



## 2017 MHCC Required Measurement Set Reference

Collection Method	Measure Abbreviation	Measure Name	Accreditation	Required
<b>HEDIS® Effectiveness of Care</b>				
<b>Prevention and Screening</b>				
Admin or Hybrid	ABA	Adult BMI Assessment	*	Required
Admin or Hybrid	WCC	Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents	*	Required
Admin or Hybrid	CIS	Childhood Immunization Status	*	Required
Admin or Hybrid	IMA	Immunizations for Adolescents	*	Required
Admin only	BCS	Breast Cancer Screening	*	Required
Admin or Hybrid	CCS	Cervical Cancer Screening	*	Required
Admin only	NCS	Non-Recommended Cervical Cancer Screening in Adolescent Females		Required
Admin or Hybrid	COL	Colorectal Cancer Screening	*	Required
Admin only	CHL	Chlamydia Screening in Women	*	Required
<b>Respiratory Conditions</b>				
Admin only	CWP	Appropriate Testing for Children With Pharyngitis	*	Required
Admin only	URI	Appropriate Treatment for Children With Upper Respiratory Infection	*	Required
Admin only	AAB	Avoidance of Antibiotic Treatment in Adults With Acute Bronchitis	*	Required
Admin only	SPR	Use of Spirometry Testing in the Assessment and Diagnosis of COPD		Required
Admin only	PCE	Pharmacotherapy Management of COPD Exacerbation	*	Required
Admin only	MMA	Medication Management for People With Asthma	*	Required
Admin only	AMR	Asthma Medication Ratio	*	Required
<b>Cardiovascular Conditions</b>				
Admin only	SPC	Statin Therapy for Patients With Cardiovascular Disease		Required
Hybrid only	CBP	Controlling High Blood Pressure	*	Required
Admin only	PBH	Persistence of Beta-Blocker Treatment After a Heart Attack	*	Required
<b>Diabetes</b>				
Admin or Hybrid	CDC	Comprehensive Diabetes Care (includes HbA1c <7)	*	Required
Admin only	SPD	Statin Therapy for Patients With Diabetes		Required
<b>Musculoskeletal Conditions</b>				
Admin only	ART	Disease-Modifying Anti-Rheumatic Drug Therapy for Rheumatoid Arthritis		Required
Admin only	LBP	Use of Imaging Studies for Low Back Pain	*	Required
<b>Behavioral Health</b>				
Admin only	AMM	Antidepressant Medication Management	*	Required
Admin only	ADD	Follow-Up Care for Children Prescribed ADHD Medication	*	Required
Admin only	FUH	Follow-Up After Hospitalization for Mental Illness	*	Required
Admin only	FUM	Follow-Up After Emergency Department Visit for Mental Illness		Required (NPR)
Admin only	FUA	Follow-Up after Emergency Department Visit for Alcohol and Other Drug Dependence		Required (NPR)
Admin only	APC	Use of Multiple Concurrent Antipsychotics in Children and Adolescents		Required
Admin only	APM	Metabolic Monitoring for Children and Adolescents on Antipsychotics		Required
<b>Measures Collected Using Electronic Clinical Data Systems</b>				
Admin only	DMS	Utilization of the PHQ-9 to Monitor Depression Symptoms for Adolescents and Adults		Not Required
Admin only	DRR	Depression Remission or Response for Adolescents and Adults		Not Required
<b>Medication Management</b>				
Admin only	MPM	Annual Monitoring for Patients on Persistent Medications		Required
<b>EOC Measures Collected Through the CAHPS Health Plan Survey</b>				
Survey	ASP	Aspirin Use and Discussion		Required
Survey	FVA	Flu Vaccinations for Adults Ages 18-64		Required
Survey	MSC	Medical Assistance With Smoking and Tobacco Use Cessation	*	Required
<b>HEDIS® Access/Availability of Care</b>				
Admin only	AAP	Adults' Access to Preventive/Ambulatory Health Services		Required
Admin only	CAP	Children and Adolescents' Access to Primary Care Practitioners		Required
Admin only	IET	Initiation and Engagement of Alcohol and Other Drug Dependence Treatment	*	Required
Admin or Hybrid	PPC	Prenatal and Postpartum Care	*	Required
Admin only	APP	Use of First-Line Psychosocial Care for Children and Adolescents on Antipsychotics		Required
<b>HEDIS® Experience of Care</b>				
Survey	CPA	CAHPS Health Plan Survey 5.0H, Adult Version		Required
<b>HEDIS® Utilization and Relative Resource Use</b>				
<b>Utilization</b>				
Admin only	W15	Well-Child Visits in the First 15 Months of Life		Required
Admin only	W34	Well-Child Visits in the Third, Fourth, Fifth and Sixth Years of Life		Required
Admin only	AWC	Adolescent Well-Care Visits		Required
Admin only	FSP	Frequency of Selected Procedures		Required
Admin only	AMB	Ambulatory Care		Required
Admin only	IPU	Inpatient Utilization—General Hospital/Acute Care		Required
Admin only	IHU	Inpatient Hospital Utilization (Risk adjusted/predicted utilization)		Required
Admin only	EDU	Emergency Department Utilization (Risk adjusted/predicted utilization)		Required
Admin only	IAD	Identification of Alcohol and Other Drug Services		Required
Admin only	MPT	Mental Health Utilization		Required
Admin only	ABX	Antibiotic Utilization		Required
Admin only	HAI	Standardized Healthcare-Associated Infection Ratio		Required NPR
Admin only	PCR	Plan All-Cause Readmissions	*	Required

