

## HEDIS VOLUME 2 MY 2022

### SUMMARY TABLE OF MEASURES, PRODUCT LINES AND CHANGES

HEDIS MY 2022 Measures	Applicable to:			Changes for HEDIS MY 2022
	Commercial	Medicaid	Medicare	
<b>General Guidelines for Data Collection and Reporting</b>	✓	✓	✓	<ul style="list-style-type: none"> <li>• Updated General Guideline 3: HEDIS Submission for Organizations Seeking Accreditation.</li> <li>• Removed the HEDIS Audit Timeline from <i>General Guideline 9: Audit Preparation</i>. It will be posted online and published in Volume 5, HEDIS Compliance Audit: Standards, Policies and Procedures.</li> <li>• Clarified that “NA” is not an audit designation in <i>General Guideline 10: Reporting</i>.</li> <li>• Clarified the definition of Medicare plans for dual enrollment in <i>General Guideline 15: Members With Dual Enrollment</i>.</li> <li>• Updated the note in <i>General Guideline 30: Data Collection Methods</i> to indicate how to use and report supplemental data for the <i>Transitions of Care</i> measure.</li> <li>• Removed the certified eCQM vendor data definition from <i>General Guideline 31: Supplemental Data</i>.</li> <li>• Clarified in <i>General Guideline 31: Supplemental Data</i> that mail order prescription “shipped date” meets criteria for dispensed date.</li> <li>• Added <i>General Guideline 33: Race and Ethnicity (RES) Stratification</i>; renumbered subsequent guidelines.</li> <li>• Added a note to <i>General Guideline 37: Measures That Use Medication Lists</i> (formerly General Guideline 36).</li> <li>• Updated <i>General Guideline 42: Presentation of Codes in HEDIS</i> (formerly General Guideline 41).</li> <li>• Updated <i>General Guideline 53: Reporting Tables</i> (formerly General Guideline 52) to clarify the format of the restructured data element tables.</li> </ul>
<b>Guidelines for Calculations and Sampling</b>	✓	✓	✓	<ul style="list-style-type: none"> <li>• Updated Table 1: Sample Size Information for Hybrid Measures.</li> <li>• Updated the HEDIS MY 2022 RAND Table for Measures Using the Hybrid Method.</li> </ul>
<b>Guidelines for Allowable Adjustments of HEDIS</b>	✓	✓	✓	<ul style="list-style-type: none"> <li>• Added <i>Guideline 3: Stratifications for Telehealth Services</i>. Renumbered all subsequent guidelines.</li> <li>• Added a note to <i>Guideline 4: Exclusions</i> to include instructions for Risk Adjusted Utilization measures.</li> </ul>

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	Commercial	Medicaid	Medicare	
				<ul style="list-style-type: none"> <li>• Updated <i>Guideline 7: Measurement Period Adjustments</i>.</li> <li>• Updated <i>Guideline 8: Timing Relationships</i>.</li> <li>• Updated <i>Guideline 10: Denominator Size</i> to include instructions for denominator size requirements for the Utilization and Risk-Adjusted Utilization measures.</li> <li>• Revised <i>Guideline 12: Measures With Special Considerations for Allowable Adjustments</i> to remove risk adjusted utilization measures from the list of measures that cannot be adjusted.</li> <li>• Added <i>Guideline 13: Allowable Adjustments to Risk Adjusted Utilization Measures</i>.</li> </ul>
<b>EFFECTIVENESS OF CARE</b>				
<b>Guidelines for Effectiveness of Care</b>	✓	✓	✓	<ul style="list-style-type: none"> <li>• Updated the <i>Note for Which Services Count?</i> to indicate how denied claims should be used for Deprescribing of Benzodiazepines in Older Adults.</li> </ul>
Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents (WCC)	✓	✓		<ul style="list-style-type: none"> <li>• Clarified that members in hospice or using hospice services anytime during the measurement year are a required exclusion.</li> <li>• Clarified in the <i>Notes</i> that services rendered during a telephone visit, e-visit or virtual check-in meet criteria for the BMI Percentile indicator.</li> <li>• Revised the Reporting Instructions for the “NumeratorByAdminElig” data element in Table WCC-1/2 to read “For each Metric and Stratification,” to indicate that the value is stratified.</li> <li>• Added required exclusions to the Rules for Allowable Adjustments.</li> </ul>
Childhood Immunization Status (CIS)	✓	✓		<ul style="list-style-type: none"> <li>• Clarified that members in hospice or using hospice services anytime during the measurement year are a required exclusion.</li> <li>• Revised optional exclusions for immunocompromising conditions (e.g., immunodeficiency) to be required exclusions.</li> <li>• Revised optional exclusions for anaphylaxis due to vaccine to be numerator compliant for specific indicators.</li> <li>• Updated value sets and logic for the MMR numerator, because single antigen vaccines are no longer used.</li> <li>• Added required exclusions and removed optional exclusions in the Rules for Allowable Adjustments.</li> </ul>
Immunizations for Adolescents (IMA)	✓	✓		<ul style="list-style-type: none"> <li>• Clarified that members in hospice or using hospice services anytime during the measurement year are a required exclusion.</li> </ul>

