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Quality Measures Desktop Reference for Medicaid Providers

HEDIS® is a widely used set of performance measures developed and maintained by NCQA. These measures are used to drive improvement efforts surrounding best practices.



Note: The information provided is based on HEDIS MY2026 technical specifications and is subject to change based on guidance given by the NCQA, CMS, and state recommendations. Refer to the appropriate agency for additional guidance.

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To simplify staying current with annual HEDIS documentation changes, we've developed a comprehensive HEDIS Resource Library for your use. This library includes tip sheets with coding guidance and measure-specific information, along with other helpful materials to support accurate documentation and claims coding guidance — promoting proper reimbursement and quality reporting.

To access these materials, log into Availity Essentials, select Payer, and then select the Resources tab. You can also contact your plan representative or consultant for assistance.

Measure	Exclusions	Eligible population	Occurrence	Description of measurement, screening, test, or treatment needed
Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents (WCC)	<ul style="list-style-type: none"> Persons with a diagnosis of pregnancy. Do not include laboratory claims (claims with POS code 81). Persons who use hospice services or elect to use a hospice benefit any time during the measurement period Persons who die any time during the measurement period 	Ages 3 to 17	Annual	<p>The percentage of persons who had an outpatient visit with a PCP or OB/GYN during the measurement period in which the following were documented:</p> <ul style="list-style-type: none"> BMI percentile documentation* Counseling for nutrition Counseling for physical activity <p>* Because BMI norms for youth vary with age and gender, this measure evaluates whether BMI percentile is assessed rather than an absolute BMI value.</p>
Chlamydia Screening (CHL)	<ul style="list-style-type: none"> Persons who use hospice services or elect to use a hospice benefit any time during the measurement period Persons who die any time during the measurement period Persons who are assigned male at birth any time in the patient's history 	Ages 16 to 24	Annual	<p>Percentage of persons who were recommended for routine chlamydia screening were identified as sexually active and had at least one test for chlamydia during the measurement period</p> <p>Note: Supplemental data can be used to identify Persons recommended for routine chlamydia screening.</p>
Oral Evaluation, Dental Services (OED)	<ul style="list-style-type: none"> Persons who use hospice services or elect to use a hospice benefit any time during the measurement period Persons who die anytime during the measurement period 	Ages 0 to 20	Annual	The percentage of persons under 21 years of age who received a comprehensive or periodic oral evaluation with a dental provider during the measurement period
Topical Fluoride for Children (TFC)	<ul style="list-style-type: none"> Persons who use hospice services or elect to use a hospice benefit any time during the measurement period Persons who die any time during the measurement period 	Ages 1 to 4	Annual	The percentage of persons who received at least two fluoride varnish applications during the measurement period
Appropriate Testing for Pharyngitis (CWP)	<ul style="list-style-type: none"> Persons who use hospice services or elect to use a hospice benefit any time during the measurement period Persons who die any time during the measurement period 	Ages 3 and older	Each occurrence	The percentage of episodes for persons who have been diagnosed with pharyngitis, dispensed an antibiotic, and received group A streptococcus (strep) test for the episode



Measure	Exclusions	Eligible population	Occurrence	Description of measurement, screening, test, or treatment needed
Pharmacotherapy Management of COPD Exacerbation (PCE)	<ul style="list-style-type: none"> Persons who use hospice services or elect to use a hospice benefit any time during the measurement period Persons who die any time during the measurement period 	Ages 40 and older	Inpatient discharge or ED event	<p>The percentage of COPD exacerbations for persons who had an acute inpatient discharge or emergency department (ED) visit on or between January 1 to November 30 of the measurement period and who were dispensed appropriate medications. Two rates are reported:</p> <ul style="list-style-type: none"> Dispensed a systemic corticosteroid (or there was evidence of an active prescription) within 14 days of the event Dispensed a bronchodilator (or there was evidence of an active prescription) within 30 days of the event <p>Note: The eligible population for this measure is based on acute inpatient discharges and ED visits, not on persons. It is possible for the denominator to include multiple events for the same individual.</p>

Measure	Exclusions	Eligible population	Occurrence	Description of measurement, screening, test, or treatment needed
Persistence of Beta-Blocker Treatment After a Heart Attack (PBH)	<ul style="list-style-type: none"> • Persons who use hospice services or elect to use a hospice benefit any time during the measurement period • Persons who die any time during the measurement period • Persons with a medication dispensing event that indicates a contraindication to beta-blocker therapy • Persons with a diagnosis that indicates a contraindication to beta-blocker therapy any time during the Patient's history through the end of the continuous enrollment period meet criteria. Do not include laboratory claims (claims with POS code 81). • Persons 66 to 80 years of age as of December 31 of the measurement period with frailty and advanced illness. Persons must meet both frailty and advanced illness criteria to be excluded. Do not include laboratory claims (claims with POS code 81). • Persons 81 years of age and older as of December 31 of the measurement period with at least two indications of frailty with different dates of service during the measurement period. Do not include laboratory claims (claims with POS code 81). 	Ages 18 and older	After discharge	The percentage of persons who were hospitalized and discharged from July 1 of the year prior to the measurement period to June 30 of the measurement period with a diagnosis of AMI (Acute myocardial infarction) and who received persistent beta-blocker treatment for 180 days (6 months) after discharge



Measure	Exclusions	Eligible population	Occurrence	Description of measurement, screening, test, or treatment needed
Controlling High Blood Pressure (CBP)	<ul style="list-style-type: none"> • Persons who use hospice services or elect to use a hospice benefit any time during the measurement period • Persons who die any time during the measurement period • Persons receiving palliative care or who had an encounter for palliative care any time during the measurement period. Do not include laboratory claims (claims with POS code 81). • Persons with a diagnosis that indicates end-stage renal disease (ESRD) any time during the Patient's history on or prior to December 31 of the measurement period. Do not include laboratory claims (claims with POS code 81). • Persons with a procedure that indicates end stage renal disease (ESRD): dialysis any time during the patient's history on or prior to December 31 of the measurement period. Do not include laboratory claims (claims with POS code 81). • Persons with a procedure that indicates ESRD: dialysis nephrectomy or kidney transplant any time during the patient's history on or prior to December 31 of the measurement period. • Persons with a diagnosis of pregnancy any time during the measurement period. Do not include laboratory claims (claims with POS code 81). • Persons 66 to 80 years of age as of December 31 of the measurement period with frailty <i>and</i> advanced illness. Persons must meet both frailty and advanced illness criteria to be excluded. Do not include laboratory claims (claims with POS code 81). 	Ages 18 to 85	Annual	<p>The percentage of persons who had a diagnosis of hypertension (HTN) and whose blood pressure (BP) was adequately controlled (< 140/90 mm Hg) during the measurement period</p> <p>The final BP of the measurement period is captured.</p> <p>Note: The most recent BP reading during the measurement period on or after the second diagnosis of hypertension. If multiple BP measurements occur on the same date or are noted in the chart on the same date, use the lowest systolic and lowest diastolic BP reading. If no BP is recorded during the measurement period, assume that the patient is <i>not controlled</i>.</p>



Measure	Exclusions	Eligible population	Occurrence	Description of measurement, screening, test, or treatment needed
Controlling High Blood Pressure (CBP) cont.	<ul style="list-style-type: none"> Persons 81 years of age and older as of December 31 of the measurement period with at least two indications of frailty with different dates of service during the measurement period. Do not include laboratory claims (claims with POS code 81). 	Ages 18 to 85	Annual	<p>The percentage of persons who had a diagnosis of hypertension (HTN) and whose blood pressure (BP) was adequately controlled (< 140/90 mm Hg) during the measurement period</p> <p>The final BP of the measurement period is captured.</p> <p>Note: The most recent BP reading during the measurement period on or after the second diagnosis of hypertension. If multiple BP measurements occur on the same date or are noted in the chart on the same date, use the lowest systolic and lowest diastolic BP reading. If no BP is recorded during the measurement period, assume that the patient is <i>not controlled</i>.</p>

