

April 1, 2024

Dear Colleague:

NCQA presents the *HEDIS^{®1} Measurement Year (MY) 2024 for the Quality Rating System (QRS): Technical Update*, which contains corrections, policy changes and clarifications to the *HEDIS MY 2024 for QRS: Measure Technical Specifications*. With this release, NCQA freezes the HEDIS for QRS measure technical specifications for MY 2024.

The final versions of the Medication List Directory (MLD), Value Set Directory (VSD) and Risk Adjustment Tables for MY 2024 reporting are available in the [NCQA Store](#).

- **Obtaining the MLD.** Changes to medications are included in the following table and in the [HEDIS MY 2024 Medication List Directory](#), available for free from the NCQA Store. If you previously ordered this product from the store, you can obtain the updated version by going to the [My Downloads](#) section of [My NCQA](#) and redownloading the file.
- **Obtaining the Risk Adjustment Tables.** The [HEDIS MY 2024 Risk Adjustment Tables](#) are available for download. Order them for free from the NCQA Store.
- **Obtaining the HEDIS MY 2024 for QRS VSD.** Changes to codes and value sets have been incorporated in the MY 2024 QRS HEDIS VSD, available for download. Order it for free from the [NCQA Store](#).

To obtain the HEDIS MY 2024 Technical Release Notes for the measures reported using ECDS, go to the [HEDIS webpage](#) and navigate to the **HEDIS Technical Resources--HEDIS Measurement Year 2024** dropdown menu. Under **Vol 1: Narrative**, click the fourth bullet entitled [HEDIS MY 2024 Technical Release Notes](#).

The [HEDIS Audit Timeline for MY 2024](#) is available on the NCQA website.

Changes listed in this document are required for HEDIS for QRS MY 2024 reporting. Review all items in the table below and incorporate them into your implementation processes. If information in this memo contradicts a previous response you received in [My NCQA](#), then the response is obsolete.

If you have questions about information included in the *Technical Update* or about other measure specifications, contact us through [My NCQA](#). We wish you a successful HEDIS data collection season!

Sincerely,

Jenna Barry, MPH
Assistant Director, Policy Measures

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Specification Updates

This document contains corrections, policy changes and clarifications to the *HEDIS MY 2024 for QRS: Measure Technical Specifications*. NCQA has identified the appropriate page number, measure/guideline and head/subtitle for each item.

