

**HEDIS MEASUREMENT YEAR 2020 & MEASUREMENT YEAR 2021 VOLUME 2
SUMMARY TABLE OF MEASURES, PRODUCT LINES AND CHANGES**

HEDIS MY 2020 & MY 2021 Measures	Applicable to:			Changes for HEDIS MY 2020 & MY 2021
	Commercial	Medicaid	Medicare	
General Guidelines for Data Collection and Reporting	✓	✓	✓	<ul style="list-style-type: none"> • Updated General Guideline 3: HEDIS Submission for Organizations Seeking Accreditation. • Replaced references to “CHIP members” with “CHIP products” in General Guideline 8: Reporting HEDIS for CHIP. • Updated deadlines in the HEDIS Audit Timeline in General Guideline 9: Audit Preparation. • Added a note to General Guideline 17: Members in Hospice to indicate how to flag the hospice data for ECDS reporting. • Updated General Guideline 18: Deceased Members to indicate that if organizations can identify members who die during the measurement year, these members must be excluded consistently from all measures and indicators. • Updated the Survey Method section in General Guideline 30: Data Collection Methods. • Clarified in General Guideline 31: Supplemental Data that codes alone do not meet criteria for proof of service. • Revised General Guideline 33: Date of Service for Laboratory Tests (formerly General Guideline 33: Measures That Require Results From the Most Recent Test or Measurement). • Removed General Guideline 35: Indicators That Require the Same Data Collection Method and added a note to the description of the CDC measure; renumbered subsequent guidelines. • Updated General Guideline 36: Measures That Use Medication Lists (formerly General Guideline 37). • Updated General Guideline 38: Member-Collected Samples (formerly General Guideline 39: Member-Collected Samples and Biometric Values). • Updated General Guideline 39: Member-Reported Services and Biometric Values (formerly General Guideline 40: Member-Reported Services). • Updated General Guideline 42: Telehealth (formerly General Guideline 43). • Updated General Guideline 44: Visits that Result in an Inpatient Stay (formerly General Guideline 45).

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HEDIS MY 2020 & MY 2021 Measures	Applicable to:			Changes for HEDIS MY 2020 & MY 2021
	Commercial	Medicaid	Medicare	
				<ul style="list-style-type: none"> Updated General Guideline 49: Mapping Proprietary or Other Codes (formerly General Guideline 50) to allow mapping of NDC codes for Immunizations. Added General Guideline 52: Reporting Tables.
Guidelines for Calculations and Sampling	✓	✓	✓	<ul style="list-style-type: none"> Updated Table 1: Sample Size Information for Hybrid Measures. Removed the Population definition from the Guidelines for the Hybrid Method section. Updated Table 2 to reflect the Minimum Required Sample Size (MRSS). Clarified in step 4 of the Systematic Sampling Methodology that the MRSS must be reported as the EM or less than the EM if sample size reduction is applied.
Guidelines for Allowable Adjustments of HEDIS	✓	✓	✓	<ul style="list-style-type: none"> Updated the Referring to Adjusted HEDIS Measures and Rates section. Added instructions for adjusting palliative care exclusions in Guideline 3: Exclusions. Added Guideline 5: Supplemental Data to clarify when supplemental data may be used for allowable adjustments.
EFFECTIVENESS OF CARE				
Guidelines for Effectiveness of Care	✓	✓	✓	<ul style="list-style-type: none"> Removed the MMDR file method to determine LIS/DE in the SES stratification guideline. Updated the note for the “Unknown” category in the SES stratification guideline.
Weight Assessment and Counseling for Nutrition and Physical Activity for Children/ Adolescents (WCC)	✓	✓		<ul style="list-style-type: none"> Removed the exclusion of member-reported biometric values (body mass index, height and weight). Added a <i>Note</i> to clarify that services rendered during a telephone visit, e-visit or virtual check-in meet criteria for the Counseling for Nutrition and Counseling for Physical Activity indicators.
Childhood Immunization Status (CIS)	✓	✓		<ul style="list-style-type: none"> Added a requirement that LAIV (influenza) vaccination must occur on the child’s second birthday.
Immunizations for Adolescents (IMA)	✓	✓		<ul style="list-style-type: none"> No changes to this measure.
Lead Screening in Children (LSC)		✓		<ul style="list-style-type: none"> Removed the limits to the Ages column in the <i>Rules for Allowable Adjustment of HEDIS</i> section.
Breast Cancer Screening (BCS)	✓	✓	✓	<ul style="list-style-type: none"> Added palliative care as a required exclusion. Added telephone visits, e-visits and virtual check-ins to the advanced illness exclusion.

HEDIS MY 2020 & MY 2021 Measures	Applicable to:			Changes for HEDIS MY 2020 & MY 2021
	Commercial	Medicaid	Medicare	
				<ul style="list-style-type: none"> Added <i>Donepezil-memantine</i> to the “Dementia combinations” description in the Dementia Medications List. Added the “Number of required exclusions” data element to the Data Elements for Reporting table. Added guidance adjusting required exclusions criteria in the <i>Rules for Allowable Adjustments</i> section.
Cervical Cancer Screening (CCS)	✓	✓		<ul style="list-style-type: none"> Added palliative care as a required exclusion. Updated the Hybrid Specification to indicate that sample size reduction is allowed. Clarified that documentation of “vaginal hysterectomy” meets criteria for documentation of hysterectomy with no residual cervix (optional exclusion). Added the “Number of required exclusions” data element to the Data Elements for Reporting table. Added guidance adjusting required exclusions criteria in the <i>Rules for Allowable Adjustments</i> section.
Colorectal Cancer Screening (COL)	✓		✓	<ul style="list-style-type: none"> Added palliative care as a required exclusion. Added telephone visits, e-visits and virtual check-ins to the advanced illness exclusion. Added <i>Donepezil-memantine</i> to the “Dementia combinations” description in the Dementia Medications List. Added the “Number of required exclusions” data element to the Data Elements for Reporting table. Added guidance adjusting required exclusions criteria in the <i>Rules for Allowable Adjustments</i> section.
Chlamydia Screening in Women (CHL)	✓	✓		<ul style="list-style-type: none"> No changes to this measure.
Care for Older Adults (COA)			✓ (SNP and MMP only)	<ul style="list-style-type: none"> Added a <i>Note</i> to clarify that medication review does not require the member to be present. Added a <i>Note</i> to clarify that services rendered during a telephone visit, e-visit or virtual check-in meet criteria for the Advance Care Planning, Functional Status Assessment and Pain Assessment indicators. Removed the fourth bullet in the numerator of the Hybrid Specification of the Functional Status Assessment indicator.

