



Asthma

Recommendations	Reference
Asthma Management Guidelines	Asthma: Learn More Breathe Better® NHLBI, NIH https://www.nhlbi.nih.gov/LMBBasthma 2023 GINA Main Report - Global Initiative for Asthma - GINA (ginasthma.org) https://ginasthma.org/2023-gina-main-report/
HEDIS Clinical Indicators	Description of the HEDIS Indicators
1. Asthma Medication Ratio (AMR) (Source: HEDIS® MY 2023 Vol. 2, Technical Specifications)	The percentage of members 5–64 years of age who were identified as having persistent asthma and had a ratio of controller medications to total asthma medications of 0.50 or greater during the measurement year.



Bipolar Disorder

Recommendations	Reference
Practice Guideline for the Treatment of Patients with Bipolar Disorder	https://tuftshealthplan.com/provider/provider-information/clinical-practice-guidelines https://psychiatryonline.org/pb/assets/raw/sitewide/practice_guidelines/guidelines/bipolar.pdf
Clinical Practice Guidelines Treatment of Patients with Schizophrenia	https://www.psychiatry.org/psychiatrists/practice/clinical-practice-guidelines https://psychiatryonline.org/doi/epdf/10.1176/appi.books.9780890424841
HEDIS Clinical Indicators	Description of the HEDIS Indicators
1. Diabetes Screening for People with Schizophrenia or Bipolar Disorder Who Are Using Antipsychotic Medications (SSD) (Source: HEDIS® MY 2023 Vol. 2, Technical Specifications)	The percentage of members 18–64 years of age with schizophrenia, schizoaffective disorder or bipolar disorder who were dispensed an antipsychotic medication and had a diabetes screening test during the measurement year.
2. Follow-Up After Hospitalization for Mental Illness (FUH) (Source: HEDIS® MY 2023 Vol. 2, Technical Specifications)	The percentage of discharges for members 6 years of age and older who were hospitalized for treatment of selected mental illness or intentional self-harm diagnoses and who had a follow-up visit with a mental health provider. Two rates are reported: <ol style="list-style-type: none"> 1. The percentage of discharges for which the member received follow-up within 30 days after discharge. 2. The percentage of discharges for which the member received follow-up within 7 days after discharge.



Cardiovascular Disease

Recommendations	Reference
One-Year Landmark Analysis of the Effect of Beta-Blocker Dose on Survival After Acute Myocardial Infarction	https://www.ahajournals.org/doi/full/10.1161/JAHA.120.019017
Treatment of Blood Cholesterol	https://circ.ahajournals.org/content/early/2013/11/11/01.cir.0000437738.63853.7a https://www.aafp.org/pubs/afp/issues/2019/0501/p589.html
Cardiovascular Disease: Risk Assessment with Nontraditional Risk Factors	Supplemental Resource: https://www.uspreventiveservicestaskforce.org/uspstf/search_results?searchterm=cardiovascular+disease+screening+using+nontraditional+risk+assessment
Healthy Diet and Physical Activity for Cardiovascular Disease Prevention in Adults with Cardiovascular Risk Factors: Behavioral Counseling Interventions	Supplemental Resource: https://www.ahajournals.org/doi/10.1161/CIR.0000000000000678
Guideline for the Management of Heart Failure	Supplemental Resource: http://circ.ahajournals.org/content/circulationaha/early/2017/04/26/CIR.0000000000000509.full.pdf
HEDIS Clinical Indicators	Description of the HEDIS Indicators
1. Persistence of Beta-Blocker Treatment after a Heart Attack (PBH) (Source: HEDIS® MY 2023, Vol. 2, Technical Specifications)	The percentage of members 18 years of age and older during the measurement year who were hospitalized and discharged from July 1 of the year prior to the measurement year to June 30 of the measurement year with a diagnosis of AMI and who received persistent beta-blocker treatment for six months after discharge.

2. Statin Therapy for Patients with Cardiovascular Disease (SPC)

(Source: HEDIS® MY 2023, Vol. 2, Technical Specifications)

The percentage of males 21-75 and females 40-75 years of age during the measurement year who were identified as having clinical atherosclerotic cardiovascular disease (ASCVD) and met the following criteria:

Received statin therapy: Members who were dispensed at least one high or moderate-intensity statin medication during the measurement year.

Statin Adherence 80%: Members who remained on a high or moderate-intensity statin medication for at least 80% of the treatment period.



