



For Public Comment
November 9, 2021–January 10, 2022
Comments due 11:59 p.m. ET
January 10, 2022

Overview of Proposed Measure Updates

Health Plan Ratings 2023

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Health Plan Ratings 2023: Overview of Proposed Measure Updates

Our Mission: Improve the Quality of Health Care

NCQA is dedicated to improving health care quality.

For more than 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 191 million Americans are enrolled in an 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, are clearly articulated, and to highlight areas that might need clarification.

HEDIS/CAHPS Update for Health Plan Ratings Scoring in 2023

This public comment seeks feedback on proposed measure changes for the required measures list for 2023 Health Plan Ratings, using results from HEDIS measurement year (MY) 2022.

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 Measure Selection Criteria when determining 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 selection criteria:

1. Measure exhibits desirable statistical properties.

- *Reliable.* A reliable measure is 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%.

- **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”, the plan either reports a valid rate (e.g., the auditor deems it valid and between 0% and 100% performance) or the plan fails to submit (not reported, receiving a 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, risk-adjusted utilization or patient experience of health care practices.

This criterion eliminated 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., 15-day and 31-day rates in the *Risk of Continued Opioid Use* measure), choose the measure closest to the ultimate clinical outcome.

Recommendations

1. Revise the following measures/indicators.

		Commercial	Medicare	Medicaid
<i>Replace this measure/indicator:</i>	<i>With this measure/indicator:</i>			
Comprehensive Diabetes Care (CDC)—BP Control <140/90	Blood Pressure Control for Patients with Diabetes (BPD)	✓	✓	✓
Comprehensive Diabetes Care (CDC)—Eye Exams	Eye Exam for Patients with Diabetes (EED)	✓	✓	✓
Comprehensive Diabetes Care (CDC)—HbA1c Control <8%	Hemoglobin A1c Control for Patients with Diabetes (HBD)—HbA1c Control <8%	✓	✓	✓
Use of High-Risk Medications in Older Adults (DAE)—Rate 1	Use of High-Risk Medications in Older Adults (DAE)—Rate 3	Not applicable	✓	Not applicable

Overview of Proposed Changes—Updates to HPR 2023 HEDIS/CAHPS Measure List

2. Add the following new measures.

Measure		Commercial	Medicare	Medicaid
KED	Kidney Health Evaluation for Patients With Diabetes	✓	✓	✓
OSW	Osteoporosis Screening in Older Women	Not applicable	✓	Not applicable
CWP	Appropriate Testing for Pharyngitis	✓ <i>(currently in HPR)</i>	✓	✓ <i>(currently in HPR)</i>
URI	Appropriate Treatment for Upper Respiratory Infection	✓ <i>(currently in HPR)</i>	✓	✓ <i>(currently in HPR)</i>
AAB	Avoidance of Antibiotic Treatment for Acute Bronchitis/Bronchiolitis	✓ <i>(currently in HPR)</i>	✓	✓ <i>(currently in HPR)</i>
RDM	Race/Ethnicity Diversity of Membership	✓	✓	✓

Refer to [Appendix 1: Proposed HEDIS/CAHPS Updates for 2023 Health Plan Ratings](#) for the rationale for measure inclusion.

Targeted Questions

1. Do you support NCQA's recommendation to replace the *Comprehensive Diabetes Care: BP Control, Eye Exams, HbA1c Control* indicators with the following standalone measures for the 2023 Health Plan Ratings for all three product lines:
 - *Blood Pressure Control for Patients with Diabetes (BPD)*
 - *Eye Exam for Patients with Diabetes (EED)*
 - *Hemoglobin A1c Control for Patients with Diabetes (HBD)—HbA1c Control*

If you do not, please explain.

2. Do you support NCQA's recommendation to replace the Rate 1 indicator of the *Use of High-Risk Medications in Older Adults (DAE)* measure with the Rate 3 indicator in the 2023 Health Plan Ratings for the Medicare product line? If you do not, please explain.
 3. Do you support NCQA's recommendation to add the *Kidney Health Evaluation for Patients With Diabetes (KED)* measure to 2023 Health Plan Ratings for all three product lines? If you do not, please explain.
 4. Do you support NCQA's recommendation to add the *Osteoporosis Screening in Older Women (OSW)* measure to 2023 Health Plan Ratings for the Medicare product line? If you do not, please explain.
 5. Do you support NCQA's recommendation to add the following measures to the 2023 Health Plan Ratings for the Medicare product line:
 - *Appropriate Testing for Pharyngitis (CWP)*
 - *Appropriate Treatment for Upper Respiratory Infection (URI)*
 - *Avoidance of Antibiotic Treatment for Acute Bronchitis/Bronchiolitis (AAB)*
- If you do not, please explain.
6. Do you support NCQA's recommendation to add the *Race/Ethnicity Diversity of Membership (RDM)* measure to 2023 Health Plan Ratings for all three product lines? If you do not, please explain.
 7. Do you have any additional feedback regarding 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.

How to Submit Comments

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 "**Proposed Updates to Health Plan Ratings (HPR) 2023**" from the drop-down box.
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 Monday, January 10, by 11:59 p.m. ET

Next Steps

The methodology and final set of required HEDIS/CAHPS measures for Health Plan Ratings in 2023 (for HEDIS MY 2022) will be released April 2022, following approval by the NCQA Standards Committee and the Board of Directors.