

SUMMARY TABLE OF MEASURES, PRODUCT LINES AND CHANGES

HEDIS 2019 Measures	Applicable to:			Changes for HEDIS 2019
	Commercial	Medicaid	Medicare	
General Guidelines for Data Collection and Reporting	✓	✓	✓	<ul style="list-style-type: none"> • Replaced all references to “Marketplace” with “Exchange.” • Revised <i>General Guideline 2</i>. • Updated the “How NCQA Defines an Organization for Accreditation” and “HEDIS Reporting for Accreditation” sections to align with the Health Plan Accreditation publication. • Updated deadlines in the HEDIS Audit Timeline in <i>General Guideline 9</i>. • Clarified the small denominator thresholds for risk-adjusted utilization measures in <i>General Guideline 10</i>. • Combined and revised former <i>General Guidelines 15–18</i> into new <i>General Guideline 15: Members With Dual Enrollment</i>; renumbered subsequent guidelines. • Revised <i>General Guideline 16</i> (formerly <i>General Guideline 19</i>). • Clarified requirements in <i>General Guideline 25</i> (formerly <i>General Guideline 28</i>). • Updated <i>General Guideline 31</i> (formerly <i>General Guideline 34</i>) to require that all services must have evidence of accountability by the practitioner. • Clarified <i>General Guideline 35</i> (formerly <i>General Guideline 38</i>) and added the new Adult Immunization Status measure. • Renamed <i>General Guideline 36: Measures that Use Medication Lists</i> (formerly <i>General Guideline 39</i>). • Added a <i>Note</i> to <i>General Guideline 38</i> (formerly <i>General Guideline 41</i>) to indicate that BP readings collected using remote monitoring devices are not considered member-collected for HEDIS reporting. • Revised <i>General Guideline 40</i> (formerly <i>General Guideline 43</i>). • Revised <i>General Guideline 43</i> (formerly <i>General Guideline 45</i>). • Added <i>General Guideline 44. ED and Observation Visits that Result in an Inpatient Stay</i>, which contains new instructions for identifying ED or observation visits that result in an inpatient stay. • Clarified <i>General Guideline 46</i> (formerly <i>General Guideline 47</i>). • Revised <i>General Guideline 49</i> (formerly <i>General Guideline 50</i>). • Revised <i>General Guideline 50</i> (formerly <i>General Guideline 51</i>).

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Guidelines for Calculations and Sampling	✓	✓	✓	<ul style="list-style-type: none"> Removed the calculating the 95 percent confidence interval and finite population correction sections. Revised Table 1 to indicate that if reducing the sample size based on the current year's administrative rate or the prior year's product line-specific rate for the <i>Prenatal and Postpartum Care</i> measure, the lowest rate of the two indicators must be used.
EFFECTIVENESS OF CARE				
Guidelines for Effectiveness of Care	✓	✓	✓	<ul style="list-style-type: none"> Revised the <i>Note</i> for <i>Which services count?</i> to indicate how denied claims should be used for specific measures in the <i>Overuse/Appropriateness</i> subdomain. Added guidelines for SES stratification.
Adult BMI Assessment (ABA)	✓	✓	✓	<ul style="list-style-type: none"> Removed "Lower 95% confidence interval" and "Upper 95% confidence interval" data elements from the Data Elements for Reporting tables.
Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents (WCC)	✓	✓		<ul style="list-style-type: none"> Clarified in the <i>Notes</i> that services rendered for obesity or eating disorders may be used to meet criteria for the Counseling for Nutrition and Counseling for Physical Activity indicators. Removed "Lower 95% confidence interval" and "Upper 95% confidence interval" data elements from the Data Elements for Reporting tables.
Childhood Immunization Status (CIS)	✓	✓		<ul style="list-style-type: none"> Revised the MMR, VZV and HepA numerators in the Administrative Specification to indicate that vaccinations administered on or between the child's first and second birthdays meet numerator criteria. Removed "Lower 95% confidence interval" and "Upper 95% confidence interval" data elements from the Data Elements for Reporting tables.
Immunizations for Adolescents (IMA)	✓	✓		<ul style="list-style-type: none"> Updated meningococcal vaccine references. Added optional exclusions for the Tdap vaccine. Removed "Lower 95% confidence interval" and "Upper 95% confidence interval" data elements from the Data Elements for Reporting tables.
Lead Screening in Children (LSC)		✓		<ul style="list-style-type: none"> Removed "Lower 95% confidence interval" and "Upper 95% confidence interval" data elements from the Data Elements for Reporting tables.
Breast Cancer Screening (BCS)	✓	✓	✓	<ul style="list-style-type: none"> Added instructions to report the rates stratified by CMS-assigned LIS/DE and Disability status for the Medicare product line. Revised the age requirements for the Exclusions for Medicare members enrolled in an I-SNP or living long-term in an institution.

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				<ul style="list-style-type: none"> • Changed reference of “Medicare Part C monthly membership file” to “Monthly Membership Detail Data File.” • Clarified that organizations should use the run date of the Monthly Membership Detail Data File to determine if a member had an LTI flag during the measurement year. • Added exclusions for members with advanced illness and frailty. • Added methods to identify bilateral mastectomy for the optional exclusion. • Removed the “Number or required exclusions (Medicare only)” row in the Data Elements for Reporting tables. • Removed “Lower 95% confidence interval” and “Upper 95% confidence interval” data elements from the Data Elements for Reporting tables. • Added a new data elements table for Medicare stratification reporting.
Cervical Cancer Screening (CCS)	✓	✓		<ul style="list-style-type: none"> • Removed “Lower 95% confidence interval” and “Upper 95% confidence interval” data elements from the Data Elements for Reporting tables.
Colorectal Cancer Screening (COL)	✓		✓	<ul style="list-style-type: none"> • Added instructions to report the rates stratified by CMS-assigned LIS/DE and Disability status for the Medicare product line. • Revised the age requirements for the Exclusions for Medicare members enrolled in an I-SNP or living long-term in an institution. • Changed references of “Medicare Part C monthly membership file” to “Monthly Membership Detail Data File.” • Clarified that organizations should use the run date of the Monthly Membership Detail Data File to determine if a member had an LTI flag during the measurement year. • Added exclusions for those with advanced illness and frailty. • Removed the “Number or required exclusions (Medicare only)” row in the Data Elements for Reporting tables. • Removed “Lower 95% confidence interval” and “Upper 95% confidence interval” data elements from the Data Elements for Reporting tables. • Added new data elements table for Medicare stratification reporting.
Chlamydia Screening in Women (CHL)	✓	✓		<ul style="list-style-type: none"> • Removed “Lower 95% confidence interval” and “Upper 95% confidence interval” data elements from the Data Elements for Reporting tables.
Care for Older Adults (COA)			✓ (SNP and MMP only)	<ul style="list-style-type: none"> • Added a definition of <i>standardized tool</i>. • Updated the Medication Review, Functional Status Assessment and Pain Assessment numerators to exclude services provided in an acute inpatient setting.

