

## APPENDIX 1

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

HEDIS 2020 Measures	Applicable to:			Changes for HEDIS 2020
	Commercial	Medicaid	Medicare	
General Guidelines for Data Collection and Reporting	✓	✓	✓	<ul style="list-style-type: none"> <li>• Updated <i>General Guideline 8</i>.</li> <li>• Added a <i>Natural Disaster and Cybercrime</i> section.</li> <li>• Updated deadlines in the HEDIS Audit Timeline in <i>General Guideline 9</i>.</li> <li>• Clarified the small denominator thresholds for risk-adjusted utilization measures in <i>General Guideline 10</i>.</li> <li>• Clarified No Benefit (NB) Audit designation in <i>General Guideline 10</i>. This is applied at the global benefit level.</li> <li>• Added a note to the Not Required (NQ) Audit designation in <i>General Guideline 10</i>.</li> <li>• Clarified in <i>General Guideline 13</i> that organizations must exclude CHIP members from their commercial product-line reports.</li> <li>• Clarified in <i>General Guideline 15</i> that the dual Medicaid/Medicare enrollment “dual eligible” and Medicare-Medicaid (MMP) sections of this guideline apply to all measures, except for PCR.</li> <li>• Clarified in <i>General Guideline 17</i> that supplemental data may be used when excluding members in hospice.</li> <li>• Added <i>General Guideline 18: Deceased Members</i>; renumbered subsequent guidelines.</li> <li>• Clarified in <i>General Guideline 26</i> (formerly <i>General Guideline 25</i>) that when members are dual enrolled, organizations must assess the benefits requirement based on the submission the member is included.</li> <li>• Significantly revised <i>General Guideline 31</i> (formerly <i>General Guideline 30</i>).</li> <li>• Removed the requirement that standard and nonstandard supplemental data files must contain all data elements required by the hybrid specification.</li> <li>• Added requirements for use of data from eCQM vendors and use of CCDs.</li> <li>• Clarified in <i>General Guideline 33</i> (formerly <i>General Guideline 32</i>) that it applies to most recent tests or measurements.</li> </ul>

HEDIS 2020 Measures	Applicable to:			Changes for HEDIS 2020
	Commercial	Medicaid	Medicare	
				<ul style="list-style-type: none"> <li>• Clarified in <i>General Guideline 33</i> (formerly <i>General Guideline 32</i>) that for lab results documented in a progress note, it is not appropriate to assume the date of the progress note was the date of the lab test.</li> <li>• Revised <i>General Guideline 37</i> (formerly <i>General Guideline 36</i>).</li> <li>• Revised <i>General Guideline 43</i> (formerly <i>General Guideline 42</i>).</li> <li>• Revised <i>General Guideline 45</i> (formerly <i>General Guideline 44</i>).</li> <li>• Added <i>General Guideline 48: SNOMED Codes</i>; renumbered subsequent guidelines.</li> </ul>
<b>Guidelines for Calculations and Sampling</b>	✓	✓	✓	<ul style="list-style-type: none"> <li>• Clarified in <i>Determining the Required Sample Size</i> that the sample size can be reduced even when the eligible member population is less than 411.</li> <li>• Updated <i>Organization Responsibility for Chart Review</i> to indicate that chart pursuit is up to the organization.</li> <li>• Updated Table 1 to indicate that the prior year's audited rate may be used to reduce MY2019 sample size for the <i>Controlling High Blood Pressure</i> measure.</li> <li>• Updated Table 1 to indicate that the prior year's audited rate may not be used to reduce MY2019 sample size for the <i>Cervical Cancer Screening and Prenatal and Postpartum Care</i> measures.</li> <li>• Added Example 4 to the Systematic Sampling Methodology.</li> </ul>
<b>Guidelines for Allowable Adjustments of HEDIS</b>	✓	✓	✓	<ul style="list-style-type: none"> <li>• Incorporated the <i>Guidelines and Rules for Allowable Adjustments</i>, which was a separate publication for HEDIS 2019, into Volume 2.</li> </ul>
<b>EFFECTIVENESS OF CARE</b>				
<b>Guidelines for Effectiveness of Care</b>	✓	✓	✓	<ul style="list-style-type: none"> <li>• Revised the SES stratification guidelines.</li> <li>• Added the <i>Rules for Allowable Adjustments of HEDIS</i> section to the measure format section.</li> </ul>
Adult BMI Assessment (ABA)	✓	✓	✓	<ul style="list-style-type: none"> <li>• Added the <i>Rules for Allowable Adjustments of HEDIS</i> section.</li> </ul>
Weight Assessment and Counseling for Nutrition and Physical Activity for Children/ Adolescents (WCC)	✓	✓		<ul style="list-style-type: none"> <li>• Clarified in the <i>Notes</i> that referral to WIC may be used to meet criteria for the Counseling for Nutrition indicator.</li> <li>• Added the <i>Rules for Allowable Adjustments of HEDIS</i> section.</li> </ul>

HEDIS 2020 Measures	Applicable to:			Changes for HEDIS 2020
	Commercial	Medicaid	Medicare	
Childhood Immunization Status (CIS)	✓	✓		<ul style="list-style-type: none"> <li>Modified value sets to make them compatible with digital measure formatting.</li> <li>Added live attenuated influenza vaccine (LAIV) as numerator compliant for the influenza rate.</li> <li>Reformatted/reorganized the MMR numerator (MMR numerator requirements were not changed).</li> <li>Added the <i>Rules for Allowable Adjustments of HEDIS</i> section.</li> </ul>
Immunizations for Adolescents (IMA)	✓	✓		<ul style="list-style-type: none"> <li>Modified value sets to make them compatible with digital measure formatting.</li> <li>Clarified in the Hybrid Specification that immunizations documented under a generic header of "meningococcal conjugate vaccine" or "meningococcal polysaccharide vaccine" meet criteria.</li> <li>Added the <i>Rules for Allowable Adjustments of HEDIS</i> section.</li> </ul>
Lead Screening in Children (LSC)		✓		<ul style="list-style-type: none"> <li>Added the <i>Rules for Allowable Adjustments of HEDIS</i> section.</li> </ul>
Breast Cancer Screening (BCS)	✓	✓	✓	<ul style="list-style-type: none"> <li>Modified value sets to make them compatible with digital measure formatting.</li> <li>Updated value sets used to identify advanced illness.</li> <li>Deleted value set combinations for unilateral mastectomy where laterality (bilateral, left, right) is not specified.</li> <li>Added the <i>Rules for Allowable Adjustments of HEDIS</i> section.</li> </ul>
Cervical Cancer Screening (CCS)	✓	✓		<ul style="list-style-type: none"> <li>Updated screening methods to include primary high-risk human papillomavirus testing.</li> <li>Modified value sets to make them compatible with digital measure formatting.</li> <li>Updated the Hybrid specification to indicate that sample size reduction is not allowed.</li> <li>Added the <i>Rules for Allowable Adjustments of HEDIS</i> section.</li> </ul>
Colorectal Cancer Screening (COL)	✓		✓	<ul style="list-style-type: none"> <li>Modified value sets to make them compatible with digital measure formatting.</li> <li>Updated value sets used to identify advanced illness.</li> <li>Updated the Hybrid specification to indicate that a result is not required if the documentation is clearly part of the member's medical history.</li> <li>Added the <i>Rules for Allowable Adjustments of HEDIS</i> section.</li> </ul>