Measure	Exclusions	Eligible population	Occurrence	Description of measurement, screening, test, or treatment needed
Cardiac Rehabilitation (CRE)	<ul style="list-style-type: none"> • Patients who use hospice services or elect to use a hospice benefit any time during the measurement period • Persons who die any time during the measurement period • Persons receiving palliative care or who had an encounter for palliative care any time during the measurement period. Do not include laboratory claims (claims with POS code 81). • Persons 66 to 80 years of age as of December 31 of the measurement period (all product lines) with frailty and advanced illness. Persons must meet both frailty and advanced illness criteria to be excluded. Do not include laboratory claims (claims with POS code 81). • Persons 81 years of age and older as of December 31 of the measurement period (all product lines) with at least two indications of frailty with different dates of service during the measurement period. Do not include laboratory claims (claims with POS code 81). • Discharged from an inpatient setting with any of the following on the discharge claim during the 180 days after the episode date: <ul style="list-style-type: none"> – Myocardial Infarction (MI) – Coronary artery bypass graft (CABG) – Heart or heart/lung transplant – Heart valve repair or replacement – Percutaneous Coronary Intervention (PCI) 	Ages 18 and older	Annual	<p>The percentage of persons who have attended cardiac rehabilitation following a qualified cardiac event including myocardial infarction, percutaneous coronary intervention, coronary artery bypass grafting, heart and heart/lung transplantation, or heart valve repair/replacement</p> <p>Four rates are reported:</p> <ul style="list-style-type: none"> • Initiation: the percentage of persons who attended two or more sessions of cardiac rehabilitation within 30 days after a qualifying event • Engagement 1: the percentage of persons who attended 12 or more sessions of cardiac rehabilitation within 90 days after a qualifying event • Engagement 2: the percentage of persons who attended 24 or more sessions of cardiac rehabilitation within 180 days after a qualifying event • Achievement: the percentage of persons who attended 36 or more sessions of cardiac rehabilitation within 180 days after a qualifying event

Measure	Exclusions	Eligible population	Occurrence	Description of measurement, screening, test, or treatment needed
Glycemic Status Assessment for Patients With Diabetes (GSD)	<ul style="list-style-type: none"> • Persons who use hospice services or elect to use a hospice benefit any time during the measurement period • Persons who die any time during the measurement period • Persons receiving palliative care or who had an encounter for palliative care any time during the measurement period. Do not include laboratory claims (claims with POS code 81). • Persons 66 years of age and older as of December 31 of the measurement period with frailty and advanced illness • Persons must meet both frailty and advanced illness criteria to be excluded. Do not include laboratory claims (claims with POS code 81). 	Ages 18 to 75	Annual	<p>The percentage of persons with diabetes (types 1 and 2) whose most recent glycemic status (hemoglobin A1c HbA1c or glucose management indicator GMI) was at the following levels during the measurement period:</p> <ul style="list-style-type: none"> • Glycemic status (< 8%) • Glycemic status (> 9%) <p>Note: Organizations must use the same data collection method (administrative or hybrid) to report these indicators.</p>
Blood Pressure Control Patients with Diabetes (BPD)	<ul style="list-style-type: none"> • Persons who use hospice services or elect to use a hospice benefit any time during the measurement period • Persons who die any time during the measurement period • Persons receiving palliative care or who had an encounter for palliative care any time during the measurement period. Do not include laboratory claims (claims with POS code 81). • Persons 66 years of age and older as of December 31 of the measurement with frailty and advanced illness • Persons must meet both frailty and advanced illness criteria to be excluded. Do not include laboratory claims (claims with POS code 81). 	Ages 18 to 75	Annual	<p>The percentage of persons with diabetes (types 1 and 2) whose blood pressure (BP) was adequately controlled (< 140/90 mm Hg) during the measurement period</p> <p>The final BP of the measurement period is captured.</p>

Measure	Exclusions	Eligible population	Occurrence	Description of measurement, screening, test, or treatment needed
Eye Exam for Patients with Diabetes (EED)	<ul style="list-style-type: none"> • Bilateral eye enucleation any time during the Patient’s history through December 31 of the measurement period: <ul style="list-style-type: none"> – Unilateral eye enucleation with a bilateral modifier (CPT® Modifier code 50) – Two unilateral eye enucleations with service dates 14 days or more apart. For example, if the service date for the first unilateral eye enucleation was February 1 of the measurement period, the service date for the second unilateral eye enucleation must be on or after February 15. – Left unilateral eye enucleation (ICD-10-PCS code 08T1XZZ) and right unilateral eye enucleation (ICD-10-PCS code 08T0XZZ) on the same or different dates of service – A unilateral eye enucleation and a left unilateral eye enucleation (ICD-10-PCS code 08T1XZZ) with service dates 14 days or more apart • A unilateral eye enucleation and a right unilateral eye enucleation (ICD-10-PCS code 08T0XZZ) with service dates 14 days or more apart • Persons who use hospice services or elect to use a hospice benefit any time during the measurement period • Persons who die any time during the measurement period 	Ages 18 to 75	Annual	<p>The percentage of persons with diabetes (types 1 and 2) who had one of the following:</p> <ul style="list-style-type: none"> • A retinal or dilated eye exam by an eye care professional (optometrist or ophthalmologist) in the measurement period • A negative retinal or dilated eye exam (negative for retinopathy) by an eye care professional in the year prior to the measurement period





Measure	Exclusions	Eligible population	Occurrence	Description of measurement, screening, test, or treatment needed
Eye Exam for Patients with Diabetes (EED) cont.	<ul style="list-style-type: none"> • Persons receiving palliative care or who had an encounter for palliative care any time during the measurement period. Do not include laboratory claims (claims with POS code 81). • Persons 66 years of age and older as of December 31 of the measurement period (all product lines) with frailty and advanced illness. Persons must meet both frailty and advanced illness criteria to be excluded. Do not include laboratory claims (claims with POS code 81). 	Ages 18 to 75	Annual	<p>The percentage of persons with diabetes (types 1 and 2) who had one of the following:</p> <ul style="list-style-type: none"> • A retinal or dilated eye exam by an eye care professional (optometrist or ophthalmologist) in the measurement period • A negative retinal or dilated eye exam (negative for retinopathy) by an eye care professional in the year prior to the measurement period

Measure	Exclusions	Eligible population	Occurrence	Description of measurement, screening, test, or treatment needed
Kidney Health Evaluation for Patients with Diabetes (KED)	<ul style="list-style-type: none"> • Persons who use hospice services or elect to use a hospice benefit any time during the measurement period • Persons who die any time during the measurement period • Persons receiving palliative care or who had an encounter for palliative care any time during the measurement period. Do not include laboratory claims (claims with POS code 81). • Persons with a diagnosis of ESRD any time during the patient's history on or prior to December 31 of the measurement period • Persons who had dialysis any time during the patient's history on or prior to December 31 of the measurement period • Persons 66 to 80 years of age as of December 31 of the measurement period with frailty <i>and</i> advanced illness. Persons must meet both frailty and advanced illness criteria to be excluded. Do not include laboratory claims (claims with POS code 81). • Persons 81 years of age and older as of December 31 of the measurement period with at least two indications of frailty with different dates of service during the measurement period. Do not include laboratory claims (claims with POS code 81). • Advanced illness on at least two different dates of service 	Ages 18 to 85	Annual	<ul style="list-style-type: none"> • The percentage of persons with diabetes (type 1 and type 2) who received a kidney health evaluation, defined by an estimated glomerular filtration rate (eGFR) <i>and</i> a urine albumin-creatinine rate (uACR), during the measurement period



Measure	Exclusions	Eligible population	Occurrence	Description of measurement, screening, test, or treatment needed
Diagnosed Mental Health Disorders (DMH)	<ul style="list-style-type: none"> Persons who use hospice services or elect to use a hospice benefit any time during the measurement period Persons who die any time during the measurement period 	1 year or older	Annual	<p>The percentage of persons who were diagnosed with a mental health disorder during the measurement period</p> <p>Note: The measure provides information on the diagnosed prevalence of mental health disorders. Neither a higher nor lower rate indicates better performance.</p>
Follow-Up After Hospitalization for Mental Illness (FUH)	<ul style="list-style-type: none"> Persons who use hospice services or elect to use a hospice benefit any time during the measurement period Persons who die any time during the measurement period 	Ages 6 and older	Within 7 and/or 30 days after discharge	<p>The percentage of discharges for persons who were hospitalized for a principal diagnosis of mental illness, or any diagnosis of intentional self-harm, and had a mental health follow-up service. Two rates are reported:</p> <ul style="list-style-type: none"> The percentage of discharges for which the patient received follow-up within 30 days after discharge. The percentage of discharges for which the patient received follow-up within 7 days after discharge
Follow-Up After Emergency Department Visit for Mental Illness (FUM)	<ul style="list-style-type: none"> Persons who use hospice services or elect to use a hospice benefit any time during the measurement period Persons who die any time during the measurement period 	Ages 6 or older	Within 7 and/or 30 days after ED visit	<p>The percentage of emergency department (ED) visits for persons with a principal diagnosis of mental illness, or any diagnosis of intentional self-harm, and had a mental health follow-up service. Two rates are reported:</p> <ul style="list-style-type: none"> The percentage of ED visits for which the patient received follow-up within 30 days of the ED visit (31 total days) The percentage of ED visits for which the patient received follow-up within 7 days of the ED visit (eight total days)

