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2024 HEDIS Quality Measures: Next Steps

Data Workgroup Webinar

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August 13, 2024

Agenda

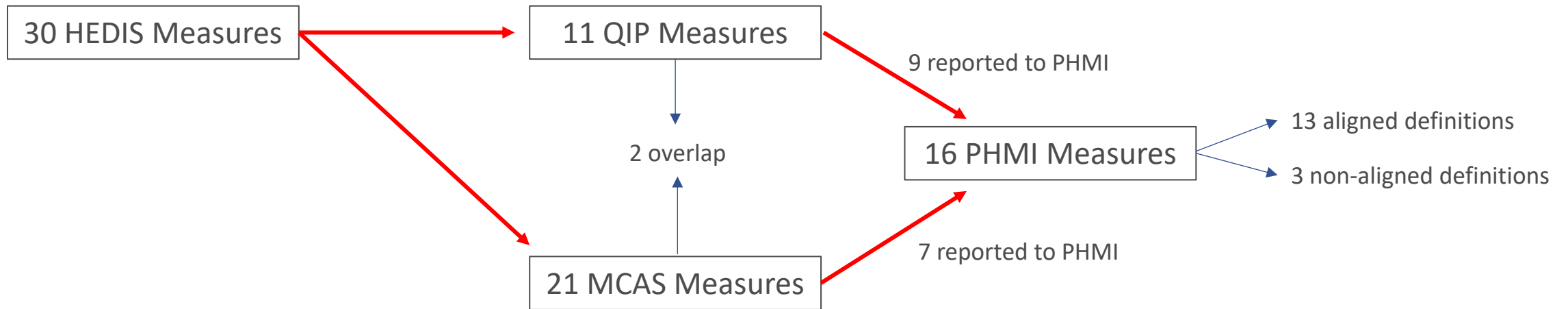
1. Discussion on the Sub-Groups of HEDIS Quality Measures Applicable to Different Health Centers
2. Discussion on the HEDIS Quality Measure Instruction Manual



Discussion on the Sub-Groups of HEDIS Quality Measures Applicable to Different Health Centers



HEDIS Measures in Relevant



Any measure can have one or more Relevant Quality Measures depending on the number of numerators that need to be tracked/reported. For example, the measure “Depression Remission or Response for Adolescents and Adults” has three Quality Measures in Relevant



2024 HEDIS Quality Measures

There are different options and different sets of measures for different health centers depending on:

- PHMI participation
- Presence of a Partnership crosswalk in Relevant
- Preference of which measures to track



2024 HEDIS Quality Measures

- All PHMI health centers have a similar set of Quality Measures because these are reported out in a standard manner
- Other health centers can choose which Quality Measures they would like to have enabled in their system
- Aliados Health will place the Quality Measures in your instance of Relevant according to health center needs/preferences
- The goal is to use 2024 Quality Measures with the 2024 HEDIS Value Sets in order to get the best data



Which Measures to Choose?

- Health centers will need to manage their own HEDIS Quality Measures in terms of which are configured and enabled
- PHMI health centers should be tracking their PHMI measures as discussed with their PHMI representative
- Non-PHMI health centers can choose which measures they want to track. Initially, these will be for all patients. For non-PHMI health centers that eventually get a Partnership patient crosswalk, these can be transitioned to show only Partnership patients (or only QIP denominator patients, depending on the measure)



Sub-Sets of Quality Measures

- In the last presentation (June 11, 2024), sub-sets of HEDIS Quality Measures were described
- When we say “PHMI Quality Measures,” that just means that the Quality Measures display results for QIP denominator patients or for Partnership patients enrolled at the end of the measurement period (depending on the measure)
- There are some Quality Measures with PHMI in the name and these are configured for the PHMI specification and probably will not be useful to non-PHMI health centers



Sub-Sets of Quality Measures

- Most of the PHMI Quality Measures are also MCAS measures and have versions that display results for all patients.
- Some measures overlap with UDS measures although there may be small differences in definitions
- Therefore, it is recommended to track all 2024 UDS measures but not the similar HEDIS measures configured for all patients
- For example, if you are a non-PHMI health center without a Partnership crosswalk, you would probably not want to track the QIP breast cancer measure configured for all patients



