**Specification Updates**

This document contains corrections and policy changes or clarifications for *HEDIS® 2019 Volume 5: HEDIS Compliance Audit™: Standards, Policies and Procedures*.

<table>
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| 56   | Audit Process: Offsite Methods | HEDIS Audit Timeline: ‘By November 1 NCQA Deadline’ | Add the red text:  
*Note: This date can be adjusted by the auditor, as needed, as long as the December 3 date is met.* |
| 68   | Audit Process: Offsite Methods | MRRV (Table 1: MRR Validation Measure Groups) | Add the red text to the *Note*:  
Because all indicators for TRC must be collected from a single medical record, all indicators must be validated for MRRV when TRC is selected. The auditor may select 16 cases based on the numerator positive counts for one indicator; however, for the selected cases, all MRR compliant numerator hits for each indicator must be validated. |
| 2-14 | HEDIS Roadmap | HEDIS Roadmap: Section 3 (Table 3.4: Reporting Board Certification) | Add the red text:  
Required only if BCR is audited. |
| 2-14 | HEDIS Roadmap | HEDIS Roadmap: Section 3 - Requested Documents 3.2 | Add the red text:  
Required only if BCR is audited. |
| 2-14 | HEDIS Roadmap | HEDIS Roadmap: Section 3 - Requested Documents 3.5 | Add the red text:  
Required only if BCR is audited. |
| 2-25 | HEDIS Roadmap | HEDIS Roadmap: Section 6 | Add the red text to the section heading:  
(IS 6) |
| 2-26 | HEDIS Roadmap | HEDIS Roadmap: Section 6 Table 6.2 Data Preparation | Add the red text to question 6.2W:  
Describe how you ensure these data are not duplicated. |
| 7-15 | Appendix 7 – Survey Sample Frame Validation | QHP ENROLLEE EXPERIENCE SURVEY SAMPLE FRAME VALIDATION | Add the QHP Survey Sample Frame Validation: Criteria to Assign QHP Enrollee Survey Sample Frame Results excerpt. |