Measure	Exclusions	Eligible population	Occurrence	Description of measurement, screening, test, or treatment needed
Diagnosed Substance Use Disorders (DSU)	<ul style="list-style-type: none"> Persons who use hospice services or elect to use a hospice benefit any time during the measurement period Persons who die any time during the measurement period 	Ages 13 and older	Annual	<p>The percentage of persons who were diagnosed with a substance use disorder during the measurement period. Four rates are reported:</p> <ul style="list-style-type: none"> The percentage of persons diagnosed with an alcohol disorder The percentage of persons diagnosed with an opioid disorder The percentage of persons diagnosed with a disorder for other or unspecified drugs The percentage of persons diagnosed with any substance use disorder <p>Note: The measure provides information on the diagnosed prevalence of substance use disorders. Neither a higher nor lower rate indicates better performance.</p>
Follow-Up After High Intensity Care for Substance Use Disorder (FUI)	<ul style="list-style-type: none"> Persons who use hospice services or elect to use a hospice benefit any time during the measurement period Persons who die any time during the measurement period 	Ages 13 and older	Within 7 and/or 30 days after visit or discharge	<p>Percentage of acute inpatient hospitalizations, residential treatment, or withdrawal management visits for a diagnosis of substance use disorder that result in a follow-up visit or service for substance use disorder. Two rates are reported:</p> <ul style="list-style-type: none"> The percentage of visits or discharges for which the Patient received follow-up for substance use disorder within 30 days after the visit or discharge The percentage of visits or discharges for which the Patient received follow-up for substance use disorder within the seven days after the visit or discharge <p>Note: Follow-up visits on the same day of the visit or discharge do not meet this measure.</p>

Measure	Exclusions	Eligible population	Occurrence	Description of measurement, screening, test, or treatment needed
Follow-Up After Emergency Department Visit for Substance Use (FUA)	<ul style="list-style-type: none"> Persons who use hospice services or elect to use a hospice benefit any time during the measurement period Persons who die any time during the measurement period 	Ages 13 and older	Within 7 and/or 30 days after ED visit	<p>The percentage of ED visits among persons with a principal diagnosis of substance use disorder (SUD), or any diagnosis of drug overdose, for which there was follow-up. Two rates are reported:</p> <ul style="list-style-type: none"> The percentage of ED visits for which the patient received follow-up within 30 days of the ED visit (31 total days) The percentage of ED visits for which the patient received follow-up within seven days of the ED visit (eight total days) <p>Note: Follow-up visits that occur on the same day as the ED discharge meet this measure.</p>
Pharmacotherapy for Opioid Use Disorder (POD)	<ul style="list-style-type: none"> Persons who use hospice services or elect to use a hospice benefit any time during the measurement period Persons who die any time during the measurement period 	Ages 16 and older	Annual	The percentage of opioid use disorder (OUD) pharmacotherapy events that lasted at least 180 days with a diagnosis of OUD and a new OUD pharmacotherapy event
Diabetes Screening for People with Schizophrenia or Bipolar Disorder Who Are Using Antipsychotic Medications (SSD)	<ul style="list-style-type: none"> Persons who use hospice services or elect to use a hospice benefit any time during the measurement period Persons who die any time during the measurement period Persons with diabetes Persons who had no antipsychotic medications dispensed during the measurement period 	Ages 18 to 64	Annual	The percentage of persons with schizophrenia, schizoaffective disorder, or bipolar disorder, who were dispensed an antipsychotic medication and had a diabetes screening test (glucose test and/or HbA1c test) during the measurement period
Diabetes Monitoring for People with Diabetes and Schizophrenia (SMD)	<ul style="list-style-type: none"> Persons who use hospice services or elect to use a hospice benefit any time during the measurement period Persons who die any time during the measurement period 	Ages 18 to 64	Annual	Percentage of persons with schizophrenia or schizoaffective disorder and diabetes who had both an LDL-C and an HbA1c test during the measurement period



Measure	Exclusions	Eligible population	Occurrence	Description of measurement, screening, test, or treatment needed
Cardiovascular Monitoring for People with Cardiovascular Disease and Schizophrenia (SMC)	<ul style="list-style-type: none"> • Persons who use hospice services or elect to use a hospice benefit any time during the measurement period • Persons who die any time during the measurement period 	Ages 18 to 64	Annual	<p>Percentage of persons with schizophrenia or schizoaffective disorder and cardiovascular disease who had an LDL-C test during the measurement period</p> <p>Note: Indicators of cardiovascular disease include:</p> <ul style="list-style-type: none"> • Inpatient discharge for acute myocardial infarction (AMI) or coronary artery bypass grafting (CABG) during the year • Diagnosis of percutaneous coronary intervention (PCI) in any setting during the year • Diagnosis of ischemic vascular disease (IVD) during an inpatient or outpatient visit in both the current year and the prior year

Measure	Exclusions	Eligible population	Occurrence	Description of measurement, screening, test, or treatment needed
Adherence to Antipsychotic Medications for Individuals with Schizophrenia (SAA)	<ul style="list-style-type: none"> • Persons who use hospice services or elect to use a hospice benefit any time during the measurement period • Persons who die any time during the measurement period • Persons who had a diagnosis of dementia. Do not include laboratory claims (claims with POS code 81). • Persons who <i>did not</i> have at least two antipsychotic medication dispensing events • Persons 66 to 80 years of age as of December 31 of the measurement period with frailty <i>and</i> advanced illness. Persons must meet both frailty and advanced illness criteria to be excluded. Do not include laboratory claims (claims with POS code 81). • Persons 81 years of age and older as of December 31 of the measurement period with at least two indications of frailty with different dates of service during the measurement period. Do not include laboratory claims (claims with POS code 81). 	Ages 18 and older	Annual	The percentage of persons with schizophrenia or schizoaffective disorder who were dispensed and remained on the antipsychotic medication for at least 80% of their treatment period