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				<ul style="list-style-type: none"> • Clarified under the examples of an advance care plan that the surrogate decision maker can make medical treatment choices (not just future treatment choices). • Added a bullet under the examples of an advance care planning discussion. • Removed the continence ADL from the list of acceptable ADLs for medical record documentation of the Functional Status Assessment numerator. • Removed “Lower 95% confidence interval” and “Upper 95% confidence interval” data elements from the Data Elements for Reporting tables.
Appropriate Testing for Children With Pharyngitis (CWP)	✓	✓		<ul style="list-style-type: none"> • Deleted the instructions for identifying ED/observation visits that result in an inpatient stay; refer to <i>General Guideline 44</i> for new instructions. • Removed “Lower 95% confidence interval” and “Upper 95% confidence interval” data elements from the Data Elements for Reporting tables.
Use of Spirometry Testing in the Assessment and Diagnosis of COPD (SPR)	✓	✓	✓	<ul style="list-style-type: none"> • Incorporated telehealth into the measure specifications. • Deleted the instructions for identifying ED/observation visits that result in an inpatient stay; refer to <i>General Guideline 44</i> for new instructions. • Removed “Lower 95% confidence interval” and “Upper 95% confidence interval” data elements from the Data Elements for Reporting tables.
Pharmacotherapy Management of COPD Exacerbation (PCE)	✓	✓	✓	<ul style="list-style-type: none"> • Deleted the instructions for identifying ED/observation visits that result in an inpatient stay; refer to <i>General Guideline 44</i> for new instructions. • Removed “Betamethasone” from the list of prescriptions for Glucocorticoids in the Systemic Corticosteroid Medications List. • Removed Methylxanthines from the Bronchodilator Medications List. • Removed “Lower 95% confidence interval” and “Upper 95% confidence interval” data elements from the Data Elements for Reporting tables.
Medication Management for People With Asthma (MMA)	✓	✓		<ul style="list-style-type: none"> • Incorporated telehealth into the measure specifications. • Removed “Mast cell stabilizers” from the <u>Asthma Controller Medications List</u>. • Revised step 4 of the numerator calculation to indicate that the ratio should be rounded to the nearest whole number using the .5 rule. • Removed “Lower 95% confidence interval” and “Upper 95% confidence interval” data elements from the Data Elements for Reporting tables.
Asthma Medication Ratio (AMR)	✓	✓		<ul style="list-style-type: none"> • Incorporated telehealth into the measure specifications. • Added instructions in step 4 of the numerator calculation to indicate that the ratio should be rounded to the nearest whole number using the .5 rule.

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				<ul style="list-style-type: none"> Removed “Mast cell stabilizers” from the <u>Asthma Controller Medications List</u>. Removed “Lower 95% confidence interval” and “Upper 95% confidence interval” data elements from the Data Elements for Reporting tables.
Controlling High Blood Pressure (CBP)	✓	✓	✓	<ul style="list-style-type: none"> Removed requirement to identify and use different thresholds for members 60-85 without a diagnosis of diabetes. Revised the definition of representative BP to indicate that the BP reading must occur on or after the second diagnosis of hypertension. Revised the event/diagnosis criteria to include members who had at least two visits on different dates of service with a diagnosis of hypertension during the measurement year or the year prior to the measurement year. Removed the diabetes flag identification from the event/diagnosis criteria. Incorporated telehealth into the measure specifications. Revised the age requirements for the Exclusions for Medicare members enrolled in an I-SNP or living long-term in an institution. Changed references of “Medicare Part C monthly membership file” to “Monthly Membership Detail Data File.” Clarified that organizations should use the run date of the Monthly Membership Detail Data File to determine if a member had an LTI flag during the measurement year. Added exclusions for members with advanced illness and frailty. Added administrative method for reporting. Added blood pressure readings taken from remote patient monitoring devices that are electronically submitted directly to the provider for numerator compliance. Updated the Hybrid specification to indicate that sample size reduction is not allowed. Removed the requirement to confirm the hypertension diagnosis. Updated the <i>Notes</i> to clarify that BP readings taken the same day as lidocaine injections and wart or mole removals should not be excluded for the numerator. Revised the Data Elements for Reporting table. Removed “Lower 95% confidence interval” and “Upper 95% confidence interval” data elements from the Data Elements for Reporting tables.
Persistence of Beta-Blocker Treatment After a Heart Attack (PBH)	✓	✓	✓	<ul style="list-style-type: none"> Added exclusions for members with advanced illness and frailty. Added exclusions for the Medicare product line for members 65 years of age and older enrolled in an I-SNP or living long-term in institutional settings.

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				<ul style="list-style-type: none"> Removed “Lower 95% confidence interval” and “Upper 95% confidence interval” data elements from the Data Elements for Reporting tables.
Statin Therapy for Patients With Cardiovascular Disease (SPC)	✓	✓	✓	<ul style="list-style-type: none"> Incorporated telehealth into the measure specifications. Added <i>Step 3: Exclusions</i>. Added exclusions for members with advanced illness and frailty. Added exclusions for the Medicare product line for members 65 years of age and older enrolled in an I-SNP or living long-term in institutional settings. Revised step 4 of the numerator calculation to indicate that the ratio should be rounded to the nearest whole number using the .5 rule. Removed “Lower 95% confidence interval” and “Upper 95% confidence interval” data elements from the Data Elements for Reporting tables.
Comprehensive Diabetes Care (CDC)	✓	✓	✓	<ul style="list-style-type: none"> Incorporated telehealth into the measure specifications. Added instructions to report the “Eye Exam (retinal) performed” indicator rate stratified by LIS/DE and Disability status for Medicare product line. Added exclusions for members with advanced illness and frailty. Added exclusions for the Medicare product line for members 65 years of age and older enrolled in an I-SNP or living long-term in institutional settings. Added methods to identify bilateral eye enucleation. Added blood pressure readings taken from remote patient monitoring devices that are electronically submitted directly to the provider for numerator compliance. Updated the <i>Notes</i> to clarify that BP readings taken the same day as lidocaine injections and wart or mole removals should not be excluded for the numerator. Removed “Lower 95% confidence interval” and “Upper 95% confidence interval” data elements from the Data Elements for Reporting tables. Added data element table CDC-3-B: Data Elements for Comprehensive Diabetes Care and clarified that it is for the “Eye Exam (retinal) performed” indicator only.
Statin Therapy for Patients With Diabetes (SPD)	✓	✓	✓	<ul style="list-style-type: none"> Incorporated telehealth into the measure specifications. Added <i>Step 2: Exclusions</i>. Added exclusions for members with advanced illness and frailty. Added exclusions for the Medicare product line for members 65 years of age and older enrolled in an I-SNP or living long-term in institutional settings.

