deleted HCPCS code G0394 from Table COL-A.</li> </ul>				
Chlamydia Screening in Women	<b>\</b>	<b>√</b>		<ul> <li>Deleted ICD-9 Diagnosis code V26.52 from Table CHL-B.</li> <li>Added LOINC codes 45194-8, 61390-1, 61391-9, 61392-7, 61393-5, 61394-3, 61395-0, 61396-8, 61372-9, 61373-7, 61374-5, 61375-2, 61376-0, 61377-8, 61378-6, 61379-4, 61380-2, 61381-0, 61382-8, 61383-6, 61384-4, 61385-1, 61386-9, 61387-7, 61388-5, 61389-3 to Table CHL-B.</li> <li>Added LOINC code 45194-8 to Table CHL-D.</li> </ul>				
Glaucoma Screening in Older Adults			<b>√</b>	<ul> <li>Deleted ICD-9-CM Diagnosis code V80.1 from Table GSO-A.</li> <li>Deleted ICD-9-CM Procedure codes 95.02, 95.03, 95.26 from Table GSO-A.</li> </ul>				
Care for Older Adults			<b>√</b>	<ul> <li>Deleted HCPCS codes G8427, G8428 from Tables COA-B and COA-C.</li> <li>Clarified when results of a pain screening tool are acceptable.</li> </ul>				
Appropriate Testing for Children With Pharyngitis	<b>√</b>	<b>√</b>		Added LOINC code 60489-2 to Table CWP-D.				
Appropriate Treatment for Children With Upper Respiratory Infection	<b>√</b>	<b>√</b>		No changes to this measure.				
Avoidance of Antibiotic Treatment in Adults With Acute Bronchitis	<b>✓</b>	<b>√</b>		No changes to this measure.				
Use of Spirometry Testing in the Assessment and Diagnosis of COPD	✓	✓	<b>√</b>	No changes to this measure.				
Pharmacotherapy of COPD Exacerbation	<b>√</b>	<b>√</b>	<b>√</b>	Added mometasone-formoterol to "Beta 2-agonists" description in Table PCE-D.				

	Applicable to:			
HEDIS 2012 Measures	Commercial	Medicaid Medicare		Changes to HEDIS 2012
Effectiveness of Care				
Use of Appropriate Medications for People With Asthma	<b>√</b>	<b>~</b>		<ul> <li>Increased the upper age limit to 64 and added new age stratifications.</li> <li>Deleted ICD-9 Diagnosis code 493.2 from Table ASM-A.</li> <li>Added required exclusions (formerly optional exclusions) to eligible population criteria.</li> <li>Added mometasone-formoterol to "Inhaled steroid combinations" description in Tables ASM-C and ASM-D.</li> <li>Added a new data element to Table ASM-1/2 to capture the required exclusions.</li> </ul>
Medication Management for People With Asthma	<b>✓</b>	<b>√</b>		First-year measure.
Cholesterol Management for Patients With Cardiovascular Conditions	<b>✓</b>	<b>✓</b>	✓	No changes to this measure.
Controlling High Blood Pressure	<b>✓</b>	<b>√</b>	✓	Deleted ICD-9 Diagnosis code V56 from Table CBP-C.
Persistence of Beta-Blocker Treatment After a Heart Attack	<b>√</b>	<b>~</b>	<b>√</b>	<ul> <li>Added ICD-9 Diagnosis code 427.89 to Table PBH-C (sinus bradycardia); listed as 427.8, which includes all valid fourth digits.</li> <li>Clarified that an intolerance or allergy to beta-blocker therapy is a valid exclusion.</li> <li>Added albuterol-ipratropium and mometasone-formoterol to "Bronchodilator combinations" description in Table PBH-D.</li> <li>Added ciclesonide to "Inhaled corticosteroids" description in Table PBH-D.</li> </ul>
Comprehensive Diabetes Care	•	<b>✓</b>	<b>√</b>	<ul> <li>Added LOINC code 62388-4 to Table CDC-D.</li> <li>Deleted CPT codes 90920, 90921, 90924, 90925 from Table CDC-K.</li> <li>Deleted HCPCS codes G0314-G0319, G0322, G0323, G0326, G0327 from Table CDC-K.</li> <li>Deleted ICD-9 Diagnosis code V56 from Tables CDC-K and CDC-P.</li> <li>Added codes for CHF to Table CDC-P (the measure previously referred to Table RCA-A, which has been deleted).</li> <li>Added CPT codes 92134, 92227, 92228 to Table CDC-G.</li> <li>Deleted ICD-9 Diagnosis code V72.0 from Table CDC-G.</li> <li>Added azilsartan to "Angiotensin II inhibitors" description in Table CDC-L.</li> <li>Added aliskiren-hydrochlorothiazide-amlodipine to the "Antihypertensive combinations" description in Table CDC-L.</li> </ul>

