



TO: Interested Organizations
FROM: Patrick Dahill, Assistant Vice President, Policy
DATE: August 12, 2019
RE: 2019 Accreditation Benchmarks and Thresholds—Mid-Year Update

This document reports national benchmarks and national and regional thresholds for HEDIS^{®1} measures and HEDIS/CAHPS^{®2} 5.0H survey results and will be used to score health plans for Accreditation year 2019.

B&T Format

This memo does not include the benchmarks and thresholds by measure. The 2019 Accreditation Benchmarks and Thresholds are available as an Excel workbook in the “My Downloads” section of My.NCQA.org (<https://my.ncqa.org/>).

Auditors, software vendors, survey vendors and HEDIS and Accreditation primary contacts have access to the Benchmarks and Thresholds file in the Download Center. Access has been limited for all other customers, to ensure that the benchmarks are used solely for their intended purpose (to estimate an organization’s HEDIS performance portion of its Accreditation score) and not for general benchmarking or commercial purposes.

If your organization is in a group noted above but does not have access to the Benchmarks and Thresholds in the Download Center, submit a request at <http://my.ncqa.org/>.

New Measures

NCQA added the following measures to Accreditation 2019 scoring.

- Metabolic Monitoring for Children and Adolescents on Antipsychotics (*commercial and Medicaid*)
- Use of First-Line Psychosocial Care for Children and Adolescents on Antipsychotics (*commercial and Medicaid*)
- Prenatal and Postpartum Care—Timeliness of Prenatal Care rate (*commercial*)

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Retired Measures

NCQA retired the following measures from Accreditation 2019 scoring.

- Antidepressant Medication Management—Effective Acute Phase Treatment Rate (*all product lines*)
- Follow-Up for Children Prescribed ADHD Medication—Initiation Phase Rate (*commercial and Medicaid*)
- Initiation and Engagement of Alcohol & Other Drug Abuse or Dependence Treatment—Initiation of AOD Treatment Rate (*all product lines*)
- Persistence of Beta Blocker Treatment After a Heart Attack (*commercial and Medicare*)
- Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents—Counseling for Nutrition Rate (*commercial and Medicaid*)
- Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents—Counseling for Physical Activity Rate (*commercial and Medicaid*)

Accreditation 2019 Scoring

As described in the *Standards and Guidelines for the Accreditation of Health Plans*, NCQA requires organizations to submit specified HEDIS measures and CAHPS 5.0H survey results annually. NCQA determines the HEDIS measure portion of the score by comparing organization results with a national benchmark (the 90th percentile of national results) and with regional and national thresholds (the 75th, 50th and 25th percentiles). NCQA uses the higher of two scores: the result based on comparison with the average of the regional and national thresholds, *or* the result based on comparison with national thresholds.

NCQA determines the CAHPS 5.0H results portion of the score by comparing organization results with a national benchmark (the 90th percentile) and with national thresholds (the 75th, 50th and 25th percentiles). NCQA does not consider regional thresholds because regional variation in the data is not as significant.

Organizations submit:

- Three rates for Comprehensive Diabetes Care
- Two rates for Pharmacotherapy Management of COPD Exacerbation
- Two rates for Prenatal and Postpartum Care
- Two rates for Statin Therapy for Patients With Cardiovascular Disease
- Two rates for Statin Therapy for Patients With Diabetes

For these measures, each rate is scored against its threshold or benchmark. Individual scores are averaged to determine the overall score on each measure.

The Comprehensive Diabetes Care average is doubled and counts as two measure scores.

Mid-Year Updates

The following updates were incorporated into the Accreditation 2019 Mid-Year Update.

