## 2022 one-page quality reference guide



For more detailed information, please refer to PATH reference guide for adult health 2022 HEDIS.

| Measure name  | Members included in the measure  | Required for measure compliance  | Frequency   | Exclusions*   | Measure closure codes   |
|---|--|--|---|---|---|
| Medication adherence for diabetes medication (MAD)            | Members (age > 18) with two fills of any diabetes medication, excluding insulin  | Member adherence to medication therapy as defined by a proportion of days covered (PDC) ≥ 80%  | Annually  | ESRD, prescription claim for insulin  | N/A   |
| Medication adherence for hypertension – RAS antagonists (MAH) | Members (age > 18) with two fills of any RAS antagonists, excluding Entresto°  | Member adherence to medication therapy as defined by a proportion of days covered (PDC) ≥ 80%  | Annually  | ESRD, prescription claim for Entresto   | N/A   |
| Medication adherence for cholesterol – statins (MAC)          | Members (age > 18) with two fills of statin  | Member adherence to medication therapy as defined by a proportion of days covered (PDC) ≥ 80%  | Annually  | ESRD  | N/A   |
| Hemoglobin A1c control for patients with diabetes (HBD)       | Members (age 18-75) with diagnosis of diabetes through medical or pharmacy claim                                       | HbA1c result must be ≤ 9% to satisfy measure   | Annually and must be the most recent A1c in the medical record  | Gestational or steroid-induced diabetes, PCOS without a diabetes diagnosis  | 3044F, 3051F, 3052F   |
| Statin use in persons with diabetes (SUPD)                    | Members (age 40-75) with two fills of diabetic medication  | At least one prescription fill of a low, moderate, or high intensity statin  | Annually  | ESRD, pregnancy, lactation, fertility, pre-diabetes, PCOS, rhabodmyolysis, myopathy, cirrhosis, prescription claim for dapagliflozin or empagliflozin | N/A   |
| Eye exam for patients with diabetes (EED)                     | Members (age 18-75) with diagnosis of diabetes through medical or pharmacy claim                                       | Eye exam report for diabetic retinal disease or dilated eye exam by ophthalmologist or optometrist; bilateral eye enucleation any time in member history | Once every two years if negative result and annually if positive result   | Gestational or steroid-induced diabetes, PCOS without a diabetes diagnosis  | 2022F, 2023F, 3072F   |
| Kidney health evaluation for patients with diabetes (KED)     | Members (age 18-85) with diagnosis of diabetes through medical or pharmacy claim                                       | Both an eGFR and a uACR test   | Annually  | ESRD, dialysis, gestational or steroid-<br>induced diabetes, PCOS without a<br>diabetes diagnosis   | eGFR: 80047, 80048, 80050,<br>80053, 80069, 82565<br>and uACR: 82043, 82570 |
| Controlling high blood pressure (CBP)                         | Members (age 18-85) with diagnosis of hypertension   | Documentation in the medical record: members 18-85 whose BP was < 140/90   | Annually and must be the most recent BP in the medical record   | ESRD, dialysis, nephrectomy, or kidney transplant, pregnancy, non-acute inpatient admission   | Sys: 3074F, 3075F<br>and Dias: 3078F, 3079F                                 |
| Breast cancer screening (BCS)                                 | All women age 50-74  | Primary screening mammogram or initial diagnostic mammogram including 3D breast tomosynthesis  | Every two years<br>(Oct. 1, 2019 through Dec. 31, 2022)   | Bilateral or two unilateral mastectomies  | Z90.11, Z90.12, Z90.13  |
| Colorectal cancer screening (COL)                             | Members age 45-75  | FOBT or FIT (fecal immunochemical) Flexible sigmoidoscopy Colonoscopy CT colonography (virtual) FIT: DNA (Cologuard®)                                    | Annually Once every five years (2017-2022) Once every 10 years (2012-2022) Once every five years (2017-2022) Once every three years (2019-2022) | Colorectal cancer or total colectomy  | Z85.038, Z85.048  |
| Osteoporosis management in women who had a fracture (OMW)     | All women age 67-85 who suffered a fracture (does not include fractures to the finger, toe, face or skull)             | Member who had either a bone mineral density (BMD) test or prescription for a drug to treat osteoporosis   | Within six months of the fracture   | BMD 24 months prior to fracture, osteoporosis treatment 12 months prior to fracture   | 76977, 77078, 77080, 77085  |
| Medication reconciliation post-<br>discharge (MRP)            | Members age 18 and older for whom medications were reconciled on D/C date through 30 days after                        | Medication reconciliation can be conducted by a prescribing practitioner, clinical pharmacist or registered nurse  | Within 30 days of each unique discharge-to-home from an inpatient setting   | N/A   | 1111F, 99483, 99495, 99496  |
| Statin therapy for patients with cardiovascular disease (SPC) | Male members age 21-75 and female members age 40-75 with a diagnosis of atherosclerotic cardiovascular disease (ASCVD) | At least one prescription fill of a moderate or high intensity statin  | Annually  | Pregnancy, invitro fertilization,<br>prescription claim for clomiphene, ESRD,<br>dialysis, cirrhosis, myalgia, myositis,<br>myopathy, rhabdomyolysis  | N/A   |

<sup>\*</sup>Hospice is an exclusion for all measures. See back side for additional exclusion details on frailty and frailty with advanced illness.

## Frailty exclusion\* Frailty with advanced illness exclusion\* Added for members ages 81 and older as of Dec. 31 of the measurement year with a frailty diagnosis during the Added for members ages 66 and older as of Dec. 31 of the measurement year with a frailty and advanced illness diagnosis measurement year. during the measurement year. Measures impacted: **Measures impacted:** Controlling high blood pressure (CBP) Breast cancer screening (BCS) Osteoporosis management in women who had a fracture (OMW) Colorectal cancer screening (COL) Comprehensive diabetes care (CDC) Conditions or situations flagged as indicating frailty include, but are not limited to: Controlling high blood pressure (CBP) Age-related cognitive decline Osteoporosis management in women who had fracture (OMW) Bed confinement Statin therapy for patients with cardiovascular disease (SPC) • Durable medical equipment use, which includes everything from a cane to a ventilator – including oxygen use Falls Conditions flagged as indicating frailty with advanced Illness include, but are not limited to: · Gait abnormality - ataxic, paralytic or difficulty walking Creutzfeldt-Jakob disease · Home care such as skilled nursing, private-duty nurse, respite care services or home health aide · Dementia – Alzheimer's disease, amnesia, Lewy body dementia or member dispensed a dementia medication · Limitations of activities due to disability · Heart disease - congestive heart failure (CHF), left ventricular failure or heart failure • Muscle weakness or atrophy, malaise, fatigue, underweight or cachexia • Hepatic – cirrhosis, hepatitis, fibrosis or sclerosis Pressure ulcers • Hypertensive heart with one or more of the following – heart failure, end-stage renal disease (ESRD) or kidney disease · Malignancy - pancreas, brain, lymph, respiratory, digestive, renal, leukemia or hepatic • Nervous system - Huntington's disease, Parkinson's disease or Pick's disease • Renal – chronic kidney disease or ESRD • Respiratory – emphysema, pulmonary fibrosis or respiratory failure Advanced illness is indicated by one of the following: • Two or more outpatient, observation, emergency department (ED) or non-acute inpatient visits on separate dates of service with a diagnosis of advanced illness • One or more inpatient visit(s) with a diagnosis of advanced illness \*Diagnosis of frailty and advanced illness are closed by claims only. · Dispensed a dementia medication: donepezil, galantamine, rivastigmine or memantine