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				<ul style="list-style-type: none"> Revised step 4 of the numerator calculation to indicate that the ratio should be rounded to the nearest whole number using the .5 rule. Removed “Lower 95% confidence interval” and “Upper 95% confidence interval” data elements from the Data Elements for Reporting tables.
Disease-Modifying Anti-Rheumatic Drug Therapy for Rheumatoid Arthritis (ART)	✓	✓	✓	<ul style="list-style-type: none"> Incorporated telehealth into the measure specifications. Clarified when to count nonacute-to-nonacute direct transfers as two discharges. Added exclusions for members with advanced illness and frailty. Added exclusions for the Medicare product line for members 65 years of age and older enrolled in an I-SNP or living long-term in institutional settings. Removed “Lower 95% confidence interval” and “Upper 95% confidence interval” data elements from the Data Elements for Reporting tables.
Osteoporosis Management in Women Who Had a Fracture (OMW)			✓	<ul style="list-style-type: none"> Clarified how to determine Negative Diagnosis History for inpatient stays that were a result of an ED visit. Deleted the instructions for identifying ED/observation visits that result in an inpatient stay; refer to <i>General Guideline 44</i> for new instructions. Incorporated telehealth into the measure specification. Added <i>Step 5: Exclusions</i>. Changed references of “Medicare Part C monthly membership file” to “Monthly Membership Detail Data File.” Clarified that organizations should use the run date of the Monthly Membership Detail Data File to determine if a member had an LTI flag during the measurement year. Added exclusions for members with advanced illness and frailty. Added “Albandronate” to the description of Other Agents in the <u>Osteoporosis Medications List</u>. Removed “Lower 95% confidence interval” and “Upper 95% confidence interval” data elements from the Data Elements for Reporting tables.
Antidepressant Medication Management (AMM)	✓	✓	✓	<ul style="list-style-type: none"> Restructured the codes and value sets for identifying the required exclusions (step 2). Refer to the Value Set Directory for a detailed summary of changes. Removed “Lower 95% confidence interval” and “Upper 95% confidence interval” data elements from the Data Elements for Reporting tables.

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Follow-Up Care for Children Prescribed ADHD Medication (ADD)	✓	✓		<ul style="list-style-type: none"> • Clarified in the continuous enrollment of Rate 2 that members who switch product lines or products between the Rate 1 and Rate 2 continuous enrollment periods are only included in Rate 1. • Restructured the codes and value sets for identifying the numerators. Refer to the Value Set Directory for a detailed summary of changes. • Removed “Lower 95% confidence interval” and “Upper 95% confidence interval” data elements from the Data Elements for Reporting tables.
Follow-Up After Hospitalization for Mental Illness (FUH)	✓	✓	✓	<ul style="list-style-type: none"> • Added the following age stratifications and total rate: 6–17, 18–64, 65 years and older. • Revised the denominator to include members with a principal diagnosis of intentional self-harm. • Clarified and reordered the instructions for acute and nonacute readmissions and direct transfers. • Renamed “Exclusions” to “Nonacute readmission or direct transfer” in the Eligible Population. • Restructured the codes and value sets for identifying the numerators. Refer to the Value Set Directory for a detailed summary of changes. • Removed the use of a mental health diagnosis as a proxy for a visit with a mental health practitioner (all numerator events require a mental health practitioner). • Revised the Data Elements for Reporting table to reflect the addition of the age stratifications and total rate. • Removed “Lower 95% confidence interval” and “Upper 95% confidence interval” data elements from the Data Elements for Reporting tables.
Follow-Up After Emergency Department Visit for Mental Illness (FUM)	✓	✓	✓	<ul style="list-style-type: none"> • Added the following age stratifications and total rate: 6–17, 18–64, 65 years and older. • Revised the denominator to include members with a principal diagnosis of intentional self-harm. • Revised the numerators to include members with a principal diagnosis of intentional self-harm and any diagnosis of a mental health disorder. • Revised the numerator to always require a diagnosis code (previously some codes were not required to be in conjunction with a diagnosis code). • Renamed “Exclusions” to “ED visits followed by inpatient admission” in the Eligible Population. • Deleted the instructions for identifying ED visits that result in an inpatient stay; refer to <i>General Guideline 44</i> for new instructions.

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				<ul style="list-style-type: none"> Restructured the codes and value sets for identifying the numerators. Refer to the Value Set Directory for a detailed summary of changes. Revised the Data Elements for Reporting table to reflect the addition of the age stratifications and total rate. Removed “Lower 95% confidence interval” and “Upper 95% confidence interval” data elements from the Data Elements for Reporting tables.
Follow-Up After Emergency Department Visit for Alcohol and Other Drug Abuse or Dependence (FUA)	✓	✓	✓	<ul style="list-style-type: none"> Renamed “Exclusions” to “ED visits followed by inpatient admission” in the Eligible Population. Deleted the instructions for identifying ED visits that result in an inpatient stay; refer to <i>General Guideline 44</i> for new instructions. Added the <u>Observation Value Set</u> to the measure to account for the removal of observation codes from the <u>IET Stand Alone Visits Value Set</u>. Codes remain unchanged. Removed “Lower 95% confidence interval” and “Upper 95% confidence interval” data elements from the Data Elements for Reporting tables.
Diabetes Screening for People With Schizophrenia or Bipolar Disorder Who Are Using Antipsychotic Medications (SSD)		✓		<ul style="list-style-type: none"> Clarified that schizoaffective disorder is included in the measure in the description and step 1 of the event/diagnosis. Incorporated telehealth into the measure specification. Restructured the codes and value sets for identifying members with schizophrenia or bipolar disorder (step 1). Refer to the Value Set Directory for a detailed summary of changes. Added “Psychotherapeutic combinations” medications to <u>SSD Antipsychotic Medications List</u> and removed the <u>Antipsychotic Combination Medications List</u>. Renamed <u>Antipsychotic Medications List</u> to <u>SSD Antipsychotic Medications List</u>. Removed “Pimozide” from the prescriptions of miscellaneous antipsychotic agents in the SSD <u>Antipsychotic Medications List</u>. Removed “Fluoxetine-olanzapine” from the prescriptions of psychotherapeutic combinations in the SSD <u>Antipsychotic Medications List</u>. Removed “Lower 95% confidence interval” and “Upper 95% confidence interval” data elements from the Data Elements for Reporting tables.
Diabetes Monitoring for People With Diabetes and Schizophrenia (SMD)		✓		<ul style="list-style-type: none"> Clarified that schizoaffective disorder is included in the measure in the description and step 1 of the event/diagnosis. Incorporated telehealth into the measure specification.