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				<ul style="list-style-type: none"> <li>Revised the optional exclusions for anaphylaxis due to vaccine to be numerator compliant for specific indicators.</li> <li>Clarified in the example for the two-dose HPV vaccination series that the second vaccine must be on or after July 25.</li> <li>Added required exclusions and removed optional exclusions in the Rules for Allowable Adjustments.</li> </ul>
Lead Screening in Children (LSC)		✓		<ul style="list-style-type: none"> <li>Clarified that members in hospice or using hospice services anytime during the measurement year are a required exclusion.</li> <li>Added required exclusions to the Rules for Allowable Adjustments.</li> </ul>
Breast Cancer Screening (BCS)	✓	✓	✓	<ul style="list-style-type: none"> <li>Clarified that members in hospice or using hospice services anytime during the measurement year are a required exclusion.</li> <li>Clarified in <i>Optional exclusions</i> that unilateral mastectomy and bilateral modifier must be from the same procedure.</li> </ul>
Cervical Cancer Screening (CCS)	✓	✓		<ul style="list-style-type: none"> <li>Clarified that members in hospice or using hospice services anytime during the measurement year are a required exclusion.</li> </ul>
Colorectal Cancer Screening (COL)	✓		✓	<ul style="list-style-type: none"> <li>Clarified that members in hospice or using hospice services anytime during the measurement year are a required exclusion.</li> <li>Added instructions to report rates stratified by race and ethnicity for each product line.</li> <li>Revised the Reporting Instructions for the "NumeratorByAdminElig" data element in <i>Table COL-A-3: Data Elements for Colorectal Cancer Screening</i> to "For each Stratification" to indicate that it is a stratified value.</li> <li>Added new data elements tables for race and ethnicity stratification reporting.</li> </ul>
Chlamydia Screening in Women (CHL)	✓	✓		<ul style="list-style-type: none"> <li>Clarified that members in hospice or using hospice services anytime during the measurement year are a required exclusion.</li> <li>Added required exclusions to the Rules for Allowable Adjustments.</li> </ul>
Care for Older Adults (COA)			✓ (SNP and MMP only)	<ul style="list-style-type: none"> <li>Removed the Advance Care Planning indicator.</li> <li>Clarified that members in hospice or using hospice services anytime during the measurement year are a required exclusion.</li> <li>Added required exclusions to the Rules for Allowable Adjustments.</li> </ul>
Appropriate Testing for Pharyngitis (CWP)	✓	✓	✓	<ul style="list-style-type: none"> <li>Added step 8 to the event/diagnosis.</li> </ul>

**4 Summary Table of Measures, Product Lines and Changes**

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	Commercial	Medicaid	Medicare	
				<ul style="list-style-type: none"> <li>• Clarified that members in hospice or using hospice services anytime during the measurement year are a required exclusion.</li> <li>• Standardized medication names in the medication tables (this change does not impact drugs that are included in the Medication List Directory).</li> <li>• Removed “Dicloxacillin” from the <u>CWP Antibiotics Medications List</u>.</li> <li>• Clarified allowable adjustments to event/diagnosis criteria in the Rules for Allowable Adjustments.</li> <li>• Added required exclusions to the Rules for Allowable Adjustments.</li> </ul>
Use of Spirometry Testing in the Assessment and Diagnosis of COPD (SPR)	✓	✓	✓	<ul style="list-style-type: none"> <li>• Clarified that members in hospice or using hospice services anytime during the measurement year are a required exclusion.</li> <li>• Clarified allowable adjustments to event/diagnosis criteria in the Rules for Allowable Adjustments.</li> <li>• Added required exclusions to the Rules for Allowable Adjustments.</li> </ul>
Pharmacotherapy Management of COPD Exacerbation (PCE)	✓	✓	✓	<ul style="list-style-type: none"> <li>• Clarified that members in hospice or using hospice services anytime during the measurement year are a required exclusion.</li> <li>• Moved Olodaterol from the “Bronchodilator combinations” description to the “Beta 2-agonists” description in the <u>Bronchodilator Medications List</u>.</li> <li>• Clarified allowable adjustments to event/diagnosis criteria in the Rules for Allowable Adjustments.</li> <li>• Added required exclusions to the Rules for Allowable Adjustments.</li> </ul>
Asthma Medication Ratio (AMR)	✓	✓		<ul style="list-style-type: none"> <li>• Clarified that members in hospice or using hospice services anytime during the measurement year are a required exclusion.</li> <li>• Clarified allowable adjustments to event/diagnosis criteria in the Rules for Allowable Adjustments.</li> <li>• Updated the exclusions criteria in the Rules for Allowable Adjustments.</li> </ul>
Controlling High Blood Pressure (CBP)	✓	✓	✓	<ul style="list-style-type: none"> <li>• Clarified that members in hospice or using hospice services anytime during the measurement year are a required exclusion.</li> <li>• Added instructions to report rates stratified by race and ethnicity for each product line.</li> <li>• Updated the Administrative Specification to make it consistent with the Hybrid Specification; replaced the visit type requirement with a visit type exclusion.</li> </ul>

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	Commercial	Medicaid	Medicare	
				<ul style="list-style-type: none"> <li>• Clarified in the numerator of the Hybrid Specification that BP readings taken by the member are eligible for use in reporting.</li> <li>• Clarified in the numerator of the Hybrid Specification that ranges and thresholds do not meet criteria.</li> <li>• Clarified in the numerator of the Hybrid Specification that a BP documented as an “average BP” (e.g., “average BP: 139/70”) is eligible for use.</li> <li>• Added new data elements tables for race and ethnicity stratification reporting.</li> </ul>
Persistence of Beta-Blocker Treatment After a Heart Attack (PBH)	✓	✓	✓	<ul style="list-style-type: none"> <li>• Corrected the example in the definition of <i>treatment days (covered days)</i>.</li> <li>• Clarified that members in hospice or using hospice services anytime during the measurement year are a required exclusion.</li> <li>• Clarified allowable adjustments to event/diagnosis criteria in the Rules for Allowable Adjustments.</li> <li>• Added required exclusions to the Rules for Allowable Adjustments.</li> </ul>
Statin Therapy for Patients With Cardiovascular Disease (SPC)	✓	✓	✓	<ul style="list-style-type: none"> <li>• Clarified that members in hospice or using hospice services anytime during the measurement year are a required exclusion.</li> </ul>
Cardiac Rehabilitation (CRE)	✓	✓	✓	<ul style="list-style-type: none"> <li>• Clarified that members in hospice or using hospice services anytime during the measurement year are a required exclusion.</li> </ul>
Hemoglobin A1c Control for Patients With Diabetes (HBD)	✓	✓	✓	<ul style="list-style-type: none"> <li>• This measure resulted from the separation of indicators that replaces the former Comprehensive Diabetes Care measure.</li> <li>• Removed the <i>Hemoglobin A1c (HbA1c) Testing</i> indicator.</li> <li>• Clarified that members in hospice or using hospice services any time during the measurement year are a required exclusion.</li> <li>• Added instructions to report rates stratified by race and ethnicity for each product line.</li> <li>• Revised the optional exclusions for polycystic ovarian syndrome, gestational diabetes or steroid-induced diabetes to be required exclusions.</li> <li>• Updated the Hybrid Specification to clarify the rules for sample size reduction.</li> <li>• Added new data elements tables for race and ethnicity stratification reporting.</li> <li>• Updated the required exclusions criteria and removed optional exclusions in the Rules for Allowable Adjustments.</li> </ul>