MCAS “Prescription” Measures

- Finalizing these measures hopefully this month
- These are not reported to PHMI
- Not mentioned in the slides below, but part of the MCAS subgroup

Antidepressant Medication Management (Aligns with 2024 HEDIS Measure AMM)
Asthma Medication Ratio (Aligns with 2024 HEDIS Measure AMR)
Concurrent Use of Opioids and Benzodiazepines (Aligns with 2024 CMS Measure COB-AD)
Follow-Up Care for Children Prescribed ADHD Medication (Aligns With 2024 HEDIS Measure ADD)
Metabolic Monitoring for Children and Adolescents on Antipsychotics (Aligns with 2024 HEDIS Measure APM)
Pharmacotherapy for Opioid Use Disorder (Aligns with 2024 HEDIS Measure POD)



PHMI Health Centers With Quality Measures That Display Partnership Patients

- PHC, SRCH, WCHC, AVH, SCIHP, AVHC
- QIP and PHMI Quality Measures display Partnership patients
- MCAS Quality Measures have also been copied (these show all patients)
- These health centers currently have all of the quality measures copied to Relevant. They need to choose which measures to validate and enable
- Most likely all the 2024 measures should be enabled so that they can be monitored for PHMI QI activities

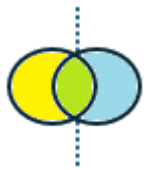


HEDIS Measure Subsets for PHMI Health Centers With a Crosswalk

PHMI Health Centers WITH a Partnership crosswalk

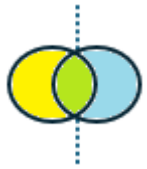
Relevant HEDIS Quality Measures

QIP Quality Measures



Overlap: some QIP measures are reported to PHMI

PHMI Quality Measures



Overlap: some PHMI measures are also MCAS measures

MCAS Quality Measures

QIP Quality Measures with denominators supplied by Partnership

PHMI Quality Measures that display patients enrolled in Partnership

Displays all patients by default but any Quality Measure can theoretically display patients enrolled in Partnership

