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Dear Colleague:

NCQA is pleased to present the 2020 HEDIS®[1] for the *Quality Rating System: Technical Update.* With this release, NCQA freezes the technical specifications for HEDIS for the Quality Rating System, with the exception of measures that require pharmacy data and the Risk Adjusted Utilization measures.

Measures that require pharmacy data and the Risk Adjusted Utilization measures will be final when the Medication List Directory of National Drug Codes (NDC) and the risk-adjustment tables are posted on November 1, 2019.

This memo contains the following information:

- Random Number (RAND) table for 2020 *HEDIS for the Quality Rating System.*
- Corrections, policy changes and clarifications to 2020 *HEDIS for the Quality Rating System.*

Obtaining the Medication List Directory (MLD). Changes to medications are included in the MLD, which will be available for download on November 1. The MLD is available for free order in the NCQA Store at http://store.ncqa.org/index.php/catalog/product/view/id/3741/s/hedis-2020-ndc.

Obtaining the updated Value Set Directory (VSD). Go to "My Downloads" at https://my.ncqa.org/Downloads and download the VSD again to obtain the October 1 version, which contains all coding changes. The NCQA Download Center does not list the VSD as "October 1 version" (in the Item Name column), but the updated version date will display in the file name once the file has been downloaded. Refer to the Summary of Changes spreadsheets in the VSD to identify codes and value sets that were added, deleted or revised.

Review all items in the table and attachments and incorporate them into your implementation processes. The changes in this document are required for HEDIS 2020 reporting.

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 via My.NCQA at https://my.ncqa.org. We wish everyone a successful HEDIS data collection season!

Sincerely,

Cindy Ottone, MHA
Director, Policy-Measures

Enclosure

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RAND Table for Measures Using the Hybrid Method

Measure	RAND
Adult BMI Assessment	.86
Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents	.78
Childhood Immunization Status	.82
Immunizations for Adolescents	.87
Cervical Cancer Screening	.58
Colorectal Cancer Screening	.26
Controlling High Blood Pressure	.12
Comprehensive Diabetes Care	.59
Prenatal and Postpartum Care	.19

Specification Updates

This document contains corrections, policy changes and clarifications to 2020 *HEDIS for the Quality Rating System.* NCQA has identified the appropriate page number, measure/guideline and head/subtitle for each item. The document is split in two sections: **Single Line-Item Changes** and **Changes That Affect Multiple Measures**.

Page	Measure/Guideline	Head/Subtitle	Update
97	Childhood Immunization Status	Administrative Specification—Numerators, MMR	Replace the second bullet with the following text (do not delete the dashed sub-bullets below the second bullet): At least one measles and rubella vaccination (Measles Rubella Immunization Value Set; Measles Rubella Vaccine Procedure Value Set) on or between the child's first and second birthdays ***and*** one of the following:
113	Comprehensive Diabetes Care	Administrative Specification—Numerators, HbA1c Control <8%	Add the following rows to the table: HbA1c Level Greater Than or Equal To 7.0 and Less Than 8.0 Value Set — Compliant HbA1c Level Greater Than or Equal To 8.0 and Less Than or Equal To 9.0 Value Set — Not compliant
131	Follow-Up After Hospitalization for Mental Illness	Note	Replace the second and third bullets with the following text: • *The Mental Health Practitioner Value Set contains provider taxonomy codes and is included for organizations that report the measure using clinical data. If an organization does not use the codes in the Mental Health Practitioner Value Set, it must map providers to a code in the value set for reporting. Only providers who meet the definition of "mental health practitioner" (Appendix 1) are eligible to be mapped. Mapping is subject to review by the HEDIS auditor.* • *Because provider taxonomy codes are not found in claims data, organizations must develop their own methods to identify mental health practitioners in claims data. Methods are subject to review by the HEDIS auditor. Refer to Appendix 1 for the definition of "mental health practitioner."*
141	Initiation and Engagement of Alcohol and Other Drug Abuse or Dependence Treatment	Administrative Specification—Numerator, Initiation of AOD Treatment	In the first paragraph after the bullet at the top of the page, replace the second reference to "Alcohol Use Disorder Treatment Medications List" with "Opioid Use Disorder Treatment Medications List."
155	Plan All-Cause Readmissions	Definitions—Outlier	Add the following language to the end of the second paragraph: If the member is an outlier and has a gap on January 1 of the measurement year, the member is assigned to the product line based on their last enrollment segment prior to January 1.

Page	Measure/Guideline	Head/Subtitle	Update
167	Prenatal and Postpartum Care	Data Elements for Reporting—Table PPC-4: Data Elements for Prenatal and Postpartum Care	Replace the language in the first column of the 11th row with "Number of medical records excluded because of valid data errors."

Changes That Affect Multiple Measures

This section identifies single changes that affect multiple measures.

Page	Measure/Guideline	Head/Subtitle	Update
105	Colorectal Cancer Screening	Exclusions	Replace the first sentence of the dashed sub-bullet, which reads, "At least one acute inpatient discharge with an advanced illness diagnosis (Advanced Illness Value Set)." with: "At least one acute inpatient discharge with an advanced illness diagnosis (Advanced Illness Value Set) on the discharge claim."
112	Comprehensive Diabetes Care	Exclusions	
122	Controlling High Blood Pressure	Exclusions	
111	Comprehensive Diabetes Care	Exclusions	In the first dashed sub-bullet under "2," replace "(instructions below)" with "(instructions below; the diagnosis must be on the discharge claim)."
122	Controlling High Blood Pressure	Exclusions	