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				<ul style="list-style-type: none"> Restructured the codes and value sets for identifying members with schizophrenia (step 1). Refer to the Value Set Directory for a detailed summary of changes. Removed “Lower 95% confidence interval” and “Upper 95% confidence interval” data elements from the Data Elements for Reporting tables.
Cardiovascular Monitoring for People With Cardiovascular Disease and Schizophrenia (SMC)		✓		<ul style="list-style-type: none"> Clarified that schizoaffective disorder is included in the measure in the description and step 1 of the event/diagnosis. Incorporated telehealth into the measure specification. Restructured the codes and value sets for identifying members with schizophrenia (step 1). Refer to the Value Set Directory for a detailed summary of changes. Removed “Lower 95% confidence interval” and “Upper 95% confidence interval” data elements from the Data Elements for Reporting tables.
Adherence to Antipsychotic Medications for Individuals With Schizophrenia (SAA)		✓		<ul style="list-style-type: none"> Clarified that schizoaffective disorder is included in the measure in the description and step 1 of the event/diagnosis. Incorporated telehealth into the measure specification. Restructured the codes and value sets for identifying members with schizophrenia (step 1). Refer to the Value Set Directory for a detailed summary of changes. Removed “Pimozide” from the description of Miscellaneous antipsychotic agents (oral) in the Oral Antipsychotic Medications List. Removed “Fluoxetine-olanzapine” from the description of Psychotherapeutic combinations (oral) in the Oral Antipsychotic Medications List. Revised step 4 of the numerator calculation to indicate that the ratio should be rounded to the nearest whole number using the .5 rule. Removed “Lower 95% confidence interval” and “Upper 95% confidence interval” data elements from the Data Elements for Reporting tables.
Metabolic Monitoring for Children and Adolescents on Antipsychotics (APM)	✓	✓		<ul style="list-style-type: none"> Removed “Lower 95% confidence interval” and “Upper 95% confidence interval” data elements from the Data Elements for Reporting tables.
Annual Monitoring for Patients on Persistent Medications (MPM)	✓	✓		<ul style="list-style-type: none"> Removed “Lower 95% confidence interval” and “Upper 95% confidence interval” data elements from the Data Elements for Reporting tables.
Medication Reconciliation Post-Discharge (MRP)			✓	<ul style="list-style-type: none"> Removed “Lower 95% confidence interval” and “Upper 95% confidence interval” data elements from the Data Elements for Reporting tables.

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Transitions of Care (TRC)			✓	<ul style="list-style-type: none"> Removed the reference to “during the measurement year” in the measure description because the Notification of Inpatient Admission may occur in the year prior to the measurement year. Clarified when identifying the medical record that only one outpatient medical record can be used for all indicators that are reported using the hybrid method. Clarified in second bullet of the <i>Notification of Inpatient Admission</i> indicator that the communication must be about the member’s inpatient stay and must occur on the day of admission or the following day. Revised the seventh bullet of the <i>Notification of Inpatient Admission</i> indicator to allow orders for tests and treatments to occur any time during the member’s inpatient stay. Clarified in the <i>Receipt of Discharge Information</i> indicator that the discharge information is not limited to the examples provided in the measure. Clarified in the fourth bullet of the <i>Receipt of Discharge Information</i> indicator that the current medication list must include medication allergies. Clarified in the sixth bullet of the <i>Receipt of Discharge Information</i> indicator that the instructions for patient care must be to the PCP or ongoing care provider. Added the <i>Notification of Inpatient Discharge</i> indicator to the first example in the <i>Notes</i> section. Added instructions in the <i>Notes</i> section for determining the discharge date if a different discharge date is found in the medical record. Revised Table TRC-3 to reflect that the Notification of Inpatient Admission and Receipt of Discharge Information indicators are reported using only medical record data, there is no administrative option available. Removed “Lower 95% confidence interval” and “Upper 95% confidence interval” data elements from the Data Elements for Reporting tables.
Follow-Up After Emergency Department Visit for People With Multiple High-Risk Chronic Conditions (FMC)			✓	<ul style="list-style-type: none"> Renamed the measure. Restructured the codes and value sets for the numerator (formerly listed under the description “behavioral health visit”). Refer to the Value Set Directory for a detailed summary of changes. Removed “Lower 95% confidence interval” and “Upper 95% confidence interval” data elements from the Data Elements for Reporting tables.
Non-Recommended Cervical Cancer Screening in Adolescent Females (NCS)	✓	✓		<ul style="list-style-type: none"> Added a note to indicate that supplemental data can be used for only required exclusions for this measure.

