

## Quality Measure Desktop Reference from Blue Cross and Blue Shield of North Carolina for Healthy Blue Providers

**Please note:** The information provided is based on HEDIS<sup>®</sup> measurement year 2022 technical specifications and is subject to change based on guidance given by the National Committee for Quality Assurance, CMS, and state recommendations. Please refer to the appropriate agency for additional guidance.

\* The measures with an asterisk include telehealth accommodations.

Effectiveness of Care	Measure	Source	Inclusion criteria	Occurrence	Description of measurement, screening, test, or treatment needed
Prevention and screening	Weight Assessment and Counseling for Nutrition and Physical Activity for Children/ Adolescents <b>(WCC)</b> *	HEDIS	Ages 3 to 17	Annual	<ul> <li>Members who had an outpatient visit with a PCP or OB/GYN during the year in which the following were documented:</li> <li>Height, weight, and BMI percentile</li> <li>Counseling for nutrition</li> <li>Counseling for physical activity</li> </ul>
Prevention and screening	Childhood Immunization Status (CIS)	HEDIS	Ages 0 to 2	Multiple doses	<ul> <li>Members who had appropriate doses of the following vaccines by their 2nd birthday: four — DTaP, three — IPV, one — MMR, three — HiB, three — Hep B, one — VZV, four — PCV, one — Hep A, two or three — RV, two — Flu by their 2nd birthday:</li> <li>Hep B — One of the three vaccinations can be a newborn hepatitis B vaccination during the eight-day period that begins on the date of birth and ends seven days after the date of birth.</li> <li>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</li> <li>MMR, VZS and Hep A can only be given between 1st and 2nd birthday to close the gap.</li> </ul>

Note: HEDIS<sup>®</sup> is a registered trademark of the National Committee for Quality Assurance (NCQA). CAHPS<sup>®</sup> is a registered trademark of the Agency for Healthcare Research and Quality (AHRQ).

## https://provider.healthybluenc.com

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Prevention and screening	Immunizations for Adolescents <b>(IMA)</b>	HEDIS	Ages 13	Multiple doses	<ul> <li>Members 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:</li> <li>Meningococcal vaccine: between 11th and 13th birthday</li> <li>Tdap vaccine: between 10th and 13th birthday</li> <li>HPV vaccine: between 9th and 13th birthday</li> </ul>
Prevention and screening	Cervical Cancer Screening <b>(CCS)</b>	HEDIS	Ages 21 to 64	Varies by age	<ul> <li>The percentage of women 21 to 64 years of age who were screened for cervical cancer using either of the following criteria:</li> <li>Women 21 to 64 years of age who had cervical cytology performed within the last three years</li> <li>Women 30 to 64 years of age who had cervical high-risk human papillomavirus (hrHPV) testing performed within the last five years</li> <li>Women 30 to 64 years of age who had cervical cytology/ high-risk human papillomavirus (hrHPV) cotesting within the last five years</li> </ul>
Prevention and screening	Chlamydia Screening in Women <b>(CHL)</b>	HEDIS	Ages 16 to 24	Annual	Members who are sexually active and who had at least one screening test for chlamydia during the year
Cardiovascular conditions	Controlling High Blood Pressure (CBP)*	HEDIS	Ages 18 to 85	Annual	Members 18 to 85 years of age who had a diagnosis of hypertension (HTN) and whose blood pressure (BP) was adequately controlled (< 140/90 mm Hg) during the measurement year <b>Note:</b> If no BP is recorded during the measurement year, assume that the member is not controlled.
Diabetes	Hemoglobin A1c Control for Patients with Diabetes (HBD)	HEDIS	Ages 18 to 75	Annual	<ul> <li>Members with diabetes (types 1 and 2) whose hemoglobin A1c (HbA1c) was at the following levels during the measurement year:</li> <li>HbA1c control (&lt; 8%)</li> <li>HbA1c poor control (&gt; 9%)</li> </ul>

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Access/ availability of care	Well-Child Visits in the First 30 Months of Life (W30)*	HEDIS	Ages 0 to 15 months Ages 15 to 30 months	Six visits Two visits	<ul> <li>Members who had the following number of well-child visits with a PCP during the last 15 months; the following rates are reported:</li> <li>Well-Child Visits in the First 15 Months: children who turned 15 months old during the measurement year: six or more well-child visits</li> <li>Well-Child Visits for Ages 15 to 30 Months: children who turned 30 months old during the measurement year: two or more well-child visits</li> </ul>
Access/ availability of care	Child and Adolescent Well-Care Visits (WCV)*	HEDIS	Ages 3 to 21	Annual	Members who had at least one comprehensive well-care visit with a PCP or an OB/GYN practitioner during the measurement year
Access/ availability of care	Prenatal and Postpartum Care (PPC)*	HEDIS	Live birth	Annual	<ul> <li>The percentage of deliveries of live births on or between October 8 of the year prior to the measurement year and October 7 of the measurement year. For these women, the measure assesses the following facets of prenatal and postpartum care:</li> <li>Members who 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</li> <li>Members who had a postpartum visit on or between seven and 84 days after delivery</li> </ul>
Utilization and risk adjustment utilization	Plan All-Cause Readmissions (PCR)*	HEDIS	Ages 18 and older	Annual	The number of acute inpatient and observation stays during the measurement year that were followed by an unplanned acute readmission for any diagnosis within 30 days and the predicted probability of an acute readmission

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Effectiveness of Care	Measure	Source	Inclusion criteria	Occurrence	Description of measurement, screening, test, or treatment needed
Behavioral health	Screening for Depression and Follow-Up Plan <b>(CDF)</b> *	CMS	Ages 12 years of age and older	Annual	<ul> <li>The percentage of members 12 years of age who were screened for clinical depression using a standardized instrument and, if screened positive, received follow-up care on the same of encounter as the positive screen:</li> <li>This measure requires the use of an age-appropriate screening instrument. The member's age is used to select the appropriate depression screening instrument.</li> <li>Depression screening captured in health risk assessments or other types of health assessments are allowed if the questions align with a specific instrument that is validated for depression screening. For example, if a health risk assessment includes questions from the PHQ-2, it counts as screening if the member answered the questions, and a total score is calculated.</li> </ul>
Children and adolescence	Early and Periodic Screening, Diagnosis and Treatment (EPSDT) program	EPSDT	Ages 0 to 20	Multiple	<ul> <li>Screening must include:</li> <li>Comprehensive health development history (inclusive both physical and mental health)</li> <li>Comprehensive unclothed physical exam or appropriately draped</li> <li>Appropriate immunizations</li> <li>Laboratory tests</li> <li>Lead toxicity screening</li> <li>Health education including anticipatory guidance</li> <li>Vision services</li> <li>Dental services</li> <li>Other necessary health care — diagnostic services and treatment to correct or ameliorate defects, physical and mental illnesses, and conditions discovered by the screening services</li> </ul>