		Applicable to:						
<b>HEDIS 2012 Measures</b>	Commercial	Medicaid	Medicare	Changes to HEDIS 2012				
Effectiveness of Care	Effectiveness of Care							
Comprehensive Diabetes Care (continued)	<b>√</b>	<b>√</b>	<b>√</b>	<ul> <li>Clarified BP Control criteria for the Administrative Specification.</li> <li>Clarified that members who meet the Optional Exclusion criteria must be excluded from the denominator for all rates, if optional exclusions are applied.</li> <li>Clarified reduction of sample size in the Hybrid Specification.</li> <li>Clarified that "Documentation of a renal transplant" meets criteria for the Medical attention for nephropathy indicator.</li> </ul>				
Disease-Modifying Anti-Rheumatic Drug Therapy for Rheumatoid Arthritis	<b>√</b>	<b>√</b>	<b>√</b>	<ul> <li>Added certolizumab pegol to description of "Immunomodulators" description in Table ART-C.</li> <li>Added mycophenolate to description of "Immunosuppressive agents" in Table ART-C.</li> <li>Added J codes J7517 and J7518 to description of "Immunosuppressive agents" in Table ART-C.</li> </ul>				
Osteoporosis Management in Women Who Had a Fracture			<b>√</b>	<ul> <li>Added CPT code 25520 to Table OMW-A.</li> <li>Deleted ICD-9 Diagnosis code V82.81 from Table OMW-B.</li> <li>Renamed "Miscellaneous hormones" description to "Other agents" in Table OMW-C.</li> <li>Added denosumab to "Other agents" description in Table OMW-C.</li> </ul>				
Use of Imaging Studies for Low Back Pain	<b>√</b>	✓		Added ICD-9 Diagnosis code 724.03 to Table LBP-A.				
Antidepressant Medication Management	✓	✓	<b>√</b>	<ul> <li>Added POS code 24 to Table AMM-B.</li> <li>Added vilazodone to "Miscellaneous antidepressants" description in Table AMM-D.</li> </ul>				
Follow-Up Care for Children Prescribed ADHD Medication	<b>√</b>	√		<ul> <li>Deleted CPT codes 99371–99373 from Table ADD-D.</li> <li>Clarified that members with a diagnosis of narcolepsy must be excluded from the denominator for both rates if optional exclusions are applied.</li> <li>Clarified in the C&amp;M Phase definition that 300 days is 10 months.</li> </ul>				
Follow-Up After Hospitalization for Mental Illness	✓	<b>√</b>	<b>√</b>	Added POS code 24 to Table FUH-C.				

		Applicable to:		
HEDIS 2012 Measures	Commercial	Medicaid	Medicare	Changes to HEDIS 2012
Effectiveness of Care			·	
Annual Monitoring for Patients on Persistent Medications	✓	✓	<b>√</b>	<ul> <li>Added a note that medications dispensed in the year prior to the measurement year must be counted toward the 180-treatment-day time frame.</li> <li>Added amiloride-hydrochlorothiazide-olmesartan and aliskiren-hydrochlorothiazide-</li> </ul>
				amlodipine to "Antihypertensive combinations" description in Table MPM-C.  • Removed polythiazide-prazosin from "Antihypertensive combinations" in Table MPM-C.
				Removed trichlormethiazide, polythiazide and bendroflumethiazide from "Thiazide diuretics" in Table MPM-C.
				Added LOINC code 60468-6 to the phenobarbital row of Table MPM-E.
Medication Reconciliation Post- Discharge			<b>✓</b>	No changes to this measure.
Potentially Harmful Drug-Disease Interactions in the Elderly			<b>√</b>	<ul> <li>Removed desipramine, nortriptyline and protriptyline from Table DDE-C.</li> <li>Removed mesoridazine from "Phenothiazide antipsychotics" description in Table DDE-D:</li> </ul>
				<ul> <li>Removed tacrine from "Cholinesterase inhibitors" description in Table DDE-F.</li> <li>Added carisoprodol-aspirin and carisoprodol-aspirin-codeine to "Skeletal muscle relaxants" description in Table DDE-G.</li> </ul>
				Deleted ICD-9 Diagnosis code V56 from Table DDE-H.
				<ul> <li>Added esomeprazole-naproxen, lansoprazole-naproxen, misoprostil-diclofenac, sumatriptan-naproxen, oxycodone HCl-ibuprofen, famotidine-ibuprofen, and hydrocodone-ibuprofen to "Nonsteroidal anti-inflammatory agents" description in Table DDE-I.</li> </ul>
Use of High-Risk Medications in the Elderly			<b>√</b>	No changes to this measure.
Fall Risk Management			<b>√</b>	This measure is collected using survey methodology. Detailed specifications and summary of changes are contained in HEDIS 2012, Volume 6: Specifications for the Medicare Health Outcomes Survey.
Management of Urinary Incontinence in Older Adults			<b>√</b>	This measure is collected using survey methodology. Detailed specifications and summary of changes are contained in HEDIS 2012, Volume 6: Specifications for the Medicare Health Outcomes Survey.
Osteoporosis Testing in Older Women			<b>√</b>	This measure is collected using survey methodology. Detailed specifications and summary of changes are contained in HEDIS 2012, Volume 6: Specifications for the Medicare Health Outcomes Survey.
Physical Activity in Older Adults			<b>√</b>	This measure is collected using survey methodology. Detailed specifications and summary of changes are contained in HEDIS 2012, Volume 6: Specifications for the Medicare Health Outcomes Survey.