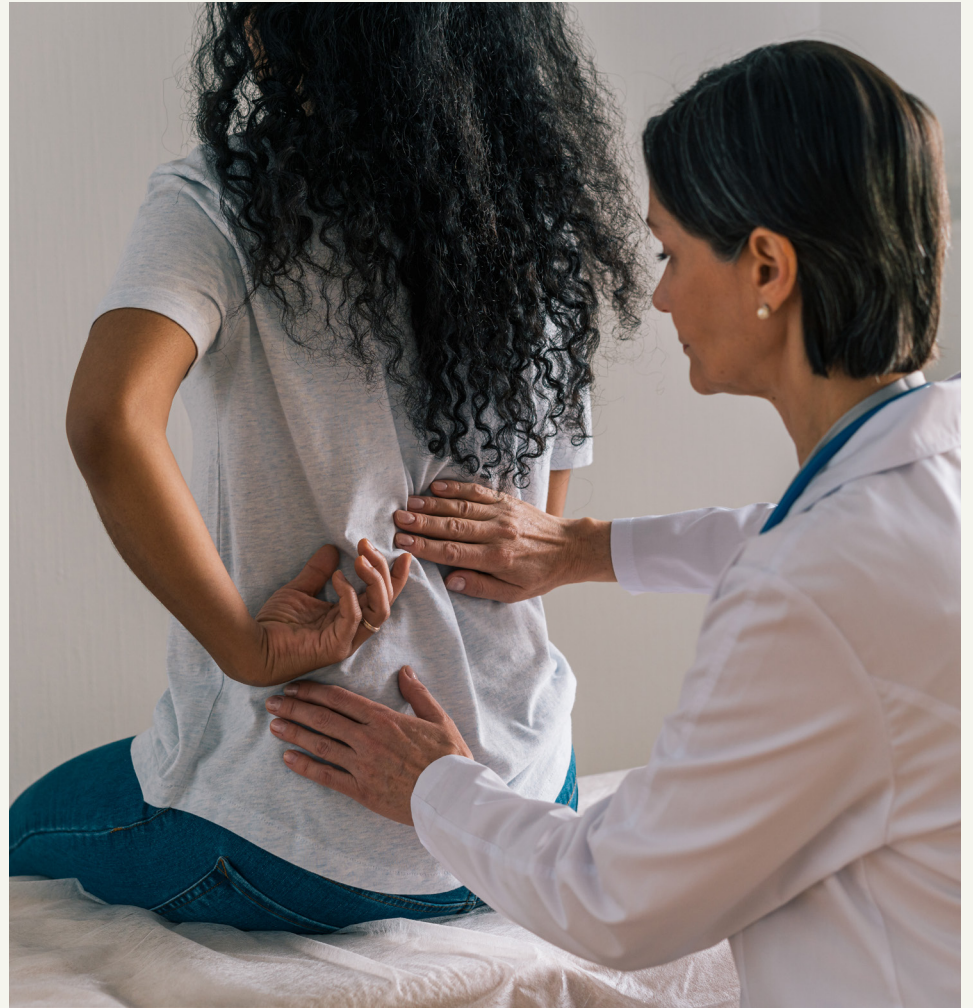


Measure	Exclusions	Eligible population	Occurrence	Description of measurement, screening, test, or treatment needed
Use of Opioids from Multiple Providers (UOP)	<ul style="list-style-type: none"> Persons who use hospice services or elect to use a hospice benefit any time during the measurement period Persons who die any time during the measurement period 	Ages 18 and older	Annual	<p>The percentage of persons receiving prescription opioids for ≥ 15 days during the measurement period who received opioids from multiple providers. Three rates are reported:</p> <ul style="list-style-type: none"> Multiple prescribers: the percentage of persons receiving prescriptions for opioids from four or more different prescribers during the measurement period Multiple pharmacies: the percentage of persons receiving prescriptions for opioids from four or more different pharmacies during the measurement period Multiple prescribers and multiple pharmacies: the percentage of persons receiving prescriptions for opioids from four or more different prescribers and four or more different pharmacies during the measurement period (for example, the percentage of persons who are numerator compliant for both the multiple prescribers and multiple pharmacies rates). <p>Note: A lower rate indicates better performance for all three rates.</p>



Measure	Exclusions	Eligible population	Occurrence	Description of measurement, screening, test, or treatment needed
Risk of Continued Opioid Use (COU)	<ul style="list-style-type: none"> • Persons who use hospice services or elect to use a hospice benefit any time during the measurement period • Persons who die any time during the measurement period • Persons who met at least one of the following at any time during the 365 days prior to the IPSD (Index Prescription Start Date) through 61 days after the IPSD: <ul style="list-style-type: none"> – Cancer: Do not include laboratory claims (claims with POS code 81). – Sickle cell disease: Do not include laboratory claims (claims with POS code 81). • Persons receiving palliative care or who had an encounter for palliative care any time during the measurement period. Do not include laboratory claims (claims with POS code 81). 	Ages 18 years and older	Annual	<p>The percentage of persons who have a new episode of opioid use that puts them at risk for continued opioid use. Two rates are reported:</p> <ul style="list-style-type: none"> • The percentage of persons with at least 15 days of prescription opioids in a 30-day period • The percentage of persons with at least 31 days of prescription opioids in a 62-day period <p>Note: Lower rate indicates better performance.</p>
Appropriate Treatment for Upper Respiratory Infection (URI)	<ul style="list-style-type: none"> • Persons who use hospice services or elect to use a hospice benefit any time during the measurement period • Persons who die any time during the measurement period 	Ages 3 months and older	Per occurrence	The percentage of episodes for persons with a diagnosis of upper respiratory infection (URI) that did not result in an antibiotic dispensing event.
Avoidance of Antibiotic Treatment for Acute Bronchitis/ Bronchiolitis (AAB)	<ul style="list-style-type: none"> • Persons who use hospice services or elect to use a hospice benefit any time during the measurement period • Persons who die any time during the measurement period 	Ages 3 months and older	Per occurrence	The percentage of episodes for persons with a diagnosis of acute bronchitis/ bronchiolitis that did not result in an antibiotic dispensing event.

Measure	Exclusions	Eligible population	Occurrence	Description of measurement, screening, test, or treatment needed
Use of Imaging Studies for Low Back Pain (LBP)	<ul style="list-style-type: none"> • Persons who use hospice services or elect to use a hospice benefit any time during the measurement period • Persons who die any time during the measurement period • Persons 66 years of age and older as of December 31 of the measurement with frailty <i>and</i> advanced illness. Persons must meet both frailty and advanced illness criteria to be excluded. Do not include laboratory claims (claims with POS code 81). • Persons meet any of the following criteria: <ul style="list-style-type: none"> – Cancer, HIV, history of organ transplant, osteoporosis, or spondylopathy. Do not include laboratory claims (claims with POS code 81). – Organ transplant, lumbar surgery, or medication treatment for osteoporosis – Trauma or a fragility fracture. Do not include laboratory claims (claims with POS code 81). – Intravenous drug abuse, neurological impairment, or spinal infection. Do not include laboratory claims (claims with POS code 81). – Prolonged use of corticosteroids. 90 consecutive days of corticosteroid treatment anytime during the 366-day period that begins 365 days prior to the IESD and ends on the IESD 	Ages 18 to 75	Not applicable	Percentage of persons who had a primary diagnosis of lower back pain and did not have an imaging study (for example, plain X-ray, MRI, or CT scan) within 28 days of the diagnosis



Measure	Exclusions	Eligible population	Occurrence	Description of measurement, screening, test, or treatment needed
Use of Imaging Studies for Low Back Pain (LBP) cont.	<ul style="list-style-type: none"> Persons receiving palliative care or who had an encounter for palliative care any time during the measurement period. Do not include laboratory claims (claims with POS code 81). A dispensed prescription to treat osteoporosis any time during the patient's history through 28 days after the IESD (Index Episode Start Date). 	Ages 18 to 75	Not applicable	Percentage of persons who had a primary diagnosis of lower back pain and did not have an imaging study (for example, plain X-ray, MRI, or CT scan) within 28 days of the diagnosis
Use of Opioids at High Dosage (HDO)	<ul style="list-style-type: none"> Persons who use hospice services or elect to use a hospice benefit any time during the measurement period Persons who die any time during the measurement period Patient who meets the following criteria: <ul style="list-style-type: none"> Cancer: Do not include laboratory claims (claims with POS code 81). Sickle cell: Do not include laboratory claims (claims with POS code 81). Persons receiving palliative care or who had an encounter for palliative care any time during the measurement period. Do not include laboratory claims (claims with POS code 81). 	Ages 18 and older	Annual	<p>The percentage of persons who received prescription opioids at a high dosage (average morphine milligram equivalent dose MME ≥ 90) for ≥ 15 days during the measurement period</p> <p>Note: Lower rate indicates better performance.</p>
Adults' Access to Preventive/ Ambulatory Health Services (AAP)	<ul style="list-style-type: none"> Persons who use hospice services or elect to use a hospice benefit any time during the measurement period Persons who die any time during the measurement period 	Ages 20 and older	Annual	<p>The percentage of persons who had an ambulatory or preventive care visit. The organization reports three separate percentages for each product line:</p> <ul style="list-style-type: none"> Medicaid and Medicare persons who had an ambulatory or preventive care visit during the measurement period Commercial persons who had an ambulatory or preventive care visit during the measurement period or the two years prior to the measurement period

Measure	Exclusions	Eligible population	Occurrence	Description of measurement, screening, test, or treatment needed
Initiation and Engagement of Substance Use Disorder Treatment (IET)	<ul style="list-style-type: none"> Persons who use hospice services or elect to use a hospice benefit any time during the measurement period Persons who die any time during the measurement period 	Ages 13 and older	Per episode	<p>The percentage of new SUD episodes that result in treatment initiation and engagement. Two rates are reported:</p> <ul style="list-style-type: none"> Initiation of SUD treatment: the percentage of new SUD episodes that result in treatment initiation through an inpatient SUD admission, outpatient visit, intensive outpatient encounter, partial hospitalization, telehealth visit, or medication treatment within 14 days Engagement of SUD treatment: the percentage of new SUD episodes that have evidence of treatment engagement within 34 days of initiation
Prenatal and Postpartum Care (PPC)	<ul style="list-style-type: none"> Persons who use hospice services or elect to use a hospice benefit any time during the measurement period Persons who die any time during the measurement period 	Live birth	Per occurrence	<p>The percentage of deliveries of live births on or between October 8 of the year prior to the measurement period and October 7 of the measurement period. For these Persons, the measure assesses the following facets of prenatal and postpartum care:</p> <ul style="list-style-type: none"> Timeliness of prenatal care: 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 Postpartum care: the percentage of deliveries that had a postpartum visit on or between 7 and 84 days after delivery