4 Summary Table of Measures, Product Lines and Changes

HEDIS 2020 Measures	Applicable to:			Changes for HEDIS 2020
	Commercial	Medicaid	Medicare	
Chlamydia Screening in Women (CHL)	✓	✓		<ul style="list-style-type: none"> <li>Added the <i>Rules for Allowable Adjustments of HEDIS</i> section.</li> </ul>
Care for Older Adults (COA)			✓ (SNP and MMP only)	<ul style="list-style-type: none"> <li>Added examples of standardized functional status assessment tools in the third bullet of the numerator of the hybrid specification for the Functional Status Assessment indicator.</li> <li>Added the <i>Rules for Allowable Adjustments of HEDIS</i> section.</li> </ul>
Appropriate Testing for Pharyngitis (CWP)	✓	✓	✓	<ul style="list-style-type: none"> <li>Revised the measure name.</li> <li>Expanded the age range to members 3 years of age and older.</li> <li>Changed the measure from a member-based denominator to an episode-based denominator.</li> <li>Revised the Episode Date definition, removed the IESD definition and added the Negative Comorbid Condition History and Negative Competing Diagnosis definitions.</li> <li>Added the Medicare product line.</li> <li>Added age ranges, age stratifications and a total rate to the eligible population.</li> <li>Removed the anchor date requirements.</li> <li>Added instructions for excluding outpatient visits that result in an inpatient stay.</li> <li>Removed the requirement to exclude episode dates where there was any diagnosis other than pharyngitis on the same date.</li> <li>Added telehealth visits to the event/diagnosis criteria.</li> <li>Added <i>Penicillin G Benzathine</i> to the “Natural penicillins” description in the <u>CWP Antibiotic Medications List</u>.</li> <li>Added a comorbid condition exclusion to the event/diagnosis criteria.</li> <li>Added a competing diagnosis exclusion to the event/diagnosis criteria.</li> <li>Added instructions for deduplicating eligible episodes to the event/diagnosis criteria.</li> <li>Revised the Data Elements for Reporting table.</li> <li>Added the <i>Rules for Allowable Adjustments of HEDIS</i> section.</li> </ul>
Use of Spirometry Testing in the Assessment and Diagnosis of COPD (SPR)	✓	✓	✓	<ul style="list-style-type: none"> <li>Removed “with or without a telehealth modifier” language; refer to <i>General Guideline 43</i>.</li> <li>Added value sets so that both professional and facility claims are used to identify the event/ diagnosis (steps 1 and 2).</li> </ul>

HEDIS 2020 Measures	Applicable to:			Changes for HEDIS 2020
	Commercial	Medicaid	Medicare	
				<ul style="list-style-type: none"> <li>• Clarified that the diagnosis must be on the discharge claim when identifying the denominator event/ diagnosis (step 1) and negative diagnosis history (step 2).</li> <li>• Revised the instructions in step 2 (when assessing for negative diagnosis history) to only exclude outpatient, ED and observation visits that result in an acute inpatient stay (do not exclude these visits if they result in a nonacute inpatient stay).</li> <li>• Added instructions for excluding outpatient visits that result in an inpatient stay.</li> <li>• Added the <i>Rules for Allowable Adjustments of HEDIS</i> section.</li> </ul>
Pharmacotherapy Management of COPD Exacerbation (PCE)	✓	✓	✓	<ul style="list-style-type: none"> <li>• Clarified that the diagnosis must be on the discharge claim when identifying the denominator event/diagnosis (step 1).</li> <li>• Added the <i>Rules for Allowable Adjustments of HEDIS</i> section.</li> </ul>
Medication Management for People With Asthma (MMA)	✓	✓		<ul style="list-style-type: none"> <li>• Updated value sets to identify acute inpatient events for the event/diagnosis.</li> <li>• Modified medication lists to make them compatible with digital measure formatting.</li> <li>• Clarified the telehealth requirements for identifying the event/diagnosis.</li> <li>• Added Benralizumab to the “Anti-interleukin-5” description in the <a href="#">Asthma Controller Medications List</a>.</li> <li>• Clarified in step 4 that the equation must be multiplied by 100 before rounding to the nearest whole number.</li> <li>• Added the <i>Rules for Allowable Adjustments of HEDIS</i> section.</li> </ul>
Asthma Medication Ratio (AMR)	✓	✓		<ul style="list-style-type: none"> <li>• Updated value sets to identify acute inpatient events for the event/diagnosis.</li> <li>• Modified medication lists to make them compatible with digital measure formatting.</li> <li>• Clarified the telehealth requirements for identifying the event/diagnosis.</li> <li>• Added <i>Benralizumab</i> to the “Anti-interleukin-5” description in the <a href="#">Asthma Controller Medications List</a>.</li> <li>• Added the <i>Rules for Allowable Adjustments of HEDIS</i> section.</li> </ul>
Controlling High Blood Pressure (CBP)	✓	✓	✓	<ul style="list-style-type: none"> <li>• Modified value sets to make them compatible with digital measure formatting.</li> <li>• Removed “with or without a telehealth modifier” language; refer to <i>General Guideline 43</i>.</li> <li>• Added value sets to identify outpatient telehealth visits for the event/diagnosis.</li> <li>• Updated value sets used to identify advanced illness.</li> </ul>

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	Commercial	Medicaid	Medicare	
				<ul style="list-style-type: none"> <li>Updated the Hybrid specification to indicate that sample size reduction is allowed.</li> <li>Clarified optional exclusion criteria apply to both the Administrative and Hybrid data collection methods.</li> <li>Added the <i>Rules for Allowable Adjustments of HEDIS</i> section.</li> </ul>
Persistence of Beta-Blocker Treatment After a Heart Attack (PBH)	✓	✓	✓	<ul style="list-style-type: none"> <li>Modified value sets to make them compatible with digital measure formatting.</li> <li>Clarified that the diagnosis must be on the discharge claim when identifying the denominator event/ diagnosis.</li> <li>Updated value sets used to identify advanced illness.</li> <li>Revised the timing for the I-SNP, long-term care and frailty exclusions.</li> <li>Added the <i>Rules for Allowable Adjustments of HEDIS</i> section.</li> </ul>
Statin Therapy for Patients With Cardiovascular Disease (SPC)	✓	✓	✓	<ul style="list-style-type: none"> <li>Modified value sets to make them compatible with digital measure formatting.</li> <li>Clarified that the diagnosis must be on the discharge claim when identifying members discharged from an inpatient setting with an MI.</li> <li>Updated value sets to identify IVD acute inpatient events.</li> <li>Updated value sets used to identify advanced illness.</li> <li>Modified medication lists to make them compatible with digital measure formatting.</li> <li>Updated the method for identifying the same or different medications; high and moderate doses of a medication are considered different medications.</li> <li>Clarified in step 4 of the administrative specification of Rate 2 that the equation must be multiplied by 100 before rounding to the nearest whole number.</li> <li>Added the <i>Rules for Allowable Adjustments of HEDIS</i> section.</li> </ul>
Comprehensive Diabetes Care (CDC)	✓	✓	✓	<ul style="list-style-type: none"> <li>Modified value sets to make them compatible with digital measure formatting.</li> <li>Removed “with or without a telehealth modifier” language; refer to <i>General Guideline 43</i>.</li> <li>Updated value sets to identify acute and nonacute inpatient events for the event/diagnosis.</li> <li>Updated value sets used to identify advanced illness.</li> <li>Updated value sets to identify IVD acute inpatient events.</li> <li>Updated value sets to identify thoracic aortic aneurysm inpatient events.</li> </ul>