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Blood Pressure Control for Patients With Diabetes (BPD)	✓	✓	✓	<ul style="list-style-type: none"> <li>• This measure resulted from the separation of indicators that replaces the former Comprehensive Diabetes Care measure.</li> <li>• Clarified that members in hospice or using hospice services anytime during the measurement year are a required exclusion.</li> <li>• Revised the optional exclusions for polycystic ovarian syndrome, gestational diabetes or steroid-induced diabetes to be required exclusions.</li> <li>• Updated the Administrative Specification to make it consistent with the Hybrid Specification; replaced the visit type requirement with a visit type exclusion.</li> <li>• Updated the Hybrid Specification to clarify the rules for sample size reduction.</li> <li>• Clarified in the numerator of the Hybrid Specification that BP readings taken by the member are eligible for use in reporting.</li> <li>• Clarified in the numerator of the Hybrid Specification that ranges and thresholds do not meet criteria.</li> <li>• Clarified in the numerator of the Hybrid Specification that a BP documented as an “average BP” (e.g., “average BP: 139/70”) is eligible for use.</li> <li>• Updated the required exclusions criteria and removed optional exclusions in the Rules for Allowable Adjustments.</li> </ul>
Eye Exam for Patients With Diabetes (EED)	✓	✓	✓	<ul style="list-style-type: none"> <li>• This measure resulted from the separation of indicators that replaces the former Comprehensive Diabetes Care measure.</li> <li>• Clarified that members in hospice or using hospice services anytime during the measurement year are a required exclusion.</li> <li>• Revised the optional exclusions for polycystic ovarian syndrome, gestational diabetes or steroid-induced diabetes to be required exclusions.</li> <li>• Updated the Hybrid Specification to clarify the rules for sample size reduction.</li> <li>• Revised the Reporting Instructions for the “NumeratorByAdminElig” data element in Table EED-3: Data Elements for Eye Exam for Patients With Diabetes to “For each Stratification” to indicate that it is a stratified value.</li> <li>• Updated the required exclusions criteria and removed optional exclusions in the Rules for Allowable Adjustments.</li> </ul>
Kidney Health Evaluation for Patients With Diabetes (KED)	✓	✓	✓	<ul style="list-style-type: none"> <li>• Clarified that members in hospice or using hospice services anytime during the measurement year are a required exclusion.</li> </ul>

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Statin Therapy for Patients With Diabetes (SPD)	✓	✓	✓	<ul style="list-style-type: none"> <li>Clarified that members in hospice or using hospice services anytime during the measurement year are a required exclusion.</li> <li>Clarified allowable adjustments to event/diagnosis criteria in the Rules for Allowable Adjustments.</li> </ul>
Osteoporosis Management in Women Who Had a Fracture (OMW)			✓	<ul style="list-style-type: none"> <li>Clarified that members in hospice or using hospice services anytime during the measurement year are a required exclusion.</li> <li>Clarified allowable adjustments to event/diagnosis criteria in the Rules for Allowable Adjustments.</li> </ul>
Osteoporosis Screening in Older Women (OSW)			✓	<ul style="list-style-type: none"> <li>Clarified that members in hospice or using hospice services anytime during the measurement year are a required exclusion.</li> </ul>
Diagnosed Mental Health Disorders (DMH)	✓	✓	✓	<ul style="list-style-type: none"> <li>Revised the measure's name from <i>Mental Health Utilization</i> to <i>Diagnosed Mental Health Disorders</i>.</li> <li>Moved the measure from the Utilization domain to the Effectiveness of Care domain.</li> <li>Revised the measure from a utilization measure to a diagnosed prevalence measure.</li> <li>Changed the measure from a member-months measure to a member-based measure.</li> <li>Combined the "0–12" and "13–17" age stratifications.</li> <li>Removed stratified reporting based on eligibility categories for Medicaid.</li> <li>Clarified that members in hospice or using hospice services anytime during the measurement year are a required exclusion.</li> <li>Removed the service setting stratifications.</li> <li>Removed procedure code requirements from the numerator.</li> <li>Removed mental health practitioner requirements from the numerator.</li> <li>Removed the requirement that the mental health diagnosis must be in the "principal" position.</li> <li>Revised the Rules for Allowable Adjustments.</li> </ul>
Antidepressant Medication Management (AMM)	✓	✓	✓	<ul style="list-style-type: none"> <li>Corrected the example in the definition of <i>treatment days</i>.</li> <li>Clarified that members in hospice or using hospice services anytime during the measurement year are a required exclusion.</li> <li>Clarified allowable adjustments to event/diagnosis criteria in the Rules for Allowable Adjustments.</li> </ul>

