

Measure Changes for MY2023

NCQA Changes for MY2023 HEDIS® Measures:

New measures added:

1. Oral Evaluation, Dental Services (OED)

- **Medicaid** members under 21 years of age who received a comprehensive or periodic oral evaluation with a dental provider. (Medicaid only)
- Replaces Annual Dental Visit (ADV)

2. Topical Fluoride for Children (TFC)

- **Medicaid** members 1-4 years of age who received at least two fluoride varnish applications. (Medicaid only)
- Replaces Annual Dental Visit (ADV)

3. Deprescribing of Benzodiazepines in Older Adults (DBO)

- **Medicare** members 67 years of age and older who were dispensed benzodiazepines who achieved a $\geq 20\%$ decrease reduction in benzodiazepine dose. (Medicare only)

4. Emergency Department Visits for Hypoglycemia in Older Adults with Diabetes (EDH)

- For **Medicare** members 67 years of age and older with diabetes (types 1 and 2), the risk-adjusted ratio of observed to expected emergency department (ED) visits for hypoglycemia (Medicare only):
 - For all members 67 and older with diabetes (types 1 and 2) the risk-adjusted ratio of O/E ED visits for hypoglycemia during the measurement year, stratified by dual eligibility.
 - For a subset of members 67 and older with diabetes (types 1 and 2) who had at least one dispensing event of insulin within each 6-month treatment period from July 1 of the year prior to the measurement year through December 31 of the measurement year, the risk-adjusted ratio of O/E ED visits for hypoglycemia, stratified by dual eligibility.

5. Social Need Screening and Intervention (SNS-E)

- Members who were screened, using prespecified instruments, at least once during the measurement period for unmet food, housing and transportation needs, and received a corresponding intervention if they screened positive.
 - Food Screening. Members who were screened for food insecurity.
 - Food Intervention. Members who received a corresponding intervention within 1 month of screening positive for food insecurity.
 - Housing Screening. Members who were screened for housing instability, homelessness or housing inadequacy.
 - Housing Intervention. Members who received a corresponding intervention within 1 month of screening positive for housing instability, homelessness or housing inadequacy.
 - Transportation Screening. Members who were screened for transportation insecurity.
 - Transportation Intervention. Members who received a corresponding intervention within 1 month of screening positive for transportation insecurity.

Changes to Existing Measures

• Adult Immunization Status (AIS-E)

- NCQA revised this measure to align with the new pneumococcal vaccination guidelines released by the Advisory Committee on Immunization Practices. NCQA also added stratifications for age and race and ethnicity.

Retired Measures:

1. Annual Dental Visit (ADV)

- This measure focused on access to dental care, rather than quality of dental care. This measure was replaced by the Oral Evaluation, Dental Services and Topical Fluoride for Children measures for MY 2023.

2. Frequency of Selected Procedures (FSP)

- This measure summarized the frequency of select clinical procedures. During a recent review it was found that this measure had low utility and was burdensome for plans to report. The measure's validity was also questioned due to the number of stratifications that contribute to small sizes for individual reporting categories.

3. Vaccination measures:

- **Flu Vaccinations for Adults Ages 18–64 (FVA)**
- **Flu Vaccinations for Adults Ages 65 and Older (FVO)**
- **Pneumococcal Vaccination Status for Older Adults (PNU)**
 - These CAHPS Health Survey measures have been retired from HEDIS. The expansion of the age range in the Adult Immunization Status measure will ensure that the clinical data regarding vaccination status is captured across all age groups that had been represented in these measures.