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				<ul style="list-style-type: none"> Removed “Lower 95% confidence interval” and “Upper 95% confidence interval” data elements from the Data Elements for Reporting tables.
Non-Recommended PSA-Based Screening in Older Men (PSA)			✓	<ul style="list-style-type: none"> Added a note to indicate that supplemental data can be used for only required exclusions for this measure. Removed “Lower 95% confidence interval” and “Upper 95% confidence interval” data elements from the Data Elements for Reporting tables.
Appropriate Treatment for Children With Upper Respiratory Infection (URI)	✓	✓		<ul style="list-style-type: none"> Deleted the instructions for identifying ED/observation visits that result in an inpatient stay; refer to <i>General Guideline 44</i> for new instructions. Added a note to indicate that supplemental data may not be used for this measure. Removed “Lower 95% confidence interval” and “Upper 95% confidence interval” data elements from the Data Elements for Reporting tables.
Avoidance of Antibiotic Treatment in Adults With Acute Bronchitis (AAB)	✓	✓		<ul style="list-style-type: none"> Incorporated telehealth into the measure specification. Deleted the instructions for identifying ED/observation visits that result in an inpatient stay; refer to <i>General Guideline 44</i> for new instructions. Added a note to indicate that supplemental data may not be used for this measure. Removed “Lower 95% confidence interval” and “Upper 95% confidence interval” data elements from the Data Elements for Reporting tables.
Use of Imaging Studies for Low Back Pain (LBP)	✓	✓		<ul style="list-style-type: none"> Deleted the instructions for identifying ED/observation visits that result in an inpatient stay; refer to <i>General Guideline 44</i> for new instructions. Clarified in step 4 required exclusions that for multiple prescriptions on the same day assume the member started taking the second prescription after exhausting the first prescription. Added a note to indicate that supplemental data can be used for only required exclusions for this measure. Removed “Lower 95% confidence interval” and “Upper 95% confidence interval” data elements from the Data Elements for Reporting tables.
Use of Multiple Concurrent Antipsychotics in Children and Adolescents (APC)	✓	✓		<ul style="list-style-type: none"> Revised the <i>Note</i> section to not include denied claims when identifying the eligible population or assessing the numerator. Removed “Lower 95% confidence interval” and “Upper 95% confidence interval” data elements from the Data Elements for Reporting tables.

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Potentially Harmful Drug-Disease Interactions in the Elderly (DDE)			✓	<ul style="list-style-type: none"> Clarified that schizoaffective disorder is included in step 2 of the additional eligible population criteria of Rate 1 and 2. Added a note to indicate that supplemental data can be used for only required exclusions for this measure. Removed “Lower 95% confidence interval” and “Upper 95% confidence interval” data elements from the Data Elements for Reporting tables.
Use of High-Risk Medications in the Elderly (DAE)			✓	<ul style="list-style-type: none"> Added a <i>Note</i> section to indicate that supplemental data may not be used for this measure. Removed “Lower 95% confidence interval” and “Upper 95% confidence interval” data elements from the Data Elements for Reporting tables.
Use of Opioids at High Dosage (UOD)	✓	✓	✓	<ul style="list-style-type: none"> Revised the measure description and added a note to indicate that the proportion will be calculated and displayed as a permillage. Replaced all references to “Morphine equivalent dose” and “MED” with “Milligram morphine equivalent” and “MME.” Clarified the definitions for “IPSD” and “Total Daily MME.” Revised the MME Daily Dose calculation to clarify that multiple dosage unit types (e.g., mg, mcg) can be used for strength and added examples. Revised steps 1 and 2 in the event/diagnosis criteria. Renamed the medication list and changed references to <u>UOD Opioid Medications List</u> for this measure. Removed buprenorphine from the <u>UOD Opioid Medications List</u> and in Table UOD-A. Revised steps 2 and 3 in the numerator. Revised Table UOD-A to clarify that conversion factor 3 should be used for methadone. Added a note to indicate that supplemental data can be used for only required exclusions for this measure. Revised the <i>Note</i> section to not include denied claims when identifying the eligible population (except for required exclusions) or assessing the numerator. Removed “Lower 95% confidence interval” and “Upper 95% confidence interval” data elements from the Data Elements for Reporting tables.
Use of Opioids From Multiple Providers (UOP)	✓	✓	✓	<ul style="list-style-type: none"> Revised the measure description and added a note to indicate that the proportion will be calculated and displayed as a permillage. Revised steps 1 and 2 in the event/diagnosis criteria.

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				<ul style="list-style-type: none"> • Added a note to indicate that supplemental data may not be used for this measure. • Revised the <i>Note</i> section to not include denied claims when identifying the eligible population or assessing the numerator. • Removed “Number of required exclusions” data element from the Data Elements for Reporting tables. • Removed “Lower 95% confidence interval” and “Upper 95% confidence interval” data elements from the Data Elements for Reporting tables.
Risk of Continued Opioid Use (COU)	✓	✓	✓	<ul style="list-style-type: none"> • First-year measure.
Medicare Health Outcomes Survey (HOS)			✓	<ul style="list-style-type: none"> • This measure is collected using survey methodology. Detailed specifications and summary of changes are contained in HEDIS 2019, <i>Volume 6: Specifications for the Medicare Health Outcomes Survey</i>.
Fall Risk Management (FRM)			✓	<ul style="list-style-type: none"> • This measure is collected using survey methodology. Detailed specifications and summary of changes are contained in HEDIS 2019, <i>Volume 6: Specifications for the Medicare Health Outcomes Survey</i>.
Management of Urinary Incontinence in Older Adults (MUI)			✓	<ul style="list-style-type: none"> • This measure is collected using survey methodology. Detailed specifications and summary of changes are contained in HEDIS 2019, <i>Volume 6: Specifications for the Medicare Health Outcomes Survey</i>.
Osteoporosis Testing in Older Women (OTO)			✓	<ul style="list-style-type: none"> • This measure is collected using survey methodology. Detailed specifications and summary of changes are contained in HEDIS 2019, <i>Volume 6: Specifications for the Medicare Health Outcomes Survey</i>.
Physical Activity in Older Adults (PAO)			✓	<ul style="list-style-type: none"> • This measure is collected using survey methodology. Detailed specifications and summary of changes are contained in HEDIS 2019, <i>Volume 6: Specifications for the Medicare Health Outcomes Survey</i>.
Flu Vaccinations for Adults Ages 18-64 (FVA)	✓	✓		<ul style="list-style-type: none"> • This measure is collected using survey methodology. Detailed specifications and summary of changes are contained in HEDIS 2019, <i>Volume 3: Specifications for Survey Measures</i>.
Flu Vaccinations for Adults Ages 65 and Older (FVO)			✓	<ul style="list-style-type: none"> • This measure is collected using survey methodology. Detailed specifications and summary of changes are contained in HEDIS 2019, <i>Volume 3: Specifications for Survey Measures</i>.

