HEDIS® 2018 (Summary) Documentation for Reporting Year 2017

General Information

This documentation presents (1) a description of each HEDIS® measure that CMS collected for 430 Medicare managed care organizations for health care provided in calendar year 2018 to Medicare beneficiaries and (2) the location of the rates associated with each HEDIS measure within the HEDIS workbook (HEDIS2018.XLS). CMS took the description and additional information for each measure from HEDIS 2018 Volume 2: Technical Specifications. This release contains only those rates, percentages, or averages for each measure and not the numerator or denominator used to create those measures. CMS has made minor modifications to the original data. CMS confirmed that all reported rates are commensurate with the HEDIS general guidelines. For example, the HEDIS guidelines advise plans to report "not applicable" for measures that rely on a small number of observations, and CMS appropriately suppressed these rates. CMS also added two variables to the database. A brief discussion of each issue identified here appears below.

CMS requires that all managed care organizations undergo an audit on all HEDIS measures. The summary data file includes all submitted data following the audit.

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Medicare HEDIS Reporting

In 2018, CMS collected data from 430 Medicare managed care contracts for health care delivered in 2017. CMS considers the reporting unit for a health plan as the equivalent to a contract. CMS signs a contract with health plans to provide health care for a given geographic service area.

CMS copied the description of each measure from the HEDIS Technical Specifications

The description and related information provided for each measure in this documentation are taken from the HEDIS 2018Technical Specifications, which are the specific instructions for calculating HEDIS measures that NCQA provides to Medicare managed care plans. For each measure, the Technical Specifications detail the precise method for sampling (when appropriate), identification of the numerator and denominator, measure calculation, and any other important considerations specific to that measure. The technical specifications also contain general guidelines that apply to all measures, such as the use of medical records and when a plan should not report a measure because its eligible membership is too small. Some measures require more detailed specifications than others. As opposed to the Beta Blocker measure described below, the calculation of the measure for the number of years a plan has had a commercial product is fairly straightforward. The technical specifications necessary to produce HEDIS measures are available from NCQA in HEDIS 2018, Volume 2: Technical Specifications."

The specifications for Beta Blocker Treatment After Heart Attack demonstrate the extent of detailed instructions provided for many measures. For this measure, the specifications describe the unit of measurement (members vs. procedures or discharges); data sources used to identify the numerator and denominator (membership, claims/encounter, hospital discharge, and pharmacy data); the period of time under consideration (the reporting year); age ranges for member inclusion in the measure (35 and older); diagnosis codes to identify acute myocardial infarction (AMI); diagnosis codes to identify exclusions for beta blocker; a list of beta blocker prescriptions; appropriate sample size if the plan chooses to use a sample; and other instructions, such as the appropriate interpretation of two AMI episodes for an individual member.

HEDIS Guidelines identify three types of missing values: NA, NB and NR

The HEDIS guidelines distinguish between three different types of missing values in the rate field: Not Applicable (NA), No Benefit (NB) and Not Report (NR). Health plans report NA when they: do not have a large enough population to calculate a representative rate (e.g., many measures require that rates be based on at least 30 members) or are not eligible for a measure (e.g., a health plan cannot calculate outpatient drug

utilization if it does not offer an outpatient drug benefit; a health plan cannot calculate a measure requiring a year of continuous enrollment if its first enrollment began mid-way through the reporting year.)

A value of NB is recorded when the health plan did not offer the health benefit required by the measure (e.g., Mental Health/Chemical Dependency). Health plans report NR when: they choose not to calculate and report a rate, or the health plan's HEDIS Compliance Auditor determines that a rate is materially biased (applicable only to audited measures).

For measures reported as a percentage, material bias is defined as a deviation of more than five percentage points from the true rate. For other measures (e.g., procedures per 1,000 member years), material bias exists if the number of counted procedures deviates by more than ten percent from the true number of procedures.

CMS suppressed a small number of rates to meet privacy requirements.