Page	Measure/Guideline	Head/Subtitle	Update												
71	Appropriate Treatment for Upper Respiratory Infection	Event/Diagnosis—step 3	Replace the second sentence in this step with the following text: Remove episode dates where the member had a claim/encounter with any diagnosis for a comorbid condition (<u>Comorbid Conditions Value Set</u>) during the 365 days prior to or on the episode date.												
76	Asthma Medication Ratio	Event/Diagnosis—step 2	Replace the text in step 2 with the following text: A member identified as having persistent asthma because of at least four asthma medication dispensing events, where leukotriene modifiers or antibody inhibitors were the sole asthma medication dispensed in that year, must also have at least one diagnosis of asthma (<u>Asthma Value Set</u>) in the same year as the leukotriene modifier or antibody inhibitor (the measurement year or the year prior to the measurement year). Do not include laboratory claims (claims with POS code 81).												
78	Asthma Medication Ratio	Asthma Controller Medications table	<p>Add the following rows to the end of the table:</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tbody> <tr> <td style="width: 30%;">Long-acting beta2-adrenergic agonist (LABA)</td> <td style="width: 20%;">• Fluticasone furoate-umeclidinium-vilanterol</td> <td style="width: 30%;">Fluticasone Furoate Umeclidinium Vilanterol Medications List</td> <td style="width: 20%;">Inhalation</td> </tr> <tr> <td>Long-acting beta2-adrenergic agonist (LABA)</td> <td>• Salmeterol</td> <td>Salmeterol Medications List</td> <td>Inhalation</td> </tr> <tr> <td>Long-acting muscarinic antagonists (LAMA)</td> <td>• Tiotropium</td> <td>Tiotropium Medications List</td> <td>Inhalation</td> </tr> </tbody> </table>	Long-acting beta2-adrenergic agonist (LABA)	• Fluticasone furoate-umeclidinium-vilanterol	Fluticasone Furoate Umeclidinium Vilanterol Medications List	Inhalation	Long-acting beta2-adrenergic agonist (LABA)	• Salmeterol	Salmeterol Medications List	Inhalation	Long-acting muscarinic antagonists (LAMA)	• Tiotropium	Tiotropium Medications List	Inhalation
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Long-acting beta2-adrenergic agonist (LABA)	• Salmeterol	Salmeterol Medications List	Inhalation												
Long-acting muscarinic antagonists (LAMA)	• Tiotropium	Tiotropium Medications List	Inhalation												
81	Avoidance of Antibiotic Treatment for Acute Bronchitis/Bronchiolitis	Event/Diagnosis—step 3	Replace the second sentence in this step with the following text: Remove episode dates where the member had a claim/encounter with any diagnosis for a comorbid condition (<u>Comorbid Conditions Value Set</u>) during the 365 days prior to or on the episode date.												
91	Childhood Immunization Status	Eligible Population—Continuous Enrollment	Replace the continuous enrollment criteria with the following text: 365 days prior to the child’s second birthday through the child’s second birthday.												
110	Eye Exam for Patient with Diabetes	Event/Diagnosis	Add the following text to the end of the second and third paragraphs: Do not include laboratory claims (claims with POS code 81).												
125	Glycemic Status Assessment for Patients With Diabetes	Numerators—Glycemic Status >9%	Replace the second sentence in the paragraph with the following text: Do not include CPT Category II codes (<u>HbA1c Test Result or Finding Value Set</u>) with a modifier (<u>CPT CAT II Modifier Value Set</u>) or from laboratory claims (claims with POS code 81).												

Page	Measure/Guideline	Head/Subtitle	Update																								
129	Immunizations for Adolescents	Eligible Population—Continuous Enrollment	Replace the continuous enrollment criteria with the following text: 365 days prior to the member’s 13th birthday through the member’s 13th birthday.																								
137	Initiation and Engagement of Substance Use Disorder Treatment	Event/Diagnosis—step 2	Replace the first paragraph with the following: Test for negative SUD diagnosis history. Remove SUD episodes if the member had an SUD diagnosis (<u>Alcohol Abuse and Dependence Value Set</u> , <u>Opioid Abuse and Dependence Value Set</u> , <u>Other Drug Abuse and Dependence Value Set</u>) during the 194 days prior to the SUD episode date. Do not include ED visits (<u>ED Value Set</u>), withdrawal management events (<u>Detoxification Value Set</u>) or lab claims (claims with POS code 81).																								
154	Oral Evaluation, Dental Services	Table OED-4: Data Elements for Oral Evaluation, Dental Services	<p>Replace the data elements table with the following:</p> <p>Table OED-4: Data Elements for Oral Evaluation, Dental Services</p> <table border="1"> <thead> <tr> <th>Metric</th> <th>Age</th> <th>Data Element</th> <th>Reporting Instructions</th> </tr> </thead> <tbody> <tr> <td rowspan="5">OralEvaluationDentalServices</td> <td>0-2</td> <td>Benefit</td> <td>Metadata</td> </tr> <tr> <td>3-5</td> <td>EligiblePopulation</td> <td>For each Stratification</td> </tr> <tr> <td>6-14</td> <td>ExclusionAdminRequired</td> <td>For each Stratification</td> </tr> <tr> <td>15-20</td> <td>NumeratorByAdmin</td> <td>For each Stratification</td> </tr> <tr> <td>Total</td> <td>NumeratorBySupplemental</td> <td>For each Stratification</td> </tr> <tr> <td></td> <td>Rate</td> <td></td> <td>(Percent)</td> </tr> </tbody> </table>	Metric	Age	Data Element	Reporting Instructions	OralEvaluationDentalServices	0-2	Benefit	Metadata	3-5	EligiblePopulation	For each Stratification	6-14	ExclusionAdminRequired	For each Stratification	15-20	NumeratorByAdmin	For each Stratification	Total	NumeratorBySupplemental	For each Stratification		Rate		(Percent)
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	Total	NumeratorBySupplemental	For each Stratification																								
	Rate		(Percent)																								
158	Plan All-Cause Readmissions	Risk Adjustment Determination	<p>Add the following as a new Risk Adjustment Determination below the Discharge Condition category:</p> <p>COVID-19 Discharge Assign a COVID-19 discharge code to the IHS if its principal discharge diagnosis was COVID-19 (ICD-10-CM code U07.1). For direct transfers, use the principal discharge diagnosis from the last discharge.</p>																								
158	Plan All-Cause Readmissions	Risk Adjustment Weighting	<p>Add the following as a new step 5 (under the current step 4), and renumber the subsequent steps.</p> <p>Step 5 For each IHS with a COVID-19 discharge, link the COVID-19 discharge diagnosis weight.</p>																								
158	Plan All-Cause Readmissions	Risk Adjustment Weighting	In the renumbered step 8 (formerly step 7), replace the reference to step 6 with step 7 in the second sentence.																								
158	Plan All-Cause Readmissions	Risk Adjustment Weighting	In the renumbered step 9 (formerly step 8), replace the reference to step 6 with step 7 in the first sentence.																								