Relative Resource Use				
Admin only	RDI	Relative Resource Use for People With Diabetes		Required
Admin only	RCA	Relative Resource Use for People With Cardiovascular Conditions		Required
Admin only	RHY	Relative Resource Use for People With Hypertension		Required
Admin only	RCO	Relative Resource Use for People With COPD		Required
Admin only	RAS	Relative Resource Use for People With Asthma		Required
HEDIS® Health Plan Descriptive Information/Stability				
Admin only	BCR	Board Certification <i>*Report results for this measure by limiting the reporting to include only providers that are actively licensed to practice by the Maryland Board of Physicians and have an office or a physical presence in the State of Maryland.</i>		Required
Admin only	ENP	Enrollment by Product Line		Required
Admin only	EBS	Enrollment by State		Required
Admin only	LDM	Language Diversity of Membership		Required
Admin only	RDM	Race/Ethnicity Diversity of Membership		Required
Admin only	TLM	Total Membership		Required
CAHPS® 5.0H, Adult Version Survey				
Member Survey	CAHPS	Overall Ratings (of Healthcare, Personal Doctor, Specialist, Health Plan)		Required
		Composite Care Scores (for Health Promotion and Education, Coordination of Care, Getting Care Quickly, Getting Needed Care, Shared Decision Making, How Well Doctors Communicate)		Required
		Composite Carrier Scores (of Customer Service, Claims Processing, and Plan Information on Costs)		Required
		Other Individual Survey Questions – Cultural Competency 2017 Focus: Addressing diversity of membership		Required
Maryland RELICC Assessment™				
Admin only	Standard	Plan Profile		Required
Admin only	Standard	Race/Ethnicity, Language, Interpreters & Cultural Competency		Required
Admin only	Supplemental	Member Level Detail File – TLM measure (use updated format using variable values codes as listed on page 14 of this QPRR for HEDIS 2017 reporting)		Required
Maryland Plan Behavioral Health Assessment				
Behavioral Health Measures (Mental Health/Chemical Dependency)				
The template for each of these measures shall be provided by the audit vendor.	BHA	Provide the percentage of enrolled Maryland members that have behavioral health benefits with your health benefit plan		Required
		Provide the percentage of enrolled Maryland members with behavioral health benefits with your health benefit plan that are served by an external provider/MBHO		Required
		Provide all accreditation information for any segment of your health benefit plan directly responsible for behavioral health services that has received accreditation (Name, Accreditation Status, and Date of Accreditation Expiration)		Required
		Provide Name, Accreditation Status, and Date of Accreditation Expiration for any external entity that provides behavioral health services to health benefit plan members through a contractual arrangement with your health benefit plan		Required
		For each healthcare discipline including behavioral health, provide the number of network providers located in Maryland and in the health benefit plan's overall service area		
		(Psychiatry, Psychology, Social Work, Nurse Psychotherapists, Certified Professional Counselors, and Licensed Clinical Alcohol and Drug Counselors, plus, corresponding to the BCR measure, family medicine, internal medicine, OB/GYN physicians, Pediatricians, Geriatricians, and other physician specialists)		Required
		Provide the percentage of network physicians, including psychiatrists, plus, corresponding to the BCR measure, family medicine, internal medicine, OB/GYN physicians, Pediatricians, Geriatricians, and other physician specialists, located in Maryland and in the health benefit plan's overall service area who are Board Certified		Required
Maryland Health Plan Quality Profile				
Plan shall provide a Quality Profile to the audit vendor.	QP	Each carrier shall submit a short ( <u>no more than 150 words</u> ) summary of their quality assurance and quality improvement initiatives. The summary shall be consistent with the overarching theme of: "Understanding and Addressing Disparities." The theme shall focus on actions taken by each carrier toward implementing progressive programs that respond to improving methods for collecting and reporting RELICC- related information. Due Date is January 31, 2017. Theme for 2017: Addressing The Diversity of Plan Membership.		Required
		Each carrier shall submit a Product Summary Table listing each of the products being marketed under each health benefit plan legal entity name. For each of the listed products, the carrier shall specify whether the product is offered in the individual or small group market, whether inside or outside the Exchange, or both, and shall identify the type of delivery system (HMO, POS, PPO, EPO, or other – please specify). In addition, the number of enrolled members and annual premium volume for each product shall be specified; plus the tax status and ownership of the legal entity shall also be described.		Required