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	Commercial	Medicaid	Medicare	
				<ul style="list-style-type: none"> <li>• Clarified the telehealth requirements.</li> <li>• Removed the telehealth exclusion from ESRD.</li> <li>• Reformatted the denominator of the Hybrid Specification.</li> <li>• Added the <i>Rules for Allowable Adjustments of HEDIS</i> section.</li> </ul>
Statin Therapy for Patients With Diabetes (SPD)	✓	✓	✓	<ul style="list-style-type: none"> <li>• Modified value sets to make them compatible with digital measure formatting.</li> <li>• Clarified the telehealth requirements for identifying the event/diagnosis.</li> <li>• Updated value sets to identify acute and nonacute inpatient events for the event/diagnosis.</li> <li>• Clarified that the diagnosis must be on the discharge claim when identifying members discharged from an inpatient setting with an MI.</li> <li>• Updated value sets to identify IVD acute inpatient events.</li> <li>• Removed the telehealth exclusion from ESRD.</li> <li>• Updated value sets used to identify advanced illness.</li> <li>• Modified medication lists to make them compatible with digital measure formatting.</li> <li>• Updated the method for identifying the same or different medications. High, moderate and low doses of a medication are considered different medications.</li> <li>• Clarified in step 4 of the administrative specification of Rate 2 that the equation must be multiplied by 100 before rounding to the nearest whole number.</li> <li>• Added the <i>Rules for Allowable Adjustments of HEDIS</i> section.</li> </ul>
Disease-Modifying Anti-Rheumatic Drug Therapy for Rheumatoid Arthritis (ART)			✓	<ul style="list-style-type: none"> <li>• Retired the Medicaid and commercial product lines.</li> <li>• Modified value sets to make them compatible with digital measure formatting.</li> <li>• Clarified that the diagnosis must be on the discharge claim when identifying members with nonacute inpatient discharges with a diagnosis of rheumatoid arthritis.</li> <li>• Updated value sets used to identify advanced illness.</li> <li>• Added <i>Sarilumab</i> to the “Immunomodulators” description in the <u>DMARD Medications List</u>.</li> <li>• Added <i>Baricitinib</i> to the “Janus kinase (JAK) inhibitor” description in the <u>DMARD Medications List</u>.</li> <li>• Added a <i>Notes</i> section.</li> </ul>

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	Commercial	Medicaid	Medicare	
				<ul style="list-style-type: none"> <li>Added the <i>Rules for Allowable Adjustments of HEDIS</i> section.</li> </ul>
Osteoporosis Management in Women Who Had a Fracture (OMW)			✓	<ul style="list-style-type: none"> <li>Modified value sets to make them compatible with digital measure formatting.</li> <li>Revised the event/diagnosis to assess all eligible fractures during the Intake Period.</li> <li>Modified the “IESD” definition and added a definition for “Episode Date.”</li> <li>Added a note in the definition of “Direct Transfer” to clarify that a fracture diagnosis is not required on the direct transfer.</li> <li>Clarified that the fracture must be on the discharge claim when identifying the denominator event/diagnosis (steps 1 and 2).</li> <li>Removed the single energy x-ray absorptiometry (SEXA) test from the measure.</li> <li>Revised the timing for the I-SNP, long-term care and frailty exclusions.</li> <li>Updated value sets used to identify advanced illness.</li> <li>Removed “with or without a telehealth modifier” language; refer to <i>General Guideline 43</i>.</li> <li>Added instructions for excluding outpatient visits that result in an inpatient stay.</li> <li>Removed <i>Calcitonin</i> from the “Other Agents” description in the <u>Osteoporosis Medications List</u>.</li> <li>Added the <i>Rules for Allowable Adjustments of HEDIS</i> section.</li> </ul>
Antidepressant Medication Management (AMM)	✓	✓	✓	<ul style="list-style-type: none"> <li>Added value sets so that both professional and facility claims are used to identify the major depression diagnosis (<i>step 2</i>: Required exclusions).</li> <li>Removed “with or without a telehealth modifier” language; refer to <i>General Guideline 43</i>.</li> <li>Added the <i>Rules for Allowable Adjustments of HEDIS</i> section.</li> </ul>
Follow-Up Care for Children Prescribed ADHD Medication (ADD)	✓	✓		<ul style="list-style-type: none"> <li>Updated the exclusions (<i>step 4</i>) for both rates.</li> <li>Clarified in the continuous enrollment criteria of Rate 2 how to handle members who switch between products.</li> <li>Added the <i>Rules for Allowable Adjustments of HEDIS</i> section.</li> </ul>
Follow-Up After Hospitalization for Mental Illness (FUH)	✓	✓	✓	<ul style="list-style-type: none"> <li>Added the <u>Mental Health Practitioner Value Set</u> to make the measure compatible with digital measure formatting.</li> <li>Clarified that the diagnosis must be on the discharge claim when identifying the event/diagnosis and direct transfers.</li> </ul>



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	Commercial	Medicaid	Medicare	
				<ul style="list-style-type: none"> <li>Removed “with or without a telehealth modifier” language; refer to <i>General Guideline 43</i>.</li> <li>Added a <i>Note</i> to address mapping providers to the codes in the <u>Mental Health Practitioner Value Set</u>.</li> <li>Added the <i>Rules for Allowable Adjustments of HEDIS</i> section.</li> </ul>
Follow-Up After Emergency Department Visit for Mental Illness (FUM)	✓	✓	✓	<ul style="list-style-type: none"> <li>Removed “with or without a telehealth modifier” language; refer to <i>General Guideline 43</i>.</li> <li>Added the <i>Rules for Allowable Adjustments of HEDIS</i> section.</li> </ul>
Follow-Up After High Intensity Care for Substance Use Disorder (FUI)	✓	✓	✓	<ul style="list-style-type: none"> <li>First-year measure.</li> </ul>
Follow-Up After Emergency Department Visit for Alcohol and Other Drug Abuse or Dependence (FUA)	✓	✓	✓	<ul style="list-style-type: none"> <li>Removed “with or without a telehealth modifier” language; refer to <i>General Guideline 43</i>.</li> <li>Added the <i>Rules for Allowable Adjustments of HEDIS</i> section.</li> </ul>
Pharmacotherapy for Opioid Use Disorder (POD)	✓	✓	✓	<ul style="list-style-type: none"> <li>First-year measure.</li> </ul>
Diabetes Screening for People With Schizophrenia or Bipolar Disorder Who Are Using Antipsychotic Medications (SSD)		✓		<ul style="list-style-type: none"> <li>Modified value sets to make them compatible with digital measure formatting.</li> <li>Removed “with or without a telehealth modifier” language; refer to <i>General Guideline 43</i>.</li> <li>Clarified the telehealth requirements for identifying the event/diagnosis.</li> <li>Updated value sets used to identify acute and nonacute inpatient events with a diagnosis of diabetes.</li> <li>Added the <i>Rules for Allowable Adjustments of HEDIS</i> section.</li> </ul>
Diabetes Monitoring for People With Diabetes and Schizophrenia (SMD)		✓		<ul style="list-style-type: none"> <li>Modified value sets to make them compatible with digital measure formatting.</li> <li>Removed “with or without a telehealth modifier” language; refer to <i>General Guideline 43</i>.</li> <li>Clarified the telehealth requirements for identifying the event/diagnosis.</li> <li>Updated value sets used to identify acute and nonacute inpatient events with a diagnosis of diabetes.</li> <li>Added the <i>Rules for Allowable Adjustments of HEDIS</i> section.</li> </ul>