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HEDIS 2012 Measures	Commercial	Medicaid	Medicare	Changes to HEDIS 2012
Effectiveness of Care				
Aspirin Use and Discussion	<b>√</b>	✓		This measure is collected using survey methodology. Detailed specifications and summary of changes are contained in <i>HEDIS 2012, Volume 3: Specifications for Survey Measures.</i>
Flu Shots for Adults Ages 50–64	<b>√</b>			This measure is collected using survey methodology. Detailed specifications and summary of changes are contained in <i>HEDIS 2012, Volume 3: Specifications for Survey Measures.</i>
Flu Shots for Older Adults			<b>√</b>	This measure is collected using survey methodology. Detailed specifications and summary of changes are contained in <i>HEDIS 2012, Volume 3: Specifications for Survey Measures.</i>
Medical Assistance With Smoking and Tobacco Use Cessation	<b>√</b>	✓	<b>√</b>	This measure is collected using survey methodology. Detailed specifications and summary of changes are contained in <i>HEDIS 2012, Volume 3: Specifications for Survey Measures.</i>
Pneumonia Vaccination Status for Older Adults			<b>√</b>	This measure is collected using survey methodology. Detailed specifications and summary of changes are contained in <i>HEDIS 2012, Volume 3: Specifications for Survey Measures.</i>
Access/Availability of Care				
Adults' Access to Preventive/ Ambulatory Health Services	<b>√</b>	<b>√</b>	<b>✓</b>	Added HCPCS codes G0438, G0439 to Table AAP-A.
Children's and Adolescents' Access to Primary Care Practitioners	<b>√</b>	<b>√</b>		Added HCPCS codes G0438, G0439 to Table CAP-A.
Annual Dental Visit		✓		No changes to this measure.
Initiation and Engagement of Alcohol and Other Drug Dependence Treatment	<b>√</b>	✓	<b>√</b>	No changes to this measure.
Prenatal and Postpartum Care	<b>√</b>	<b>√</b>		<ul> <li>Moved CPT code 99500 from Part A to Part D in Table PPC-C Decision Rule 2.</li> <li>Added LOINC codes 972-0, 978-7, 1305-2 to Table PPC-C (Decision Rules 2 and 3).</li> <li>Deleted CPT code 99500 and HCPCS codes H1000-H1005 from Table PPC-C Decision Rule 3; this eliminates redundancy because members with these codes are identified in Decision Rule 4.</li> <li>Moved CPT code 99500 from Part A to Part C in Table PPC-C Decision Rule 4.</li> </ul>