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HEDIS MY 2020 & MY 2021 Measures	Applicable to:			Changes for HEDIS MY 2020 & MY 2021
	Commercial	Medicaid	Medicare	
Appropriate Testing for Pharyngitis (CWP)	✓	✓	✓	<ul style="list-style-type: none"> Updated the instructions for excluding visits that result in an inpatient stay. Deleted step 8; this step is unnecessary because these members are removed in step 5.
Use of Spirometry Testing in the Assessment and Diagnosis of COPD (SPR)	✓	✓	✓	<ul style="list-style-type: none"> Added telephone visits, e-visits and virtual check-ins to step 1 of the event/diagnosis and removed the requirement to exclude telehealth. Updated the instructions for excluding visits that result in an inpatient stay (step 2).
Pharmacotherapy Management of COPD Exacerbation (PCE)	✓	✓	✓	<ul style="list-style-type: none"> Moved the instructions from step 1 to step 2 to exclude ED visits that result in an inpatient stay. Added Fluticasone furoate-umeclidinium-vilanterol to the “Bronchodilator combinations” description in the Bronchodilator Medications List. Added Formoterol-acclidinium to the “Bronchodilator combinations” description in the Bronchodilator Medications List.
Asthma Medication Ratio (AMR)	✓	✓		<ul style="list-style-type: none"> Removed the restriction that only three of the four visits with an asthma diagnosis be an outpatient telehealth, telephone visit, e-visit or virtual check-in when identifying the event/diagnosis. Clarified in step 1 when the diagnosis must be on the discharge claim. Added Dupilumab to the “Anti-interleukin-4” description in the Dupilumab Medications List. Clarified NDC code mapping requirements in the <i>Notes</i>.
Controlling High Blood Pressure (CBP)	✓	✓	✓	<ul style="list-style-type: none"> Revised the time frame in the event/diagnosis criteria to look for two outpatient visits with a diagnosis of hypertension in the first six months of the measurement year and the year prior to the measurement year. Removed the restriction that only one of the two visits with a hypertension diagnosis be an outpatient telehealth, telephone visit, e-visit or virtual check-in when identifying the event/diagnosis. Added palliative care as a required exclusion. Added telephone visits, e-visits and virtual check-ins to the advanced illness exclusion. Added Donepezil-memantine to the “Dementia combinations” description in the Dementia Medications List. In the Administrative Specification, added telephone visits, e-visits and virtual check-ins as appropriate settings for BP readings.

HEDIS MY 2020 & MY 2021 Measures	Applicable to:			Changes for HEDIS MY 2020 & MY 2021
	Commercial	Medicaid	Medicare	
				<ul style="list-style-type: none"> Updated the Hybrid Specification to indicate that sample size reduction is not allowed for MY 2020; sample size reduction is allowed for MY 2021. Removed the requirements for remote monitoring devices to allow BPs taken by any digital device. Removed the exclusion of BP readings reported or taken by the member. Added the “Number of required exclusions” data element to the Data Elements for Reporting table. Added guidance for adjusting required exclusions in the <i>Rules for Allowable Adjustments</i> section.
Persistence of Beta-Blocker Treatment After a Heart Attack (PBH)	✓	✓	✓	<ul style="list-style-type: none"> Added telephone visits, e-visits and virtual check-ins to the advanced illness exclusion. Added Donepezil-memantine to the “Dementia combinations” description in the <u>Dementia Medications List</u>.
Statin Therapy for Patients With Cardiovascular Disease (SPC)	✓	✓	✓	<ul style="list-style-type: none"> Removed the restriction that only one of the two visits with an IVD diagnosis be an outpatient telehealth, telephone visit, e-visit or virtual check-in when identifying the event/diagnosis. Added telephone visits, e-visits and virtual check-ins to the advanced illness exclusion. Added palliative care as a required exclusion. Added Donepezil-memantine to the “Dementia combinations” description in the <u>Dementia Medications List</u>. In the <i>Rules for Allowable Adjustments</i> section, clarified that the required exclusions criteria may be adjusted with limits.
Cardiac Rehabilitation (CRE)	✓	✓	✓	<ul style="list-style-type: none"> First-year measure (MY 2020).
Comprehensive Diabetes Care (CDC)	✓	✓	✓	<ul style="list-style-type: none"> Retired the “HbA1c control (<7.0%) for a selected population” indicator. Retired the “Medical Attention for Nephropathy” indicator for the commercial and Medicaid product lines. Clarified in the measure description that organizations must use the same data collection method for the HbA1c testing and control indicators (this information was previously included in the General Guidelines). Removed the restriction that only one of the two visits with a diabetes diagnosis be an outpatient telehealth, telephone visit, e-visit or virtual check-in when identifying the event/diagnosis.