Chronic Obstructive Pulmonary Disease

Recommendations	Reference
Chronic Obstructive Pulmonary Disease: Screening	https://www.uspreventiveservicestaskforce.org/uspstf/recommendation/chronic-obstructive-pulmonary-disease-screening
Global Strategy for Prevention, Diagnosis and Management Of COPD: 2023 Report	https://goldcopd.org/2023-gold-report-2/
HEDIS Clinical Indicators	Description of the HEDIS Indicators
<p>1. Use of Spirometry Testing in the Assessment and Diagnosis of COPD (SPR) (Source: HEDIS® MY 2023, Vol. 2, Technical Specifications)</p>	<p>Percentage of members 40 years and older with a new diagnosis of COPD or newly active COPD, who have received spirometry testing to confirm the diagnosis.</p>
<p>2. Pharmacotherapy Management of COPD Exacerbation (PCE) (Source: HEDIS® MY 2023, Vol. 2, Technical Specifications)</p>	<p>The percentage of COPD exacerbations for members 40 years of age and older who had an acute inpatient discharge or ED visit on or between January 1–November 30 of the measurement year and who were dispensed appropriate medications. Two rates are reported:</p> <ol style="list-style-type: none"> 1. Dispensed a systemic corticosteroid (or there was evidence of an active prescription) within 14 days of the event. 2. Dispensed a bronchodilator (or there was evidence of an active prescription) within 30 days of the event. <p><i>Note: The eligible population for this measure is based on acute inpatient discharges and ED visits, not on members. It is possible for the denominator to include multiple events for the same individual.</i></p>

Diabetes

Recommendations	Reference
American Diabetes Association Standards of Medical Care in Diabetes – 2020	https://care.diabetesjournals.org/content/43/Supplement_1/S1
Abnormal Blood Glucose and Type 2 Diabetes Mellitus: Screening	https://www.uspreventiveservicestaskforce.org/uspstf/recommendation/screening-for-prediabetes-and-type-2-diabetes
HEDIS Clinical Indicators	Description of the HEDIS Indicators
1. Hemoglobin A1c Control for Patients with Diabetes (HBD) (Source: HEDIS® MY 2023, Vol. 2, Technical Specifications)	The percentage of members 18–75 years of age with diabetes (types 1 and 2) whose hemoglobin A1c (HbA1c) was at the following levels during the measurement year: <ul style="list-style-type: none"> • HbA1c Control (<8.0%). • HbA1c Poor Control (>9.0%).
2. Blood Pressure Control for Patients with Diabetes (BPD) (Source: HEDIS® MY 2023, Vol. 2, Technical Specifications)	The percentage of members 18–75 years of age with diabetes (types 1 and 2) whose blood pressure (BP) was adequately controlled (<140/90 mm Hg) during the measurement year.
3. Eye Exam for Patients with Diabetes (EED) (Source: HEDIS® MY 2023, Vol. 2, Technical Specifications)	The percentage of members 18–75 years of age with diabetes (types 1 and 2) who had a retinal eye exam



Healthy Weight Management

Recommendations	Reference
Centers for Disease Control and Prevention (CDC) – Overweight and Obesity (2023)	Centers for Disease Control and Prevention (CDC) – Overweight and Obesity
Healthy People 2030 Reduce the portion of adults with obesity (2020)	Healthy People 2030 Reduce the portion of adults with obesity
2020-2025 USDA Dietary Guidelines for Americans (2020)	2020-2025 USDA Dietary Guidelines for Americans
NIH Overweight and Obesity Treatment (2022)	NIH Overweight and Obesity Treatment
Pharmacologic Treatment of Overweight and Obesity in Adults	https://www.ncbi.nlm.nih.gov/books/NBK279038/
HEDIS Clinical Indicators	Description of the Indicators
HEDIS Indicator not applicable. There is not a HEDIS measure aligning with adult healthy weight management.	N/A