Under the Privacy Act, CMS cannot publish or otherwise disclose the data in a form raising unacceptable possibilities that an individual could be identified (i.e., the data must not be beneficiary-specific and must be aggregated to a level where no data cells have 10 or fewer beneficiaries). To ensure that no beneficiary can be identified, CMS has chosen not to report certain measures, specifically reported enrollment by age category, and has suppressed an extremely small number of rates. CMS has replaced suppressed rates with a 'NA.' Please see the section on missing values above for an explanation of missing value designations.

CMS has added variables to the HEDIS data.

CMS includes our record of enrollment as of December of the measurement year in the "GENERAL" sheet in the HEDIS workbook. The HEDIS reported value is adjusted for individuals with partial-year enrollment and reflects the entire contract's enrollment. CMS's enrollment is now broken down by the number enrolled in the CMS approved contract market area.

We have included the Medicare Modernization Act plan type designations as well as indicators if the contract offers a Special Needs benefit packages or a Part D Drug benefit in 2017. These values can be found on the sheet named "GENERAL".

We have also changed the way we are reporting the area served by each contract. The states served by each contract used to be reported within every measure. Since this data is constant for the measurement year and the size of the areas covered by each contract have increased dramatically, we have moved the area served into its own separate reports. You will find a separate sheet called "Service Area" in the HEDIS workbook which contains the contract, state(s) and counties served by the contracts reporting HEDIS. There is additional field "EGHP" which indicates if the county is available only to beneficiaries in Employer Groups. The old "Service State" field in each measure now just lists the Market Area served by the contract for the contracts still reporting by market area.

National Enrollment Weighted Average Score

CMS has calculated and included a weighted national average for all of the Effectiveness of Care (EOC) measures. These rates are reported on a separate sheet called "National Rates" in the SNP HEDIS workbook. The rate for each of the EOC measures was calculated using the following formula:

$$((En_1/TotE)*Sn_1)+((En_2/TotE)*Sn_2)+\ldots+((En_x/TotE)*Sn_x)=\text{National Enrollment Weighted Average Score}$$

Where: TotE = Total enrollment for all PBPs with a valid numeric rate in the measure
En_1 = Enrollment in the first PBP with a valid numeric rate
Sn_1 = Reported rate for the first PBP with a valid numeric rate
En_x = Enrollment in the last PBP with a valid numeric rate
Sn_x = Reported rate for the last PBP with a valid numeric rate

General - General Information

DESCRIPTION - General organization Information. These fields are not explicitly identified in the HEDIS Technical Specifications.

REPORTING LEVEL - N/A

General-0010	Type of Organization (Local CCP, 1876 Cost, etc.)
General-0011	Type of Plan (Post Balanced Budget Amendment Naming)
General-0014	Offers Special Needs Plans to beneficiaries (Yes or No)
General-0015	Offers Part D benefits (Yes or No)
General-0020	Line of Business (HMO, POS, etc.)
General-0050	12/2011 Enrollment as reported by the Medicare Advantage Prescription Drug (MARx) system
General-0060	CMS Region Number
General-0070	CMS Region Name
General-0080	Patient Population
General-0085	Submitted summary level HEDIS 2008 data to NCQA
General-0087	Included in HOS data from NCQA

Service_Area - Contract Service Area

DESCRIPTION - The area where the contract provides services to Medicare care beneficiaries. This data comes from the Health Plan Management System (HPMS) as reported by the contract.

REPORTING LEVEL - N/A

SA-0030	Social Security Administration (SSA) State/County Code
SA-0040	American National Standards Institute (ANSI) State/County Code INCITS 31-2009 (formerly Federal Information Processing Standard [FIPS] State/County codes)
SA-0050	State Abbreviation (United States Postal Service (USPS) State Code)
SA-0060	County Name
SA-0070	County serves only beneficiaries in an Employer Group Health Plan (Y = Yes, N = No)

National_Rates - National Rates

CMS has calculated and included a weighted National average for all of the Effectiveness of Care (EOC) measures. These rates are reported on a separate sheet called "National Rates" in the HEDIS Workbook. The rate for each of the EOC measures was calculated using the following formula:

$$((En1/TotE)*Sn1)+((En2/TotE)*Sn2)+...+((Enx/TotE)*Snx)=\text{National Weighted Average Score}$$