- Benchmarks were updated for the following measures in the Excel data file:
 - Adherence to Antipsychotic Medications for Individuals With Schizophrenia (*Medicaid*)
 - Adult BMI Assessment (*commercial and Medicaid*)
 - Asthma Medication Ratio (*commercial and Medicaid*)
 - Avoidance of Antibiotic Treatment in Adults With Acute Bronchitis (*commercial and Medicaid*)
 - Breast Cancer Screening (*all product lines*)
 - Childhood Immunization Status (*commercial and Medicaid*)
 - Colorectal Cancer Screening (*commercial and Medicare*)
 - Comprehensive Diabetes Care – Blood Pressure Control <140/90 (*all product lines*)
 - Comprehensive Diabetes Care – Eye Exams (*all product lines*)
 - Comprehensive Diabetes Care – HbA1c Control <8% (*all product lines*)
 - Controlling High Blood Pressure (*all product lines*)
 - Diabetes Screening for People With Schizophrenia or Bipolar Disorder Who Are Using Antipsychotic Medications (*Medicaid*)
 - Follow-Up After Hospitalization for Mental Illness (*all product lines*)
 - Medication Management for People With Asthma (*commercial and Medicaid*)
 - Osteoporosis Management in Women Who Had a Fracture (*Medicare*)
 - Statin Therapy for Patients With Cardiovascular Disease; both rates (*all product lines*)
 - Statin Therapy for Patients With Diabetes; both rates (*all product lines*)
 - Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents (*commercial and Medicaid*)
- Measure IDs were updated for the following measure in the Excel data file:
 - Controlling High Blood Pressure (CBP)
- Special Scoring Rule was updated for the *Use of High Risk Medications in the Elderly* measure.
- The National O/E Ratios were added for the Plan All-Cause Readmissions (PCR) and Emergency Department Utilization (EDU) measures in Appendix A of this memo.
- Medicaid Adjustment points were updated for the applicable measures in the Medicaid Adjustments section of this memo.
- Medicaid Adjustment points were removed from the following measures:
 - Adult BMI Assessment (Regions 7, 10)
 - Comprehensive Diabetes Care – BP Control <140/90 (Regions 1, 3, 5, 7, 8, 9, 10)
 - Comprehensive Diabetes Care – HbA1c Control <8% (Region 4)
 - Controlling High Blood Pressure (Regions 2, 10)
 - Statin Therapy for Patients With Diabetes – Received Statin Therapy (Region 9)
 - Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents (Region 7)

Special Scoring Rules

The “Other scoring notes” column in the Excel workbook (refer to *B&T Format*, above) indicates which measures meet a special scoring threshold.

For measures where a higher rate indicates better performance, and the 90th percentile is 90 or above and the distribution for thresholds below the 90th percentile is within 5 percentage points, NCQA implements the following special scoring rules.

- If the special scoring threshold is at the **75th percentile**, plans with reported rates at or above the **national 75th percentile** receive **100% of the national points**.
- If the special scoring threshold is at the **50th percentile**, plans with reported rates at or above the **regional 50th percentile** receive **100% of the regional points**.
- If the special scoring threshold is at the **25th percentile**, plans with reported rates at or above the **regional 25th percentile** receive **100% of the regional points**.
- Plans with reported rates **below the regional 25th percentile** receive **68% of the regional points**.

For measures where a lower rate indicates better performance, and the 90th percentile is 10 or below and the distribution for thresholds below the 90th percentile is within 5 percentage points, NCQA implements the following special scoring rule.

- If the special scoring rule is at the **25th percentile**, plans with reported rates at or below the **regional 25th percentile** receive **100% of the regional points**.
- Plans with reported rates **above the regional 25th percentile** receive **68% of the regional points**.

Note: The special scoring rules are applicable to Medicaid scoring at the national level only, not the regional level.

Scoring for Marketplace Product Lines

For Renewal Surveys and applicable First Surveys, NCQA will continue to score the Marketplace product line on Accreditation standards only, and will evaluate whether the organization continues to be a Qualified Health Plan under CMS requirements.

If the organization did not submit Quality Rating System (QRS) measures to CMS and is not listed on [Healthcare.gov](https://www.healthcare.gov), NCQA will not accredit the Marketplace product line or, if the organization is accredited, will revoke its Accreditation status. If the organization is not required by CMS to report QRS measures but is listed on Healthcare.gov, NCQA will discuss the issue with the organization before revoking Accreditation status.

Scoring for Medicaid Product Lines

NCQA allows Medicaid product lines to be scored on the CAHPS Health Plan Survey 5.0H Adult Version, on the Child Version or on the Children With Chronic Conditions Survey questions/composites. General population results are used to calculate both the Child and the Children With Chronic Conditions surveys; all organizations (including those whose Accreditation score is based on a previous standards year) may submit either version.

Adjusted Accreditation Points for Medicaid Plans by Region

Because a limited number of Medicaid plans submit audited HEDIS results, NCQA cannot publish regional thresholds for the HEDIS measures. However, NCQA developed adjustment factors using the commercial regional and national thresholds, when substantial differences between national and regional measures were evident. Refer to *Appendix B: HHS Regions*.

Point adjustments for Medicaid plans are outlined below by region and apply to all reporting products or to any combination of products. Regions that are not listed below do not have any applicable adjustments for that particular region. Medicaid plans should add the following percentage points to their rates (before scoring).