Human Immunodeficiency Virus HIV

Recommendations	Reference
Prevention of Human Immunodeficiency Virus (HIV) Infection: Preexposure Prophylaxis	https://www.uspreventiveservicestaskforce.org/uspstf/recommendation/prevention-of-human-immunodeficiency-virus-hiv-infection-pre-exposure-prophylaxis
Human Immunodeficiency Virus (HIV) Infection: Screening	https://www.uspreventiveservicestaskforce.org/uspstf/recommendation/human-immunodeficiency-virus-hiv-infection-screening
Infectious Disease Society of America Guidance for Persons with HIV	https://www.idsociety.org/practice-guideline/primary-care-management-of-people-with-hiv/
HEDIS Clinical Indicators	Description of the HEDIS Indicators
1. HIV Medical Visit Frequency	Percentage of patients, regardless of age with a diagnosis of HIV who had at least one medical visit in each 6-month period of the 24-month measurement period, with a minimum of 60 days between medical visits. (HRSA)
2. HIV Viral Load Suppression	The percentage of patients, regardless of age, with a diagnosis of HIV with a HIV viral load less than 200 copies/mL at last HIV viral load test during the measurement year. (HRSA)



Hypertension

Recommendations	Reference
Hypertension in Adults: Screening	https://www.uspreventiveservicestaskforce.org/uspstf/recommendation/hypertension-in-adults-screening Supplemental Resource: https://www.ahajournals.org/doi/epub/10.1161/HYP.0000000000000087
HEDIS Clinical Indicators	Description of the HEDIS Indicators
Controlling High Blood Pressure (CBP) (Source: HEDIS® MY 2023, Vol. 2, Technical Specifications)	The percentage of members 18–85 years of age who had a diagnosis of hypertension (HTN) and whose BP was adequately controlled (<140/90 mm Hg) during the measurement year.



Major Depression

Recommendations	Reference
Practice Guidelines for the Psychiatric Evaluation of Adults	https://psychiatryonline.org/guidelines
Depression, Adult in Primary Care (Institute for Clinical Systems Improvement)	http://www.icsi.org/guideline/depression/
Depression in Adults: Screening	https://www.uspreventiveservicestaskforce.org/uspstf/draft-update-summary/screening-depression-suicide-risk-adults
HEDIS Clinical Indicators	Description of the HEDIS Indicators
<p>Antidepressant Medication Management (AMM) (Source: HEDIS® MY 2023, Vol. 2, Technical Specifications)</p>	<p>The percentage of members 18 years of age and older who were treated with antidepressant medication, had a diagnosis of major depression and who remained on an antidepressant medication treatment. Two rates are reported:</p> <ul style="list-style-type: none"> • <i>Effective Acute Phase Treatment.</i> The percentage of members who remained on an antidepressant medication for at least 84 days (12 weeks). <p><i>Effective Continuation Phase Treatment.</i> The percentage of members who remained on an antidepressant medication for at least 180 days (6 months).</p>



Opioid Prescribing for Chronic Pain

Recommendations	Reference
CDC Guideline for Prescribing Opioids for Chronic Pain	https://www.cdc.gov/drugoverdose/pdf/guidelines_at-a-glance-a.pdf https://www.cdc.gov/mmwr/volumes/71/rr/rr7103a1.htm?s_cid=rr71_03a1_w
Prevention of Opioid Use Disorder: Interventions	https://www.uspreventiveservicestaskforce.org/uspstf/recommendation/interventions-to-prevent-opioid-use-disorder https://www.cdc.gov/opioids/overdoseprevention/opioid-use-disorder.html#print
Checklist for Prescribing Opioids for Chronic Pain	https://stacks.cdc.gov/view/cdc/38025
HEDIS Clinical Indicators	Description of the HEDIS Indicators
1. Use of Opioids at High Dosage (HDO) (Source: HEDIS® MY 2023, Vol. 2, Technical Specifications)	The proportion of members 18 years and older who received prescription opioids at a high dosage (average morphine milligram equivalent dose [MME] ≥ 90) for ≥ 15 days during the measurement year. <i>Note: A lower rate indicates better performance.</i>
2. Use of Opioids From Multiple Providers (UOP) (Source: HEDIS® MY 2023, Vol. 2, Technical Specifications)	The proportion of members 18 years and older, receiving prescription opioids for ≥ 15 days during the measurement year who received opioids from multiple providers. Three rates are reported. <ol style="list-style-type: none"> 1. <i>Multiple Prescribers.</i> The proportion of members receiving prescriptions for opioids from four or more different prescribers during the measurement year. 2. <i>Multiple Pharmacies.</i> The proportion of members receiving prescriptions for opioids from four or more different pharmacies during the measurement year.

3. *Multiple Prescribers and Multiple Pharmacies.* The proportion of members receiving prescriptions for opioids from four or more different prescribers **and** four or more different pharmacies during the measurement year (i.e., the proportion of members who are numerator compliant for both the Multiple Prescribers and Multiple Pharmacies rates).