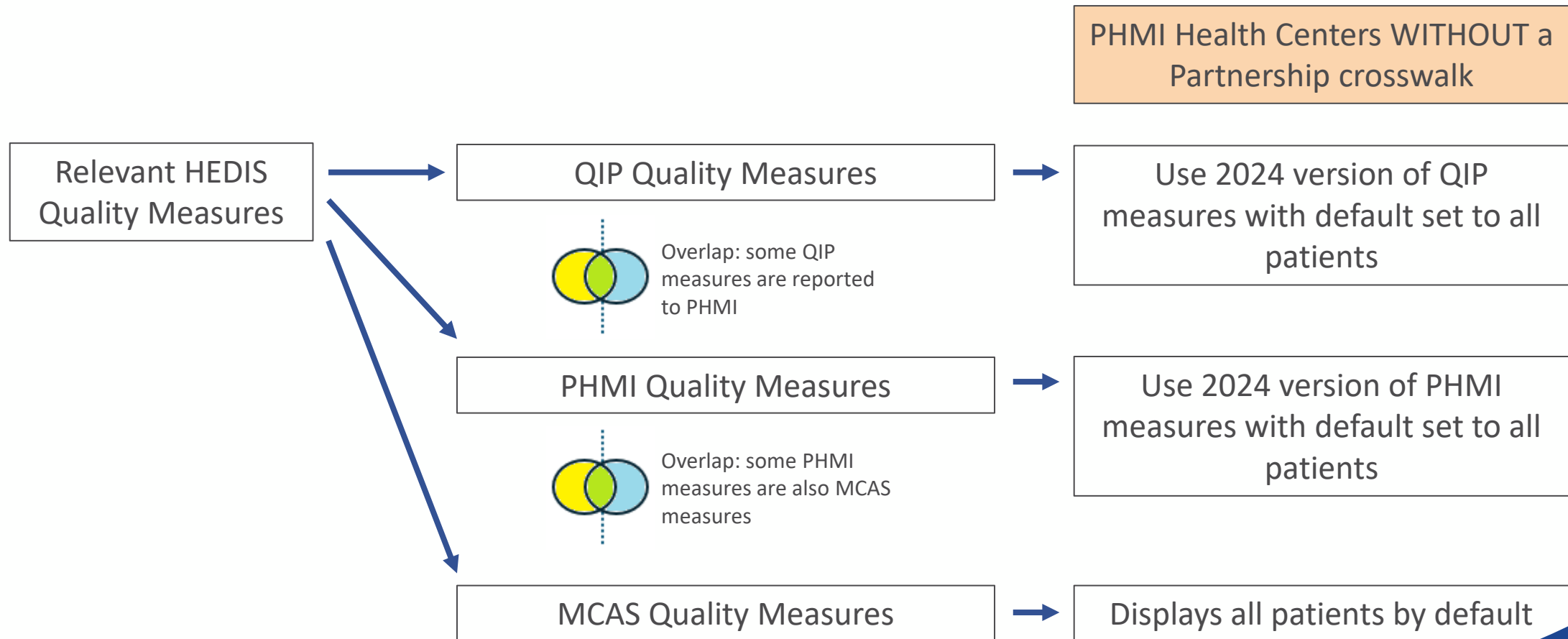


PHMI Health Centers With Quality Measures That Display All Patients

- SVCHC, LVHC, AMC
- QIP and PHMI Quality Measures display all patients because the Partnership crosswalk is not yet configured
- MCAS Quality Measures have also been copied (these show all patients)
- These health centers currently have all of the quality measures copied to Relevant. They need to choose which measures to validate and enable.
- Since the measures display all patients, they cannot be directly used to monitor PHMI data graphically