Where:

TotE = Total enrollment for all contracts with a valid numeric rate in the measure

En1 = Enrollment in the first contract with a valid numeric rate

Sn1 = Reported rate for the first contract with a valid numeric rate

Enx = Enrollment in the last contract with a valid numeric rate

Snx = Reported rate for the last contract with a valid numeric rate

REPORTING LEVEL - National

NR-0010	The HEDIS Year of the data (the measurement year is one year prior)
NR-0020	Measure from the HEDIS Public Use File for which the national rate has been calculated
NR-0030	Field from the HEDIS Public Use File for which the national rate has been calculated
NR-0040	The National Rate for this measure and field
NR-0050	The number of contracts that submitted a numeric HEDIS rate for this measure and field
NR-0060	The total number of enrollees in the contracts that submitted a numeric HEDIS rate for this measure and field

AOC201 - Adults' Access to Preventive/Ambulatory Health Services (AAP)

DESCRIPTION - The percentage of members 20 years and older who had an ambulatory or preventive care visit. The organization reports three separate percentages for each product line.

• Medicaid and Medicare members who had an ambulatory or preventive care visit during the measurement year.

• Commercial members who had an ambulatory or preventive care visit during the measurement year or the two years prior to the measurement year.

(HEDIS 2018, Volume 2: Technical Specification, Pg. 281)

 REPORTING LEVEL - Contract

AOC201-0010	Rate 20-44 Years
AOC201-0020	Rate 45-64 Years
AOC201-0030	Rate 65+ Years
AOC201-0040	Lower Confidence Interval - 20-44 Years
AOC201-0050	Upper Confidence Interval - 20-44 Years
AOC201-0060	Lower Confidence Interval - 45-64 Years
AOC201-0070	Upper Confidence Interval - 45-64 Years
AOC201-0080	Lower Confidence Interval - 65+ Years
AOC201-0090	Upper Confidence Interval - 65+ Years
AOC201-0095	Rate - Total
AOC201-0100	Lower Confidence Interval - Total
AOC201-0110	Upper Confidence Interval - Total

AOC235 - Initiation and Engagement of Alcohol and Other Drug Dependence Treatment (IET)

DESCRIPTION - The percentage of adolescent and adult members with a new episode of alcohol or other drug (AOD) dependence who received the following.

• Initiation of AOD Treatment. The percentage of members who initiate treatment through an inpatient AOD admission, outpatient visit, intensive outpatient encounter or partial hospitalization within 14 days of the diagnosis.

• Engagement of AOD Treatment. The percentage of members who initiated treatment and who had two or more additional services with a diagnosis of AOD within 30 days of the initiation visit.

(HEDIS 2018, Volume 2: Technical Specification, Pg. 287)

 REPORTING LEVEL - Contract

AOC235-0070	Lower 95% confidence interval - Engagement of AOD - Alcohol abuse or dependence - Total
AOC235-0080	Lower 95% confidence interval - Engagement of AOD - Opioid abuse or dependence - Total
AOC235-0090	Lower 95% confidence interval - Engagement of AOD - Other drug abuse or dependence - Total
AOC235-0100	Lower 95% confidence interval - Engagement of AOD - Total - Total
AOC235-0110	Lower 95% confidence interval - Initiation of AOD - Alcohol abuse or dependence - Total
AOC235-0120	Lower 95% confidence interval - Initiation of AOD - Opioid abuse or dependence - Total
AOC235-0130	Lower 95% confidence interval - Initiation of AOD - Other drug abuse or dependence - Total
AOC235-0140	Lower 95% confidence interval - Initiation of AOD - Total - Total
AOC235-0150	Reported rate - Engagement of AOD - Alcohol abuse or dependence - Total
AOC235-0160	Reported rate - Engagement of AOD - Opioid abuse or dependence - Total
AOC235-0170	Reported rate - Engagement of AOD - Other drug abuse or dependence - Total
AOC235-0180	Reported rate - Engagement of AOD - Total - Total
AOC235-0190	Reported rate - Initiation of AOD - Alcohol abuse or dependence - Total
AOC235-0200	Reported rate - Initiation of AOD - Opioid abuse or dependence - Total
AOC235-0210	Reported rate - Initiation of AOD - Other drug abuse or dependence - Total
AOC235-0220	Reported rate - Initiation of AOD - Total - Total
AOC235-0230	Upper 95% confidence interval - Engagement of AOD - Alcohol abuse or dependence - Total
AOC235-0240	Upper 95% confidence interval - Engagement of AOD - Opioid abuse or dependence - Total
AOC235-0250	Upper 95% confidence interval - Engagement of AOD - Other drug abuse or dependence - Total
AOC235-0260	Upper 95% confidence interval - Engagement of AOD - Total - Total
AOC235-0270	Upper 95% confidence interval - Initiation of AOD - Alcohol abuse or dependence - Total
AOC235-0280	Upper 95% confidence interval - Initiation of AOD - Opioid abuse or dependence - Total
AOC235-0290	Upper 95% confidence interval - Initiation of AOD - Other drug abuse or dependence - Total
AOC235-0300	Upper 95% confidence interval - Initiation of AOD - Total - Total

