October 1, 2014

Dear Colleague:

NCQA is pleased to present the HEDIS®[1] Measures Included in the 2015 *Quality Rating System (QRS) Technical Update.* With this release, NCQA freezes the technical specifications for HEDIS Measures Included in the QRS, with the exception of *Relative Resource Use (RRU) for People With Diabetes* and measures that require pharmacy data—these will be final when the Standard Pricing Tables (SPT), risk-adjustment tables and National Drug Code (NDC) lists are posted on November 3, 2014.

This memo contains the following information:

- Random Number (RAND) table for HEDIS Measures Included in the 2015 QRS.
- Corrections, policy changes and clarifications to HEDIS Measures Included in the 2015 *QRS Technical Specifications.*

This memo does not contain changes to medications. Refer to the *NDC List Technical Update* document posted with the NDC lists in November for all medication changes.

Organizations must go to the NCQA Store (http://store.ncqa.org/) and download the October 1 version of the Quality Rating System Value Set Directory (VSD).

Please note the following important licensing information: Uniform Bill Codes ("UB Codes") are protected under federal copyright laws and are owned by the American Hospital Association (AHA). The UB Codes in the HEDIS specifications are included with the permission of the AHA. The UB Codes contained in the HEDIS specifications may be used by health plans and other health care delivery organizations for the purpose of calculating and reporting HEDIS results or using HEDIS measure results for their internal quality improvement purposes. All other uses of the UB Codes require a license from the AHA. Software vendors and all others desiring to use the UB Codes in a commercial product to generate HEDIS results, or for any other use, must obtain a commercial use license directly from the AHA. To inquire about licensing, please contact ub04@healthforum.com.

Review all items in the table below and the attached document, and incorporate them into your implementation processes. HEDIS Compliance Auditors will consider these documents to be part of the specifications. If you have questions about information included in the *Technical Update* or about other measure specifications, contact us through our Policy Clarification Support (PCS) system at http://pcs.ncqa.org. We wish everyone a successful data collection season!

Sincerely,

Cindy Ottone, MHA
Director, Policy

Enclosure

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

RAND Table for Measures Using the Hybrid Method

Measure	RAND
Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents	.35
Cervical Cancer Screening	.86
Controlling High Blood Pressure	.66
Comprehensive Diabetes Care	.06
Prenatal and Postpartum Care	.93

Specification Updates

This document contains corrections, policy changes and clarifications to *HEDIS Measures Included in the 2015 QRS Technical Specifications.* NCQA has identified the appropriate page number, measure/guideline and head/subtitle for each item.

Page	Measure/Guideline	Head/Subtitle	Update
17-18	General Guideline 29	Measures That Require Results From the Most Recent Test	Replace the fourth paragraph with the following text: Multiple dates of service may be associated with a single lab test. For example, a laboratory test may have a collection date (i.e., the date when the specimen was drawn), a reported date (i.e., the date when results were calculated and reported) and a claim date (i.e., the date of service on the claim). Because of this, the "result" may not be associated with the most recent date. An organization may consider all events with dates no more than seven days apart to be the *same* test and may use the result associated with that event (even if it is not the most recent date of service). If there are two or more events with results, the most recent result must be used. The most recent date among all events must be in the time frame specified by the measure and must be used for reporting. For example, a test with a collection date of December 1 and a reported date of December 8 may be considered the same test and the most recent date of December 8 must be used for reporting. Tests with dates more than seven days apart are considered different tests; the most recent must be used.
19	General Guideline 33	Identifying Events/Diagnoses Using Laboratory or Pharmacy Data	Replace the last sentence in the first paragraph with the following text: Laboratory claims and data may be used only for the Lab Panel Value Set, the Obstetric Panel Value Set, the Pregnancy Tests Value Set, the Sexual Activity Value Set (which do not contain LOINC* codes) and value sets that contain LOINC codes.
68	Cervical Cancer Screening	Numerator—Step 2	Replace the last sentence with the following text: For example, if the service date for cervical cytology was December 1 of the measurement year, then the HPV test must include a service date on or between November 27 and December 5 of the measurement year.
71	Chlamydia Screening in Women	Event/diagnosis—Claim/ encounter data	Add the following bullet: • Pregnancy Tests Value Set.
72	Chlamydia Screening in Women	Exclusion (optional)	Replace the text in this section with the following text: Exclude members who qualified for the denominator based on a pregnancy test (Pregnancy Tests Value Set) alone and who meet either of the following: • A pregnancy test (Pregnancy Test Exclusion Value Set) during the measurement year followed within seven days (inclusive) by a prescription for isotretinoin (Table CHL-E). • A pregnancy test (Pregnancy Test Exclusion Value Set) during the measurement year followed within seven days (inclusive) by an x-ray (Diagnostic Radiology Value Set).
103	Prenatal and Postpartum Care	Note	Add the following text to the end of the fourth bulleted note. The LMP may not be used to determine the first trimester.