HEDIS 2020 Measures	Applicable to:			Changes for HEDIS 2020
	Commercial	Medicaid	Medicare	
Cardiovascular Monitoring for People With Cardiovascular Disease and Schizophrenia (SMC)		✓		<ul style="list-style-type: none"> <li>Modified value sets to make them compatible with digital measure formatting.</li> <li>Removed “with or without a telehealth modifier” language; refer to <i>General Guideline 43</i>.</li> <li>Updated value sets to identify IVD acute inpatient events.</li> <li>Added the <i>Rules for Allowable Adjustments of HEDIS</i> section.</li> </ul>
Adherence to Antipsychotic Medications for Individuals With Schizophrenia (SAA)	✓	✓	✓	<ul style="list-style-type: none"> <li>Added the Medicare and commercial product lines.</li> <li>Expanded the age range to 18 years of age and older.</li> <li>Added exclusions for members with advanced illness and frailty.</li> <li>Added exclusions for the Medicare product line for members 66 years of age and older enrolled in an I-SNP or living long-term in an institutional setting.</li> <li>Removed “with or without a telehealth modifier” language; refer to <i>General Guideline 43</i>.</li> <li>Clarified in step 4 that the equation must be multiplied by 100 before rounding to the nearest whole number.</li> <li>Added the <i>Rules for Allowable Adjustments of HEDIS</i> section.</li> </ul>
Metabolic Monitoring for Children and Adolescents on Antipsychotics (APM)	✓	✓		<ul style="list-style-type: none"> <li>Modified value sets to make them compatible with digital measure formatting.</li> <li>Removed “Prochlorperazine” from the <u>Antipsychotic Medications List</u> and added a <u>Prochlorperazine Medications List</u>.</li> <li>Added Blood Glucose and Cholesterol indicators.</li> <li>Combined the 1–5 years and 6–11 years age stratification.</li> <li>Added the <i>Rules for Allowable Adjustments of HEDIS</i> section.</li> </ul>
Medication Reconciliation Post-Discharge (MRP)			✓	<ul style="list-style-type: none"> <li>Modified value sets to make them compatible with digital measure formatting.</li> <li>Added instructions for identifying acute inpatient events that occur between the admission and discharge dates of a nonacute inpatient stay.</li> <li>Clarified the fifth bullet in the hybrid specification.</li> <li>Added the <i>Rules for Allowable Adjustments of HEDIS</i> section.</li> </ul>
Transitions of Care (TRC)			✓	<ul style="list-style-type: none"> <li>Modified value sets to make them compatible with digital measure formatting.</li> <li>Removed “with or without a telehealth modifier” language; refer to <i>General Guideline 43</i>.</li> </ul>

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	Commercial	Medicaid	Medicare	
				<ul style="list-style-type: none"> <li>• Added instructions for identifying acute inpatient events that occur between the admission and discharge dates of a nonacute inpatient stay.</li> <li>• Clarified in the <i>Notification of Inpatient Admission</i> and <i>Receipt of Discharge Information</i> numerators that a “received date” is not required when reporting the indicators using a shared EMR system.</li> <li>• Added a <i>Note</i> to the <i>Notification of Inpatient Admission</i> numerator to clarify that provider notification that a patient was sent to the ED does not meet criteria if the ED visit results in inpatient admission.</li> <li>• Clarified in the <i>Receipt of Discharge Information</i> numerator that the required discharge information must be in the appropriate medical record even when the PCP or ongoing care provider is the discharging provider.</li> <li>• Clarified in the <i>Patient Engagement After Inpatient Discharge</i> numerator that an interaction between the member’s caregiver and the provider meets criteria if the member is unable to communicate with the provider.</li> <li>• Added the <i>Rules for Allowable Adjustments of HEDIS</i> section.</li> </ul>
Follow-Up After Emergency Department Visit for People With Multiple High-Risk Chronic Conditions (FMC)			✓	<ul style="list-style-type: none"> <li>• Removed “with or without a telehealth modifier” language; refer to <i>General Guideline 43</i>.</li> <li>• Updated value sets to identify acute and nonacute inpatient events (step 3).</li> <li>• Added the <i>Rules for Allowable Adjustments of HEDIS</i> section.</li> </ul>
Non-Recommended Cervical Cancer Screening in Adolescent Females (NCS)	✓	✓		<ul style="list-style-type: none"> <li>• Modified value sets to make them compatible with digital measure formatting.</li> <li>• Added the <i>Rules for Allowable Adjustments of HEDIS</i> section.</li> </ul>
Non-Recommended PSA-Based Screening in Older Men (PSA)			✓	<ul style="list-style-type: none"> <li>• Modified value sets to make them compatible with digital measure formatting.</li> <li>• Added the <i>Rules for Allowable Adjustments of HEDIS</i> section.</li> </ul>
Appropriate Treatment for Upper Respiratory Infection (URI)	✓	✓	✓	<ul style="list-style-type: none"> <li>• Revised the measure name.</li> <li>• Expanded the age range to members 3 months of age and older.</li> <li>• Changed the measure from a member-based denominator to an episode-based denominator.</li> <li>• Revised the Episode Date definition, removed the IESD definition and added the Negative Comorbid Condition History definition.</li> <li>• Added the Medicare product line.</li> </ul>

HEDIS 2020 Measures	Applicable to:			Changes for HEDIS 2020
	Commercial	Medicaid	Medicare	
				<ul style="list-style-type: none"> <li>• Added age ranges, age stratifications and a total rate to the eligible population.</li> <li>• Removed the anchor date requirements.</li> <li>• Added instructions for excluding outpatient visits that result in an inpatient stay.</li> <li>• Removed the requirement to exclude episode dates where there was any diagnosis other than upper respiratory infection on the same date.</li> <li>• Added telehealth visits to the event/diagnosis criteria.</li> <li>• Added <i>Penicillin G Benzathine</i> to the “Natural penicillins” description in the <a href="#">CWP Antibiotic Medications List</a>.</li> <li>• Added a comorbid condition exclusion to the event/diagnosis criteria.</li> <li>• Added instructions for deduplicating eligible episodes to the event/diagnosis criteria.</li> <li>• Revised the Data Elements for Reporting table.</li> <li>• Added the <i>Rules for Allowable Adjustments of HEDIS</i> section.</li> </ul>
Avoidance of Antibiotic Treatment for Acute Bronchitis/Bronchiolitis (AAB)	✓	✓	✓	<ul style="list-style-type: none"> <li>• Revised the measure name.</li> <li>• Expanded the age range to members 3 months of age and older.</li> <li>• Changed the measure from a member-based denominator to an episode-based denominator.</li> <li>• Revised the Intake Period.</li> <li>• Removed the IESD definition.</li> <li>• Revised the Negative Competing Diagnosis time frame.</li> <li>• Added the Medicare product line.</li> <li>• Added age ranges, age stratifications and a total rate to the eligible population.</li> <li>• Updated the continuous enrollment and allowable gap requirements.</li> <li>• Removed “with or without a telehealth modifier” language; refer to <i>General Guideline 43</i>.</li> <li>• Added instructions for excluding outpatient visits that result in an inpatient stay.</li> <li>• Deleted the <a href="#">Cystic Fibrosis Value Set</a> from step 3 in the event/diagnosis criteria (codes for cystic fibrosis were moved to the <a href="#">Comorbid Conditions Value Set</a>).</li> <li>• Added instructions for deduplicating eligible episodes to the event/diagnosis criteria.</li> <li>• Revised the Data Elements for Reporting table.</li> </ul>