HEDIS 2019 Measures	Applicable to:			Changes for HEDIS 2019
	Commercial	Medicaid	Medicare	
Medical Assistance With Smoking and Tobacco Use Cessation (MSC)	✓	✓	✓	<ul style="list-style-type: none"> This measure is collected using survey methodology. Detailed specifications and summary of changes are contained in HEDIS 2019, <i>Volume 3: Specifications for Survey Measures</i>.
Pneumococcal Vaccination Status for Older Adults (PNU)			✓	<ul style="list-style-type: none"> This measure is collected using survey methodology. Detailed specifications and summary of changes are contained in HEDIS 2019, <i>Volume 3: Specifications for Survey Measures</i>.
ACCESS/AVAILABILITY OF CARE				
Adults' Access to Preventive/ Ambulatory Health Services (AAP)	✓	✓	✓	<ul style="list-style-type: none"> Incorporated telehealth into the measure specification. Removed "Lower 95% confidence interval" and "Upper 95% confidence interval" data elements from the Data Elements for Reporting tables.
Children's and Adolescents' Access to Primary Care Practitioners (CAP)	✓	✓		<ul style="list-style-type: none"> Removed "Lower 95% confidence interval" and "Upper 95% confidence interval" data elements from the Data Elements for Reporting tables.
Annual Dental Visit (ADV)		✓		<ul style="list-style-type: none"> Removed "Lower 95% confidence interval" and "Upper 95% confidence interval" data elements from the Data Elements for Reporting tables.
Initiation and Engagement of Alcohol and Other Drug Abuse or Dependence Treatment (IET)	✓	✓	✓	<ul style="list-style-type: none"> Deleted the instructions for identifying ED/observation visits that result in an inpatient stay; refer to <i>General Guideline 44</i> for new instructions. Replaced MAT references with references to "medication treatment." Added the Observation Value Set to the measure to account for the removal of observation codes from the <u>IET Stand Alone Visits Value Set</u>. Codes remain unchanged. Clarified the Engagement of AOD Treatment numerator. Clarified in the <i>Notes</i> that members in the "other drug abuse or dependence" cohort do not meet numerator criteria for Initiation of AOD Treatment or Engagement of AOD Treatment and that methadone is not included in the medication lists for the measure. Removed "Lower 95% confidence interval" and "Upper 95% confidence interval" data elements from the Data Elements for Reporting tables.
Prenatal and Postpartum Care (PPC)	✓	✓		<ul style="list-style-type: none"> Deleted prenatal visits with internal organization codes for LMP/EDD and obstetrical history/risk assessment counseling from Decision Rule 3 of the Administrative specification. Internal organization codes are supplemental data and are in the scope of the hybrid specification.

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				<ul style="list-style-type: none"> • Clarified that documentation in the medical record of gestational age with either prenatal risk assessment and counseling/education or complete obstetrical history meets criteria for the Timeliness of Prenatal Care numerator. • Clarified in the <i>Notes</i> that nonancillary services must be delivered by the required provider type. • Removed “Lower 95% confidence interval” and “Upper 95% confidence interval” data elements from the Data Elements for Reporting tables.
Use of First-Line Psychosocial Care for Children and Adolescents on Antipsychotics (APP)	✓	✓		<ul style="list-style-type: none"> • Restructured the codes and value sets for identifying the required exclusions (step 4). Refer to the Value Set Directory for a detailed summary of changes. • Clarified that schizoaffective disorder is included in step 4 of the event. • Renamed the <u>Other Psychotic Disorders Value Set</u> to <u>Other Psychotic and Developmental Disorders Value Set</u> (codes remain unchanged). • Removed acute inpatient encounter code combinations that referenced the <u>Telehealth POS Value Set</u> from step 4 (required exclusions). • Removed “Lower 95% confidence interval” and “Upper 95% confidence interval” data elements from the Data Elements for Reporting tables.
EXPERIENCE OF CARE				
CAHPS Health Plan Survey 5.0H, Adult Version (CPA)	✓	✓		<ul style="list-style-type: none"> • This measure is collected using survey methodology. Detailed specifications and summary of changes are contained in HEDIS 2019, <i>Volume 3: Specifications for Survey Measures</i>.
CAHPS Health Plan Survey 5.0H, Child Version (CPC)		✓		<ul style="list-style-type: none"> • This measure is collected using survey methodology. Detailed specifications and summary of changes are contained in HEDIS 2019, <i>Volume 3: Specifications for Survey Measures</i>.
Children With Chronic Conditions (CCC)		✓		<ul style="list-style-type: none"> • This measure is collected using survey methodology. Detailed specifications and summary of changes are contained in HEDIS 2019, <i>Volume 3: Specifications for Survey Measures</i>.
UTILIZATION AND RISK ADJUSTED UTILIZATION				
Guidelines for Utilization	✓	✓	✓	<ul style="list-style-type: none"> • Revised <i>General Guideline 8</i> to clarify the reporting requirements for Medicare/Medicaid members.
Well-Child Visits in the First 15 Months of Life (W15)	✓	✓		<ul style="list-style-type: none"> • Clarified that children who turn 15 months old during the measurement year are included in the measure.

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				<ul style="list-style-type: none"> • Clarified in the numerator to not count visits that occur after the member's 15-month birthday. • Clarified the medical record requirements for health history, physical developmental history, mental developmental history, and health education/anticipatory guidance. • Added a <i>Note</i> that includes examples of documentation that does not meet criteria for the numerator. • Removed "Lower 95% confidence interval" and "Upper 95% confidence interval" data elements from the Data Elements for Reporting tables.
Well-Child Visits in the Third, Fourth, Fifth and Sixth Years of Life (W34)	✓	✓		<ul style="list-style-type: none"> • Clarified the medical record requirements for health history, physical developmental history, mental developmental history and health education/anticipatory guidance. • Added a <i>Note</i> that includes examples of documentation that does not meet criteria for the numerator. • Removed "Lower 95% confidence interval" and "Upper 95% confidence interval" data elements from the Data Elements for Reporting tables.
Adolescent Well-Care Visits (AWC)	✓	✓		<ul style="list-style-type: none"> • Clarified the medical record requirements for health history, physical developmental history, mental developmental history, and health education/anticipatory guidance. • Added a <i>Note</i> that includes examples of documentation that does not meet criteria for the numerator. • Removed "Lower 95% confidence interval" and "Upper 95% confidence interval" data elements from the Data Elements for Reporting tables.
Frequency of Selected Procedures (FSP)	✓	✓	✓	<ul style="list-style-type: none"> • No changes to this measure.
Ambulatory Care (AMB)	✓	✓	✓	<ul style="list-style-type: none"> • Incorporated telehealth into the measure specification. • Deleted the instructions for identifying ED/observation visits that result in an inpatient stay; refer to <i>General Guideline 44</i> for new instructions.
Inpatient Utilization—General Hospital/Acute Care (IPU)	✓	✓	✓	<ul style="list-style-type: none"> • Removed use of MS-DRGs for identification of inpatient discharges. • Clarified that member months for maternity rates are reported for members 10–64 years of age.
Identification of Alcohol and Other Drug Services (IAD)	✓	✓	✓	<ul style="list-style-type: none"> • Restructured select codes and value sets. Refer to the Value Set Directory for a detailed summary of changes. • Revised instructions for reporting members with more than one service (on different dates of service) in different service categories.