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	Commercial	Medicaid	Medicare	
				<ul style="list-style-type: none"> <li>Updated the exclusions criteria in the Rules for Allowable Adjustments.</li> </ul>
Follow-Up Care for Children Prescribed ADHD Medication (ADD)	✓	✓		<ul style="list-style-type: none"> <li>Removed the definition of <i>new episode</i>.</li> <li>Corrected the example in the definition of <i>treatment days (covered days)</i>.</li> <li>Updated the time frame for continuous medication treatment to include dispensing events on the IPSD in the count of treatment days.</li> <li>Revised the optional exclusion for narcolepsy to a required exclusion and updated the Data Element Table to indicate that this exclusion is only reported for Rate 1.</li> <li>Clarified that members in hospice or using hospice services anytime during the measurement year are a required exclusion.</li> <li>Clarified allowable adjustments to event/diagnosis criteria in the Rules for Allowable Adjustments.</li> <li>Added required exclusions and removed optional exclusions in the Rules for Allowable Adjustments.</li> <li>Removed adjustments to the Continuation and Management Phase in the Rules for Allowable Adjustments.</li> </ul>
Follow-Up After Hospitalization for Mental Illness (FUH)	✓	✓	✓	<ul style="list-style-type: none"> <li>Updated the steps for identifying acute readmission or direct transfer in the event/diagnosis.</li> <li>Clarified that members in hospice or using hospice services anytime during the measurement year are a required exclusion.</li> <li>Added psychiatric collaborative care management to the numerator.</li> <li>Added required exclusions to the Rules for Allowable Adjustments.</li> </ul>
Follow-Up After Emergency Department Visit for Mental Illness (FUM)	✓	✓	✓	<ul style="list-style-type: none"> <li>Clarified that members in hospice or using hospice services anytime during the measurement year are a required exclusion.</li> <li>Added required exclusions to the Rules for Allowable Adjustments.</li> </ul>
Diagnosed Substance Use Disorders (DSU)	✓	✓	✓	<ul style="list-style-type: none"> <li>Revised the measure's name from <i>Identification of Alcohol and Other Drug Use Services</i> to <i>Diagnosed Substance Use Disorders</i>.</li> <li>Moved the measure from the Utilization domain to the Effectiveness of Care domain.</li> <li>Revised the measure from a utilization measure to a diagnosed prevalence measure.</li> <li>Changed the measure from a member-months measure to a member-based measure.</li> <li>Aligned the diagnosis codes in the measure with those used in the Initiation and Engagement of Substance Use Disorder Treatment measure.</li> </ul>



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				<ul style="list-style-type: none"> <li>Removed the service setting stratifications.</li> <li>Collapsed age stratifications to report three age groups and a total group: “13–17,” “18–64,” “65 and older” and “Total.”</li> <li>Removed stratified reporting based on eligibility categories for Medicaid.</li> <li>Clarified that members in hospice or using hospice services anytime during the measurement year are a required exclusion.</li> <li>Removed procedure code requirements from the numerator.</li> <li>Revised the Rules for Allowable Adjustments section.</li> </ul>
Follow-Up After High Intensity Care for Substance Use Disorder (FUI)	✓	✓	✓	<ul style="list-style-type: none"> <li>Clarified that members in hospice or using hospice services anytime during the measurement year are a required exclusion.</li> <li>Restructured the numerator logic and value sets.</li> <li>Added required exclusions to the Rules for Allowable Adjustments.</li> </ul>
Follow-Up After Emergency Department Visit for Substance Use (FUA)	✓	✓	✓	<ul style="list-style-type: none"> <li>Revised the measure name from <i>Follow-Up After Emergency Department Visit for Alcohol and Other Drug Abuse or Dependence</i> to <i>Follow-Up After Emergency Department Visit for Substance Use</i>.</li> <li>Revised terminology from “alcohol or other drug abuse or dependence (AOD)” to “substance use” or substance use disorder (SUD).”</li> <li>Clarified that members in hospice or using hospice services anytime during the measurement year are a required exclusion.</li> <li>Added a pharmacy benefit requirement.</li> <li>Added ED visits with a diagnosis of unintentional and undetermined drug overdose to the denominator.</li> <li>Revised and restructured the numerator logic and value sets.</li> <li>Added required exclusions in the Rules for Allowable Adjustments.</li> </ul>
Pharmacotherapy for Opioid Use Disorder (POD)	✓	✓	✓	<ul style="list-style-type: none"> <li>Clarified that members in hospice or using hospice services anytime during the measurement year are a required exclusion.</li> <li>Clarified in step 4 of the event/diagnosis to count overlapping direct transfer days only once and added an example.</li> <li>Added required exclusions to the Rules for Allowable Adjustments.</li> </ul>

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	Commercial	Medicaid	Medicare	
Diabetes Screening for People With Schizophrenia or Bipolar Disorder Who Are Using Antipsychotic Medications (SSD)		✓		<ul style="list-style-type: none"> <li>• Clarified that members in hospice or using hospice services anytime during the measurement year are a required exclusion.</li> <li>• Updated the exclusions criteria in the Rules for Allowable Adjustments.</li> </ul>
Diabetes Monitoring for People With Diabetes and Schizophrenia (SMD)		✓		<ul style="list-style-type: none"> <li>• Clarified that members in hospice or using hospice services anytime during the measurement year are a required exclusion.</li> <li>• Added required exclusions to the Rules for Allowable Adjustments.</li> </ul>
Cardiovascular Monitoring for People With Cardiovascular Disease and Schizophrenia (SMC)		✓		<ul style="list-style-type: none"> <li>• Clarified that members in hospice or using hospice services anytime during the measurement year are a required exclusion.</li> <li>• Added required exclusions to the Rules for Allowable Adjustments.</li> </ul>
Adherence to Antipsychotic Medications for Individuals With Schizophrenia (SAA)	✓	✓	✓	<ul style="list-style-type: none"> <li>• Clarified that members in hospice or using hospice services anytime during the measurement year are a required exclusion.</li> <li>• Replaced language specific to “J codes or NDCs” with generic language as the value sets and medications lists are not limited to these codes.</li> <li>• Clarified allowable adjustments to event/diagnosis criteria in the Rules for Allowable Adjustments.</li> <li>• Updated the exclusions criteria in the Rules for Allowable Adjustments.</li> <li>• Clarified allowable adjustments to numerator criteria in the Rules for Allowable Adjustments.</li> </ul>
Metabolic Monitoring for Children and Adolescents on Antipsychotics (APM)	✓	✓		<ul style="list-style-type: none"> <li>• Clarified that members in hospice or using hospice services anytime during the measurement year are a required exclusion.</li> <li>• Added required exclusions to the Rules for Allowable Adjustments.</li> </ul>
Advance Care Planning (ACP)			✓	<ul style="list-style-type: none"> <li>• This is a first-year measure.</li> </ul>
Transitions of Care (TRC)			✓	<ul style="list-style-type: none"> <li>• Clarified that members in hospice or using hospice services anytime during the measurement year are a required exclusion.</li> <li>• Added physician assistant as an appropriate provider type to perform a medication reconciliation for the Medication Reconciliation Post-Discharge indicator.</li> <li>• Clarified in the <i>Notes</i> that documentation of “post-op/surgery follow-up” without a reference to “hospitalization,” “admission” or “inpatient stay” does not meet criteria for the fifth bullet of the Medication Reconciliation Post-Discharge indicator.</li> </ul>