HEDIS 2020 Measures	Applicable to:			Changes for HEDIS 2020
	Commercial	Medicaid	Medicare	
				<ul style="list-style-type: none"> <li>Added the <i>Rules for Allowable Adjustments of HEDIS</i> section.</li> </ul>
Use of Imaging Studies for Low Back Pain (LBP)	✓	✓		<ul style="list-style-type: none"> <li>Modified value sets to make them compatible with digital measure formatting.</li> <li>Removed “with or without a telehealth modifier” language; refer to <i>General Guideline 43</i>.</li> <li>Added instructions for excluding outpatient visits that result in an inpatient stay.</li> <li>Clarified the timing of the prolonged use of corticosteroids exclusion in step 4 of the event/diagnosis criteria.</li> <li>Added the <i>Rules for Allowable Adjustments of HEDIS</i> section.</li> </ul>
Potentially Harmful Drug-Disease Interactions in Older Adults (DDE)			✓	<ul style="list-style-type: none"> <li>Revised the measure name.</li> <li>Revised the IESD definition.</li> <li>Modified value sets to make them compatible with digital measure formatting.</li> <li>Added “SNRIs” to Rate 1.</li> <li>Removed “H2 receptor antagonists” from Rate 2.</li> <li>Added value sets so that both professional and facility claims are used to identify hip fractures (Rate 1).</li> <li>Added an exclusion for major depressive disorder to Rate 1.</li> <li>Renamed <u>Potentially Harmful Drugs—Rate 1 Medications List</u> to <u>Potentially Harmful Drugs—History of Falls Medications List</u>.</li> <li>Renamed <u>Potentially Harmful Drugs—Rate 1 and Rate 2 Medications List</u> to <u>Potentially Harmful Drugs—History of Falls and Dementia Medications List</u>.</li> <li>Renamed <u>Potentially Harmful Drugs—Rate 2 Medications List</u> to <u>Potentially Harmful Drugs—Dementia Medications List</u>.</li> <li>Added <i>Pyrilamine</i> to the “Anticholinergic agents, antihistamines” description in the <u>Potentially Harmful Drugs—Dementia Medications List</u>.</li> <li>Added <i>Methscopolamine</i> to the “Anticholinergic agents, antispasmodics” description in the <u>Potentially Harmful Drugs—Dementia Medications List</u>.</li> <li>Added the <i>Rules for Allowable Adjustments of HEDIS</i> section.</li> </ul>
Use of High-Risk Medications in Older Adults (DAE)			✓	<ul style="list-style-type: none"> <li>Revised the measure name.</li> </ul>

HEDIS 2020 Measures	Applicable to:			Changes for HEDIS 2020
	Commercial	Medicaid	Medicare	
				<ul style="list-style-type: none"> <li>Retired former Numerator 1 for members who received at least one dispensing event for a high-risk medication.</li> <li>Modified medication lists to make them compatible with digital measure formatting.</li> <li>Added <i>Pyrilamine</i> to the High-Risk Medications Table “Anticholinergics, first-generation antihistamines” description.</li> <li>Added <i>Methscopolamine</i> to the High-Risk Medications Table “Antispasmodics” description.</li> <li>Removed <i>Ticlopidine</i> from the High-Risk Medications Table “Antithrombotics” description.</li> <li>Added <i>Glimepiride</i> to the High-Risk Medications Table “Endocrine system, sulfonylureas, long-duration” description.</li> <li>Removed <i>Pentazocine</i> from the High-Risk Medications Table “Pain medications, other” description.</li> <li>Added a <i>Note</i> to indicate that denied claims are not included when assessing the numerator.</li> <li>Added the <i>Rules for Allowable Adjustments of HEDIS</i> section.</li> </ul>
Use of Opioids at High Dosage (HDO)	✓	✓	✓	<ul style="list-style-type: none"> <li>Changed the measure acronym from UOD to HDO.</li> <li>Updated the average daily MME threshold from &gt;120 to ≥90.</li> <li>Deleted the IPSD definition and the former step 4 of the numerator.</li> <li>Revised treatment period definition used to calculate the numerator.</li> <li>Modified medication lists to make them compatible with digital measure formatting.</li> <li>Updated Table HDO-A to include medication lists and strength (for use in the MME calculation).</li> <li>Added a note to indicate that methadone for the treatment of opioid use disorder is excluded from this measure.</li> <li>Added the <i>Rules for Allowable Adjustments of HEDIS</i> section.</li> </ul>
Use of Opioids From Multiple Providers (UOP)	✓	✓	✓	<ul style="list-style-type: none"> <li>Modified medication lists to make them compatible with digital measure formatting.</li> <li>Updated the method for identifying the same or different medications; the definition of “same” and “different” remains the same (drugs that were the “same” in prior years will remain “same” and drugs that were “different” in prior years will remain “different”).</li> </ul>

HEDIS 2020 Measures	Applicable to:			Changes for HEDIS 2020
	Commercial	Medicaid	Medicare	
				<ul style="list-style-type: none"> <li>Added a note to indicate that methadone for the treatment of opioid use disorder is excluded from this measure.</li> <li>Added the <i>Rules for Allowable Adjustments of HEDIS</i> section.</li> </ul>
Risk of Continued Opioid Use (COU)	✓	✓	✓	<ul style="list-style-type: none"> <li>Modified medication lists to make them compatible with digital measure formatting.</li> <li>Updated the method for identifying the same or different medications; the definition of “same” and “different” remains the same (drugs that were the “same” in prior years will remain “same” and drugs that were “different” in prior years will remain “different”).</li> <li>Added a note to indicate that methadone for the treatment of opioid use disorder is excluded from this measure.</li> <li>Added the <i>Rules for Allowable Adjustments of HEDIS</i> section.</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 2020, 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 2020, Volume 6: Specifications for the Medicare Health Outcomes Survey</i>.</li> </ul>
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 2020, Volume 6: Specifications for the Medicare Health Outcomes Survey</i>.</li> </ul>
Osteoporosis Testing in Older Women (OTO)			✓	<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 2020, 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 2020, 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>This measure is collected using survey methodology. Detailed specifications and summary of changes are contained in <i>HEDIS 2020, Volume 3: Specifications for Survey Measures</i>.</li> </ul>

HEDIS 2020 Measures	Applicable to:			Changes for HEDIS 2020
	Commercial	Medicaid	Medicare	
Flu Vaccinations for Adults Ages 65 and Older (FVO)			✓	<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 2020, Volume 3: Specifications for Survey Measures</i>.</li> </ul>
Medical Assistance With Smoking and Tobacco Use Cessation (MSC)	✓	✓	✓	<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 2020, Volume 3: Specifications for Survey Measures</i>.</li> </ul>
Pneumococcal Vaccination Status for Older Adults (PNU)			✓	<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 2020, Volume 3: Specifications for Survey Measures</i>.</li> </ul>
<b>ACCESS/AVAILABILITY OF CARE</b>				
Adults' Access to Preventive/ Ambulatory Health Services (AAP)	✓	✓	✓	<ul style="list-style-type: none"> <li>Removed "with or without a telehealth modifier" language; refer to <i>General Guideline 43</i>.</li> <li>Added the <i>Rules for Allowable Adjustments of HEDIS</i> section.</li> </ul>
Children's and Adolescents' Access to Primary Care Practitioners (CAP)	✓	✓		<ul style="list-style-type: none"> <li>Added telehealth to the measure numerator.</li> <li>Added the <i>Rules for Allowable Adjustments of HEDIS</i> section.</li> </ul>
Annual Dental Visit (ADV)		✓		<ul style="list-style-type: none"> <li>Added the <i>Rules for Allowable Adjustments of HEDIS</i> section.</li> </ul>
Initiation and Engagement of Alcohol and Other Drug Abuse or Dependence Treatment (IET)	✓	✓	✓	<ul style="list-style-type: none"> <li>Revised the Intake Period to end on November 13 of the measurement year.</li> <li>Removed "with or without a telehealth modifier" language; refer to <i>General Guideline 43</i>.</li> <li>Clarified that the diagnosis must be on the discharge claim when identifying acute and nonacute inpatient discharges.</li> <li>Renamed the medication lists.</li> <li>Added "Buprenorphine injections" to the <u>Opioid Use Disorder Treatment Medications List</u>.</li> <li>Added the <i>Rules for Allowable Adjustments of HEDIS</i> section.</li> </ul>
Prenatal and Postpartum Care (PPC)	✓	✓		<ul style="list-style-type: none"> <li>Revised the timing of the event/diagnosis criteria.</li> <li>Revised the <i>Timeliness of Prenatal Care</i> numerator to allow for visits that occur before the enrollment start date.</li> <li>Revised the timing of the <i>Postpartum Care</i> numerator.</li> </ul>