Italicized measures in this section indicate added measures or a change in adjustment points from the Initial 2019 Benchmarks and Thresholds Memo.

REGION 1: Connecticut, Maine, Rhode Island, Massachusetts, New Hampshire, Vermont

HMO/POS/PPO/EPO

Adult BMI Assessment..... add 4 percentage points

REGION 2: New Jersey, New York, Puerto Rico, Virgin Islands

HMO/POS/PPO/EPO

Adult BMI Assessment..... add 4 percentage points

Breast Cancer Screening..... add 2 percentage points

Comprehensive Diabetes Care—Blood Pressure Control <140/90..... add 3 percentage points

Immunizations for Adolescents—Combo 2..... add 3 percentage points

Medication Management for People With Asthma—75% Rate..... add 3 percentage points

Pharmacotherapy Management of COPD Exacerbation—Systemic Corticosteroid..... add 2 percentage points

Statin Therapy for Patients With Cardiovascular Disease—Received Statin Therapy..... add 3 percentage points

Statin Therapy for Patients With Diabetes—Received Statin Therapy..... add 2 percentage points

REGION 4: Alabama, Georgia, Mississippi, South Carolina, Florida, Kentucky, North Carolina, Tennessee

HMO/POS/PPO/EPO

Antidepressant Medication Management—Continuation Phase..... add 4 percentage points

Appropriate Treatment for Children With Upper Respiratory Infection..... add 4 percentage points

Avoidance of Antibiotic Treatment in Adults With Acute Bronchitis..... add 3 percentage points

Childhood Immunization Status—Combo 10..... add 7 percentage points

Comprehensive Diabetes Care—Blood Pressure Control <140/90..... add 3 percentage points

Comprehensive Diabetes Care—Eye Exam..... add 8 percentage points

Controlling High Blood Pressure..... add 3 percentage points

Flu Vaccinations for Adults Ages 18–64..... add 3 percentage points

Follow-Up After Hospitalization for Mental Illness..... add 8 percentage points

Immunizations for Adolescents—Combo 2..... add 4 percentage points

Pharmacotherapy Management of COPD Exacerbation—Bronchodilator..... add 4 percentage points

Pharmacotherapy Management of COPD Exacerbation—Systemic Corticosteroid..... add 2 percentage points

Statin Therapy for Patients With Cardiovascular Disease—Received Statin Therapy..... add 3 percentage points

Statin Therapy for Patients With Cardiovascular Disease—Statin Adherence 80%..... add 4 percentage points

Statin Therapy for Patients With Diabetes—Received Statin Therapy..... add 2 percentage points

Statin Therapy for Patients With Diabetes—Statin Adherence 80%..... add 5 percentage points

Use of Imaging Studies for Low Back Pain..... add 6 percentage points

REGION 5: Illinois, Michigan, Ohio, Indiana, Minnesota, Wisconsin

HMO/POS/PPO/EPO

Chlamydia Screening in Women..... add 4 percentage points
 Follow-Up Care for Children Prescribed ADHD Medication—Continuation add 2 percentage points

REGION 6: Arkansas, New Mexico, Texas, Louisiana, Oklahoma

HMO/POS/PPO/EPO

Adult BMI Assessment..... add 9 percentage points
 Antidepressant Medication Management—Continuation Phase add 6 percentage points
 Appropriate Testing for Children With Pharyngitis..... add 5 percentage points
 Appropriate Treatment for Children With Upper Respiratory Infection add 8 percentage points
Avoidance of Antibiotic Treatment in Adults With Acute Bronchitis..... add 6 percentage points
Breast Cancer Screening..... add 4 percentage points
 Cervical Cancer Screening add 4 percentage points
 Childhood Immunization Status—Combination 10 add 8 percentage points
 Chlamydia Screening in Women..... add 4 percentage points
Comprehensive Diabetes Care—Blood Pressure Control <140/90..... add 8 percentage points
 Comprehensive Diabetes Care—Eye Exam..... add 9 percentage points
Comprehensive Diabetes Care—HbA1c Control <8.0%..... add 5 percentage points
Controlling High Blood Pressure..... add 7 percentage points
Follow-Up After Hospitalization for Mental Illness add 8 percentage points
 Follow-Up Care for Children Prescribed ADHD Medication—Continuation add 4 percentage points
 Immunizations for Adolescents—Combo 2..... add 3 percentage points
 Medication Management for People With Asthma—75% Rate add 3 percentage points
 Prenatal and Postpartum Care—Postpartum Care add 10 percentage points
 Prenatal and Postpartum Care—Timeliness of Prenatal Care add 6 percentage points
Statin Therapy for Patients With Cardiovascular Disease—Received Statin Therapy..... add 2 percentage points
Statin Therapy for Patients With Cardiovascular Disease—Statin Adherence 80% add 3 percentage points
Statin Therapy for Patients With Diabetes—Received Statin Therapy..... add 2 percentage points
Statin Therapy for Patients With Diabetes—Statin Adherence 80% add 5 percentage points
 Use of Imaging Studies for Low Back Pain..... add 4 percentage points
 Weight Assessment and Counseling for Nutrition and Physical Activity for Children/
 Adolescents—BMI Percentile add 10 percentage points