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				<ul style="list-style-type: none"> <li>Revised the Reporting Instructions for the “NumeratorByAdminElig” data element in Table TRC-3: Data Elements for Transitions of Care to “For each Metric and Stratification” to indicate that it is a stratified value.</li> <li>Added required exclusions to the Rules for Allowable Adjustments.</li> <li>Clarified allowable adjustments to the numerator criteria in the Rules for Allowable Adjustments.</li> </ul>
Follow-Up After Emergency Department Visit for People With Multiple High-Risk Chronic Conditions (FMC)			✓	<ul style="list-style-type: none"> <li>Clarified that members in hospice or using hospice services anytime during the measurement year are a required exclusion.</li> <li>Added required exclusions to the Rules for Allowable Adjustments.</li> </ul>
Non-Recommended Cervical Cancer Screening in Adolescent Females (NCS)	✓	✓		<ul style="list-style-type: none"> <li>Clarified that members in hospice or using hospice services anytime during the measurement year are a required exclusion.</li> <li>Updated the exclusions criteria in the Rules for Allowable Adjustments.</li> </ul>
Non-Recommended PSA-Based Screening in Older Men (PSA)			✓	<ul style="list-style-type: none"> <li>Clarified that members in hospice or using hospice services anytime during the measurement year are a required exclusion.</li> <li>Updated the exclusions criteria in the Rules for Allowable Adjustments.</li> </ul>
Appropriate Treatment for Upper Respiratory Infection (URI)	✓	✓	✓	<ul style="list-style-type: none"> <li>Clarified that members in hospice or using hospice services anytime during the measurement year are a required exclusion.</li> <li>Replaced all references to “<u>CWP Antibiotic Medications List</u>” with “<u>AAB Antibiotic Medications List</u>.”</li> <li>Standardized medication names in the medication tables (this change does not impact drugs that are included in the Medication List Directory).</li> <li>Added required exclusions to the Rules for Allowable Adjustments.</li> </ul>
Avoidance of Antibiotic Treatment for Acute Bronchitis/Bronchiolitis (AAB)	✓	✓	✓	<ul style="list-style-type: none"> <li>Clarified that members in hospice or using hospice services anytime during the measurement year are a required exclusion.</li> <li>Standardized medication names in the medication tables (this change does not impact drugs that are included in the Medication List Directory).</li> <li>Added required exclusions to the Rules for Allowable Adjustments.</li> </ul>
Use of Imaging Studies for Low Back Pain (LBP)	✓	✓	✓	<ul style="list-style-type: none"> <li>Added the Medicare product line.</li> <li>Expanded the age range to increase the upper age limit to 75 years.</li> <li>Added age stratifications.</li> </ul>

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				<ul style="list-style-type: none"> <li>Added required exclusions for osteoporosis, lumbar surgery, spondylopathy, fragility fractures and palliative care.</li> <li>Clarified that members in hospice or using hospice services anytime during the measurement year are a required exclusion.</li> <li>Added exclusions for members with advanced illness and frailty.</li> <li>Updated the exclusions criteria in the Rules for Allowable Adjustments.</li> </ul>
Potentially Harmful Drug-Disease Interactions in Older Adults (DDE)			✓	<ul style="list-style-type: none"> <li>Clarified that members in hospice or using hospice services anytime during the measurement year are a required exclusion.</li> <li>Standardized medication names in the medication tables (this change does not impact drugs that are included in the Medication List Directory).</li> </ul>
Use of High-Risk Medications in Older Adults (DAE)			✓	<ul style="list-style-type: none"> <li>Clarified that members in hospice or using hospice services anytime during the measurement year are a required exclusion.</li> <li>Standardized medication names in the medication tables (this change does not impact drugs that are included in the Medication List Directory).</li> </ul>
Deprescribing of Benzodiazepines in Older Adults (DBO)			✓	<ul style="list-style-type: none"> <li>This is a first-year measure.</li> </ul>
Use of Opioids at High Dosage (HDO)	✓	✓	✓	<ul style="list-style-type: none"> <li>Clarified that members in hospice or using hospice services anytime during the measurement year are a required exclusion.</li> </ul>
Use of Opioids From Multiple Providers (UOP)	✓	✓	✓	<ul style="list-style-type: none"> <li>Clarified that members in hospice or using hospice services anytime during the measurement year are a required exclusion.</li> <li>Added required exclusions to the Rules for Allowable Adjustments.</li> </ul>
Risk of Continued Opioid Use (COU)	✓	✓	✓	<ul style="list-style-type: none"> <li>Clarified that members in hospice or using hospice services anytime during the measurement year are a required exclusion.</li> </ul>
Medicare Health Outcomes Survey (HOS)			✓	<ul style="list-style-type: none"> <li>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>.</li> </ul>
Fall Risk Management (FRM)			✓	<ul style="list-style-type: none"> <li>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>.</li> </ul>