6 Summary Table of Measures, Product Lines and Changes

HEDIS MY 2020 & MY 2021 Measures	Applicable to:			Changes for HEDIS MY 2020 & MY 2021
	Commercial	Medicaid	Medicare	
				<ul style="list-style-type: none"> • Added telephone visits, e-visits and virtual check-ins to the advanced illness exclusion. • Added palliative care as a required exclusion. • Deleted the <u>HbA1c Level 7.0–9.0 Value Set</u>. • Updated the Administrative Specification logic and value sets for the Eye Exam indicator. • Added telephone visits, e-visits and virtual check-ins to the Administrative Specification as appropriate settings for BP readings. • Added Nebivolol-valsartan to the “Antihypertensive combinations” description in the <u>ACE inhibitor and ARB Medications List</u>. • Added Donepezil-memantine to the “Dementia combinations” description in the <u>Dementia Medications List</u>. • Added polycystic ovarian syndrome to the optional exclusions. • Added a <i>Note</i> to the <i>Denominator-Sample Size Reduction</i> section in the Hybrid Specification. • Clarified that documentation of “HB1c” meets criteria for the Hybrid Specification of the HbA1c testing indicator. • Clarified that eye exam results read by a system that provides an artificial intelligence (AI) interpretation meet criteria. • Removed the requirements for remote monitoring devices to allow BPs taken by any digital device. • Removed the exclusion of BP readings reported or taken by the member. • Revised the Data Elements for Reporting tables. • In the <i>Rules for Allowable Adjustments</i> section, clarified that the required exclusions criteria may be adjusted with limits.
Kidney Health Evaluation for Patients With Diabetes (KED)	✓	✓	✓	<ul style="list-style-type: none"> • First-year measure (MY 2020).
Statin Therapy for Patients With Diabetes (SPD)	✓	✓	✓	<ul style="list-style-type: none"> • Added polycystic ovarian syndrome to the optional exclusions. • Removed the restriction that only one of the two visits with a diabetes diagnosis be an outpatient telehealth, telephone visit, e-visit or virtual check-in when identifying the event/diagnosis.

HEDIS MY 2020 & MY 2021 Measures	Applicable to:			Changes for HEDIS MY 2020 & MY 2021
	Commercial	Medicaid	Medicare	
				<ul style="list-style-type: none"> Removed the restriction that only one of the two visits with an IVD diagnosis be an outpatient telehealth, telephone visit, e-visit or virtual check-in when identifying the event/diagnosis, step 2 required exclusions. Added telephone visits, e-visits and virtual check-ins to the advanced illness exclusion. Added palliative care as a required exclusion. Added Donepezil-memantine to the “Dementia combinations” description in the Dementia Medications List. Added Pitavastatin 1 mg to the Pitavastatin Moderate Intensity Medications List and deleted the Pitavastatin Low Intensity Medications List. In the <i>Rules for Allowable Adjustments</i> section, clarified that the required exclusions criteria may be adjusted with limits.
Disease-Modifying Anti-Rheumatic Drug Therapy for Rheumatoid Arthritis (ART)			✓	<ul style="list-style-type: none"> Removed the restriction that only one of the two visits with a rheumatoid arthritis diagnosis be an outpatient telehealth, telephone visit, e-visit or virtual check-in when identifying the event/diagnosis. Added telephone visits, e-visits and virtual check-ins to the advanced illness exclusion. Added Upadacitinib to the “Janus kinase (JAK)” description in the DMARD Medications List. Added Donepezil-memantine to the “Dementia combinations” description in the Dementia Medications List. This measure is retired for MY 2021.
Osteoporosis Management in Women Who Had a Fracture (OMW)			✓	<ul style="list-style-type: none"> Updated the instructions for excluding visits that result in an inpatient stay (steps 1 and 2). Added telephone visits, e-visits and virtual check-ins to the advanced illness exclusion. Added palliative care as a required exclusion. Added Donepezil-memantine to the “Dementia combinations” description in the Dementia Medications List. In the <i>Rules for Allowable Adjustments</i> section, clarified that the required exclusions criteria may be adjusted with limits.
Osteoporosis Screening in Older Women (OSW)			✓	<ul style="list-style-type: none"> First-year measure (MY 2020).
Antidepressant Medication Management (AMM)	✓	✓	✓	<ul style="list-style-type: none"> Added e-visits and virtual check-ins to the event/diagnosis (step 2 required exclusion).

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HEDIS MY 2020 & MY 2021 Measures	Applicable to:			Changes for HEDIS MY 2020 & MY 2021
	Commercial	Medicaid	Medicare	
Follow-Up Care for Children Prescribed ADHD Medication (ADD)	✓	✓		<ul style="list-style-type: none"> • Clarified in step 4 (of both rates) when the diagnosis must be on the discharge claim. • Added telehealth and telephone visits to the Rate 1 numerator. • Added e-visits and virtual check-ins to the Rate 2 numerator and modified the telehealth restrictions.
Follow-Up After Hospitalization for Mental Illness (FUH)	✓	✓	✓	<ul style="list-style-type: none"> • Replaced “mental health practitioner” with “mental health provider.” • Removed the mental health provider requirement for follow-up visits for intensive outpatient encounters, partial hospitalizations, community mental health centers and electroconvulsive therapy settings. • Added visits in a behavioral healthcare setting to the numerator. • Added telephone visits to the numerator. • Deleted the <u>Mental Health Practitioner Value Set</u>. • Revised the instructions in the <i>Notes</i> for identifying mental health providers.
Follow-Up After Emergency Department Visit for Mental Illness (FUM)	✓	✓	✓	<ul style="list-style-type: none"> • Added telephone visits, e-visits and virtual check-ins to the numerator.
Follow-Up After High Intensity Care for Substance Use Disorder (FUI)	✓	✓	✓	<ul style="list-style-type: none"> • Clarified the Episode Date when detoxification occurs during an acute inpatient or residential treatment stay. • Clarified when the diagnosis must be on the discharge claim (event/diagnosis). • Added value sets to the numerators. • Added the <i>Rules for Allowable Adjustments of HEDIS</i> section.
Follow-Up After Emergency Department Visit for Alcohol and Other Drug Abuse or Dependence (FUA)	✓	✓	✓	<ul style="list-style-type: none"> • Added value sets to the numerators.
Pharmacotherapy for Opioid Use Disorder (POD)	✓	✓	✓	<ul style="list-style-type: none"> • Added value sets to the Opioid Use Disorder Treatment Medications table. • Added the <i>Rules for Allowable Adjustments of HEDIS</i> section.
Diabetes Screening for People With Schizophrenia or Bipolar Disorder Who Are Using Antipsychotic Medications (SSD)		✓		<ul style="list-style-type: none"> • Added telephone visits, e-visits and virtual check-ins to step 1 of the event/diagnosis. • Removed the restriction that only one of the two visits with a diabetes diagnosis be an outpatient telehealth, telephone visit, e-visit or virtual check-in when identifying the event/diagnosis, step 2 required exclusions.