REGION 7: Iowa, Missouri, Kansas, Nebraska

HMO/POS/PPO/EPO

Appropriate Testing for Children With Pharyngitis..... add 3 percentage points
 Appropriate Treatment for Children With Upper Respiratory Infection add 6 percentage points
Avoidance of Antibiotic Treatment in Adults With Acute Bronchitis..... add 5 percentage points
 Cervical Cancer Screening add 3 percentage points
 Chlamydia Screening in Women..... add 8 percentage points
 Follow-Up After Hospitalization for Mental Illness add 4 percentage points
 Follow-Up Care for Children Prescribed ADHD Medication—Continuation add 6 percentage points
 Immunizations for Adolescents—Combo 2..... add 4 percentage points
 Prenatal and Postpartum Care—Timeliness of Prenatal Care add 5 percentage points

REGION 8: Colorado, North Dakota, Utah, Montana, South Dakota, Wyoming**HMO/POS/PPO/EPO**

Breast Cancer Screening	add 3 percentage points
Cervical Cancer Screening	add 3 percentage points
Chlamydia Screening in Women.....	add 10 percentage points
<i>Comprehensive Diabetes Care—Eye Exam</i>	<i>add 3 percentage points</i>
Follow-Up Care for Children Prescribed ADHD Medication—Continuation	add 5 percentage points
Prenatal and Postpartum Care—Timeliness of Prenatal Care	add 4 percentage points
<i>Weight Assessment and Counseling for Nutrition and Physical Activity for Children/ Adolescents—BMI Percentile</i>	<i>add 5 percentage points</i>

REGION 9: American Samoa, California, Hawaii, Arizona, Guam, Nevada**HMO/POS/PPO/EPO**

Antidepressant Medication Management—Continuation Phase	add 4 percentage points
Appropriate Testing for Children With Pharyngitis.....	add 7 percentage points
<i>Asthma Medication Ratio</i>	<i>add 2 percentage points</i>
Childhood Immunization Status—Combination 10	add 4 percentage points
<i>Comprehensive Diabetes Care—Eye Exam</i>	<i>add 5 percentage points</i>
Controlling High Blood Pressure.....	add 2 percentage points
<i>Medication Management for People With Asthma—75% Rate</i>	<i>add 2 percentage points</i>
Pharmacotherapy Management of COPD Exacerbation—Systemic Corticosteroid	add 4 percentage points
Prenatal and Postpartum Care—Postpartum Care	add 3 percentage points
<i>Statin Therapy for Patients With Cardiovascular Disease—Received Statin Therapy</i>	<i>add 2 percentage points</i>
<i>Statin Therapy for Patients With Cardiovascular Disease—Statin Adherence 80%</i>	<i>add 2 percentage points</i>
<i>Statin Therapy for Patients With Diabetes—Statin Adherence 80%</i>	<i>add 2 percentage points</i>
<i>Weight Assessment and Counseling for Nutrition and Physical Activity for Children/ Adolescents—BMI Percentile</i>	<i>add 3 percentage points</i>

REGION 10: Alaska, Oregon, Idaho, Washington**HMO/POS/PPO/EPO**

Appropriate Testing for Children With Pharyngitis.....	add 3 percentage points
Asthma Medication Ratio	add 2 percentage points
Breast Cancer Screening.....	add 3 percentage points
Cervical Cancer Screening	add 3 percentage points
Chlamydia Screening in Women.....	add 5 percentage points
<i>Comprehensive Diabetes Care—HbA1c Control <8.0%</i>	<i>add 2 percentage points</i>
Prenatal and Postpartum Care—Timeliness of Prenatal Care	add 4 percentage points
<i>Weight Assessment and Counseling for Nutrition and Physical Activity for Children/ Adolescents—BMI Percentile</i>	<i>add 8 percentage points</i>

Appendix A: PCR and EDU Scoring

The Plan All-Cause Readmissions (PCR) and Emergency Department Utilization (EDU) measures are required for Accreditation 2019. Because these measures are case-mix adjusted, modifications must be made to the traditional scoring model. The PCR measure is reported as a ratio of observed to expected (O/E) hospital readmissions, and the EDU measure is reported as observed to expected (O/E) ED visits.