Measure	Exclusions	Eligible population	Occurrence	Description of measurement, screening, test, or treatment needed
Use of First-Line Psychosocial Care for Children and Adolescents on Antipsychotics (APP)	<ul style="list-style-type: none"> Persons who use hospice services or elect to use a hospice benefit any time during the measurement period Persons who die any time during the measurement period Persons for whom first-line antipsychotic medications may be clinically appropriate: Persons with a diagnosis of schizophrenia, schizoaffective disorder, bipolar disorder, other psychotic disorder, autism, or other developmental disorder on at least two different dates of service during the measurement period. Do not include laboratory claims (claims with POS code 81). 	Ages 1 to 17	Annual	<ul style="list-style-type: none"> The percentage of persons who had a new prescription for an antipsychotic medication and had documentation of psychosocial care as first-line treatment
Well-Child Visits in the First 30 Months of Life (W30)	<ul style="list-style-type: none"> Persons who use hospice services or elect to use a hospice benefit any time during the measurement period Persons who die any time during the measurement period 	Ages 0 to 15 months	Six visits	<p>Persons who had the following number of well-child visits with a PCP during the last 15 months. The following rates are reported:</p> <ul style="list-style-type: none"> Well-child visits in the first 15 months: children who turned 15 months old during the measurement period: six or more well-child visits Well-child visits for age 15 to 30 months: children who turned 30 months old during the measurement period: two or more well-child visits
		Ages 15 to 30 months	Two visits	
Child and Adolescent Well-Care Visits (WCV)	<ul style="list-style-type: none"> Persons who use hospice services or elect to use a hospice benefit any time during the measurement period Persons who die any time during the measurement period 	Ages 3 to 21	Annual	Persons who had at least one comprehensive well-care visit with a PCP or an OB/GYN practitioner during the measurement period
Antibiotic Utilization for Respiratory Conditions (AXR)	<ul style="list-style-type: none"> Persons who use hospice services or elect to use a hospice benefit any time during the measurement period Persons who die in the measurement period 	Ages 3 months and older	Per episode	The percentage of episodes for persons with a diagnosis of a respiratory condition that resulted in an antibiotic dispensing event



Measure	Exclusions	Eligible population	Occurrence	Description of measurement, screening, test, or treatment needed
Plan All-Cause Readmissions (PCR)	<ul style="list-style-type: none"> Persons who use hospice services or elect to use a hospice benefit any time during the measurement period 	Ages 18 and older	Per occurrence	The risk-adjusted ratio of actual to predicted unplanned acute readmissions (inpatient or observation) within 30 days of hospitalization (inpatient or observation) for any diagnosis.
Acute Hospital Utilization (AHU)	<ul style="list-style-type: none"> Persons who use hospice services or elect to use a hospice benefit any time during the measurement period 	Ages 18 and older		For persons 18 years of age and older, the risk-adjusted ratio of observed-to-expected acute inpatient and observation stay discharges during the measurement period
Disability Description of Membership (DDM)	N/A	All Ages		<p>An unduplicated count and percentage of members enrolled at any time during the measurement year, by disability status and disability status source.</p> <p>Report the number of members by disability status and the source from which those data were obtained:</p> <ul style="list-style-type: none"> Self-reported questionnaires Self-reported accommodations Enrollment status Unknown No data

Measure	Exclusions	Eligible population	Occurrence	Description of measurement, screening, test, or treatment needed
Childhood Immunization Status (CIS-E)	<ul style="list-style-type: none"> • Persons who use hospice services or elect to use a hospice benefit any time during the measurement period • Persons who die any time during the measurement period • Persons who had a contraindication to a childhood vaccine on or before their second birthday. Do not include laboratory claims (claims with POS 81). • Persons who had an organ or bone marrow transplant. 	Ages 0 to 2	Multiple doses	<p>The percentage of persons who had appropriate doses of the following vaccines on or before their second birthday:</p> <ul style="list-style-type: none"> • Four diphtheria, tetanus, and acellular pertussis (DTaP) • Three polio (IPV) • One measles, mumps, and rubella (MMR) (can only be given on or between first and second birthday to close the gap) • Three haemophilus influenza type B (HiB) • Three hepatitis B (HepB) (One of the three vaccinations can be a newborn hepatitis B vaccination during the 8-day period that begins on the date of birth and ends seven days after the date of birth.) • One chicken pox (VZV) (can only be given on or between first and second birthday to close the gap) • Four pneumococcal conjugate (PCV) • One hepatitis A (HepA) (can only be given on or between first and second birthday to close the gap) • Two two-dose rotavirus (RV) or three three-dose rotavirus (RV) (Or one two-dose and two three-dose RV combination) • Two influenza (flu) (influenza cannot be given until infant is 6 months of age – One of the two vaccinations for influenza can be an LAIV administered on the child's second birthday).



Measure	Exclusions	Eligible population	Occurrence	Description of measurement, screening, test, or treatment needed
Immunizations for Adolescents (IMA-E)	<ul style="list-style-type: none"> Persons who use hospice services or elect to use a hospice benefit any time during the measurement period Persons who die anytime during the measurement period 	Ages 9-13	Multiple doses	<p>The percentage of persons who had one dose of meningococcal vaccine, one tetanus, diphtheria toxoids and acellular pertussis (Tdap) vaccine, and have completed the human papillomavirus (HPV) vaccine series by their 13th birthday. The measure calculates a rate for each vaccine and two combination rates:</p> <ul style="list-style-type: none"> Meningococcal vaccine between 10th and 13th birthday Tdap vaccine between 10th and 13th birthday HPV vaccines between 9th and 13th birthday
Lead Screening in Children (LSC-E)	<ul style="list-style-type: none"> Persons who use hospice services or elect to use a hospice benefit any time during the measurement period Persons who die any time during the measurement period 	Ages 0 to 2	Once before age 2	The percentage of persons who had one or more capillary or venous lead blood tests by their second birthday
Breast Cancer Screening (BCS-E)	<ul style="list-style-type: none"> Persons who use hospice services or elect to use a hospice benefit any time during the measurement period Persons who had a bilateral mastectomy or both right and left unilateral mastectomies any time during the patient's history through the end of the measurement period Persons who had gender-affirming chest surgery with a diagnosis of gender dysphoria any time during the patient's history through the end of the measurement period Persons 66 years of age or older as of December 31 of the measurement period with frailty <i>and</i> advanced illness. Persons must meet both frailty and advanced illness criteria to be excluded. Do not include laboratory claims (claims with POS code 81). Persons who die any time during the measurement period Persons receiving palliative care or who had an encounter for palliative care any time during the measurement period. Do not include laboratory claims (claims with POS code 81). 	Ages 40 to 74	Annual	The percentage of persons who were recommended for routine breast cancer screening and had a mammogram to screen for breast cancer



Measure	Exclusions	Eligible population	Occurrence	Description of measurement, screening, test, or treatment needed
Documented Assessment After Mammogram (DBM-E)	<ul style="list-style-type: none"> Persons who use hospice services or elect to use a hospice benefit any time during the measurement period Persons who die any time during the measurement period 	Ages 40 to 74		The percentage of episodes of mammograms documented in the form of a BI-RADS assessment within 14 days of the mammogram
Follow-Up After Abnormal Mammogram Assessment (FMA-E)	<ul style="list-style-type: none"> Persons who use hospice services or elect to use a hospice benefit any time during the measurement period Persons who die any time during the measurement period 	Ages 40 to 74		The percentage of episodes for with inconclusive or high-risk BI-RADS assessments who received appropriate follow-up within 90 days of the assessment
Cervical Cancer Screening (CCS-E)	<ul style="list-style-type: none"> Persons who use hospice services or elect to use a hospice benefit any time during the measurement period Persons who die any time during the measurement period Hysterectomy with no residual cervix any time during the patient's history through December 31 of the measurement period Cervical agenesis or acquired absence of cervix any time during the patient's history through the end of the measurement period. Do not include laboratory claims (claims with POS code 81). Persons receiving palliative care or who had an encounter for palliative care any time during the measurement period. Do not include laboratory claims (claims with POS code 81). Persons with Sex Assigned at Birth of Male any time during the patient's history 	Ages 21 to 64	Varies by age	<p>The percentage of persons who were recommended for routine cervical cancer screening and were screened for cervical cancer using any of the following criteria:</p> <ul style="list-style-type: none"> Persons 21 to 64 years of age who were recommended for routine cervical cancer screening and had cervical cytology performed within the last three years Persons 30 to 64 years of age who were recommended for routine cervical cancer screening and had cervical high-risk human papillomavirus (hrHPV) testing performed within the last five years Persons 30 to 64 years of age who were recommended for routine cervical cancer screening and had cervical cytology/high-risk human papillomavirus (hrHPV) cotesting within the last five years