HEDIS MY 2020 & MY 2021 Measures	Applicable to:			Changes for HEDIS MY 2020 & MY 2021
	Commercial	Medicaid	Medicare	
Diabetes Monitoring for People With Diabetes and Schizophrenia (SMD)		✓		<ul style="list-style-type: none"> Added telephone visits, e-visits and virtual check-ins to step 1 of the event/diagnosis. Removed the restriction that only one of the two visits with a diabetes diagnosis be an outpatient telehealth, telephone visit, e-visit or virtual check-in when identifying the event/diagnosis. Added polycystic ovarian syndrome to the optional exclusions.
Cardiovascular Monitoring for People With Cardiovascular Disease and Schizophrenia (SMC)		✓		<ul style="list-style-type: none"> Clarified in step 2 when the diagnosis must be on the discharge claim. Added telephone visits, e-visits and virtual check-ins to step 1 of the event/diagnosis. Removed the restriction that only one of the two visits with an IVD diagnosis be an outpatient telehealth, telephone visit, e-visit or virtual check-in when identifying the event/diagnosis.
Adherence to Antipsychotic Medications for Individuals With Schizophrenia (SAA)	✓	✓	✓	<ul style="list-style-type: none"> Relabeled step 2 to “Required exclusions” and moved the exclusions for members with advanced illness, frailty, enrolled in an I-SNP or living long-term in an institutional setting to a new step 3 labeled as “exclusions.” Added telephone visits, e-visits and virtual check-ins to step 1 of the event/diagnosis. Added telephone visits, e-visits and virtual check-ins to the advanced illness exclusion. Added Donepezil-memantine to the “Dementia combinations” description in the Dementia Medications List.
Metabolic Monitoring for Children and Adolescents on Antipsychotics (APM)	✓	✓		<ul style="list-style-type: none"> Clarified in the <i>Rules for Allowable Adjustments of HEDIS</i> that when adjusting ages, the upper age range may be expanded or there may be no upper age limit.
Transitions of Care (TRC)			✓	<ul style="list-style-type: none"> Revised the time frame for the <i>Notification of Inpatient Admission and Receipt of Discharge Information</i> indicators to the day of admission/discharge through 2 days after the admission/discharge. Clarified how to handle observation visits that precede the inpatient stay when identifying the event/diagnosis. Added e-visits and virtual check-ins to the Patient Engagement After Inpatient Discharge numerator. Updated the Hybrid Specification to indicate that sample size reduction is not allowed for MY 2020; sample size reduction is allowed for MY 2021. Revised the “one medical record” requirement to allow reporting from the outpatient medical record that is accessible to the PCP or ongoing care provider.

HEDIS MY 2020 & MY 2021 Measures	Applicable to:			Changes for HEDIS MY 2020 & MY 2021
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				<ul style="list-style-type: none"> Revised the sixth bullet of the <i>Receipt of Discharge Information</i> indicator of the hybrid specification. Added a <i>Note</i> to clarify that medication reconciliation does not require the member to be present. In the Data Elements for Reporting table, in the “Numerator events by supplemental data” row of the Hybrid column, replaced <i>Each of the 2 rates, for each age stratification and total</i> with <i>Each of the 4 rates, for each age stratification and total</i> because supplemental data may now be used.
Follow-Up After Emergency Department Visit for People With Multiple High-Risk Chronic Conditions (FMC)			✓	<ul style="list-style-type: none"> Clarified that ED visits that result in an inpatient stay are excluded (step 2). Added telephone visits, e-visits and virtual check-ins to the event/diagnosis when identifying visits with chronic condition diagnoses, step 3. Added e-visits and virtual check-ins to the numerator.
Non-Recommended Cervical Cancer Screening in Adolescent Females (NCS)	✓	✓		<ul style="list-style-type: none"> No changes to this measure.
Non-Recommended PSA-Based Screening in Older Men (PSA)			✓	<ul style="list-style-type: none"> No changes to this measure.
Appropriate Treatment for Upper Respiratory Infection (URI)	✓	✓	✓	<ul style="list-style-type: none"> Updated the instructions for excluding visits that result in an inpatient stay. In the <i>Rules for Allowable Adjustments</i> section, clarified that the numerator criteria may be adjusted with limits.
Avoidance of Antibiotic Treatment for Acute Bronchitis/Bronchiolitis (AAB)	✓	✓	✓	<ul style="list-style-type: none"> Updated the instructions for excluding visits that result in an inpatient stay. In the <i>Rules for Allowable Adjustments</i> section, clarified that the numerator criteria may be adjusted with limits.
Use of Imaging Studies for Low Back Pain (LBP)	✓	✓		<ul style="list-style-type: none"> In the <i>Rules for Allowable Adjustments</i> section, clarified that the numerator criteria may be adjusted with limits.
Potentially Harmful Drug-Disease Interactions in Older Adults (DDE)			✓	<ul style="list-style-type: none"> Replaced references to “anticonvulsants” with “antiepileptics.” Clarified in the IESD definition for nonacute inpatient encounters identified only by a professional claim that the IESD is the date of service. Added palliative care as a required exclusion.