EOC003 - Breast Cancer Screening (BCS)

DESCRIPTION - The percentage of women 50–74 years of age who had a mammogram to screen for breast cancer. (HEDIS 2018, Volume 2: Technical Specification, Pg. 79)

REPORTING LEVEL - Contract

EOC003-0100	Rate - Total
EOC003-0110	Lower Confidence Interval - tot
EOC003-0120	Upper Confidence Interval - tot

EOC010 - Followup after Hospitalization for Mental Illness (FUH)

DESCRIPTION - The percentage of discharges for members 6 years of age and older who were hospitalized for treatment of selected mental illness diagnoses and who had an outpatient visit, an intensive outpatient encounter or partial hospitalization with a mental health practitioner. Two rates are reported:

• The percentage of discharges for which the member received follow-up within 30 days of discharge.

• The percentage of discharges for which the member received follow-up within 7 days of discharge.

(HEDIS 2018, Volume 2: Technical Specification, Pg. 179)

REPORTING LEVEL - Contract

EOC010-0011	Rate - 7 Days
EOC010-0012	Rate - 30 Days
EOC010-0021	Upper Confidence Interval - 7 Days
EOC010-0022	Upper Confidence Interval - 30 Days
EOC010-0031	Lower Confidence Interval - 7 Days
EOC010-0032	Lower Confidence Interval - 30 Days

EOC020 - Comprehensive Diabetes Care (CDC)

DESCRIPTION - The percentage of members 18–75 years of age with diabetes (type 1 and type 2) who had each of the following.

• Hemoglobin A1c (HbA1c) testing

• HbA1c poor control (>9.0%)

• HbA1c control (<8.0%)

• Eye exam (retinal) performed

• Medical attention for nephropathy

• BP control (<140/90 mm Hg)

(HEDIS 2018, Volume 2: Technical Specifications, Pg. 140)

REPORTING LEVEL - Contract

EOC020-0010	Rate - HbA1c Testing
EOC020-0020	Lower Confidence Interval - HbA1c Testing
EOC020-0030	Upper Confidence Interval - HbA1c Testing
EOC020-0040	Rate - Poor HbA1c Control
EOC020-0050	Lower Confidence Interval - Poor HbA1c Control
EOC020-0060	Upper Confidence Interval - Poor HbA1c Control
EOC020-0070	Rate - Eye Exams
EOC020-0080	Lower Confidence Interval - Eye Exams
EOC020-0090	Upper Confidence Interval - Eye Exams
EOC020-0160	Rate - Med Att Diabetic Neph.
EOC020-0170	Lower Confidence Interval - Med Att Diabetic Neph.
EOC020-0180	Upper Confidence Interval - Med Att Diabetic Neph.
EOC020-0310	Rate - Blood Press Cont <140/90
EOC020-0320	Lower Confidence Interval - Blood Press Cont <140/90
EOC020-0330	Upper Confidence Interval - Blood Press Cont <140/90
EOC020-0340	Rate - HbA1c Control (<8.0%)
EOC020-0350	Lower Confidence Interval - HbA1c Control (<8.0%)
EOC020-0360	Upper Confidence Interval - HbA1c Control (<8.0%)

EOC030 - Antidepressant Medication Management (AMM)

DESCRIPTION - The percentage of members 18 years of age and older who were treated with antidepressant medication, had a diagnosis of major depression and who remained on an antidepressant medication treatment. Two rates are reported.