Measure	Exclusions	Eligible population	Occurrence	Description of measurement, screening, test, or treatment needed
Colorectal Cancer Screening (COL-E)	<ul style="list-style-type: none"> • Persons who use hospice services or elect to use a hospice benefit any time during the measurement period • Persons who die any time during the measurement period • Persons 66 years of age or older as of December 31 of the measurement period with frailty <i>and</i> advanced illness. Persons must meet both frailty and advanced illness criteria to be excluded. Do not include laboratory claims (claims with POS code 81). • Persons receiving palliative care or who had an encounter for palliative care any time during the measurement period. Do not include laboratory claims (claims with POS code 81). • Persons who had colorectal cancer any time during the patient's history through December 31 of the measurement period. Do not include laboratory claims (claims with POS code 81). • Persons who had a total colectomy any time during the patient's history through December 31 of the measurement period 	Ages 45 to 75	Dependent on screening type	<p>The percentage of persons who had appropriate screening for colorectal cancer. Screenings are defined by one of the following:</p> <ul style="list-style-type: none"> • Fecal occult blood test (FOBT) during the measurement period • Annual fecal immunochemical test (FIT) during measurement period • Flexible sigmoidoscopy during the measurement period or the four years prior to the measurement period • Colonoscopy during the measurement period or the nine years prior to the measurement period • CT colonography during the measurement period or the four years prior to the measurement period • Stool DNA (sDNA) with FIT test during the measurement period or the two years prior to the measurement period

Measure	Exclusions	Eligible population	Occurrence	Description of measurement, screening, test, or treatment needed
Blood Pressure Control for Patients With Hypertension (BPC-E)	<ul style="list-style-type: none"> • Persons who use hospice services or elect to use a hospice benefit any time during the measurement period • Persons who die any time during the measurement period • Persons receiving palliative care or who had an encounter for palliative care any time during the measurement period. Do not include laboratory claims (claims with POS code 81). • Persons with a diagnosis that indicates end-stage renal disease (ESRD) any time during the Patient's history on or prior to December 31 of the measurement period. Do not include laboratory claims (claims with POS code 81). • Persons with a procedure that indicates end stage renal disease (ESRD): dialysis any time during the patient's history on or prior to December 31 of the measurement period. Do not include laboratory claims (claims with POS code 81). • Persons with a procedure that indicates ESRD: dialysis nephrectomy or kidney transplant any time during the patient's history on or prior to December 31 of the measurement period. Persons with a diagnosis of pregnancy any time during the measurement period. Do not include laboratory claims (claims with POS code 81). • Persons 66 to 80 years of age as of December 31 of the measurement period with frailty <i>and</i> advanced illness. Persons must meet both frailty and advanced illness criteria to be excluded. Do not include laboratory claims (claims with POS code 81). 	Ages 18 to 85	Annual	The percentage of persons who had a diagnosis of hypertension (HTN) and whose most recent blood pressure (BP) was < 140/90 mm Hg during the measurement period



Measure	Exclusions	Eligible population	Occurrence	Description of measurement, screening, test, or treatment needed
Blood Pressure Control for Patients With Hypertension (BPC-E) cont.	<ul style="list-style-type: none"> Persons 81 years of age and older as of December 31 of the measurement period with at least two indications of frailty with different dates of service during the measurement period. Do not include laboratory Non-acute inpatient stay or admission 	Ages 18 to 85	Annual	The percentage of persons who had a diagnosis of hypertension (HTN) and whose most recent blood pressure (BP) was < 140/90 mm Hg during the measurement period
Statin Therapy for Patients with Cardiovascular Disease (SPC-E)	<ul style="list-style-type: none"> Persons who use hospice services or elect to use a hospice benefit any time during the measurement period Persons receiving palliative care or who had an encounter for palliative care any time during the measurement period. Do not include laboratory claims (claims with POS code 81). Persons who die any time during the measurement period Persons with a diagnosis of pregnancy during the measurement period or the year prior to the measurement period. Do not include laboratory claims (claims with POS code 81). In vitro fertilization in the measurement period or the year prior to the measurement period Dispensed at least one prescription for clomiphene during the measurement period or the year prior to the measurement period ESRD during the measurement period or the year prior to the measurement period. Do not include laboratory claims (claims with POS code 81). Dialysis during the measurement period or the year prior to the measurement period 	Ages 21 to 75	Annual	<p>The percentage of persons who are identified as having clinical atherosclerotic cardiovascular disease (ASCVD) and met the following criteria. The following rates are reported:</p> <ul style="list-style-type: none"> Received statin therapy: Persons who were dispensed at least one high- or moderate-intensity statin medication during the measurement period. Statin adherence 80%: Persons who remained on a high- or moderate-intensity statin medication for at least 80% of the treatment period.

Measure	Exclusions	Eligible population	Occurrence	Description of measurement, screening, test, or treatment needed
Statin Therapy for Patients with Cardiovascular Disease (SPC-E) cont.	<ul style="list-style-type: none"> • Cirrhosis during the measurement period or the year prior to the measurement period. Do not include laboratory claims (claims with POS code 81). • Myalgia, myositis, myopathy, or rhabdomyolysis during the measurement period. Do not include laboratory claims (claims with POS code 81). • Myalgia or rhabdomyolysis caused by a statin any time during the patient’s history through December 31 of the measurement period • Persons 66 years of age and older as of December 31 of the measurement period with frailty and advanced illness. • (Persons must meet both frailty and advanced illness criteria to be excluded) • Do not include laboratory claims (claims with POS code 81). 	Ages 21 to 75	Annual	<p>The percentage of persons who are identified as having clinical atherosclerotic cardiovascular disease (ASCVD) and met the following criteria. The following rates are reported:</p> <ul style="list-style-type: none"> • Received statin therapy: Persons who were dispensed at least one high- or moderate-intensity statin medication during the measurement period. • Statin adherence 80%: Persons who remained on a high- or moderate-intensity statin medication for at least 80% of the treatment period.
Statin Therapy for Patients with Diabetes (SPD-E)	<ul style="list-style-type: none"> • Persons with at least one of the following during the year prior to the measurement period in any setting: <ul style="list-style-type: none"> – Myocardial Infarction (MI) – Coronary artery bypass graft (CABG) – Percutaneous Coronary Intervention (PCI) – Other revascularization procedure – Two diagnoses on two separate dates of service of Atherosclerotic Cardiovascular Disease (ASCVD) • Persons who had at least one encounter with a diagnosis of IVD (In Vitro Diagnostic) during both the measurement period and the year prior to the measurement period 	Ages 40 to 75	Annual	<p>The percentage of persons with diabetes who do not have clinical atherosclerotic cardiovascular disease (ASCVD) who met the following criteria. Two rates are reported:</p> <ul style="list-style-type: none"> • Received statin therapy: Persons who were dispensed at least one statin medication of any intensity during the measurement period • Statin adherence 80%: Persons who remained on a statin medication of any intensity for at least 80% of the treatment period