HEDIS MY 2020 & MY 2021 Measures	Applicable to:			Changes for HEDIS MY 2020 & MY 2021
	Commercial	Medicaid	Medicare	
				<ul style="list-style-type: none"> Added Donepezil-memantine to the “Dementia combinations” description in the Dementia Medications List. Updated the “Number of required exclusions” data element in the Data Elements for Reporting Table. In the <i>Rules for Allowable Adjustments</i> section, clarified that the required exclusions and numerator criteria may be adjusted with limits.
Use of High-Risk Medications in Older Adults (DAE)			✓	<ul style="list-style-type: none"> Added a definition for “IPSD.” Revised the continuous enrollment to the measurement year and the year prior to the measurement year. Updated the age of Medicare members in the eligible population to reflect the extended continuous enrollment period. Added palliative care as a required exclusion. Added Rate 2: High-Risk Medications to Avoid Except for Appropriate Diagnosis. Revised Rate 1 to specify that two dispensing events for the same high-risk medication drug class meets numerator criteria. Removed the days supply requirement for nonbenzodiazepine hypnotic medications. Added a Total rate. Updated the <i>Note</i> section. Added the “Number of required exclusions” data element to the Data Elements for Reporting table. In the <i>Rules for Allowable Adjustments</i> section, clarified that the required exclusions and numerator criteria may be adjusted with limits.
Use of Opioids at High Dosage (HDO)	✓	✓	✓	<ul style="list-style-type: none"> Clarified the instructions for calculating covered days for the numerator. Clarified the instructions for treatment period. Added palliative care as a required exclusion. Added medication lists for acetaminophen benzhydrocodone, aspirin codeine and codeine phosphate. In the <i>Rules for Allowable Adjustments</i> section, clarified that the event/diagnosis, required exclusions and numerator criteria may be adjusted with limits.
Use of Opioids From Multiple Providers (UOP)	✓	✓	✓	<ul style="list-style-type: none"> Added the Aspirin Codeine Medications List, the Codeine Phosphate Medications List and the Acetaminophen Benzhydrocodone Medications List.

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				<ul style="list-style-type: none"> • Clarified the instructions for calculating covered days. • In the <i>Rules for Allowable Adjustments</i> section, clarified that the event/diagnosis and numerator criteria may be adjusted with limits.
Risk of Continued Opioid Use (COU)	✓	✓	✓	<ul style="list-style-type: none"> • Added the Aspirin Codeine Medications List, the Codeine Phosphate Medications List and the Acetaminophen Benzhydrocodone Medications List. • Clarified the instructions for calculating covered days. • Added palliative care as a required exclusion. • In the <i>Rules for Allowable Adjustments</i> section, clarified that the event/diagnosis, required exclusions and numerator criteria may be adjusted with limits.
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 <i>HEDIS 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 <i>HEDIS 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 <i>HEDIS 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 <i>HEDIS Volume 6: Specifications for the Medicare Health Outcomes Survey</i>.
Flu Vaccinations for Adults Ages 18-64 (FVA)	✓	✓		<ul style="list-style-type: none"> • No changes to this measure.
Flu Vaccinations for Adults Ages 65 and Older (FVO)			✓	<ul style="list-style-type: none"> • No changes to this measure.
Medical Assistance With Smoking and Tobacco Use Cessation (MSC)	✓	✓	✓	<ul style="list-style-type: none"> • No changes to this measure.
Pneumococcal Vaccination Status for Older Adults (PNU)			✓	<ul style="list-style-type: none"> • No changes to this measure.

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	Commercial	Medicaid	Medicare	
ACCESS/AVAILABILITY OF CARE				
Guidelines for Access/ Availability of Care				<ul style="list-style-type: none"> No changes to these guidelines.
Adults' Access to Preventive/ Ambulatory Health Services (AAP)	✓	✓	✓	<ul style="list-style-type: none"> No changes to this measure.
Annual Dental Visit (ADV)		✓		<ul style="list-style-type: none"> No changes to this measure.
Initiation and Engagement of Alcohol and Other Drug Abuse or Dependence Treatment (IET)	✓	✓	✓	<ul style="list-style-type: none"> Clarified the Episode Date when detoxification occurs during an acute inpatient stay. Updated the step 3 instructions for ED and observation visits that result in an inpatient stay, to make them consistent with instructions in the <i>Definitions</i> section. Added value sets for opioid treatment services that are billed weekly or monthly to the denominator and numerators. Updated the continuous enrollment period.
Prenatal and Postpartum Care (PPC)	✓	✓		<ul style="list-style-type: none"> Revised the definition of last enrollment segment. Clarified that visits that occur prior to the enrollment start date (during the pregnancy) meet criteria. Added telephone visits (<u>Telephone Visits Value Set</u>) e-visits and virtual check-ins (<u>Online Assessments Value Set</u>) to the <u>Timeliness of Prenatal Care</u> rate (administrative specification) and clarified in the <i>Notes</i> that services provided via telephone, e-visit or virtual check-in are eligible for use in reporting both rates. Updated the Hybrid Specification to indicate that sample size reduction is allowed using only the current year's administrative rate for MY 2020; for MY 2021, organizations may reduce the sample size using the current year's administrative rate or the prior year's audited, product line-specific rate. Added examples of "pregnancy diagnosis" in the Hybrid Specification of the Timeliness of Prenatal Care indicator.
Use of First-Line Psychosocial Care for Children and Adolescents on Antipsychotics (APP)	✓	✓		<ul style="list-style-type: none"> Added telephone visits and e-visits or virtual check-ins to the event/diagnosis (step 4 required exclusions). Clarified in the <i>Rules for Allowable Adjustments</i> that the required exclusions may not be adjusted.