HEDIS 2019 Measures	Applicable to:			Changes for HEDIS 2019
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				<ul style="list-style-type: none"> Deleted the instructions for identifying ED/observation visits that result in an inpatient stay; refer to <i>General Guideline 44</i> for new instructions. Replaced “MAT” references with references to “medication treatment.” Added <u>Telehealth POS Value Set</u> to the <i>Telehealth reporting</i> section.
Mental Health Utilization (MPT)	✓	✓	✓	<ul style="list-style-type: none"> Restructured select codes and value sets. Refer to the Value Set Directory for a detailed summary of changes. Revised instructions for reporting members with more than one service (on different dates of service) in different service categories. Deleted the instructions for identifying ED/observation visits that result in an inpatient stay; refer to <i>General Guideline 44</i> for new instructions. Added <u>Telehealth POS Value Set</u> to the <i>Telehealth reporting</i> section.
Antibiotic Utilization (ABX)	✓	✓	✓	<ul style="list-style-type: none"> No changes to this measure.
Standardized Healthcare-Associated Infection Ratio (HAI)	✓	✓	✓	<ul style="list-style-type: none"> Revised the steps in Calculation of Hospital Discharge Weight. Revised the Data Elements for Reporting tables.
Guidelines for Risk Adjusted Utilization	✓	✓	✓	<ul style="list-style-type: none"> Added <i>Guideline 5: SES Stratification</i>. Added <i>Guideline 6: Data Element Tables</i>.
Plan All-Cause Readmissions (PCR)	✓	✓	✓	<ul style="list-style-type: none"> Revised the Planned Hospital Stay definition. Added a <i>Note</i> to the eligible population to refer to <i>General Guideline 10</i> when reporting for small denominator limits. Added instructions and data element tables to report the rate stratified by CMS-assigned LIS/DE and Disability status for the Medicare product line. Removed former step 5 in the denominator and added language about planned admissions to step 3 in the numerator. Revised steps 6 and 7 in Risk Adjustment Weighting. Renamed “Expected Readmission Rate” to “Estimated Readmission Risk” in step 8. Renamed “Total Variance” to “Variance.” Revised the Data Elements for Reporting tables. Added shading to the Data Elements for Reporting tables to indicate how data are reported.

HEDIS 2019 Measures	Applicable to:			Changes for HEDIS 2019
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				<ul style="list-style-type: none"> Removed “Lower 95% confidence interval” and “Upper 95% confidence interval” data elements from the Data Elements for Reporting tables.
Hospitalization Following Discharge from a Skilled Nursing Facility (HFS)			✓	<ul style="list-style-type: none"> First-year measure.
Acute Hospital Utilization (AHU)	✓		✓	<ul style="list-style-type: none"> Revised the definitions of “outlier” and “nonoutlier.” Added a <i>Note</i> to the eligible population to refer to <i>General Guideline 10</i> when reporting for small denominator limits. Revised direct transfers to include observation discharges. Removed step 6 in the calculation of observed events for classifying discharges as surgical or medical using MS-DRGs. All classifications should use the <u>Surgical Value Set</u>. Revised the Risk Adjustment Weighting and Calculation of Expected Events to truncate intermediate calculations to 10 decimal places and truncate the variance to 4 decimal places. Renamed “Total Variance” to “Variance.” Added in a rounding rule for PPD calculation and Variance. Revised the covariance and variance formulas and added guidance to steps 4 and 5 in the expected count of hospitalization. Added instructions to clarify that the Outlier Rate data element is calculated by IDSS. Clarified instructions to indicate that the Number of Members in the Eligible Population, Observed Discharges per 1,000 Nonoutlier Members and Expected Discharges per 1,000 Nonoutlier Members data elements are calculated by IDSS. Added a <i>Note</i> section. Added shading to the Data Elements for Reporting tables to indicate how data are reported. Added “18–64 Total” and “65+ Total” to data element tables AHU-A-2/3, AHU-B-2/3, AHU-C-2/3 and AHU-D-2/3.
Emergency Department Utilization (EDU)	✓		✓	<ul style="list-style-type: none"> Added a <i>Note</i> to the eligible population to refer to <i>General Guideline 10</i> when reporting for small denominator limits. Deleted the instructions for identifying ED visits that result in an inpatient stay; refer to <i>General Guideline 44</i> for new instructions.

HEDIS 2019 Measures	Applicable to:			Changes for HEDIS 2019
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				<ul style="list-style-type: none"> Revised the Risk Adjustment Weighting and Calculation of Expected Events to truncate intermediate calculations to 10 decimal places and truncate the variance to 4 decimal places. Renamed “Total Variance” to “Variance.” Revised the covariance and variance formulas and added guidance to steps 5 and 6 in the expected count of hospitalization. Clarified instructions to indicate that Observed Visits per 1,000 Members and Expected Visits per 1,000 Members data elements are calculated by IDSS. Added a <i>Note</i> section. Added shading to the Data Elements for Reporting tables to indicate how data are reported. Added “18–64 Total” and “65+ Total” to data element tables EDU-A-2/3 and EDU-B-2/3.
Hospitalization for Potentially Preventable Complications (HPC)			✓	<ul style="list-style-type: none"> Added definitions for “Total ACSC Outlier” and “Total ACSC Nonoutlier.” Added a Note to the eligible population to refer to <i>General Guideline</i> 10 when reporting for small denominator limits. Changed references of “Medicare Part C monthly membership file” to “Monthly Membership Detail Data File.” Clarified that organizations should use the run date of the Monthly Membership Detail Data File to determine if a member had an LTI flag during the measurement year. Revised direct transfers to include observation discharges. Revised Total ACSC in the calculation of observed events to clarify that discharges for Acute ACSC outliers or Chronic ACSC outliers must be removed. Revised the Risk Adjustment Weighting and Calculation of Expected Events to truncate intermediate calculations to 10 decimal places and truncate the variance to 4 decimal places. Renamed “Total Variance” to “Variance.” Revised the covariance and variance formulas and added guidance to steps 5 and 6 in the expected count of hospitalization. Added “Total ACSC Nonoutlier Members,” “Total ACSC Outlier Members” and “Total ACSC Outlier Rate as data elements to Table HPC-A-3. Added instructions to clarify that the Chronic ACSC Outlier Rate, Acute ACSC Outlier Rate and Total ACSC Outlier Rate data elements are calculated by IDSS.