Measure	Exclusions	Eligible population	Occurrence	Description of measurement, screening, test, or treatment needed
Statin Therapy for Patients with Diabetes (SPD-E) cont.	<ul style="list-style-type: none"> • Persons with a diagnosis of pregnancy during the measurement period or year prior to the measurement period. Do not include laboratory claims (claims with POS code 81). • In vitro fertilization in the measurement period or year prior to the measurement period • Dispensed at least one prescription for clomiphene during the measurement period or the year prior to the measurement period. • ESRD during the measurement period or the year prior to the measurement period. Do not include laboratory claims (claims with POS code 81). • Dialysis during the measurement period or the year prior to the measurement period • Cirrhosis during the measurement period or the year prior to the measurement period. Do not include laboratory claims (claims with POS code 81). • Myalgia, myositis, myopathy, or rhabdomyolysis during the measurement period. Do not include laboratory claims (claims with POS code 81). • Myalgia or rhabdomyolysis caused by a statin any time during the Patient's history through December 31 of the measurement period • Persons who use hospice services or elect to use a hospice benefit any time during the measurement period • Persons who die any time during the measurement period 	Ages 40 to 75	Annual	<p>The percentage of persons with diabetes who do not have clinical atherosclerotic cardiovascular disease (ASCVD) who met the following criteria. Two rates are reported:</p> <ul style="list-style-type: none"> • Received statin therapy: Persons who were dispensed at least one statin medication of any intensity during the measurement period • Statin adherence 80%: Persons who remained on a statin medication of any intensity for at least 80% of the treatment period



Measure	Exclusions	Eligible population	Occurrence	Description of measurement, screening, test, or treatment needed
Statin Therapy for Patients with Diabetes (SPD-E) cont.	<ul style="list-style-type: none"> Persons receiving palliative care or who had an encounter for palliative care any time during the measurement period. Do not include laboratory claims (claims with POS code 81). Persons 66 years of age and older as of December 31 of the measurement period with frailty and advanced illness. Persons must meet both frailty and advanced illness criteria to be excluded. Do not include laboratory claims (claims with POS code 81). 	Ages 40 to 75	Annual	<p>The percentage of persons with diabetes who do not have clinical atherosclerotic cardiovascular disease (ASCVD) who met the following criteria. Two rates are reported:</p> <ul style="list-style-type: none"> Received statin therapy: Persons who were dispensed at least one statin medication of any intensity during the measurement period Statin adherence 80%: Persons who remained on a statin medication of any intensity for at least 80% of the treatment period
Blood Pressure Control for Patients with Diabetes (BPD-E)	<ul style="list-style-type: none"> Persons who use hospice services or elect to use a hospice benefit any time during the measurement period Persons who die any time during the measurement period Persons receiving palliative care or who had an encounter for palliative care any time during the measurement period. Do not include laboratory claims (claims with POS code 81). Persons 66 years of age and older as of December 31 of the measurement period with frailty and advanced illness. Persons must meet both frailty and advanced illness criteria to be excluded. Do not include laboratory claims (claims with POS code 81). 	Ages 18 to 75	Annual	The percentage of persons 18-75 with diabetes and most recent blood pressure (BP) <140/90 mm Hg during the measurement period

Measure	Exclusions	Eligible population	Occurrence	Description of measurement, screening, test, or treatment needed
Follow-Up Care for Children Prescribed ADHD Medication (ADD-E)	<ul style="list-style-type: none"> Persons who use hospice services or elect to use a hospice benefit any time during the measurement period Persons who die any time during the measurement period Persons with a diagnosis of narcolepsy any time during the patient's history through the end of the measurement period. Do not include laboratory claims (claims with POS code 81). 	Ages 6 to 12	Varies by phase	<p>The percentage of children newly prescribed attention-deficit/hyperactivity disorder (ADHD) medication who had at least three follow-up care visits within a 10-month period, one of which was within 30 days of when the first ADHD medication was dispensed</p> <p>Two rates are reported:</p> <ul style="list-style-type: none"> Initiation phase: the percentage of persons 6 to 12 years of age with a prescription dispensed for ADHD medication, who had one follow-up visit with a practitioner with prescribing authority during the 30-day initiation phase. Continuation and maintenance (C&M) phase: the percentage of Persons 6 to 12 years of age with a prescription dispensed for ADHD medication, who remained on the medication for at least 210 days and who, in addition to the visit in the Initiation Phase, had at least two follow-up visits with a practitioner within 270 days (nine months) after the initiation phase ended.
Metabolic Monitoring for Children and Adolescents on Antipsychotics (APM-E)	<ul style="list-style-type: none"> Persons who use hospice services or elect to use a hospice benefit any time during the measurement period Persons who die any time during the measurement period 	Ages 1 to 17	Annual	<p>Persons who had two or more antipsychotic prescriptions and had metabolic testing during the year. Three rates are reported:</p> <ul style="list-style-type: none"> The percentage of children and adolescents on antipsychotics who received blood glucose testing The percentage of children and adolescents on antipsychotics who received cholesterol testing The percentage of children and adolescents on antipsychotics who received both blood glucose and cholesterol testing

Measure	Exclusions	Eligible population	Occurrence	Description of measurement, screening, test, or treatment needed
Depression Screening and Follow-up for Adolescents and Adults (DSF-E)	<ul style="list-style-type: none"> • Persons who use hospice services or elect to use a hospice benefit any time during the measurement period • Persons who die any time during the measurement period • Persons with a history of bipolar disorder any time during the patient's history through the end of the year prior to the measurement period. Do not include laboratory claims (claims with POS code 81). • Persons with depression that starts during the year prior to the measurement period. Do not include laboratory claims (claims with POS code 81). 	Ages 12 and older	Per episode	<p>The percentage of persons who were screened for clinical depression using a standardized instrument and, if screened positive, received follow-up care:</p> <ul style="list-style-type: none"> • Depression screening: The percentage of persons who were screened for clinical depression using a standardized instrument • Follow-up on positive screen: The percentage of persons who received follow-up care within 30 days of a positive depression screen finding
Utilization of the PHQ-9 to Monitor Depression Symptoms for Adolescents and Adults (DMS-E)	<ul style="list-style-type: none"> • Persons with any of the following any time during the Patient's history through the end of the measurement period. Do not include laboratory claims (claims with POS code 81): <ul style="list-style-type: none"> – Bipolar disorder – Personality disorder – Psychotic disorder – Pervasive developmental disorder • Persons who use hospice services or elect to use a hospice benefit any time during the measurement period • Persons who die any time during the measurement period 	Ages 12 and older	Per episode	The percentage of persons with a diagnosis of major depression or dysthymia, who had an outpatient encounter with a PHQ-9 score present in their record in the same assessment period as the encounter
Follow-Up After Acute and Urgent Care Visits for Asthma (AAF-E)	<ul style="list-style-type: none"> • Persons who use hospice services or elect to use a hospice benefit any time during the measurement period • Persons who die any time during the measurement period • Persons with cystic fibrosis diagnosis • Do not include laboratory claims (claims with POS code 81). 	Ages 5-64	Per episode	Percentage of eligible population having a follow-up visit diagnosis of asthma within 30 days of an inpatient discharge, observation stay discharge or ED visit, or urgent care visit with corresponding asthma diagnosis.

Measure	Exclusions	Eligible population	Occurrence	Description of measurement, screening, test, or treatment needed
Unhealthy Alcohol Use Screening and Follow-Up (ASF-E)	<ul style="list-style-type: none"> • Persons who use hospice services or elect to use a hospice benefit any time during the measurement period • Persons who die any time during the measurement period • Persons with alcohol use disorder that starts during the year prior to the measurement period. Do not include laboratory claims (claims with POS code 81). • Persons with history of dementia any time during the patient's history through the end of the measurement period. Do not include laboratory claims (claims with POS code 81). 	Ages 18 and older	Per episode	<p>The percentage of persons who were screened for unhealthy alcohol use using a standardized instrument and, if screened positive, received appropriate follow-up care:</p> <ul style="list-style-type: none"> • Unhealthy alcohol use screening: The percentage of persons who had a systematic screening for unhealthy alcohol use • Follow-up care on positive screen: The percentage of persons receiving brief counseling or other follow-up care within 60 days (two months) of screening positive for unhealthy alcohol use
Depression Remission or Response for Adolescents and Adults (DRR-E)	<ul style="list-style-type: none"> • Persons who use hospice services or elect to use a hospice benefit any time during the measurement period • Persons who die any time during the measurement period • Persons with any of the following any time during the patient's history through the end of the measurement period: <ul style="list-style-type: none"> – Bipolar disorder – Personality disorder – Psychotic disorder – Pervasive developmental disorder 	Ages 12 and older	Per episode	<p>The percentage of persons with a diagnosis of depression and an elevated PHQ-9 score, who had evidence of response or remission within 120 to 240 days (four to eight months) of the elevated score:</p> <ul style="list-style-type: none"> • Follow-up PHQ-9: The percentage of persons who have a follow-up PHQ-9 score documented within 120 to 240 days (four to eight months) after the initial elevated PHQ-9 score • Depression remission: The percentage of persons who achieved remission within 120 to 240 days (four to eight months) after the initial elevated PHQ-9 score • Depression response: The percentage of persons who showed response within 120 to 240 days (four to eight months) after the initial elevated PHQ-9 score
Adult Immunization Status (AIS-E)	<ul style="list-style-type: none"> • Persons who use hospice services or elect to use a hospice benefit any time during the measurement period • Persons who die any time during the measurement period 	Ages 19 and older	Annual	<p>The percentage of persons who are up to date on recommended routine vaccines for influenza, tetanus, and diphtheria (Td) or tetanus, diphtheria and acellular pertussis (Tdap), zoster, pneumococcal, hepatitis B and coronavirus disease 2019 (COVID-19)</p>