HEDIS Measure Subsets for PHMI Health Centers Without a Crosswalk

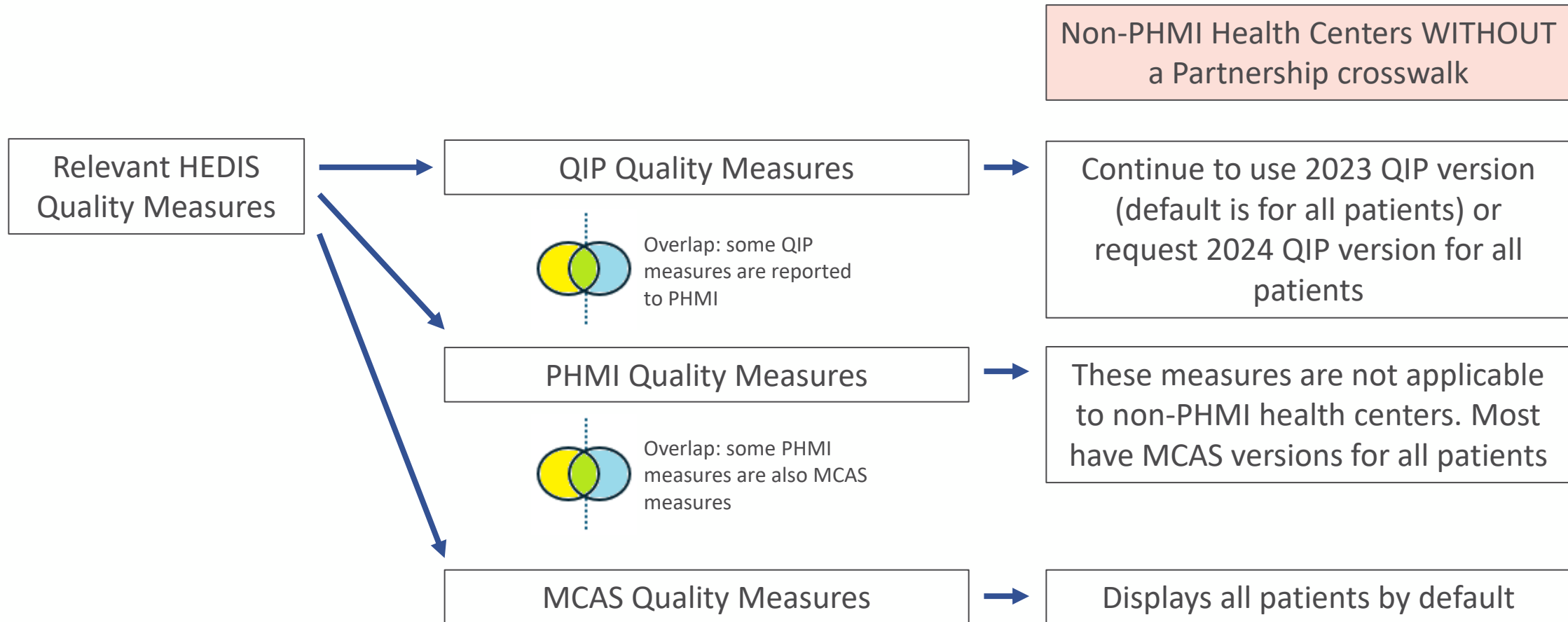


Non-PHMI Health Centers With Quality Measures That Display All Patients

- All the other health centers
- These health centers currently do not have any of the 2024 Quality Measures copied to Relevant. They need to choose which measures they want to validate and enable.
- Aliados Health will send you a menu of Quality Measure names. Health centers can choose which 2024 Quality Measures they would like and Aliados Health will copy them for you



HEDIS Measure Subsets for non-PHMI Health Centers Without a Crosswalk



Quality Measure Naming Convention

The name format depends on the measure subgroup

1. **QIP Measures.** Example, Breast Cancer Screening (QIP 2024)
2. **MCAS Measures.** Example, Chlamydia Screening in Women (Aligns with 2024 HEDIS Measure CHL)
3. **PHMI Measures with Aligned Definitions.** Example, Postpartum Depression Screening and Follow-Up: Depression Screening (Aligns with 2024 HEDIS Measure PDS) PARTNERSHIP PATIENTS ONLY
4. **PHMI Measures with Specific (non-aligned) Definitions.** Example, Well-Child Visits in the First 15 Months of Life (PHMI 2024)



HEDIS Quality Measure Names (Part 1)

QIP Subgroup (with PHMI-specific versions for PHMI health centers)

QIP Version	PHMI Version
Breast Cancer Screening (QIP 2024)	--
Cervical Cancer Screening (QIP 2024)	--
Child and Adolescent Well-Care Visits (QIP 2024)	Child and Adolescent Well-Care Visits (PHMI 2024)
Childhood Immunization Status (QIP 2024)	--
Colorectal Cancer Screening (QIP 2024)	--
Controlling High Blood Pressure (QIP 2024)	--
Diabetes: HbA1c Good Control ($\leq 9\%$) (QIP 2024)	Diabetes: HbA1c Poor Control ($> 9\%$) (PHMI 2024)
Diabetes: Retinal Eye Exam (QIP 2024)	--
Immunizations for Adolescents (QIP 2024)	--
Lead Screening in Children (QIP 2024)	--
Well-Child Visits in the First 15 Months of Life (QIP 2024)	Well-Child Visits in the First 15 Months of Life (PHMI 2024)



HEDIS Quality Measure Names (Part 2)

MCAS and PHMI Subgroups (Table A)

MCAS Version	PHMI Version
--	Adult Access to Preventive/Ambulatory Health Services (Aligns with 2024 HEDIS Measure AAP) PARTNERSHIP PATIENTS ONLY
Chlamydia Screening in Women (Aligns with 2024 HEDIS Measure CHL)	--
Developmental Screening in the First Three Years of Life (Aligns with 2024 CMS Measure DEV-CH)	--
Diabetes Screening for People With Schizophrenia or Bipolar Disorder Who Are Using Antipsychotic Medications (Aligns with 2024 HEDIS Measure SSD)	--
Immunizations for Adolescents (Aligns With 2024 HEDIS Measure IMA)	--
Lead Screening in Children (Aligns with 2024 HEDIS Measure LSC)	--
Topical Fluoride for Children (Aligns with 2024 CMS Measure TFL-CH)	--
--	Well-Child Visits for Age 15 Months–30 Months (Aligns with 2024 HEDIS Measure W30) PARTNERSHIP PATIENTS ONLY



HEDIS Quality Measure Names (Part 2)

MCAS and PHMI Subgroups (Table B)

MCAS Version	PHMI Version
Contraceptive Care - All Women: Most or Moderately Effective Contraception (Aligns with 2024 CMS Measure CCW-AD)	--
Contraceptive Care - Postpartum Women: Most or Moderately Effective Contraception Within 90 Days of Delivery (Aligns with 2024 CMS Measure CCP-AD)	--
Prenatal and Postpartum Care: Postpartum Care (Aligns with 2024 HEDIS Measure PPC)	Prenatal and Postpartum Care: Postpartum Care (Aligns with 2024 HEDIS Measure PPC) PARTNERSHIP PATIENTS ONLY
Prenatal and Postpartum Care: Timeliness of Prenatal Care (Aligns with 2024 HEDIS Measure PPC)	Prenatal and Postpartum Care: Timeliness of Prenatal Care (Aligns with 2024 HEDIS Measure PPC) PARTNERSHIP PATIENTS ONLY
Prenatal Immunization Status (Aligns with 2024 HEDIS Measure PRS)	--