HEDIS 2019 Measures	Applicable to:			Changes for HEDIS 2019
	Commercial	Medicaid	Medicare	
				<ul style="list-style-type: none"> • Clarified instructions to indicate that Observed Discharges per 1,000 Nonoutlier Members and Expected Discharges per 1,000 Nonoutlier Members data elements are calculated by IDSS. • Added shading to the Data Elements for Reporting tables to indicate how data are reported.
HEALTH PLAN DESCRIPTIVE INFORMATION				
Board Certification (BCR)	✓	✓	✓	<ul style="list-style-type: none"> • No changes to this measure.
Enrollment by Product Line (ENP)	✓	✓	✓	<ul style="list-style-type: none"> • No changes to this measure.
Enrollment by State (EBS)	✓	✓	✓	<ul style="list-style-type: none"> • No changes to this measure.
Language Diversity of Membership (LDM)	✓	✓	✓	<ul style="list-style-type: none"> • No changes to this measure.
Race/Ethnicity Diversity of Membership (RDM)	✓	✓	✓	<ul style="list-style-type: none"> • No changes to this measure.
Total Membership (TLM)	✓	✓	✓	<ul style="list-style-type: none"> • Removed guidance for dually enrolled members and dual-eligible members from the Calculation section. Refer to <i>General Guideline 15</i>.
MEASURES COLLECTED USING ELECTRONIC CLINICAL DATA SYSTEMS				
Guidelines for Measures Collected Using ECDS	✓	✓	✓	<ul style="list-style-type: none"> • Removed IP-ECDS Coverage reporting requirement in <i>General Guideline 1</i>. • Clarified that administrative data can be refreshed in <i>General Guideline 2</i>. • Added definitions for “QDM”, “CQL” and “Participation” in <i>General Guideline 3</i>. • Updated the name of the “Administrative Claims” SSoR category to “Administrative” in <i>General Guideline 4</i>. • Revised the definition to clarify that all services incurred (i.e., paid, suspended, pending and denied) must be included and to clarify the types of files that are eligible under this designation. • Added <i>General Guideline 5: Member Allocation</i> to HEDIS ECDS Measures; renumbered subsequent guidelines. • Added description of digital measure package contents to <i>General Guideline 6</i> (formerly <i>General Guideline 5</i>). • Added <i>General Guideline 7: Presentation of Codes in HEDIS ECDS Measures</i>.

HEDIS 2019 Measures	Applicable to:			Changes for HEDIS 2019
	Commercial	Medicaid	Medicare	
Depression Screening and Follow-Up for Adolescents and Adults (DSF)	✓	✓	✓	<ul style="list-style-type: none"> • Converted ECDS measures to digital measure format. Refer to ECDS <i>General Guideline 6</i> • Revised how value sets are referenced. See ECDS <i>General Guideline 7</i>. • Added a <i>References</i> section. • Added <i>Allocation</i> to the <i>Guidance</i> section. • Clarified measure requirements in the <i>Guidance</i> section. • Removed the definitions of <i>ECDS</i> and <i>ECDS coverage</i>. • Added definitions of depression screening instruments, follow-up on positive depression screen, additional depression assessment and participation. • Added total scores indicating positive findings for the Depression Screening Instruments. • Clarified that Denominator 1 is the initial population, minus exclusions. • Revised the time frame for Numerator 1 to January 1–December 1 of the measurement period. • Revised the Data Elements for Reporting tables.
Utilization of the PHQ-9 to Monitor Depression Symptoms for Adolescents and Adults (DMS)	✓	✓	✓	<ul style="list-style-type: none"> • Converted ECDS measures to digital measure format. Refer to ECDS <i>General Guideline 6</i>. • Revised the measure to calculate a separate rate for each assessment period. • Added a <i>References</i> section. • Added <i>Allocation</i> to the <i>Guidance</i> section. • Revised measure requirements in <i>Guidance</i>. • Removed definitions for <i>IESD</i>, <i>ECDS</i> and <i>ECDS coverage</i>. • Added the definition of <i>participation</i>. • Revised how value sets are referenced. See ECDS <i>General Guideline 7</i>. • Revised the Data Elements for Reporting tables.
Depression Remission or Response for Adolescents and Adults (DRR)	✓	✓	✓	<ul style="list-style-type: none"> • Converted ECDS measures to digital measure format. Refer to ECDS <i>General Guideline 6</i>. • Revised how value sets are referenced. See ECDS <i>General Guideline 7</i>. • Added <i>Clinical Recommendation Statement</i> and <i>References</i> sections. • Added allocation to the <i>Guidance</i> section.

HEDIS 2019 Measures	Applicable to:			Changes for HEDIS 2019
	Commercial	Medicaid	Medicare	
				<ul style="list-style-type: none"> Revised <i>Guidance</i> to state that the PHQ-9 can be used for members 12 years of age and older. Removed the definitions of <i>ECDS</i>, <i>ECDS coverage</i>, <i>interactive encounter</i>, <i>remission</i> and <i>response</i>. Added the definition of <i>participation</i>. Clarified that Denominator 1 is the initial population, minus exclusions. Revised the Data Elements for Reporting tables.
Unhealthy Alcohol Use Screening and Follow-Up (ASF)	✓	✓	✓	<ul style="list-style-type: none"> Converted ECDS measures to digital measure format. Refer to ECDS <i>General Guideline 6</i>. Revised how value sets are referenced. See ECDS <i>General Guideline 7</i>. Added a <i>References</i> section. Added <i>Allocation</i> to the <i>Guidance</i> section. Clarified measure requirements in <i>Guidance</i>. Removed the definitions of <i>ECDS</i>, <i>ECDS coverage</i>, <i>IESD</i> and <i>Intake Period</i>. Added the definition of <i>participation</i>. Revised the time frame of the dementia exclusion. Added total scores indicating positive findings for the <i>Unhealthy Alcohol Use</i> screening instruments. Removed the <i>Note</i> section. Revised the Data Elements for Reporting tables.
Adult Immunization Status (AIS)	✓	✓	✓	<ul style="list-style-type: none"> First-year measure.
Prenatal Immunization Status (PRS)	✓	✓		<ul style="list-style-type: none"> First-year measure.