• Effective Acute Phase Treatment. The percentage of members who remained on an antidepressant medication for at least 84 days (12 weeks).

• Effective Continuation Phase Treatment. The percentage of members who remained on an antidepressant medication for at least 180 days (6 months).

(HEDIS 2018, Volume 2: Technical Specifications, Pg. 170)

REPORTING LEVEL - Contract

EOC030-0010	Rate - Effect.Continuation Phase Treat.
EOC030-0020	Lower Confidence Interval - Effect.Continuation Phase Treat.
EOC030-0030	Upper Confidence Interval - Effect.Continuation Phase Treat.
EOC030-0040	Rate - Effect.Acute Phase Treatment
EOC030-0050	Lower Confidence Interval - Effect.Acute Phase Treatment
EOC030-0060	Upper Confidence Interval - Effect.Acute Phase Treatment

EOC035 - Controlling High Blood Pressure (CBP)

DESCRIPTION - The percentage of members 18–85 years of age who had a diagnosis of hypertension (HTN) and whose BP was adequately controlled during the measurement year based on the following criteria:

• Members 18–59 years of age whose BP was <140/90 mm Hg.

• Members 60–85 years of age with a diagnosis of diabetes whose BP was <140/90 mm Hg.

• Members 60–85 years of age without a diagnosis of diabetes whose BP was <150/90 mm Hg.

Note: Use the Hybrid Method for this measure. A single rate is reported and is the sum of all three groups.

(HEDIS 2018, Volume 2: Technical Specification, Pg. 122)

REPORTING LEVEL - Contract

EOC035-0100	Rate - Total
EOC035-0110	Lower Confidence Interval tot
EOC035-0120	Upper Confidence Interval tot

EOC040 - Colorectal Cancer Screening (COL)

DESCRIPTION - The percentage of members 50–75 years of age who had appropriate screening for colorectal cancer. (HEDIS 2018, Volume 2: Technical Specification, Pg. 86)

REPORTING LEVEL - Contract

EOC040-0010	Reported Rate
EOC040-0020	Lower Confidence Interval
EOC040-0030	Upper Confidence Interval

EOC045 - Osteoporosis Management in Women Who Had a Fracture (OMW)

DESCRIPTION - The percentage of women 67–85 years of age who suffered a fracture and who had either a bone mineral density (BMD) test or prescription for a drug to treat osteoporosis in the six months after the fracture. (HEDIS 2018, Volume 2: Technical Specification, Pg. 165)

REPORTING LEVEL - Contract

EOC045-0010	Reported rate
EOC045-0020	Lower Confidence Interval
EOC045-0030	Upper Confidence Interval

EOC055 - Persistence of Beta-Blocker Treatment After a Heart Attack (PBH)

DESCRIPTION - The percentage of members 18 years of age and older during the measurement year who were hospitalized and discharged from July 1 of the year prior to the measurement year to June 30 of the measurement year with a diagnosis of AMI and who received persistent beta-blocker treatment for six months after discharge. (HEDIS 2018, Volume 2: Technical Specification, Pg. 129)

REPORTING LEVEL - Contract

EOC055-0010	Reported rate
EOC055-0020	Lower Confidence Interval
EOC055-0030	Upper Confidence Interval

EOC060 - Management of Urinary Incontinence in Older Adults (MUI)

DESCRIPTION - The following components of this measure assess the management of urinary incontinence in older adults.

• Discussing Urinary Incontinence. The percentage of Medicare members 65 years of age and older who reported having urine leakage in the past six months and who discussed their urinary leakage problem with a health care provider.

• Discussing Treatment of Urinary Incontinence. The percentage of Medicare members 65 years of age and older who reported having urine leakage in the past six months and who discussed treatment options for their current urine leakage problem.