HEDIS Quality Measure Names (Part 2)

MCAS and PHMI Subgroups (Table C)

MCAS Version	PHMI Version
Depression Remission or Response for Adolescents and Adults: Follow-Up PHQ-9 (Aligns with 2024 HEDIS Measure DRR)	Depression Remission or Response for Adolescents and Adults: Follow-Up PHQ-9 (Aligns with 2024 HEDIS Measure DRR) PARTNERSHIP PATIENTS ONLY
Depression Remission or Response for Adolescents and Adults: Depression Response (Aligns with 2024 HEDIS Measure DRR)	Depression Remission or Response for Adolescents and Adults: Depression Response (Aligns with 2024 HEDIS Measure DRR) PARTNERSHIP PATIENTS ONLY
Depression Remission or Response for Adolescents and Adults: Depression Remission (Aligns with 2024 HEDIS Measure DRR)	Depression Remission or Response for Adolescents and Adults: Depression Remission (Aligns with 2024 HEDIS Measure DRR) PARTNERSHIP PATIENTS ONLY
Depression Screening and Follow-Up for Adolescents and Adults (Aligns with 2024 HEDIS Measure DSF)	--
Depression Screening and Follow-Up for Adolescents and Adults: Depression Screening (Aligns with 2024 HEDIS Measure DSF)	Depression Screening and Follow-Up for Adolescents and Adults: Depression Screening (Aligns with 2024 HEDIS Measure DSF) PARTNERSHIP PATIENTS ONLY
Depression Screening and Follow-Up for Adolescents and Adults: Follow-Up on Positive Screen (Aligns with 2024 HEDIS Measure DSF)	Depression Screening and Follow-Up for Adolescents and Adults: Follow-Up on Positive Screen (Aligns with 2024 HEDIS Measure DSF) PARTNERSHIP PATIENTS ONLY
Prenatal Depression Screening and Follow-Up (Aligns With 2024 HEDIS Measure PND)	--
--	Prenatal Depression Screening and Follow-Up: Depression Screening (Aligns With 2024 HEDIS Measure PND) PARTNERSHIP PATIENTS ONLY
--	Prenatal Depression Screening and Follow-Up: Follow-Up on Positive Screen (Aligns With 2024 HEDIS Measure PND) PARTNERSHIP PATIENTS ONLY
Postpartum Depression Screening and Follow-Up (Aligns with 2024 HEDIS Measure PDS)	--
--	Postpartum Depression Screening and Follow-Up: Depression Screening (Aligns with 2024 HEDIS Measure PDS) PARTNERSHIP PATIENTS ONLY
--	Postpartum Depression Screening and Follow-Up: Follow-Up on Positive Screen (Aligns with 2024 HEDIS Measure PDS) PARTNERSHIP PATIENTS ONLY



Note: There Are No 2024 MCAS Versions of Access Measures

- These measures are only truly correct when it is known which patients are expected to have a visit within the measurement period
- Therefore, a denominator is needed from Partnership (either a QIP denominator, or a denominator composed of current Partnership members, depending on the measure)

Adult Access to Preventive/Ambulatory Health Services (Aligns with 2024 HEDIS Measure AAP) PARTNERSHIP PATIENTS ONLY

Well-Child Visits in the First 15 Months of Life (QIP 2024)

Well-Child Visits for Age 15 Months–30 Months (Aligns with 2024 HEDIS Measure W30) PARTNERSHIP PATIENTS ONLY



Recommendations/Tips

- The original version of the Quality Measure copied to your instance of Relevant should have no modifications to the SQL or to the measure “key” (a field in Relevant). If desired, health centers can create a copy of the Quality Measure, change the name and the measure key, and then customize the code how they like.
- PHMI health centers must keep the same SQL and measure key for standard reporting. Please do not change the SQL or the Measure Key for QMs that are used for PHMI reporting
- Health centers are responsible for the Data Elements associated with the Quality Measures