Measure	Exclusions	Eligible population	Occurrence	Description of measurement, screening, test, or treatment needed
Prenatal Immunization Status (PRS-E)	<ul style="list-style-type: none"> Persons who use hospice services or elect to use a hospice benefit any time during the measurement period Persons who die any time during the measurement period Deliveries that occurred at less than 37 weeks gestation 	N/A	Annual	The percentage of deliveries in the measurement period in which persons had received influenza and tetanus, diphtheria toxoids, and acellular pertussis (Tdap) vaccinations
Prenatal Depression Screening and Follow-up (PND-E)	<ul style="list-style-type: none"> Persons who use hospice services or elect to use a hospice benefit any time during the measurement period Persons who die any time during the measurement period Deliveries that occurred at less than 37 weekss gestation 	Not applicable	Annual	<p>The percentage of deliveries in which persons were screened for clinical depression while pregnant and, if screened positive, received follow-up care:</p> <ul style="list-style-type: none"> Depression screening: The percentage of deliveries in which persons were screened for clinical depression during pregnancy using a standardized instrument Follow-up on positive screen: The percentage of deliveries in which persons received follow-up care within 30 days of a positive depression screen finding
Postpartum Depression Screening and Follow-up (PDS-E)	<ul style="list-style-type: none"> Persons who use hospice services or elect to use a hospice benefit any time during the measurement period Persons who die any time during the measurement period 	Not applicable	Annual	<p>The percentage of deliveries in which persons were screened for clinical depression during the postpartum period, and if screened positive, received follow-up care:</p> <ul style="list-style-type: none"> Depression screening: The percentage of deliveries in which persons were screened for clinical depression using a standardized instrument during the postpartum period Follow-up on positive screen: The percentage of deliveries in which persons received follow-up care within 30 days of a positive depression screen finding



Measure	Exclusions	Eligible population	Occurrence	Description of measurement, screening, test, or treatment needed
Social Need Screening and Intervention (SNS-E)	<ul style="list-style-type: none"> • Persons who use hospice services or elect to use a hospice benefit any time during the measurement period • Persons who die any time during the measurement period 	Any age	Annual	<p>The percentage of persons 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:</p> <ul style="list-style-type: none"> • Food screening: The percentage of persons who were screened for food insecurity. • Food intervention: The percentage of persons who received a corresponding intervention within 30 days (1 month) of screening positive for food insecurity • Housing screening: The percentage of persons who were screened for housing instability, homelessness, or housing inadequacy. • Housing intervention: The percentage of persons who received a corresponding intervention within 30 days (1 month) of screening positive for housing instability, homelessness, or housing inadequacy • Transportation screening: The percentage of persons who were screened for transportation insecurity • Transportation intervention: The percentage who received a corresponding intervention within 30 days (1 month) of screening positive for transportation insecurity



Measure	Exclusions	Eligible population	Occurrence	Description of measurement, screening, test, or treatment needed
Tobacco Use Screening and Cessation Intervention (TSC-E)	<ul style="list-style-type: none"> • Persons receiving palliative services or had a palliative encounter during the measurement period.. • Persons who use hospice services or elect to use a hospice benefit any time during the measurement period • Persons who die any time during the measurement period 	Ages 12 and older	Annual	<p>Percentage of persons 12 and older screened once during the measurement period, identified as tobacco users, and received tobacco cessation intervention:</p> <ul style="list-style-type: none"> • Tobacco use screening: percentage of persons 12 and older screened for tobacco use. • Cessation intervention: percentage of persons 12 and older identified as a tobacco user and received tobacco cessation intervention.
Medical Assistance with Smoking and Tobacco Use Cessation (MSC) CAHPS*	N/A	Ages 18 and older	Annual	<p>The following components of this measure assess different facets of providing medical assistance with smoking and tobacco use cessation:</p> <ul style="list-style-type: none"> • Advising smokers and tobacco users to quit: a rolling average represents the percentage of persons 18 years of age and older who were current smokers or tobacco users and who received advice to quit during the measurement period • Discussing cessation medications: a rolling average represents the percentage of persons 18 years of age and older who were current smokers or tobacco users and who discussed or were recommended cessation medications during the measurement period • Discussing cessation strategies: a rolling average represents the percentage of persons 18 years of age and older who were current smokers or tobacco users and who discussed or were provided cessation methods or strategies during the measurement period



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Measure	Exclusions	Eligible population	Occurrence	Description of measurement, screening, test, or treatment needed
Health Plan Survey 5.1H, Adult Version (CPA) CAHPS*	N/A	Persons who have been with the plan through the year	Annual	<p data-bbox="1430 180 1959 407">This measure provides information on the experiences of persons with the organization and gives a general indication of how well the organization meets persons' expectations. Results summarize patient experiences through ratings, composites, and question summary rates.</p> <p data-bbox="1430 423 1959 488">Four global rating questions reflect overall satisfaction:</p> <ol data-bbox="1472 496 1959 626" style="list-style-type: none"> 1. Rating of All Health Care 2. Rating of Health Plan 3. Rating of Personal Doctor 4. Rating of Specialist Seen Most Often <p data-bbox="1430 643 1959 708">Five composite scores summarize responses in key areas:</p> <ol data-bbox="1472 716 1959 878" style="list-style-type: none"> 1. Claims Processing (commercial only) 2. Customer Service 3. Getting Care Quickly 4. Getting Needed Care 5. How Well Doctors Communicate <p data-bbox="1430 894 1959 1057">Item-specific question summary rates are reported for the rating questions and each composite question. Question Summary Rates are also reported individually for one item summarizing the following concept:</p> <ol data-bbox="1472 1065 1959 1097" style="list-style-type: none"> 1. Coordination of Care



Measure	Exclusions	Eligible population	Occurrence	Description of measurement, screening, test, or treatment needed
Health Plan Survey 5.1H, Child Version (CPC) CAHPS*	N/A	Persons who have been with the plan through the year	Annual	<p>This measure provides information on parents' experience with their child's Medicaid organization. Results summarize patient experiences through ratings, composites, and individual question summary rates.</p> <p>Four global rating questions reflect overall satisfaction:</p> <ol style="list-style-type: none"> 1. Rating of All Health Care 2. Rating of Health Plan 3. Rating of Personal Doctor 4. Rating of Specialist Seen Most Often. <p>Four composite scores summarize responses in key areas:</p> <ol style="list-style-type: none"> 1. Customer Service 2. Getting Care Quickly 3. Getting Needed Care 4. How Well Doctors Communicate <p>Item-specific question summary rates are reported for the rating questions and each composite question. Question Summary Rates are also reported individually for one item summarizing the following concept:</p> <ol style="list-style-type: none"> 1. Coordination of Care
Children With Chronic Conditions (CCC) CAHPS*	N/A	Persons who have been with the plan through the year	Annual	<p>This measure provides information on parents' experience with their child's Medicaid organization for the population of children with chronic conditions. Three composites summarize satisfaction with basic components of care essential for successful treatment, management, and support of children with chronic conditions:</p> <ol style="list-style-type: none"> 1. Access to Specialized Services 2. Family Centered Care: Personal Doctor Who Knows Child 3. Coordination of Care for Children With Chronic Conditions <p>Item-specific question summary rates are reported for each composite question. Question summary rates are also reported individually for two items summarizing the following concepts:</p> <ol style="list-style-type: none"> 1. Access to Prescription Medicines 2. Family Centered Care: Getting Needed Information



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