HEDIS MY 2022 Measures	Applicable to:			Changes for HEDIS MY 2022
	Commercial	Medicaid	Medicare	
Management of Urinary Incontinence in Older Adults (MUI)			✓	<ul style="list-style-type: none"> <li>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>.</li> </ul>
Physical Activity in Older Adults (PAO)			✓	<ul style="list-style-type: none"> <li>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>.</li> </ul>
Flu Vaccinations for Adults Ages 18-64 (FVA)	✓	✓		<ul style="list-style-type: none"> <li>No changes to this measure.</li> </ul>
Flu Vaccinations for Adults Ages 65 and Older (FVO)			✓	<ul style="list-style-type: none"> <li>No changes to this measure.</li> </ul>
Medical Assistance With Smoking and Tobacco Use Cessation (MSC)	✓	✓	✓	<ul style="list-style-type: none"> <li>No changes to this measure.</li> </ul>
Pneumococcal Vaccination Status for Older Adults (PNU)			✓	<ul style="list-style-type: none"> <li>No changes to this measure.</li> </ul>
<b>ACCESS/AVAILABILITY OF CARE</b>				
<b>Guidelines for Access/ Availability of Care</b>				<ul style="list-style-type: none"> <li>No changes to these guidelines.</li> </ul>
Adults' Access to Preventive/ Ambulatory Health Services (AAP)	✓	✓	✓	<ul style="list-style-type: none"> <li>Clarified that members in hospice or using hospice services anytime during the measurement year are a required exclusion.</li> <li>Added required exclusions to the Rules for Allowable Adjustments.</li> </ul>
Annual Dental Visit (ADV)		✓		<ul style="list-style-type: none"> <li>Clarified that members in hospice or using hospice services anytime during the measurement year are a required exclusion.</li> <li>Added required exclusions to the Rules for Allowable Adjustments.</li> </ul>
Initiation and Engagement of Substance Use Disorder Treatment (IET)	✓	✓	✓	<ul style="list-style-type: none"> <li>Replaced "alcohol and other drug (AOD)" references with "substance use disorder (SUD)."</li> <li>Changed the start of the Intake Period to November 15 of the year prior to the measurement year.</li> <li>Changed from a member-based measure to an SUD diagnosis episode-based measure.</li> <li>Revised the age stratifications.</li> </ul>

HEDIS MY 2022 Measures	Applicable to:			Changes for HEDIS MY 2022
	Commercial	Medicaid	Medicare	
				<ul style="list-style-type: none"> <li>Revised the negative diagnosis history from 60 days to 194 days.</li> <li>Added a Negative Medication History to the denominator.</li> <li>Revised the Continuous Enrollment criteria from 108 days to 242 days.</li> <li>Clarified that members in hospice or using hospice services any time during the measurement year are a required exclusion.</li> <li>Revised the numerator criteria for Initiation of SUD Treatment and Engagement of SUD Treatment.</li> <li>Added an <i>Other</i> section to the Rules for Allowable Adjustments.</li> <li>Clarified allowable adjustments to event/diagnosis criteria in the Rules for Allowable Adjustments.</li> <li>Added required exclusions to the Rules for Allowable Adjustments.</li> </ul>
Prenatal and Postpartum Care (PPC)	✓	✓		<ul style="list-style-type: none"> <li>Added instructions to report rates stratified by race and ethnicity for each product line.</li> <li>Removed the definition of <i>last enrollment segment</i> and clarified continuous enrollment requirements for steps 1 and 2 of the Timeliness of Prenatal Care numerator.</li> <li>Clarified that members in hospice or using hospice services anytime during the measurement year are a required exclusion.</li> <li>Clarified that services provided during a telephone visit, e-visit or virtual check-in may be used for Administrative and Hybrid collection methods.</li> <li>Added required exclusions to the Rules for Allowable Adjustments.</li> <li>Added new data elements tables for race and ethnicity stratification reporting.</li> </ul>
Use of First-Line Psychosocial Care for Children and Adolescents on Antipsychotics (APP)	✓	✓		<ul style="list-style-type: none"> <li>Clarified that members in hospice or using hospice services anytime during the measurement year are a required exclusion.</li> <li>Updated the exclusions criteria in the Rules for Allowable Adjustments.</li> </ul>
<b>EXPERIENCE OF CARE</b>				
CAHPS Health Plan Survey 5.1H, Adult Version (CPA)	✓	✓		<ul style="list-style-type: none"> <li>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>.</li> </ul>

HEDIS MY 2022 Measures	Applicable to:			Changes for HEDIS MY 2022
	Commercial	Medicaid	Medicare	
CAHPS Health Plan Survey 5.1H, Child Version (CPC)		✓		<ul style="list-style-type: none"> <li>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>.</li> </ul>
Children With Chronic Conditions (CCC)		✓		<ul style="list-style-type: none"> <li>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>.</li> </ul>
<b>UTILIZATION AND RISK ADJUSTED UTILIZATION</b>				
<b>Guidelines for Utilization</b>	✓	✓	✓	<ul style="list-style-type: none"> <li>Added the Antibiotic Utilization for Respiratory Conditions (ABX) measure to <i>General Guideline 2: Continuous enrollment criteria</i>.</li> <li>Removed stratified reporting using Medicaid eligibility categories.</li> <li>Updated the guidelines to indicate that IDSS produces data in member years format for all product lines and removed instructions for reporting visits and discharges by member months.</li> <li>Removed General Guideline 7: Medicaid eligibility reporting categories and General Guideline 10: Calculating member years and renumbered subsequent guidelines.</li> <li>Revised <i>General Guideline 8: Calculating member months</i> to align with the reformatting of the Data Elements for Reporting tables.</li> </ul>
Well-Child Visits in the First 30 Months of Life (W30)	✓	✓		<ul style="list-style-type: none"> <li>Clarified that members in hospice or using hospice services anytime during the measurement year are a required exclusion.</li> <li>Added required exclusions to the Rules for Allowable Adjustments.</li> <li>Added well-care visit stratifications to the Rules for Allowable Adjustments.</li> </ul>
Child and Adolescent Well-Care Visits (WCV)	✓	✓		<ul style="list-style-type: none"> <li>Added a <i>Note</i> in the Description to clarify that the Guidelines for Effectiveness of Care Measures should be used when calculating this measure.</li> <li>Clarified that members in hospice or using hospice services anytime during the measurement year are a required exclusion.</li> <li>Added instructions to report rates stratified by race and ethnicity for each product line.</li> <li>Added new data elements tables for race and ethnicity stratification reporting.</li> <li>Added required exclusions to the Rules for Allowable Adjustments.</li> </ul>
Frequency of Selected Procedures (FSP)	✓	✓	✓	<ul style="list-style-type: none"> <li>Clarified that members in hospice or using hospice services anytime during the measurement year are a required exclusion.</li> </ul>