HEDIS 2020 Measures	Applicable to:			Changes for HEDIS 2020
	Commercial	Medicaid	Medicare	
				<ul style="list-style-type: none"> <li>• Added a <i>Definitions</i> section.</li> <li>• Revised the <i>Continuous Enrollment</i> criteria.</li> <li>• Added a <i>Note</i> to step 1 of the event/diagnosis to clarify that the date of service or, for inpatient claims, the date of discharge is used if the date of delivery cannot be interpreted on the claim.</li> <li>• Deleted the decision rules and standardized the prenatal care visit requirements in the <i>Timeliness of Prenatal Care</i> numerator.</li> <li>• Clarified in the <i>Timeliness of Prenatal Care</i> and <i>Postpartum Care</i> numerators to not count visits that occur on the date of delivery.</li> <li>• Updated the <i>Postpartum Care</i> numerator to exclude services provided in an acute inpatient setting.</li> <li>• Updated the Hybrid specification to indicate that sample size reduction is not allowed.</li> <li>• Added bullets to the Hybrid Specification of the <i>Postpartum Care</i> numerator to meet criteria.</li> <li>• Added the <i>Rules for Allowable Adjustments of HEDIS</i> section.</li> </ul>
Use of First-Line Psychosocial Care for Children and Adolescents on Antipsychotics (APP)	✓	✓		<ul style="list-style-type: none"> <li>• Combined the “1–5 years” and “6–11 years” age stratifications.</li> <li>• Removed “with or without a telehealth modifier”; refer to <i>General Guideline 43</i>.</li> <li>• Removed “Prochlorperazine” from the <u><a href="#">Antipsychotic Medications List</a></u>.</li> <li>• Added the <i>Rules for Allowable Adjustments of HEDIS</i> section.</li> </ul>
<b>EXPERIENCE OF CARE</b>				
CAHPS Health Plan Survey 5.0H, 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 2020, Volume 3: Specifications for Survey Measures</i>.</li> </ul>
CAHPS Health Plan Survey 5.0H, 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 2020, 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 2020, Volume 3: Specifications for Survey Measures</i>.</li> </ul>

HEDIS 2020 Measures	Applicable to:			Changes for HEDIS 2020
	Commercial	Medicaid	Medicare	
<b>UTILIZATION AND RISK ADJUSTED UTILIZATION</b>				
<b>Guidelines for Utilization</b>	✓	✓	✓	<ul style="list-style-type: none"> <li>• Added Guideline 15: Data Element Tables.</li> </ul>
Well-Child Visits in the First 15 Months of Life (W15)	✓	✓		<ul style="list-style-type: none"> <li>• Added instructions to not count services provided via telehealth when reporting this measure.</li> <li>• Added a <i>Note</i> to clarify that handouts given during a visit without evidence of a discussion does not meet criteria for Health Education/Anticipatory Guidance.</li> <li>• Added the <i>Rules for Allowable Adjustments of HEDIS</i> section.</li> </ul>
Well-Child Visits in the Third, Fourth, Fifth and Sixth Years of Life (W34)	✓	✓		<ul style="list-style-type: none"> <li>• Added instructions to not count services provided via telehealth when reporting this measure.</li> <li>• Added a <i>Note</i> to clarify that handouts given during a visit without evidence of a discussion does not meet criteria for Health Education/Anticipatory Guidance.</li> <li>• Added the <i>Rules for Allowable Adjustments of HEDIS</i> section.</li> </ul>
Adolescent Well-Care Visits (AWC)	✓	✓		<ul style="list-style-type: none"> <li>• Added instructions to not count services provided via telehealth when reporting this measure.</li> <li>• Added a <i>Note</i> to clarify that handouts given during a visit without evidence of a discussion does not meet criteria for Health Education/Anticipatory Guidance.</li> <li>• Added the <i>Rules for Allowable Adjustments of HEDIS</i> section.</li> </ul>
Frequency of Selected Procedures (FSP)	✓	✓	✓	<ul style="list-style-type: none"> <li>• Revised the “Count as one procedure...” definition under <i>Calculations</i> to address double counting procedures.</li> <li>• Added a <i>Note</i> section.</li> <li>• Added shading to the Data Elements for Reporting tables to indicate how data are reported.</li> <li>• Added a “0-19” row and deleted the footnotes in data element tables FSP-1 and FSP-2.</li> <li>• Added the <i>Rules for Allowable Adjustments of HEDIS</i> section.</li> </ul>
Ambulatory Care (AMB)		✓		<ul style="list-style-type: none"> <li>• Retired the Medicare and commercial product lines.</li> <li>• Removed “with or without a telehealth modifier” language; refer to <i>General Guideline 43</i>.</li> <li>• Added a note to indicate that supplemental data may not be used for this measure.</li> </ul>

HEDIS 2020 Measures	Applicable to:			Changes for HEDIS 2020
	Commercial	Medicaid	Medicare	
				<ul style="list-style-type: none"> <li>• Added shading to the Data Elements for Reporting tables to indicate how data are reported.</li> <li>• Added the <i>Rules for Allowable Adjustments of HEDIS</i> section.</li> </ul>
Inpatient Utilization—General Hospital/Acute Care (IPU)		✓		<ul style="list-style-type: none"> <li>• Retired the Medicare and commercial product lines.</li> <li>• Clarified in step 2 to use the diagnosis on the discharge claim.</li> <li>• Added a <i>Note</i> section.</li> <li>• Added shading to the Data Elements for Reporting tables to indicate how data are reported.</li> <li>• Added the <i>Rules for Allowable Adjustments of HEDIS</i> section</li> </ul>
Identification of Alcohol and Other Drug Services (IAD)	✓	✓	✓	<ul style="list-style-type: none"> <li>• Clarified that the discharge claim is used to report inpatient services.</li> <li>• Clarified that members must be categorized in the “Any Services” category based on their age as of the first eligible encounter.</li> <li>• Clarified in “Categorizing chemical dependency services” that the intent of excluding ED/observation visits that result in an inpatient stay is to not double count events.</li> <li>• Renamed the Medication Lists.</li> <li>• Added “Buprenorphine injections” to the <u>Opioid Use Disorder Treatment Medications List</u>.</li> <li>• Added a <i>Note</i> section.</li> <li>• Added shading to the Data Elements for Reporting tables to indicate how data are reported.</li> <li>• Added the <i>Rules for Allowable Adjustments of HEDIS</i> section.</li> </ul>
Mental Health Utilization (MPT)	✓	✓	✓	<ul style="list-style-type: none"> <li>• Clarified that the discharge claim is used to report inpatient services.</li> <li>• Clarified that members must be categorized in the “Any Services” category based on their age as of the first eligible encounter.</li> <li>• Clarified in <i>Categorizing mental health services</i> that the intent of excluding ED/observation visits that result in an inpatient stay is to not double count events.</li> <li>• Added the <u>Mental Health Practitioner Value Set</u> to make the measure compatible with digital measure formatting.</li> <li>• Added a <i>Note</i> section.</li> </ul>