14 Summary Table of Measures, Product Lines and Changes

HEDIS MY 2020 & MY 2021 Measures	Applicable to:			Changes for HEDIS MY 2020 & MY 2021
	Commercial	Medicaid	Medicare	
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 <i>HEDIS 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 <i>HEDIS 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 <i>HEDIS Volume 3: Specifications for Survey Measures</i>.
UTILIZATION AND RISK ADJUSTED UTILIZATION				
Guidelines for Utilization	✓	✓	✓	<ul style="list-style-type: none"> Deleted <i>Guideline 15: Data Element Tables</i>; refer to <i>General Guideline 53: Reporting Tables</i>.
Well-Child Visits in the First 30 Months of Life (W30)	✓	✓		<ul style="list-style-type: none"> Revised the measure name to Well-Child Visits in the First 30 Months of Life. Retired the 0, 1, 2, 3, 4 and 5 well-child visit rates. Added Rate 2 for children who turned 30 months old during the measurement year and had two or more well-child visits in the last 15 months. Removed the Hybrid Data Collection Method. Removed the telehealth exclusion. Revised the Data Elements for Reporting table. Revised the Ages criteria in the Rules for Allowable Adjustments section to only allow ranges within the specified age range of the measure.
Child and Adolescent Well-Care Visits (WCV)	✓	✓		<ul style="list-style-type: none"> This measure is a combination measure that replaces the former “Well-Child Visits in the Third, Fourth, Fifth and Sixth Years of Life” and “Adolescent Well-Care Visits” HEDIS measures. Added members age 7–11 years. Added age stratifications. Removed the Hybrid Data Collection Method. Removed the telehealth exclusion. Revised the Data Elements for Reporting table.

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				<ul style="list-style-type: none"> Revised the Ages criteria in the Rules for Allowable Adjustments section to only allow ranges within the specified age range.
Frequency of Selected Procedures (FSP)	✓	✓	✓	<ul style="list-style-type: none"> Updated the “Count as one procedure...” definition in the Calculations section.
Ambulatory Care (AMB)		✓		<ul style="list-style-type: none"> No changes to this measure.
Inpatient Utilization—General Hospital/Acute Care (IPU)		✓		<ul style="list-style-type: none"> No changes to this measure.
Identification of Alcohol and Other Drug Services (IAD)	✓	✓	✓	<ul style="list-style-type: none"> Added value sets to identify outpatient or medication treatment.
Mental Health Utilization (MPT)	✓	✓	✓	<ul style="list-style-type: none"> Deleted the Mental Health Practitioner Value Set. Replaced references to “mental health practitioner” with “mental health provider.” Added telephone visits (Telephone Visits Value Set), e-visits and virtual check-ins (Online Assessments Value Set) to the <i>Telehealth</i> section. Deleted redundant value sets from the <i>Telehealth</i> section. Revised the instructions in the <i>Notes</i> for identifying mental health providers.
Antibiotic Utilization (ABX)	✓	✓	✓	<ul style="list-style-type: none"> No changes to this measure.
Guidelines for Risk Adjusted Utilization	✓	✓	✓	<ul style="list-style-type: none"> Removed the MMDR file method to determine LIS/DE in <i>Guideline 7: SES stratification</i>. Updated the note for the “Unknown” category in <i>Guideline 7: SES stratification</i>. Deleted <i>Guideline 8: Data Element Tables</i>; refer to <i>General Guideline 53: Reporting Tables</i>. Renamed the <i>Utilization Risk Adjustment Determination</i> section to <i>Risk Adjustment Comorbidity Category Determination</i>. Added telephone visits to Risk Adjustment Comorbidity Category Determination. Replaced references to “encounters” with “denominator units” in the <i>Risk Adjustment Comorbidity Category Determination</i> section. Replaced references to “Table CC-Comorbid” with “Table CC-Mapping” in the <i>Risk Adjustment Comorbidity Category Determination</i> section. Replaced references to “HCC column” with “Comorbid HCC columns” in step 5 in the <i>Risk Adjustment Comorbidity Category Determination</i> section.

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				<ul style="list-style-type: none"> Updated the Example: Table HCC—Comb in step 5 in the <i>Risk Adjustment Comorbidity Category Determination</i> section.
Plan All-Cause Readmissions (PCR)	✓	✓	✓	<ul style="list-style-type: none"> Revised the measure description. Added a <i>Note</i> to the definition of “plan population” to clarify that it should be used as a denominator for the outlier rate. Removed “Risk Adjustment Tables” from the Definitions. Replaced references to “Table HCC-Surg” with references to the “<u>Surgery Procedure Value Set</u>” in the <i>Risk Adjustment Determination</i> section. Replaced references to “Table PCR-DischCC” with “Table CC_Mapping” in the <i>Risk Adjustment Determination</i> section. Updated the <i>Note</i> in the <i>Risk Adjustment Weighting</i> section for IHS that are discharged or transferred to skilled nursing care. Removed references to specific risk weight tables in the <i>Risk Adjustment Weighting</i> section. Clarified rounding rules in step 8 of the <i>Risk Adjustment Weighting</i> section. Revised the data element tables to separate the Medicaid and commercial product lines from the Medicare product line.
Hospitalization Following Discharge from a Skilled Nursing Facility (HFS)			✓	<ul style="list-style-type: none"> Revised measure description. Revised the age requirements to 65 years and older. Replaced references to “Table HFS-DischCC” with “Table CC_Mapping” in the <i>Risk Adjustment Determination</i> section. Clarified in the <i>Risk Adjustment Determination</i> section that diagnoses that cannot be mapped to Table CC_Mapping are excluded. Removed references to specific risk weight tables in the <i>Risk Adjustment Weighting</i> section. Clarified rounding rules in step 7 of the <i>Risk Adjustment Weighting</i> section. Updated step 3 of the numerator to specify that diagnoses must be found on the discharge claim.
Acute Hospital Utilization (AHU)	✓		✓	<ul style="list-style-type: none"> Removed references to specific risk weight tables in the <i>Risk Adjustment Weighting</i> section. Clarified that for categories with a single member the covariance should be set to zero in step 4 of the Expected Count of Hospitalization calculation.