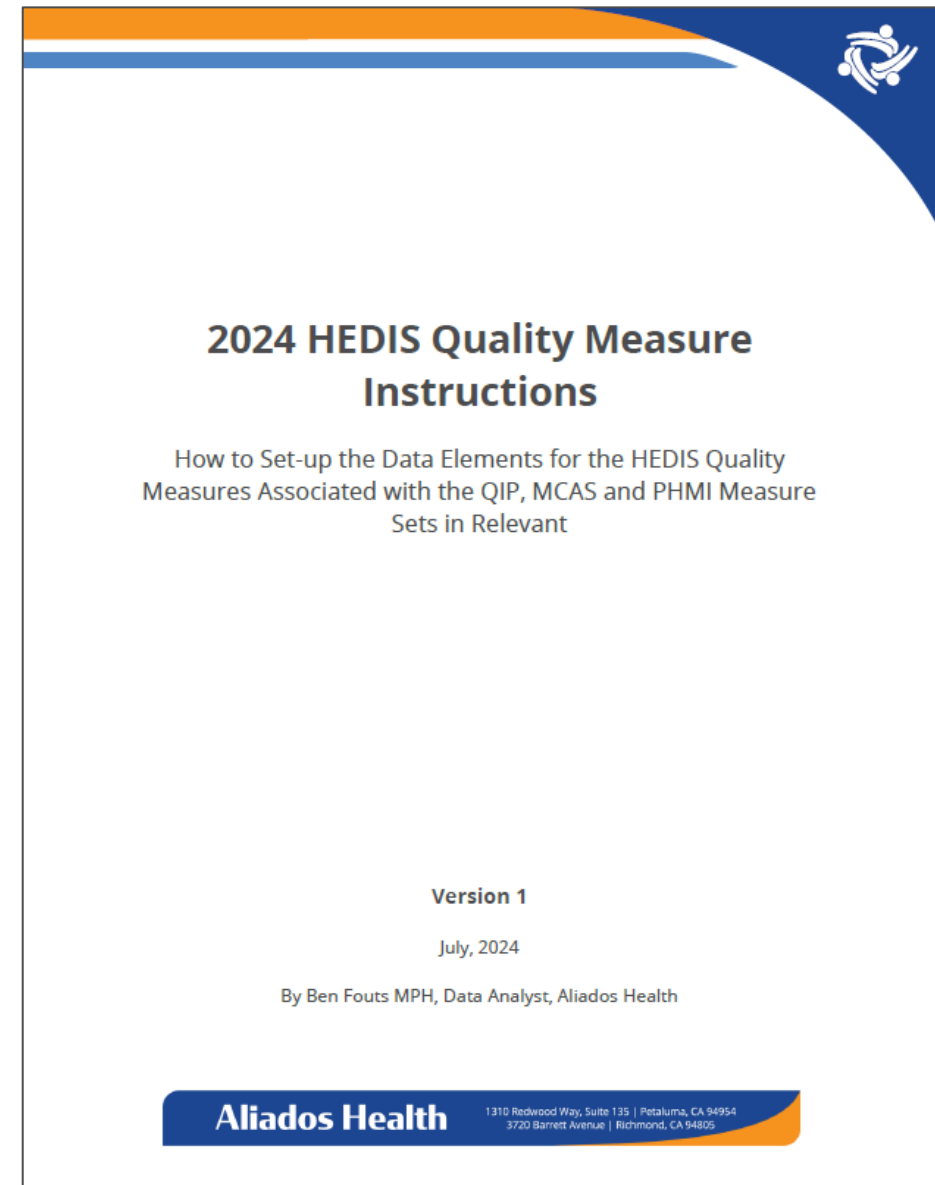


Discussion on the HEDIS Quality Measure Instruction Manual



Instruction Manual

- Covers all of the thirty 2024 HEDIS measures that Aliados Health will maintain
- Has a section for each measure with measure definitions
- Appendices that cover value sets and notes on SQL code for the Transformers/Data Elements