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<b>HEDIS 2012 Measures</b>	Commercial	Medicaid	Medicare	Changes to HEDIS 2012
Prenatal and Postpartum Care (continued)	<b>√</b>	<b>√</b>		<ul> <li>Moved CPT code 99500 from Part C to Part A in Table PPC-D.</li> <li>Clarified in the <i>Note</i> section that the most recent estimated date of delivery (EDD) should be used if multiple dates are documented and that a single date (date of delivery or EDD) must be used to define the start and end of the first trimester.</li> <li>Clarified in the <i>Note</i> section that postpartum visits with physician assistants, nurse practitioners, midwives and registered nurses are acceptable.</li> <li>Clarified in the <i>Note</i> section that the intent of the measure is to assess whether prenatal and preventive care was rendered on a routine, outpatient basis.</li> </ul>
Call Abandonment	<b>√</b>	✓	<b>√</b>	• Clarified the <i>Note</i> section how calls should be handled when the member's phone system tracks wait time and calls the member back.
Call Answer Timeliness	<b>√</b>	<b>√</b>	<b>√</b>	<ul> <li>Clarified that abandoned calls are noncompliant.</li> <li>Clarified in the <i>Note</i> section how calls should be handled when the member's phone system tracks wait time and calls the member back.</li> </ul>
Experience of Care				
CAHPS Health Plan Survey 4.0H, Adult Version	<b>√</b>	<b>√</b>		This measure is collected using survey methodology. Detailed specifications and summary of changes are contained in <i>HEDIS 2012, Volume 3: Specifications for Survey Measures.</i>
CAHPS Health Plan Survey 4.0H, Child Version	<b>√</b>	✓		This measure is collected using survey methodology. Detailed specifications and summary of changes are contained in <i>HEDIS 2012, Volume 3: Specifications for Survey Measures.</i>
Children With Chronic Conditions	<b>√</b>	<b>√</b>		This measure is collected using survey methodology. Detailed specifications and summary of changes for the measure are contained in <i>HEDIS 2012, Volume 3: Specifications for Survey Measures.</i>
Utilization and Relative Resource Use				
Guidelines for Utilization Measures	✓	✓	✓	No changes to these guidelines.
Frequency of Ongoing Prenatal Care		✓		Clarified notes below Table FPC-A and added a "9th-month" column.
Well-Child Visits in the First 15 Months of Life	<b>√</b>	✓		Added HCPCS codes G0438, G0439 to Table W15-A.

		Applicable to:		
<b>HEDIS 2012 Measures</b>	Commercial	Medicaid	Medicare	Changes to HEDIS 2012
Utilization and Relative Resource Use				
Well-Child Visits in the Third, Fourth, Fifth and Sixth Years of Life	<b>√</b>	<b>√</b>		Added HCPCS codes G0438, G0439 to Table W34-A.
Adolescent Well-Care Visits	✓	✓		Added HCPCS codes G0438, G0439 to Table AWC-A.
Frequency of Selected Procedures	<b>√</b>	<b>√</b>	<b>✓</b>	<ul> <li>Added CPT codes 22551, 93451-93453, 93456-93461 to Table FSP-A.</li> <li>Deleted CPT codes 52612, 52614, 52620 from Table FSP-A.</li> <li>Removed 0-4 and 5-19 age categories in "Member Months" in Tables FSP-1 and FSP-2.</li> <li>Added a note below Tables FSP-1 and FSP-2.</li> <li>Added the 65+ category to "Bariatric weight loss surgery" procedure in Table FSP-2.</li> </ul>
Ambulatory Care	✓	✓	✓	Deleted CPT code 99432 from Table AMB-A.
Inpatient Utilization—General Hospital/ Acute Care	<b>√</b>	✓	<b>✓</b>	<ul> <li>Added ICD-9 Diagnosis code V90 to Table IPU-A.</li> <li>Clarified that the 'Maternity" category is not based on an actual delivery.</li> <li>Clarified when MS-DRGs 789–795 should be reported.</li> <li>Clarified categorization of discharges based on coding and hierarchy methodology.</li> </ul>
Identification of Alcohol and Other Drug Services	<b>√</b>	<b>√</b>	<b>√</b>	Added POS code 24 to Table IAD-D.
Mental Health Utilization	✓	✓	✓	Added POS code 24 to Table MPT-D.
Antibiotic Utilization	✓	✓	✓	No changes to this measure.
Plan All-Cause Readmissions	<b>√</b>		<b>√</b>	<ul> <li>Clarified that a principal diagnosis is required for the pregnancy exclusion in the denominator and numerator criteria.</li> <li>Clarified and re-ordered the steps to identify risk adjustment determination and weighting.</li> <li>Added CPT codes 92002, 92004, 92012, 92014, 98925–98929, 98940–98942 to Table PCR-B.</li> <li>Added UB Revenue codes 1001, 1002 to Table PCR-B.</li> </ul>