Note: A lower rate indicates better performance for all three rates.



Palliative Care

Recommendations	Reference
National Consensus Project for Quality Palliative Care: “Clinical Practice Guidelines for Quality Palliative Care”4 th Edition	https://www.nationalcoalitionhpc.org/ncp/ https://www.nationalcoalitionhpc.org/wp-content/uploads/2020/07/NCHPC-NCPGuidelines_4thED_web_FINAL.pdf
HEDIS Clinical Indicators	Description of the HEDIS Indicators
1. Care for Older Adults-Advanced Care Planning (COA) (Source: HEDIS® MY 2023, Vol. 2, Technical Specifications)	The percentage of adults 66 years and older who had each of the following during the measurement year: Medication review. Functional status assessment. Pain assessment.



Prenatal Care (Routine and High Risk)

Recommendations	Reference
ACOG Clinical Guidance Current Practice Bulletin	https://www.acog.org/clinical/clinical-guidance/practice-bulletin
Preeclampsia: Screening	https://www.uspreventiveservicestaskforce.org/uspstf/draft-update-summary/hypertensive-disorders-pregnancy-screening
2021 United States Preventive Services Task Force (USPSTF) Perinatal Depression Preventive Interventions	https://www.uspreventiveservicestaskforce.org/uspstf/draft-update-summary/perinatal-depression-interventions-to-prevent
Marijuana Use During Pregnancy and Lactation	https://www.acog.org/clinical/clinical-guidance/committee-opinion/articles/2017/10/marijuana-use-during-pregnancy-and-lactation https://www.cdc.gov/marijuana/factsheets/pdf/MarijuanaFactSheets-Pregnancy-508compliant.pdf
Tobacco Smoking Cessation in Adults, Including Pregnant Persons: Interventions	https://www.uspreventiveservicestaskforce.org/uspstf/recommendation/tobacco-use-in-adults-and-pregnant-women-counseling-and-interventions
HEDIS Clinical Indicators	Description of the HEDIS Indicators
1. Prenatal and Postpartum Care (PPC) (Source: HEDIS® MY 2023, Technical Specifications)	<p>The percentage of deliveries of live births on or between October 8 of the year prior to the measurement year and October 7 of the measurement year. For these women, the measure assesses the following facets of prenatal and postpartum care.</p> <p><i>Timeliness of Prenatal Care.</i> The percentage of deliveries that received a prenatal care visit in the first trimester, on or before the enrollment start date or within 42 days of enrollment in the organization.</p> <p><i>Postpartum Care.</i> The percentage of deliveries that had a postpartum visit on or between 7 and 84 days after delivery.</p>



Preventive Care (Adult: 19 years old and over)

Recommendations	Reference
U.S. Preventive Services Task Force: Breast Cancer Screening	https://www.cdc.gov/cancer/breast/basic_info/screening.htm
U.S. Preventive Services Task Force: Cervical Cancer Screening	https://www.uspreventiveservicestaskforce.org/uspstf/draft-update-summary/cervical-cancer-screening-adults-adolescents
U.S. Preventive Services Task Force: Chlamydia and Gonorrhea Screening	https://www.uspreventiveservicestaskforce.org/uspstf/recommendation/chlamydia-and-gonorrhea-screening
Skin Cancer: Screening	https://www.uspreventiveservicestaskforce.org/uspstf/recommendation/skin-cancer-screening
2023 Recommended Immunization Schedule for Adults Aged 19 Years or Older, United States	https://www.cdc.gov/vaccines/schedules/hcp/imz/adult.html
CDC Guidelines for Medical Eligibility for Contraception	https://www.cdc.gov/reproductivehealth/contraception/mmwr/mec/summary.html
CDC Guidelines for Sexually Transmitted Infections; testing and treatment	https://www.cdc.gov/std/treatment/default.htm
HEDIS Clinical Indicators	Description of the HEDIS Indicators
1. Breast Cancer Screening (BCS) (Source: HEDIS® MY 2023, Vol. 2, Technical Specifications)	The percentage of women 50-74 years of age who had a mammogram to screen for breast cancer.
2. Cervical Cancer Screening (CCS) (Source: HEDIS® MY 2023, Vol. 2, Technical Specifications)	The percentage of women 21–64 years of age who were screened for cervical cancer using either of the following criteria: <ul style="list-style-type: none"> • Women 21–64 years of age who had cervical cytology performed within