Other changes: Cross-Cutting Topics

1. Race/Ethnicity Stratification

- NCQA is continuing its work to identify and reduce disparities in care. NCQA introduced race and ethnicity stratifications to eight additional HEDIS measures:
 - Adult Immunization Status (AIS-E)
 - Asthma Medication Ratio (AMR)
 - Breast Cancer Screening (BCS-E)
 - Immunizations for Adolescents (IMA)
 - Initiation and Engagement of Substance Use Disorder Treatment (IET)
 - Follow-Up After Emergency Department Visit for Substance Use (FUA)
 - Pharmacotherapy for Opioid Use Disorder (POD)
 - Well-Child Visits in the First 30 Months of Life (W30)
- NCQA plans to continue expanding the race and ethnicity stratifications to HEDIS measures over the next several years to help identify disparities in care among patient populations. This effort continues to build on NCQA's existing work dedicated to the advancing of health equity in data and quality measurement.

2. Gender Affirming Approaches to Measurement

- To ensure that HEDIS measures appropriately acknowledge and affirm member gender identity, NCQA has revised measures which reference pregnancy or deliveries to remove the limitation to women. This change does not impact the intent or value sets of impacted measures, but simply acknowledges that pregnancy and childbirth are not experienced exclusively by individuals who identify as women. This change will reduce the likelihood of transgender members are inadvertently excluded or inappropriately included in a measure due to gender identity. Moving forward, NCQA intends to explore additional opportunities to transform HEDIS measures to be more inclusive and affirming of sexual and gender minority members.

3. Optional exclusions are now required exclusions

- For consistency across measure reporting programs, and with digital measures, all optional exclusions will become required exclusions beginning in MY 2023.

4. Electronic Clinical Data Systems (ECDS) Reporting

- NCQA will allow **voluntary ECDS reporting for the Cervical Cancer Screening measure.**
- This year NCQA retired the administrative-only reporting method for **Breast Cancer Screening (BCS-E)**; only the ECDS reporting method will be used for this measure.

Changes to Washington State Common Measure Set (WSCMS)

The following three measures were added to the WSCMS in 2022 for MY 2023:

Title: **Arrest Rate for Medicaid Beneficiaries with an Identified Behavioral Health Need**

Description:

The percentage of Medicaid enrollees 18 – 64 years of age who were arrested at least once in the measurement year and had an identified mental health or substance use disorder treatment need. There are two reportable rates for this measure:

Rate 1: The percentage of members arrested at least once in the measurement year and had an identified mental health treatment need

Rate 2: The percentage of members arrested at least once in the measurement year and had an identified substance use disorder treatment need

Title: **Timely Receipt of Substance Use Disorder Treatment for Medicaid Beneficiaries Released from a Correctional Facility**

Description:

The percentage of Medicaid enrollees aged 18 to 64 receiving SUD treatment within a specified time period following release from a correctional facility or local jail, among enrollees with an identified SUD treatment need indicated between the day of release through 90-days post release. There are four reportable rates for this measure:

Rate 1a: Receipt of SUD treatment within 7 Days of Release from a Department of Corrections Correctional Facility

Rate 1b: Receipt of SUD treatment within 30 Days of Release from a Department of Corrections Correctional Facility

Rate 2a: Receipt of SUD treatment within 7 Days of Release from a Local Jail Facility while Under Department of Corrections Custody

Rate 2b: Receipt of SUD treatment within 30 Days of Release from a Local Jail Facility while Under Department of Corrections Custody

Reported for Medicaid only.

Title: Timely Receipt of Mental Health Treatment for Medicaid Beneficiaries Released from a Correctional Facility

Description:

The percentage of Medicaid enrollees aged 18 to 64 receiving mental health treatment within a specified time period following release from a correctional facility or local jail, among enrollees with an identified mental health treatment need indicated between the day of release through 90-days post release. There are four reportable rates for this measure:

Rate 1a: Receipt of mental health treatment within 7 Days of Release from a Department of Corrections Correctional Facility

Rate 1b: Receipt of mental health within 30 Days of Release from a Department of Corrections Correctional Facility

Rate 2a. Receipt of mental health treatment within 7 Days of Release from a Local Jail Facility while Under Department of Corrections Custody

Rate 2b: Receipt of mental health treatment within 30 Days of Release from a Local Jail Facility while Under Department of Corrections Custody

Reported for Medicaid only.