HEDIS 2020 Measures	Applicable to:			Changes for HEDIS 2020
	Commercial	Medicaid	Medicare	
				<ul style="list-style-type: none"> <li>Added shading to the Data Elements for Reporting tables to indicate how data are reported.</li> <li>Added the <i>Rules for Allowable Adjustments of HEDIS</i> section.</li> </ul>
Antibiotic Utilization (ABX)	✓	✓	✓	<ul style="list-style-type: none"> <li>Added a <i>Note</i> section.</li> <li>Added shading to the Data Elements for Reporting tables to indicate how data are reported.</li> <li>Added the <i>Rules for Allowable Adjustments of HEDIS</i> section.</li> </ul>
<b>Guidelines for Risk Adjusted Utilization</b>	✓	✓	✓	<ul style="list-style-type: none"> <li>Added <i>General Guideline 5: Observation stays without discharge date</i>; renumbered subsequent guidelines.</li> <li>Added <i>General Guideline 6: Direct transfers</i>.</li> <li>Revised <i>General Guideline 7: SES stratification</i> (formerly <i>General Guideline 5</i>).</li> <li>Updated value sets in the <i>Utilization Risk Adjustment Determination</i> section.</li> </ul>
Plan All-Cause Readmissions (PCR)	✓	✓	✓	<ul style="list-style-type: none"> <li>Added definitions of “outlier,” “nonoutlier” and “plan population.”</li> <li>Added observation stays to inpatient admissions.</li> <li>Revised direct transfers to include observation discharges.</li> <li>Moved instructions for direct transfer to Guideline 5 in the Guidelines for Risk Adjusted Utilization Measures.</li> <li>Added steps to remove hospitalizations for outlier members and report a count of outlier members.</li> <li>Removed the high-frequency hospitalization stratification for Medicaid.</li> <li>Added a step in the Risk Adjustment Weighting section for observation stay IHS.</li> <li>Removed the base weight variable from the Risk Adjustment Weighting.</li> <li>Removed Sample Table: PCR—Risk Adjustment Weighting in Risk Adjustment Weighting.</li> <li>Added a <i>Note</i> to step 4 in the numerator.</li> <li>Revised the data element tables to combine the 18–64 and 65+ populations.</li> <li>Added instructions and data element tables to report plan population and outlier rate.</li> </ul>

HEDIS 2020 Measures	Applicable to:			Changes for HEDIS 2020
	Commercial	Medicaid	Medicare	
				<ul style="list-style-type: none"> <li>Removed the “Total 18-64 Medicare” and “Total 65+ Medicare” rows from Table PCR-B-3 and removed associated footnotes.</li> <li>Added instructions and data element tables to report the rate among index stays discharged or transferred to skilled nursing care.</li> </ul>
Hospitalization Following Discharge from a Skilled Nursing Facility (HFS)			✓	<ul style="list-style-type: none"> <li>Clarified in step 2 of the denominator to exclude the skilled nursing facility stay if the direct transfer’s discharge date occurs after November 1 of the measurement year.</li> <li>Moved instructions for direct transfer to Guideline 5 in the Guidelines for Risk Adjusted Utilization Measures.</li> <li>Moved the <i>Note</i> in step 1 of the numerator.</li> <li>Added a note to step 3 of the numerator.</li> <li>Added a step to the numerator to clarify for hospitalizations with one or more direct transfers to use the last discharge.</li> <li>Combined the bullets for a potentially planned procedure and planned hospitalization specific to post-acute care settings in step 2 of the numerator, to clarify that both must be without a principal acute diagnosis.</li> </ul>
Acute Hospital Utilization (AHU)	✓		✓	<ul style="list-style-type: none"> <li>Moved instructions for direct transfer to Guideline 5 in the Guidelines for Risk Adjusted Utilization Measures.</li> <li>Clarified in step 3 of the <i>Calculation of Observed Events</i> to use the original stay and any direct transfer stays to identify exclusions.</li> </ul>
Emergency Department Utilization (EDU)	✓		✓	<ul style="list-style-type: none"> <li>No changes to this measure.</li> </ul>
Hospitalization for Potentially Preventable Complications (HPC)			✓	<ul style="list-style-type: none"> <li>Moved instructions for direct transfer to Guideline 5 in the Guidelines for Risk Adjusted Utilization Measures.</li> <li>Clarified in step 3 of <i>Acute ACSC</i> in the <i>Calculation of Observed Events</i> that the specified diagnoses must be found on the discharge claim.</li> <li>Clarified in step 3 of <i>Acute ACSC</i> and <i>Chronic ACSC</i> in the <i>Calculation of Observed Events</i> to use all discharges to identify primary diagnoses and exclusions for direct transfers.</li> <li>Clarified instructions to indicate that the Number of Members in the Eligible Population data element is calculated by IDSS.</li> </ul>

HEDIS 2020 Measures	Applicable to:			Changes for HEDIS 2020
	Commercial	Medicaid	Medicare	
<b>HEALTH PLAN DESCRIPTIVE INFORMATION</b>				
Board Certification (BCR)	✓	✓	✓	<ul style="list-style-type: none"> <li>• NCQA will no longer collect audited data for this measure.</li> </ul>
Enrollment by Product Line (ENP)	✓	✓	✓	<ul style="list-style-type: none"> <li>• No changes to this measure.</li> </ul>
Enrollment by State (EBS)	✓	✓	✓	<ul style="list-style-type: none"> <li>• No changes to this measure.</li> </ul>
Language Diversity of Membership (LDM)	✓	✓	✓	<ul style="list-style-type: none"> <li>• No changes to this measure.</li> </ul>
Race/Ethnicity Diversity of Membership (RDM)	✓	✓	✓	<ul style="list-style-type: none"> <li>• No changes to this measure.</li> </ul>
Total Membership (TLM)	✓	✓	✓	<ul style="list-style-type: none"> <li>• Added guidance for dually enrolled members and dual Medicaid/Medicare members in the Calculation section.</li> <li>• Replaced references to “Marketplace” with “Exchange” in Table TLM-1/2/3.</li> </ul>
<b>MEASURES COLLECTED USING ELECTRONIC CLINICAL DATA SYSTEMS</b>				
<b>Guidelines for Measures Collected Using ECDS</b>	✓	✓	✓	<ul style="list-style-type: none"> <li>• Incorporated the former What Are Electronic Clinical Data Systems? section into the Description section.</li> <li>• Clarified the requirements in the <i>Description</i> section for how data must be accessible by the care team upon request.</li> <li>• Clarified in the <i>Guidelines</i> section that ECDS measures follow the <i>General Guidelines for Data Collection and Reporting</i> unless an ECDS-specific guideline overrides those rules.</li> <li>• Added examples to the EHR SSoR category in <i>Guideline 2</i>.</li> <li>• Revised Guideline 4.</li> <li>• Revised <i>Guideline 5</i> to indicate that a member’s allocation is based on enrollment as detailed in the measure logic.</li> <li>• Revised Guideline 6.</li> <li>• Updated <i>Guideline 7</i> to indicate how codes are represented in HEDIS ECDS measures.</li> </ul>
Breast Cancer Screening (BCS-E)	✓	✓	✓	<ul style="list-style-type: none"> <li>• First-year ECDS version of the measure.</li> </ul>