HEDIS MY 2022 Measures	Applicable to:			Changes for HEDIS MY 2022
	Commercial	Medicaid	Medicare	
				<ul style="list-style-type: none"> <li>Updated the “Member Months” definition in the <i>Calculations</i> section to indicate that IDSS produces member years data for all product lines.</li> <li>Clarified the clinical components headers in the Rules for Allowable Adjustments.</li> <li>Added required exclusions to the Rules for Allowable Adjustments.</li> <li>Clarified allowable adjustments to the calculations criteria in the Rules for Allowable Adjustments.</li> </ul>
Ambulatory Care (AMB)		✓		<ul style="list-style-type: none"> <li>Clarified that members in hospice or using hospice services anytime during the measurement year are a required exclusion.</li> <li>Removed stratified reporting by Medicaid eligibility category.</li> <li>Updated the “Member Months” definition in Calculations to indicate that IDSS produces member years data for all product lines.</li> <li>Clarified in the Note that supplemental data may not be used for the mental health and chemical dependency required exclusion.</li> <li>Clarified the clinical components headers in the Rules for Allowable Adjustments.</li> <li>Added required exclusions to the Rules for Allowable Adjustments.</li> <li>Clarified allowable adjustments to the calculations criteria in the Rules for Allowable Adjustments.</li> </ul>
Inpatient Utilization—General Hospital/Acute Care (IPU)		✓		<ul style="list-style-type: none"> <li>Clarified that members in hospice or using hospice services anytime during the measurement year are a required exclusion.</li> <li>Removed stratified reporting by Medicaid eligibility category.</li> <li>Updated the “Member Months” definition in Calculations to indicate that IDSS produces member years data for all product lines.</li> <li>Clarified the clinical components headers in the Rules for Allowable Adjustments.</li> <li>Added required exclusions to the Rules for Allowable Adjustments.</li> <li>Clarified allowable adjustments to the calculations criteria in the Rules for Allowable Adjustments.</li> </ul>
Antibiotic Utilization for Respiratory Conditions (AXR)	✓	✓	✓	<ul style="list-style-type: none"> <li>This is a first-year measure.</li> </ul>
<b>Guidelines for Risk Adjusted Utilization</b>	✓	✓	✓	<ul style="list-style-type: none"> <li>Added instructions to Guideline 1 for confirming ED visits that do not result in an observation stay.</li> </ul>



HEDIS MY 2022 Measures	Applicable to:			Changes for HEDIS MY 2022
	Commercial	Medicaid	Medicare	
				<ul style="list-style-type: none"> <li>Added instructions to Guideline 5 for identifying admissions dates for observation stays without a recorded admission date.</li> </ul>
Plan All-Cause Readmissions (PCR)	✓	✓	✓	<ul style="list-style-type: none"> <li>Clarified that members in hospice or using hospice services anytime during the measurement year are a required exclusion.</li> <li>Added Rules for Allowable Adjustments of HEDIS.</li> </ul>
Hospitalization Following Discharge from a Skilled Nursing Facility (HFS)			✓	<ul style="list-style-type: none"> <li>Clarified that members in hospice or using hospice services anytime during the measurement year are a required exclusion.</li> <li>Added Rules for Allowable Adjustments of HEDIS.</li> </ul>
Acute Hospital Utilization (AHU)	✓		✓	<ul style="list-style-type: none"> <li>Removed surgery and medicine stratifications.</li> <li>Added a definition for <i>Planned Hospital Stay</i>.</li> <li>Clarified that members in hospice or using hospice services anytime during the measurement year are a required exclusion.</li> <li>Updated step 3 of the Calculation of Observed Events to specify that diagnoses must be found on the discharge claim.</li> <li>Added an exclusion to step 3 of Calculation of Observed Events to exclude planned hospital stays.</li> <li>Removed steps 6 and 7 from Calculation of Observed Events.</li> <li>Added calculation instructions for the O/E ratio.</li> <li>Added Rules for Allowable Adjustments of HEDIS.</li> </ul>
Emergency Department Utilization (EDU)	✓		✓	<ul style="list-style-type: none"> <li>Clarified that members in hospice or using hospice services anytime during the measurement year are a required exclusion.</li> <li>Added calculation instructions for the O/E ratio.</li> <li>Added Rules for Allowable Adjustments of HEDIS.</li> </ul>
Hospitalization for Potentially Preventable Complications (HPC)			✓	<ul style="list-style-type: none"> <li>Clarified that members in hospice or using hospice services anytime during the measurement year are a required exclusion.</li> <li>Added calculation instructions for the O/E ratio.</li> <li>Added Rules for Allowable Adjustments of HEDIS.</li> </ul>
<b>HEALTH PLAN DESCRIPTIVE INFORMATION</b>				
Enrollment by Product Line (ENP)	✓	✓	✓	<ul style="list-style-type: none"> <li>Removed stratified reporting by Medicaid eligibility category.</li> </ul>

HEDIS MY 2022 Measures	Applicable to:			Changes for HEDIS MY 2022
	Commercial	Medicaid	Medicare	
Language Diversity of Membership (LDM)	✓	✓	✓	<ul style="list-style-type: none"> <li>Updated the <i>Note</i> after Table LDM-B-1/2/3: Preferred Language Data.</li> </ul>
Race/Ethnicity Diversity of Membership (RDM)	✓	✓	✓	<ul style="list-style-type: none"> <li>Updated the measure to align with and reference <i>General Guideline 33: Race and Ethnicity (RES) Stratification</i>.</li> <li>Replaced detailed definitions of reporting categories with reference to General Guideline 33.</li> <li>Replaced tables RDM-A-1 (CMS Categories Crosswalked to HEDIS/OMB Race and Ethnicity) and RDM-A-2 (Combined Categories Crosswalked to HEDIS/OMB Race and Ethnicity) with reference to corresponding General Guideline 33 tables (RES-A-1/2/3 and RES-B-1/2/3, respectively).</li> <li>Updated “Declined” category label to “Asked but No Answer” to align with category labels in General Guideline 33.</li> <li>Updated Reporting Category notes to align with corresponding notes in General Guideline 33.</li> </ul>
<b>MEASURES REPORTED USING ELECTRONIC CLINICAL DATA SYSTEMS</b>				
<b>Guidelines for Measures Reported Using ECDS</b>	✓	✓	✓	<ul style="list-style-type: none"> <li>Added a disclaimer to the Description (formerly Guideline 8: Disclaimer for HEDIS Digital Measure Specifications).</li> <li>Switched the placement of Guideline 2 and Guideline 3.</li> <li>Updated the definition of QDE in Guideline 2: HEDIS Definitions and Requirements for ECDS Reporting.</li> <li>Added definitions for FHIR and Resources in Guideline 2: HEDIS Definitions and Requirements for ECDS Reporting.</li> <li>Removed the definition of QDM from Guideline 2: HEDIS Definitions and Requirements for ECDS Reporting.</li> <li>Updated Electronic Method in Guideline 3: Data Collection Methods.</li> <li>Updated the “Member-reported data” definition in <i>Guideline 4: Types of ECDS Data</i>.</li> <li>Updated Guideline 6: HEDIS Digital Measure Format.</li> <li>Updated Guideline 7: Presentation of Codes in HEDIS Digital Measures.</li> </ul>
Childhood Immunization Status (CIS-E)	✓	✓		<ul style="list-style-type: none"> <li>This is the first year the measure is reported using ECDS.</li> </ul>