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Emergency Department Utilization (EDU)	✓		✓	<ul style="list-style-type: none"> • Added definitions for “outlier” and “non-outlier.” • Revised step 1 in the calculation of observed events to exclude ED visits that result in an observation stay. • Added step 3 in the calculation of observed events to remove discharges for outlier members. • Removed references to specific risk weight tables in the <i>Risk Adjustment Weighting</i> section. • Specified separate PPV and PUCV risk adjustment weight tables for the Medicare population age 18-64 and the Medicare population age 65 and older. • Removed step 3 to identify the base risk weight from the calculation of PPV and PUCV; renumbered subsequent steps. • Clarified that for categories with a single member the covariance should be set to zero in step 4 of the Expected Count of Visits calculation. • Added instructions to report outliers separate from non-outliers. • Revised the data elements tables and added reporting columns for outliers.
Hospitalization for Potentially Preventable Complications (HPC)			✓	<ul style="list-style-type: none"> • Removed the toe amputation exclusion from step 3 of Chronic ACSC Observed Events. • Removed the “acute bronchitis with COPD diagnosis” bullet from step 3 of Chronic ACSC Observed Events. • Removed references to specific risk weight tables in the <i>Risk Adjustment Weighting and Calculation of the Expected Events</i> section. • Clarified that for categories with a single member the covariance should be set to zero in step 4 of the Expected Count of Hospitalization calculation.
HEALTH PLAN DESCRIPTIVE INFORMATION				
Enrollment by Product Line (ENP)	✓	✓	✓	<ul style="list-style-type: none"> • Revised the Data Elements for Reporting table.
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"> • Revised the Data Elements for Reporting tables.
Race/Ethnicity Diversity of Membership (RDM)	✓	✓	✓	<ul style="list-style-type: none"> • Revised the note referring to total member counts. • Revised the Data Elements for Reporting tables.

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Total Membership (TLM)	✓	✓	✓	<ul style="list-style-type: none"> No changes to this measure.
MEASURES REPORTED USING ELECTRONIC CLINICAL DATA SYSTEMS				
Guidelines for Measures Reported Using ECDS	✓	✓	✓	<ul style="list-style-type: none"> Revised the title of the ECDS guidelines. Replaced references to “EHR” with “EHR/PHR.” Updated <i>Guideline 2: Data Collection Methods</i> to indicate that data collection for the SSoRs must be completed by the supplemental data collection deadline and an SSoR can be refreshed. Updated the Member-reported data and EHR/PHR definitions in <i>Guideline 4: Types of ECDS data</i>. Revised <i>Guideline 5: Member Allocation to HEDIS ECDS Measures</i>. Updated <i>Guideline 6: HEDIS ECDS Digital Measure Format</i> to indicate that a Technical Release Notes file will be included in the digital measure packages with the list of measure updates. Added <i>Guideline 8: Disclaimer for HEDIS ECDS Measure Specifications</i>.
Breast Cancer Screening (BCS-E)	✓	✓	✓	<ul style="list-style-type: none"> Added a palliative care exclusion. Added telephone visits, e-visits and virtual check-ins to the advanced illness exclusion. Restructured the Data Elements for Reporting tables. Replaced references to “continuous enrollment,” “allowable gap” and “anchor date” with “allocation” in the <i>Eligible Population</i> section of the Rules for Allowable Adjustments. Clarified the exclusion criteria in the <i>Rules for Allowable Adjustments</i> section. Refer to the Technical Release Notes file in the Digital Measures Package for a comprehensive list of changes.
Colorectal Cancer Screening (COL-E)	✓		✓	<ul style="list-style-type: none"> Added a palliative care exclusion. Restructured the Data Elements for Reporting tables. Replaced references to “continuous enrollment,” “allowable gap” and “anchor date” with “allocation” in the <i>Eligible Population</i> section of the Rules for Allowable Adjustments. Clarified the exclusion criteria in the <i>Rules for Allowable Adjustments</i> section. Refer to the Technical Release Notes file in the Digital Measures Package for a comprehensive list of changes.