Data Elements Required for the HEDIS Measure Sets

- Many have already been established in your system for the UDS report or other purposes
- Design new ones in a similar manner as others already in your system. No need to re-invent the wheel. Keep things consistent
- Good idea to use the derived Transformers (like `relevant_lab_results`, `relevant_cases`, etc.) when you can
- Use the recommended HEDIS Value Sets. Value Sets are connected to EHR data depending on type (for example, LOINC to identify specific kinds of labs)



HEDIS-Specific Data Elements

- There are no new Data Elements in 2024. Some of these might have been created previously in your Relevant
- Table of HEDIS-specific Data Elements. See page 10 of the 2024 manual (first version)

New Data Element Name	General Measure Name	Diagnosis (ICD-10)		Procedures			Medications		Labs (LOINC)	Structured Data
		Problem List	Visit Assessment	CPT	HCPCS	DPT	NDC	RxNorm and NDC		
opioid_use_or_dependence_cases	Pharmacotherapy for Opioid Use Disorder	Yes								
infertility_cases	Contraceptive Care: Most or Moderately Effective Contraception (All Women)	Yes		Yes*	Yes*					
postpartum_treatments	Prenatal and Postpartum Care: Postpartum Care		Yes*	Yes*						Yes
childhood_development_screens	Developmental Screening in the First Three Years of Life			Yes**						Yes
topical_fluoride_applications	Topical Fluoride for Children			Yes**		Yes				



Medication Value Sets

Two sets of codes are used in the Value Sets that define medications for the Quality Measures:

- CQM value sets use RxNorm
- HEDIS value sets use RxNorm and NDC. It is assumed that each set individually identifies the correct medications (so no need to use both in a Data Element)
- CMS value sets use NDC



New Code Set: NDC

Map these fields in the medications Data Element

medications		
id	bigint = nextval('rdm.medic...')	
patient_id	bigint	
visit_id	bigint	
medication_name	varchar	
rxnorm_code	varchar	← Should already be mapped for UDS/eCQM Value Sets
started_on	date	
ended_on	date	
ndc_normalized	varchar	← New
ndc_raw	varchar	← New
updated_on	date	



NDC In Relevant

- The Relevant Medications Data Element description:

Description ⓘ

Represents patients taking a medication. The `ndc_raw` column contains NDCs directly from the source database that may or may not be normalized. The `normalized_ndc` column contains only NDCs that have been normalized according to the [UMLS RxNorm Technical Documentation](#).

- Example of NDC data (NDC should be 11 digits)

A medication_name	A rxnorm_code	📅 started_on	📅 ended_on	A ndc_normalized	A ndc_raw
glipiZIDE	310488	2022-09-06	2022-09-06	00378111001	00378111001
Pioglitazone HCl	317573	2022-09-06	2022-09-06	00093727105	00093-7271-05
Atorvastatin Calcium	617311	2022-09-06	2022-09-06	00378395205	00378395205
Aspirin	318272	2022-09-06	2022-09-06	00113027468	00113-0274-68
BD Pen Needle Nano U/F	1013738	2022-09-06	2022-09-06	08290320548	08290320548
Metoprolol Succinate ER	866427	2022-09-06	2022-09-06	00378459510	00378-4595-10



Appendix A: Value Set References

- Displays Value Sets for all Data Elements of all HEDIS measures, not just the new ones
- Value Sets can come from HEDIS, CQM or CMS. These appear on different tables in Relevant
- Good idea to check that the Data Element is using the correct Value Set (not individual codes in the SQL) and that the “latest” Value Set is chosen.
- In other words, WHERE latest = TRUE



Appendix B: Examples of SQL Code

See table on page 98 (version 1)

Contains coding examples, by data type

- A. Diagnosis
- B. Procedures
- C. Labs
- D. Medications
- E. Structured Data



Appendix B: Examples of SQL Code

- The examples only illustrate an approach. It must be customized to your own instance of Relevant
- Since different instances of Relevant are built on different EHR databases (eCW, NextGen, EPIC), there might be different tables and field names in your instance
- Different instances of Relevant also have different Transformers, sometimes with different names and field names



Appendix C: Standard Upload of Monthly Partnership Files

- Very brief description
- Non-PHMI health centers can learn the details of managing Partnership files from Aliados Health or Relevant
- The files that are uploaded for PHMI health centers are the monthly QIP denominator files and the monthly Partnership membership files
- A more efficient and electronic system of handling these files may be developed this year or next year



Questions?