Page	Measure/Guideline	Head/Subtitle	Update
185	Guidelines for Measures Reported Using Electronic Clinical Data Systems	Description—Disclaimer	Remove the entire disclaimer section from the guidelines.
185	Guidelines for Measures Reported Using Electronic Clinical Data Systems	Guidelines—1. Initial Population	Remove the second sentence in the paragraph.
185	Guidelines for Measures Reported Using Electronic Clinical Data Systems	Guidelines—2. HEDIS Definitions and Requirements for ECDS Reporting	Replace the definition of “Denominator” with the following text: What is reported to NCQA for the measure denominator results, typically defined in the specifications included in this publication as “the initial population, minus exclusions.”
204	Breast Cancer Screening	NCQA_Terminology-3.0.0	Add the following to the end of the table: <ul style="list-style-type: none"> – code "Hispanic or Latino": '2135-2' from "RaceAndEthnicityCDC" display 'Hispanic or Latino' – code "Institutional": 'institutional' from "ClaimTypeCodes" – code "managed care policy": 'MCPOL' from "ActCode" – code "Native Hawaiian or Other Pacific Islander": '2076-8' from "RaceAndEthnicityCDC" display 'Native Hawaiian or Other Pacific Islander' – code "Non Hispanic or Latino": '2186-5' from "RaceAndEthnicityCDC" display 'Non Hispanic or Latino' – code "Other": 'OTH' from "NullFlavor" display 'Other' – code "Pharmacy": 'pharmacy' from "ClaimTypeCodes" – code "Professional": 'professional' from "ClaimTypeCodes" – code "retiree health program": 'RETIRE' from "ActCode" – code "subsidized health program": 'SUBSIDIZ' from "ActCode" – code "Unknown": 'UNK' from "NullFlavor" display 'Unknown' – code "White": '2106-3' from "RaceAndEthnicityCDC" display 'White'
212	Cervical Cancer Screening:	Data Elements for Reporting—Table CCS-E-4: Data Elements for Cervical Cancer Screening	Replace the data element table name with the following: Table CCS-E-A-4: Metadata Elements for Cervical Cancer Screening
215	Childhood Immunization Status	Definitions—Participation period	Replace the definition of “Participation period” with the following text: 365 days prior to the member’s second birthday through the member’s second birthday.