HEDIS MY 2020 & MY 2021 Measures	Applicable to:			Changes for HEDIS MY 2020 & MY 2021
	Commercial	Medicaid	Medicare	
Follow-Up Care for Children Prescribed ADHD Medication (ADD-E)	✓	✓		<ul style="list-style-type: none"> • Added telehealth and telephone visits to the Rate 1 numerator. • Added online assessments to the Rate 2 numerator and modified the telehealth restrictions. • Restructured the Data Elements for Reporting tables. • Replaced references to “continuous enrollment,” “allowable gap” and “anchor date” with “allocation” in the <i>Eligible Population</i> section of the Rules for Allowable Adjustments. • Clarified the exclusion criteria in the <i>Rules for Allowable Adjustments</i> section. • Refer to the Technical Release Notes file in the Digital Measures Package for a comprehensive list of changes.
Depression Screening and Follow-Up for Adolescents and Adults (DSF-E)	✓	✓	✓	<ul style="list-style-type: none"> • Revised the thresholds for determining a “positive screen” across depression screening tools that identify members to receive follow-up care. • Combined the 18–44 years and 45–64 years age strata. • Added online assessments to Numerator 2 (added online assessment codes to the <u>Follow Up Visits Value Set</u>). • Restructured the Data Elements for Reporting tables. • Replaced references to “continuous enrollment,” “allowable gap” and “anchor date” with “allocation” in the <i>Eligible Population</i> section of the Rules for Allowable Adjustments. • Clarified that the hospice exclusion may be adjusted in the <i>Exclusions</i> section of the Rules for Allowable Adjustments. • Refer to the Technical Release Notes file in the Digital Measures Package for a comprehensive list of changes.
Utilization of the PHQ-9 to Monitor Depression Symptoms for Adolescents and Adults (DMS-E)	✓	✓	✓	<ul style="list-style-type: none"> • Added telephone visits and online assessment codes to the <u>Interactive Outpatient Encounter Value Set</u>. • Restructured the Data Elements for Reporting tables. • Replaced references to “continuous enrollment,” “allowable gap” and “anchor date” with “allocation” in the <i>Eligible Population</i> section of the Rules for Allowable Adjustments. • Clarified that the hospice exclusion may be adjusted in the <i>Exclusions</i> section of the Rules for Allowable Adjustments. • Refer to the Technical Release Notes file in the Digital Measures Package for a comprehensive list of changes.

HEDIS MY 2020 & MY 2021 Measures	Applicable to:			Changes for HEDIS MY 2020 & MY 2021
	Commercial	Medicaid	Medicare	
Depression Remission or Response for Adolescents and Adults (DRR-E)	✓	✓	✓	<ul style="list-style-type: none"> Restructured the Data Elements for Reporting tables. Replaced references to “continuous enrollment,” “allowable gap” and “anchor date” with “allocation” in the <i>Eligible Population</i> section of the Rules for Allowable Adjustments. Clarified that the hospice exclusion may be adjusted in the <i>Exclusions</i> section of the Rules for Allowable Adjustments. Refer to the Technical Release Notes file in the Digital Measures Package for a comprehensive list of changes.
Unhealthy Alcohol Use Screening and Follow-Up (ASF-E)	✓	✓	✓	<ul style="list-style-type: none"> Revised the timing for the AUD diagnosis exclusion to remove members with a diagnosis during the year prior to the measurement year. Restructured the Data Elements for Reporting tables. Replaced references to “continuous enrollment,” “allowable gap” and “anchor date” with “allocation” in the <i>Eligible Population</i> section of the Rules for Allowable Adjustments. Clarified that the hospice exclusion may be adjusted in the <i>Exclusions</i> section of the Rules for Allowable Adjustments. Refer to the Technical Release Notes file in the Digital Measures Package for a comprehensive list of changes.
Adult Immunization Status (AIS-E)	✓	✓	✓	<ul style="list-style-type: none"> Revised the numerator requirements for Rate 4: Immunization Status-Pneumococcal. Removed the composite rate. Restructured the Data Elements for Reporting tables. Replaced references to “continuous enrollment,” “allowable gap” and “anchor date” with “allocation” in the <i>Eligible Population</i> section of the <i>Rules for Allowable Adjustments</i>. Clarified that the hospice exclusion may be adjusted in the <i>Exclusions</i> section of the Rules for Allowable Adjustments. Refer to the Technical Release Notes file in the Digital Measures Package for a comprehensive list of changes.
Prenatal Immunization Status (PRS-E)	✓	✓		<ul style="list-style-type: none"> Restructured the Data Elements for Reporting tables. Replaced references to “continuous enrollment,” “allowable gap” and “anchor date” with “allocation” in the <i>Eligible Population</i> section of the Rules for Allowable Adjustments. In the <i>Rules for Allowable Adjustments</i> section, clarified that the exclusions criteria may be adjusted with limits.

HEDIS MY 2020 & MY 2021 Measures	Applicable to:			Changes for HEDIS MY 2020 & MY 2021
	Commercial	Medicaid	Medicare	
				<ul style="list-style-type: none"> • Clarified that the hospice exclusion may be adjusted in the <i>Exclusions</i> section of the Rules for Allowable Adjustments. • Refer to the Technical Release Notes file in the Digital Measures Package for a comprehensive list of changes.
Prenatal Depression Screening and Follow-Up (PND-E)	✓	✓		<ul style="list-style-type: none"> • Raised the thresholds for determining a “positive screen” across depression screening tools that identify members to receive follow-up care. • Added online assessments to Numerator 2 (added online assessment codes to the <u>Follow Up Visits Value Set</u>). • Restructured the Data Elements for Reporting tables. • Added the <i>Rules for Allowable Adjustments of HEDIS</i> section. • Refer to the Technical Release Notes file in the Digital Measures Package for a comprehensive list of changes.
Postpartum Depression Screening and Follow-Up (PDS-E)	✓	✓		<ul style="list-style-type: none"> • Revised the thresholds for determining a “positive screen” across depression screening tools that identify members to receive follow-up care. • Revised the screening period to assess screening that occurs 7 to 84 days after delivery. • Added online assessments to Numerator 2 (added online assessment codes to the <u>Follow Up Visits Value Set</u>). • Restructured the Data Elements for Reporting tables. • Added the <i>Rules for Allowable Adjustments of HEDIS</i> section. • Refer to the Technical Release Notes file in the Digital Measures Package for a comprehensive list of changes.