	<p>the last 3 years.</p> <ul style="list-style-type: none"> • Women 30–64 years of age who had cervical high-risk human papillomavirus (hrHPV) testing performed within the last 5 years. • Women 30–64 years of age who had cervical cytology/high-risk human papillomavirus (hrHPV) cotesting within the last 5 years.
<p>3. Chlamydia Screening (CHL) (Source: HEDIS® MY 2023 Vol. 2, Technical Specifications)</p>	<p>The percentage of women 16--24 years of age who were identified as sexually active and who had at least one test for chlamydia during the measurement year.</p>

Schizophrenia

Recommendations	Reference
Clinical Practice Guidelines for Patients with Schizophrenia	https://psychiatryonline.org/doi/book/10.1176/appi.books.9780890424841
HEDIS Clinical Indicators	Description of the HEDIS Indicators
1. Diabetes Screening for People with Schizophrenia or Bipolar Disorder Who are Using Antipsychotic Medications (SSD) (Source: HEDIS® MY 2023, Vol. 2, Technical Specifications)	The percentage of members 18–64 years of age with schizophrenia, schizoaffective disorder or bipolar disorder, who were dispensed an antipsychotic medication and had a diabetes screening test during the measurement year.
2. Cardiovascular Monitoring for People with Cardiovascular Disease and Schizophrenia (SMC) (Source: HEDIS® MY 2023, Vol. 2, Technical Specifications)	The percentage of members 18–64 years of age with schizophrenia or schizoaffective disorder and cardiovascular disease, who had an LDL-C test during the measurement year.
3. Diabetes Monitoring for People with Diabetes and Schizophrenia (SMD) (Source: HEDIS® MY 2023, Vol. 2, Technical Specifications)	The percentage of members 18–64 years of age with schizophrenia or schizoaffective disorder and diabetes who had both an LDL-C test and an HbA1c test during the measurement year.
4. Adherence to Antipsychotic Medications for Individuals with Schizophrenia (SAA) (Source: HEDIS® MY 2023, Vol. 2, Technical Specifications)	The percentage of members 18 years of age and older during the measurement year with schizophrenia or schizoaffective disorder who were dispensed and remained on an antipsychotic medication for at least 80% of their treatment period.

Substance Abuse Disorders

Recommendations	Reference
Unhealthy Drug Use: Screening	https://www.uspreventiveservicestaskforce.org/uspstf/recommendation/drug-use-illicit-screening
Illicit Drug Use in Children, Adolescents, and Young Adults: Primary Care-Based Interventions	https://www.uspreventiveservicestaskforce.org/uspstf/recommendation/drug-use-illicit-primary-care-interventions-for-children-and-adolescents
Unhealthy Alcohol Use in Adolescents and Adults: Screening and Behavioral Counseling Interventions	https://www.uspreventiveservicestaskforce.org/uspstf/recommendation/unhealthy-alcohol-use-in-adolescents-and-adults-screening-and-behavioral-counseling-interventions
HEDIS Clinical Indicators	Description of the HEDIS Indicators
<p>1. Initiation and Engagement of Alcohol and Other Drug Abuse or Dependence (AOD) Treatment (IET) (Source: HEDIS® MY 2023 Vol. 2, Technical Specifications)</p>	<p>The percentage of adolescent and adult members with a new episode of alcohol or other drug (AOD) abuse or dependence who received the following.</p> <p><i>Initiation of AOD Treatment.</i> The percentage of members who initiate treatment through an inpatient AOD admission, outpatient visit, intensive outpatient encounter or partial hospitalization, telehealth or medication treatment within 14 days of the diagnosis.</p> <p><i>Engagement of AOD Treatment.</i> The percentage of members who initiated treatment and who were engaged in ongoing AOD treatment within 34 days of the initiation visit.</p>
<p>2. Follow-Up After Emergency Department Visit for Alcohol and Other Drug Abuse or Dependence (FUA) (Source: HEDIS® MY 2023 Vol. 2, Technical Specifications)</p>	<p>The percentage of emergency department (ED) visits for members 13 years of age and older with a principal diagnosis of alcohol or other drug (AOD) abuse or dependence, who had a follow up visit for AOD.</p> <p>Two rates are reported:</p> <ol style="list-style-type: none"> 1. The percentage of ED visits for which the member received follow-up within 30 days of the ED visit (31 total days). 2. The percentage of ED visits for which the member received follow-up within 7 days of the ED visit (8 total days).