HEDIS 2020 Measures	Applicable to:			Changes for HEDIS 2020
	Commercial	Medicaid	Medicare	
Colorectal Cancer Screening (COL-E)	✓	✓	✓	<ul style="list-style-type: none"> <li>• First-year ECDS version of the measure.</li> </ul>
Follow-Up Care for Children Prescribed ADHD Medication (ADD-E)	✓	✓		<ul style="list-style-type: none"> <li>• First-year ECDS version of the measure.</li> </ul>
Depression Screening and Follow-Up for Adolescents and Adults (DSF)	✓	✓	✓	<ul style="list-style-type: none"> <li>• Restructured the format of ECDS measures header layout (e.g., reformatted stratifications, added Participation Period to the <i>Definitions</i> section, removed underlining from value set names).</li> <li>• Added Reporting to the <i>Guidance</i> section.</li> <li>• Updated the positive finding score for the Center for Epidemiologic Studies Depression Scale-Revised (CESD-R) depression screening instrument from <math>\geq 10</math> to <math>\geq 17</math>.</li> <li>• Added Edinburgh Postnatal Depression Scale (EPDS) to list of depression screening instruments for adolescents.</li> <li>• Added Duke Anxiety Depression Scale (DADS) to list of depression screening instruments for adults and added an associated direct reference code.</li> <li>• Modified value sets to make them compatible with digital measure formatting.</li> <li>• Revised the timing for the exclusion for bipolar disorder from “during the Measurement Period or the year prior to the Measurement Period” to “during the year prior to the Measurement Period.”</li> <li>• Added direct reference codes for Medicaid, Medicare, Private Health Insurance (Commercial) and Birth Date.</li> <li>• Added Attributes to the <i>Data Criteria (element level)</i> section.</li> <li>• Revised the former “Data Source” column to “Data Source Logic” in the Data Elements for Reporting tables.</li> <li>• Removed the collection of the “Initial Population” and “Denominator” data elements by SSoR in the Data Elements for Reporting tables.</li> <li>• Added the <i>Rules for Allowable Adjustments of HEDIS</i> section.</li> </ul>
Utilization of the PHQ-9 to Monitor Depression Symptoms for Adolescents and Adults (DMS)	✓	✓	✓	<ul style="list-style-type: none"> <li>• Restructured the format of ECDS measures header layout (e.g., reformatted stratifications, added Participation Period to the <i>Definitions</i> section, removed underlining from value set names).</li> <li>• Revised Item Count from Encounters to Person.</li> </ul>

HEDIS 2020 Measures	Applicable to:			Changes for HEDIS 2020
	Commercial	Medicaid	Medicare	
				<ul style="list-style-type: none"> <li>• Added Reporting to the <i>Guidance</i> section.</li> <li>• Added a definition for Interactive Outpatient Encounter.</li> <li>• Modified value sets to make them compatible with digital measure formatting.</li> <li>• Added individual Initial Populations for each of the three rates.</li> <li>• Added individual Exclusions for each of the three rates.</li> <li>• Moved each of the three Denominator criteria to the corresponding Initial Population.</li> <li>• Added direct reference codes for Medicaid, Medicare, Private Health Insurance (Commercial) and Birth Date.</li> <li>• Revised the former “Data Source” column to “Data Source Logic” in the Data Elements for Reporting tables.</li> <li>• Removed the collection of the “Denominator” data element by SSoR in the Data Elements for Reporting tables.</li> <li>• Added the <i>Rules for Allowable Adjustments of HEDIS</i> section.</li> </ul>
Depression Remission or Response for Adolescents and Adults (DRR)	✓	✓	✓	<ul style="list-style-type: none"> <li>• Restructured the format of ECDS measures header layout (e.g., reformatted stratifications, added Participation Period to the <i>Definitions</i> section, removed underlining from value set names).</li> <li>• Clarified that the age stratifications are reported as of the start of the Intake Period.</li> <li>• Added Reporting to the <i>Guidance</i> section.</li> <li>• Modified value sets to make them compatible with digital measure formatting.</li> <li>• Added direct reference codes for Medicaid, Medicare, Private Health Insurance (Commercial) and Birth Date.</li> <li>• Revised the former “Data Source” column to “Data Source Logic” in the Data Elements for Reporting tables.</li> <li>• Removed the collection of the “Initial Population” and “Denominator” data elements by SSoR in the Data Elements for Reporting tables.</li> <li>• Added the <i>Rules for Allowable Adjustments of HEDIS</i> section.</li> </ul>
Unhealthy Alcohol Use Screening and Follow-Up (ASF)	✓	✓	✓	<ul style="list-style-type: none"> <li>• Restructured the format of ECDS measures header layout (e.g., reformatted stratifications, added Participation Period to the <i>Definitions</i> section, removed underlining from value set names).</li> <li>• Added Reporting to the <i>Guidance</i> section.</li> </ul>



HEDIS 2020 Measures	Applicable to:			Changes for HEDIS 2020
	Commercial	Medicaid	Medicare	
				<ul style="list-style-type: none"> <li>• Modified value sets to make them compatible with digital measure formatting.</li> <li>• Added direct reference codes for Medicaid, Medicare, Private Health Insurance (Commercial) and Birth Date.</li> <li>• Revised the former “Data Source” column to “Data Source Logic” in the Data Elements for Reporting tables.</li> <li>• Removed the collection of the “Initial Population” and “Denominator” data elements by SSoR in the Data Elements for Reporting tables.</li> <li>• Added the <i>Rules for Allowable Adjustments of HEDIS</i> section.</li> </ul>
Adult Immunization Status (AIS)	✓	✓	✓	<ul style="list-style-type: none"> <li>• Restructured the format of ECDS measures header layout (e.g., reformatted stratifications, added Participation Period to the <i>Definitions</i> section, removed underlining from value set names).</li> <li>• Modified value sets to make them compatible with digital measure formatting.</li> <li>• Added individual Initial Populations for each of the five rates.</li> <li>• Added individual Exclusions for each of the five rates.</li> <li>• Moved the each of the five Denominator criteria to the corresponding Initial Population.</li> <li>• Clarified that the zoster and pneumococcal vaccines must occur on or before the end of the measurement period.</li> <li>• Added direct reference codes for Medicaid, Medicare, Private Health Insurance (Commercial) and Birth Date.</li> <li>• Revised the former “Data Source” column to “Data Source Logic” in the Data Elements for Reporting tables.</li> <li>• Removed the collection of the “Initial Population” and “Denominator” data elements by SSoR in the Data Elements for Reporting tables.</li> <li>• Added the <i>Rules for Allowable Adjustments of HEDIS</i> section.</li> </ul>
Prenatal Immunization Status (PRS)	✓	✓		<ul style="list-style-type: none"> <li>• Restructured the format of ECDS measures header layout (e.g., reformatted stratifications, added Participation Period to the <i>Definitions</i> section, removed underlining from value set names).</li> <li>• Modified value sets to make them compatible with digital measure formatting.</li> <li>• Added a direct reference code for Assessment, Performed: Length of gestation at birth (observable entity) (SNOMEDCT Code 412726003).</li> </ul>

HEDIS 2020 Measures	Applicable to:			Changes for HEDIS 2020
	Commercial	Medicaid	Medicare	
				<ul style="list-style-type: none"> <li>• Added direct reference codes for Medicaid and Private Health Insurance (Commercial).</li> <li>• Revised the former “Data Source” column to “Data Source Logic” in the Data Elements for Reporting tables.</li> <li>• Removed the collection of the “Initial Population” and “Denominator” data elements by SSoR in the Data Elements for Reporting tables.</li> <li>• Added the <i>Rules for Allowable Adjustments of HEDIS</i> section.</li> </ul>
Prenatal Depression Screening and Follow-Up (PND)	✓	✓		<ul style="list-style-type: none"> <li>• First-year measure.</li> </ul>
Postpartum Depression Screening and Follow-Up (PDS)	✓	✓		<ul style="list-style-type: none"> <li>• First-year measure.</li> </ul>