To identify meaningful distinctions between plans, NCQA will distinguish between three levels of performance using statistical significance testing; better-than-expected performance, lower-than-expected performance and same-as-expected performance.

Before evaluating the plan's O/E thresholds as outlined below, the plan's ratio and upper/lower confidence limits need to be calibrated to determine what percent above or below the national average the plan's ratio is. In order to calibrate the O/E ratio, divide the plan's ratio and upper and lower confidence limits by the national average O/E ratio. This calibrated value is then compared to 1.0 for scoring.

- *A calibrated O/E ratio >1.0* means the plan had a below average O/E ratio, based on its case mix.
- *A calibrated O/E ratio <1.0* means the plan had an above average O/E ratio, based on its case mix.

Plans with fewer than 150 denominator events (i.e., the eligible population) are scored NA. This score does not count against the maximum number of NA scores a plan can receive for Accreditation scoring. To help protect against trivial (though statistically significant) differences from driving Accreditation status, we will use an effect size threshold of 0.9 and 1.1. Calibrated O/Es must be significantly different from 1.0 and exceed the upper and lower thresholds.

To calculate the upper and lower confidence limits (CL) for scoring, we apply the formulas below using the reported values in the measure. Table 1 outlines the points earned for each group of plans.

$$(1) \text{ Upper CL} = \frac{\text{Observed Count} + 1.96\sqrt{\text{Variance}}}{\text{Expected Count}}$$

$$(2) \text{ Lower CL} = \frac{\text{Observed Count} - 1.96\sqrt{\text{Variance}}}{\text{Expected Count}}$$

$$(3) \text{ Calibrated Upper CL} = \frac{\text{Upper CL}}{\text{National Average O/E}}$$

$$(4) \text{ Calibrated Lower CL} = \frac{\text{Lower CL}}{\text{National Average O/E}}$$

Table 1. Scoring Algorithm for PCR and EDU

PCR and EDU Scoring Rule	Percentage of Points Earned
Calibrated O/E <0.9 and 95% upper confidence limit <1.0	100%
Calibrated O/E not meaningfully and significantly different from 1.0 ($0.9 \leq O/E \leq 1.1$ or 95% confidence limit includes 1.0)	68%
Calibrated O/E >1.1 and 95% lower confidence limit >1.0	20%
Not Report (NR) or Biased Rate (BR) HEDIS Audit Result	0%
Plan's denominator/eligible population <150	NA

Notes:

NCQA will calculate the confidence limits for all organizations.

The following table includes the national average O/E ratio by product line.

Product Line	PCR National Average O/E Ratio	EDU National Average O/E Ratio
Commercial	0.7152365518	1.0355582877
Medicare*	0.7141689695	1.036925519

*For the Medicare product line, NCQA will use the national O/E Ratio for individuals 65 years and older to score organizations on the PCR and EDU measures.

Appendix B: HHS Regions

The regions used in this memo and in the Excel workbook align with the U.S. Department of Health and Human Services regions and are listed below for reference.

Region Number	Region Name	Covered States
1	Boston	Connecticut, Maine, Rhode Island, Massachusetts, New Hampshire, Vermont
2	New York	New Jersey, New York, Puerto Rico, Virgin Islands
3	Philadelphia	Delaware, Maryland, Virginia, District of Columbia, Pennsylvania, West Virginia
4	Atlanta	Alabama, Georgia, Mississippi, South Carolina, Florida, Kentucky, North Carolina, Tennessee
5	Chicago	Illinois, Michigan, Ohio, Indiana, Minnesota, Wisconsin
6	Dallas	Arkansas, New Mexico, Texas, Louisiana, Oklahoma
7	Kansas City	Iowa, Missouri, Kansas, Nebraska
8	Denver	Colorado, North Dakota, Utah, Montana, South Dakota, Wyoming
9	San Francisco	American Samoa, California, Hawaii, Arizona, Guam, Nevada
10	Seattle	Alaska, Oregon, Idaho, Washington