



**For Public Comment**  
November 18, 2020–January 13, 2021  
Comments due 11:59 p.m. ET  
January 13, 2021

# Health Plan Ratings 2022: Overview of Proposed Measure Updates

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# Health Plan Ratings 2022: Overview of Proposed Measure Updates

## Our Mission: Improve the Quality of Health Care

NCQA is dedicated to improving health care quality.

For almost 30 years, NCQA has been driving improvement throughout the health care system, helping to advance the issue of health care quality to the top of the national agenda. NCQA's programs and services reflect a straightforward formula for improvement: measurement, transparency, accountability.

This approach works, as evidenced by the dramatic improvements in clinical quality demonstrated by NCQA-Accredited health plans using both standards and performance results. Today, approximately 176 million Americans are enrolled in a NCQA-Accredited health plan.

## Stakeholders Participating in Public Comment

NCQA shares these changes for public comment to generate thoughtful commentary and constructive suggestions from interested parties. Many comments lead to changes in our standards and policies, and the review process makes our standards stronger for all stakeholders.

NCQA asks respondents to consider whether the requirements are feasible as written and are clearly articulated, and to highlight areas that might need clarification.

## HEDIS/CAHPS Update for Health Plan Ratings Scoring in 2022

NCQA seeks feedback on proposed changes to the 2022 Health Plan Ratings scoring measure list.

A critical issue for any quality rating tool is the certainty of the judgment—we want to be sure that plans assigned a higher value deserve it. If a rating system includes redundant measures or measures with poor statistical properties, we risk rewarding random variation (noise) over true quality differences (signal).

NCQA used the following criteria to determine the measures proposed for inclusion in or removal from Health Plan Ratings.

### Measure Selection Criteria

All HEDIS and CAHPS measures eligible for use in NCQA programs were reviewed against the following criteria:

#### 1. Measure exhibits desirable statistical properties.

- *Reliable.* A reliable measure permits statistical differentiation of one plan from the overall pattern of performance across plans. With higher reliability, we are less likely to make a mistake on a performance rating.
- *Room to improve.* If all plans perform at a very high level, there is little reason to push for higher performance. We set this criterion as average performance of less than 90%.

- *Exhibits meaningful variation.* The more variation in performance, the more certain we can be that a plan is high performing. And if most plans score above 90%, it becomes harder to distinguish the best performers from the next-best performers. Based on prior experience working with the measures, we defined a 10%–15% range or greater difference between the 10th and 90th percentiles as meaningful variation, for measures where higher rates indicate better performance.
- *Consistently scoreable.* At least 40% of plans must have a scoreable rate. By “scoreable rate” we mean that the plan either reports a valid rate (the auditor deems it valid and between 0% and 100% performance) or fails to submit (Not Reported or a biased rate that receives “0” on the rating scale) to support accountability for reporting accurate data. We continue to exempt plans that have small sample sizes or absence of benefit, because not having a valid rate is not under the plan’s control.

## 2. Use in programs and value-based payment initiatives.

NCQA considered a measure’s use in external programs (e.g., CMS Star Ratings, Medicaid core set), performance trends (e.g., declining performance) and strategic objectives (e.g., reward for reporting digital quality measures).

## 3. Measures address quality or patient experience of health care practices.

This criterion eliminated Health Plan Descriptive Information measures (neither quality nor patient experience) and most Utilization measures that do not apply risk adjustment (no optimal volume of services without reference to a case mix adjusted population).

## 4. Eliminate redundancy between paired measures.

For “paired” measures (e.g., testing and control of HbA1c in the *Comprehensive Diabetes Care* measure; 15-day and 31-day rates in the *Risk of Continued Opioid Use* measure), choose the measure closest to the ultimate clinical outcome.

## Recommendations

- Add the following new measures.

Measure		Commercial	Medicare	Medicaid
SAA	Adherence to Antipsychotic Medications for Individuals With Schizophrenia	✓	✓	(currently in HPR)
FUI	Follow-Up After High Intensity Care for Substance Use Disorder (7-Day Rate)	✓	✓	✓
HFS	Hospitalization Following Discharge From a Skilled Nursing Facility		✓	
POD	Pharmacotherapy for Opioid Use Disorder	✓	✓	✓
PCR	Plan All-Cause Readmissions	(add back to HPR scoring for 2022)*	(add back to HPR scoring for 2022)*	✓
PRS	Prenatal Immunization Status (Digital Quality Measure)	✓		✓

**\*Note:** Due to concerns about the impact of COVID-19 on risk-adjusted predictions for expected rates in MY 2020, NCQA revised the HPR 2021 methodology to remove this measure from scoring. For HPR 2022, NCQA plans the measure back into the scoring methodology.

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Refer to [Appendix 4: Proposed HEDIS/CAHPS Updates for 2022 Health Plan Ratings](#) for the rationale for measure inclusions.

Refer to [Appendix 5: Proposed NCQA 2022 Health Plan Ratings Methodology](#) for the detailed scoring methodology.

### Targeted Questions

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1. Do you support NCQA's recommendation to add the *Adherence to Antipsychotic Medications for Individuals With Schizophrenia* measure to 2022 Health Plan Ratings for the commercial and Medicare product lines? If you do not, please explain.
2. Do you support NCQA's recommendation to add the *Follow-Up After High Intensity Care for Substance Use Disorder (7-Day Rate)* measure to 2022 Health Plan Ratings for all three product lines? If you do not, please explain.
3. Do you support NCQA's recommendation to add the *Hospitalization Following Discharge From a Skilled Nursing Facility* measure to 2022 Health Plan Ratings for the Medicare product line? If you do not, please explain.
4. Do you support NCQA's recommendation to add the *Pharmacotherapy for Opioid Use Disorder* measure to 2022 Health Plan Ratings for all three product lines? If you do not, please explain.
5. Do you support NCQA's recommendation to add the *Plan All-Cause Readmissions* measure to 2022 Health Plan Ratings for the Medicaid product line? If you do not, please explain.
6. Do you support NCQA's recommendation to add the *Prenatal Immunization Status* measure to 2022 Health Plan Ratings for the commercial and Medicaid product lines? If you do not, please explain.
7. Do you have additional feedback about the Health Plan Ratings measure list and/or methodology?

**Note:** Comments can be entered for each product line-specific measure in the public comment database.

## Public Comment Instructions

### Submitting Comments

Respond to topic and element-specific questions for each product on NCQA's public comment website. NCQA does not accept comments by mail, email or fax.

1. Go to <http://my.ncqa.org> and enter your email address and password.
2. Once logged in, scroll down and click **Public Comments**.
3. Click **Add Comment** to open the comment box.
4. Select the following product from the drop-down box:
  - a. **Health Plan Ratings (HPR) 2022**.
5. Click to select the **Topic** and **Element** (question) on which you would like to comment.
6. Click to select your support option (**Support, Do not support, Support with modifications**).
  - a. If you choose **Do not support**, include your rationale in the text box.
  - b. If you choose **Support with modifications**, enter the suggested modification in the text box.
7. Enter your comments in the **Comments** box.

**Note:** *There is a 2,500-character limit for each comment. We suggest you develop your comments in Word to check your character limit; use the "cut and paste" function to copy your comment into the Comments box.*

8. Use the **Submit** button to submit more than one comment. Use the **Close** button to finish leaving comments; you can view all submitted comments in the **Public Comments** module.

**All comments must be entered by Wednesday, January 13, at 11:59 p.m. ET**

### Next Steps

The final set of HEDIS/CAHPS measures scored for Health Plan Ratings in 2022 will be released April 2021, following approval by the NCQA Standards Committee and the Board of Directors.