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<b>HEDIS 2012 Measures</b>	Commercial	Medicaid	Medicare	Changes to HEDIS 2012
Utilization and Relative Resource Use				
Guidelines for Relative Resource Use Measures				<ul> <li>Retired Relative Resource Use for People with Acute Low Back Pain (RLB).</li> <li>Deleted CPT codes 90919–90921, 90923–90925 from Table RRU-B.</li> <li>Deleted HCPCS codes G0311–G0319, G0321–G0323, G0325–G0327 from Table RRU-B.</li> <li>Deleted ICD-9 Diagnosis code V56 from Table RRU-B.</li> <li>Removed the DRG code method for capturing discharges and pricing.</li> <li>Updated General Guideline 1 to include all EOC measures that must be reported with the corresponding RRU measure.</li> <li>Added new "Diagnostic Laboratory" and "Imaging Services" categories.</li> <li>Updated specifications to subclassify inpatient stays for the service frequency calculations.</li> <li>Updated specifications to allow reporting of generic vs. name brand prescriptions.</li> <li>Moved "Required Exclusions" for all RRU measures to Guidelines for Relative Resource Use Measures.</li> <li>Deleted UB Revenue codes 022x, 077x from Table RRU-E (formerly RDI-E in the Relative Resource Use for People With Diabetes measure).</li> <li>Incorporated the Hierarchical Condition Categories (HCC) risk-adjustment methodology.</li> </ul>
Relative Resource Use for People With Diabetes	<b>√</b>	<b>√</b>	<b>~</b>	<ul> <li>Revised Service Frequency Calculations (including addition of "Other condition-specific categories").</li> <li>Moved required exclusion tables to the Guidelines for Relative Resource Use and renamed them.</li> <li>Incorporated the HCC-RRU Risk Adjustment methodology.</li> <li>Added new "Diagnostic Laboratory" and "Imaging Services" categories.</li> <li>Revised the Data Elements for Reporting tables.</li> </ul>
Relative Resource Use for People With Cardiovascular Conditions	<b>√</b>	<b>√</b>		<ul> <li>Revised Service Frequency Calculations (including addition of "Other condition-specific categories").</li> <li>Moved required exclusion tables to the Guidelines for Relative Resource Use and renamed them.</li> <li>Incorporated the HCC-RRU risk-adjustment methodology.</li> <li>Added new "Diagnostic Laboratory" and "Imaging Services" categories.</li> <li>Revised the Data Elements for Reporting tables.</li> </ul>

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Utilization and Relative Resource Use				
Relative Resource Use for People With Hypertension	<b>✓</b>	<b>√</b>	<b>√</b>	<ul> <li>Revised Service Frequency Calculations.</li> <li>Moved required exclusion tables to the Guidelines for Relative Resource Use and renamed them.</li> <li>Revised all reporting tables to reflect the changes to service frequency reporting.</li> <li>Incorporated the HCC-RRU Risk Adjustment methodology.</li> <li>Added new "Diagnostic Laboratory" and "Imaging Services" categories.</li> <li>Revised the Data Elements for Reporting tables.</li> </ul>
Relative Resource Use for People With COPD	<b>√</b>	<b>√</b>	<b>√</b>	<ul> <li>Revised Service Frequency Calculations.</li> <li>Moved required exclusion tables to the Guidelines for Relative Resource Use and renamed them.</li> <li>Revised all reporting tables to reflect the changes to service frequency reporting.</li> <li>Clarified the Note regarding visit criteria.</li> <li>Incorporated the HCC-RRU Risk Adjustment methodology.</li> <li>Added new "Diagnostic Laboratory" and "Imaging Services" categories.</li> <li>Revised the Data Elements for Reporting tables.</li> </ul>
Relative Resource Use for People With Asthma	<b>~</b>	<b>√</b>	<b>~</b>	<ul> <li>Revised Service Frequency Calculations.</li> <li>Moved required exclusion tables to the Guidelines for Relative Resource Use and renamed them.</li> <li>Revised all reporting tables to reflect the changes to service frequency reporting.</li> <li>Incorporated the HCC-RRU Risk Adjustment methodology.</li> <li>Added new "Diagnostic Laboratory" and "Imaging Services" categories.</li> <li>Revised the Data Elements for Reporting tables.</li> <li>Increased upper age limit to 64 years of age.</li> <li>Added additional required exclusions to eligible population criteria.</li> </ul>

		Applicable to:		
<b>HEDIS 2012 Measures</b>	Commercial	Medicaid	Medicare	Changes to HEDIS 2012
Health Plan Descriptive Information				
Board Certification	✓	✓	✓	No changes to this measure.
Enrollment by Product Line	✓	✓	✓	No changes to this measure.
Enrollment by State	✓	✓	✓	No changes to this measure.
Language Diversity of Membership	<b>√</b>	<b>√</b>	<b>√</b>	<ul> <li>Clarified that indirect data are not reported in this measure.</li> <li>Clarified that members who decline to provide language information should be included in Table LDM-A.</li> </ul>
Race/Ethnicity Diversity of Membership	✓	✓	✓	Revised reporting tables to better reflect the captured data.
Weeks of Pregnancy at Time of Enrollment		<b>√</b>		No changes to this measure.
Total Membership	✓	✓	✓	Moved this measure to the Health Plan Descriptive Information domain.