HEDIS MY 2022 Measures	Applicable to:			Changes for HEDIS MY 2022
	Commercial	Medicaid	Medicare	
Immunizations for Adolescents (IMA-E)	✓	✓		<ul style="list-style-type: none"> <li>This is the first year the measure is reported using ECDS.</li> <li>Updated the logic for the measure to be expressed in FHIR.</li> <li>Refer to the <i>Technical Release Notes</i> file in the Digital Measures Package for a comprehensive list of changes.</li> </ul>
Breast Cancer Screening (BCS-E)	✓	✓	✓	<ul style="list-style-type: none"> <li>Updated the logic for the measure to be expressed in FHIR.</li> <li>Refer to the <i>Technical Release Notes</i> file in the Digital Measures Package for a comprehensive list of changes.</li> </ul>
Colorectal Cancer Screening (COL-E)	✓		✓	<ul style="list-style-type: none"> <li>Updated the logic for the measure to be expressed in FHIR.</li> <li>Added instructions to report rates stratified by race and ethnicity for each product line.</li> <li>Added new data elements tables for race and ethnicity stratification reporting.</li> <li>Refer to the <i>Technical Release Notes</i> file in the Digital Measures Package for a comprehensive list of changes.</li> </ul>
Follow-Up Care for Children Prescribed ADHD Medication (ADD-E)	✓	✓		<ul style="list-style-type: none"> <li>Updated the logic for the measure to be expressed in FHIR.</li> <li>Refer to the <i>Technical Release Notes</i> file in the Digital Measures Package for a comprehensive list of changes.</li> <li>Clarified allowable adjustments to event/diagnosis criteria in the Rules for Allowable Adjustments.</li> <li>Removed adjustments to the Continuation and Management Phase in the Rules for Allowable Adjustments.</li> </ul>
Metabolic Monitoring for Children and Adolescents on Antipsychotics (APM-E)	✓	✓		<ul style="list-style-type: none"> <li>This is the first year the measure is reported using ECDS.</li> <li>Updated the logic for the measure to be expressed in FHIR.</li> <li>Refer to the <i>Technical Release Notes</i> file in the Digital Measures Package for a comprehensive list of changes.</li> </ul>
Depression Screening and Follow-Up for Adolescents and Adults (DSF-E)	✓	✓	✓	<ul style="list-style-type: none"> <li>Updated the logic for the measure to be expressed in FHIR.</li> <li>Refer to the <i>Technical Release Notes</i> file in the Digital Measures Package for a comprehensive list of changes.</li> </ul>
Utilization of the PHQ-9 to Monitor Depression Symptoms for Adolescents and Adults (DMS-E)	✓	✓	✓	<ul style="list-style-type: none"> <li>Updated the logic for the measure to be expressed in FHIR.</li> <li>Refer to the <i>Technical Release Notes</i> file in the Digital Measures Package for a comprehensive list of changes.</li> </ul>

HEDIS MY 2022 Measures	Applicable to:			Changes for HEDIS MY 2022
	Commercial	Medicaid	Medicare	
Depression Remission or Response for Adolescents and Adults (DRR-E)	✓	✓	✓	<ul style="list-style-type: none"> <li>Updated the logic for the measure to be expressed in FHIR.</li> <li>Refer to the <i>Technical Release Notes</i> file in the Digital Measures Package for a comprehensive list of changes.</li> </ul>
Unhealthy Alcohol Use Screening and Follow-Up (ASF-E)	✓	✓	✓	<ul style="list-style-type: none"> <li>Updated the logic for the measure to be expressed in FHIR.</li> <li>Refer to the <i>Technical Release Notes</i> file in the Digital Measures Package for a comprehensive list of changes.</li> </ul>
Adult Immunization Status (AIS-E)	✓	✓	✓	<ul style="list-style-type: none"> <li>Updated the logic for the measure to be expressed in FHIR.</li> <li>Removed the collection of the “Initial Population” data element by SSoR in the Data Elements for Reporting tables.</li> <li>Refer to the <i>Technical Release Notes</i> file in the Digital Measures Package for a comprehensive list of changes.</li> </ul>
Prenatal Immunization Status (PRS-E)	✓	✓		<ul style="list-style-type: none"> <li>Updated the logic for the measure to be expressed in FHIR.</li> <li>Refer to the <i>Technical Release Notes</i> file in the Digital Measures Package for a comprehensive list of changes.</li> </ul>
Prenatal Depression Screening and Follow-Up (PND-E)	✓	✓		<ul style="list-style-type: none"> <li>Updated the logic for the measure to be expressed in FHIR.</li> <li>Refer to the <i>Technical Release Notes</i> file in the Digital Measures Package for a comprehensive list of changes.</li> </ul>
Postpartum Depression Screening and Follow-Up (PDS-E)	✓	✓		<ul style="list-style-type: none"> <li>Updated the logic for the measure to be expressed in FHIR.</li> <li>Refer to the <i>Technical Release Notes</i> file in the Digital Measures Package for a comprehensive list of changes.</li> </ul>