Page	Measure/Guideline	Head/Subtitle	Update
231	Colorectal Cancer Screening	Data Elements for Reporting—Table COL-E-A-4: Metadata Elements for Colorectal Cancer Screening	Replace the data element table name with the following: Table COL-E-A-4: Metadata Elements for Colorectal Cancer Screening
236	Depression Screening and Follow-Up for Adolescents and Adults	Depression screening instrument—Instruments for Adults (18+ years)	In the “Edinburgh Postnatal Depression Scale (EPDS)” row, replace LOINC code 48544-1 with 99046-5 in the “Total Score LOINC Codes” column.
236	Depression Screening and Follow-Up for Adolescents and Adults	Exclusions—Exclusions 1	Add the following to the end of the first and second bullets: Do not include laboratory claims (claims with POS code 81).
243	Immunizations for Adolescents	Definitions—Participation period	Replace the definition of “Participation period” with the following text: 365 days prior to the member’s 13th birthday through the member’s 13th birthday.”
255	Social Need Screening and Intervention	Transportation insecurity screening instruments	In the “Screening Item LOINC Codes” column, replace 93030-5 with 101351-5 for the following instruments: <ul style="list-style-type: none"> • Inpatient Rehabilitation Facility—Patient Assessment Instrument (IRF-PAI)—version 4.0 [CMS Assessment] • Outcome and assessment information set (OASIS) form—version E—Discharge from Agency [CMS Assessment] • Outcome and assessment information set (OASIS) form—version E—Resumption of Care [CMS Assessment] • Outcome and assessment information set (OASIS) form—version E—Start of Care [CMS Assessment]

Changes That Affect Multiple Measures

This section identifies single changes that affect multiple measures.

Page	Measure/Guideline	Head/Subtitle	Update
111	Eye Exam for Patients With Diabetes	Diabetes Medications table	Add “Tirzepatide” to the “Glucagon-like peptide-1 (GLP1) agonists” row.
124	Glycemic Status Assessment for Patients With Diabetes	Diabetes Medications table	
147	Kidney Health Evaluation for Patients With Diabetes	Diabetes Medications table	
192	Adult Immunization Status	Guidance—Programming Guidance	Delete the following text: The requirements for identifying members in hospice using the monthly membership detail data files are not included in the measure calculation logic, and must be programmed manually.
200	Breast Cancer Screening	Guidance—Programming Guidance	
208	Cervical Cancer Screening	Guidance—Programming Guidance	
215	Childhood Immunization Status	Guidance—Programming Guidance	
226	Colorectal Cancer Screening	Guidance—Programming Guidance	
234	Depression Screening and Follow-Up for Adolescents and Adults	Guidance—Programming Guidance	
243	Immunizations for Adolescents	Guidance—Programming Guidance	
251	Social Need Screening and Intervention	Guidance—Programming Guidance	
200	Breast Cancer Screening	Initial population	In the first bullet, replace the reference to “AdministrativeGender code F” with “AdministrativeGender code Female.”
209	Cervical Cancer Screening	Initial population	
200	Breast Cancer Screening	Initial population	In the third bullet, replace the reference to “Female-typical” with “female-typical.”
209	Cervical Cancer Screening	Initial population	
200	Breast Cancer Screening	Guidance—Programming Guidance	Delete the following text: SES and product line stratifications are not included in the measure calculation logic, and must be programmed manually. Replace it with the following text: Product line stratifications are not included in the measure calculation logic, and must be programmed manually.
226	Colorectal Cancer Screening	Guidance—Programming Guidance	

Page	Measure/Guideline	Head/Subtitle	Update
235	Depression Screening and Follow-Up for Adolescents and Adults	Depression screening instrument— Instruments for Adolescents (≤17 years)	In the “Edinburgh Postnatal Depression Scale (EPDS)” row, replace LOINC code 71354-5 with 99046-5 in the “Total Score LOINC Codes” column.
238	Depression Screening and Follow-Up for Adolescents and Adults	Direct reference codes and codesystems:	<p>Delete:</p> <ul style="list-style-type: none"> – code "Edinburgh Postnatal Depression Scale [EPDS]": '71354-5' from "LOINC" display 'Total score [EPDS]' <p>Replace it with:</p> <ul style="list-style-type: none"> – code "Total score [EPDS]": '99046-5' from "LOINC" display 'Total score [EPDS]'