• Impact of Urinary Incontinence. The percentage of Medicare members 65 years of age and older who reported having urine leakage in the past six months and who reported that urine leakage made them change their daily activities or interfered with their sleep a lot.

(HEDIS 2018, Volume 2: Technical Specification, Pg. 270)

 REPORTING LEVEL - Contract

EOC060-0010	Discussing Urinary Incontinence Rate
EOC060-0020	Treatment of Urinary Incontinence Rate
EOC060-0030	Impact of Urinary Incontinence Rate

EOC065 - Disease Modifying Anti-Rheumatic Drug Therapy in Rheumatoid Arthritis (ART)

DESCRIPTION - The percentage of members who were diagnosed with rheumatoid arthritis and who were dispensed at least one ambulatory prescription for a disease-modifying anti-rheumatic drug (DMARD). (HEDIS 2018, Volume 2: Technical Specification, Pg. 162)

 REPORTING LEVEL - Contract

EOC065-0010	Reported rate
EOC065-0020	Lower Confidence Interval
EOC065-0030	Upper Confidence Interval

EOC070 - Use of High-Risk Medications in the Elderly (DAE)

DESCRIPTION - • The percentage of Medicare members 66 years of age and older who received at least one high-risk medication.

• The percentage of Medicare members 66 years of age and older who received at least two different high-risk medications.

For both rates, a lower rate represents better performance.

(HEDIS 2018, Volume 2: Technical Specification, Pg. 253)

 REPORTING LEVEL - Contract

EOC070-0010	Rate - one prescription
EOC070-0020	Lower Confidence Interval - one prescription
EOC070-0030	Upper Confidence Interval - one prescription
EOC070-0040	Rate - at least 2 prescriptions
EOC070-0050	Lower Confidence Interval - at least 2 prescriptions
EOC070-0060	Upper Confidence Interval - at least 2 prescriptions

EOC080 - Use of Spirometry Testing in the Assessment and Diagnosis of COPD (SPR)

DESCRIPTION - The percentage of members 40 years of age and older with a new diagnosis of COPD or newly active COPD, who received appropriate spirometry testing to confirm the diagnosis. (HEDIS 2018, Volume 2: Technical Specification, Pg. 104)

 REPORTING LEVEL - Contract

EOC080-0010	Reported rate
EOC080-0020	Lower Confidence Interval
EOC080-0030	Upper Confidence Interval

EOC085 - Physical Activity in Older Adults (PAO) HOS

DESCRIPTION - The two components of this measure assess different facets of promoting physical activity in older adults.

• Discussing Physical Activity. The percentage of Medicare members 65 years of age and older who had a doctor's visit in the past 12 months and who spoke with a doctor or other health provider about their level of exercise or physical activity.

• Advising Physical Activity. The percentage of Medicare members 65 years of age and older who had a doctor's visit in the past 12 months and who received advice to start, increase or maintain their level exercise or physical activity.

 (HEDIS 2018, Volume 2: Technical Specification, Pg. 272)

 REPORTING LEVEL - Contract

EOC085-0010	Discussing Physical Activity Rate
EOC085-0020	Advising Physical Activity Rate

EOC090 - Potentially Harmful Drug-Disease Interactions in the Elderly (DDE)

DESCRIPTION - The percentage of Medicare members 65 years of age and older who have evidence of an underlying disease, condition or health concern and who were dispensed an ambulatory prescription for a potentially harmful medication, concurrent with or after the diagnosis.

Report each of the three rates separately and as a total rate.

• A history of falls and a prescription for anticonvulsants, nonbenzodiazepine hypnotics, SSRIs, antiemetics, antipsychotics, benzodiazepines or tricyclic antidepressants.

• Dementia and a prescription for antiemetics, antipsychotics, benzodiazepines, tricyclic antidepressants, H2 receptor antagonists, nonbenzodiazepine hypnotics or anticholinergic agents.

• Chronic kidney disease and prescription for Cox-2 selective NSAIDs or nonaspirin NSAIDs.

• Total rate (the sum of the three numerators divided by the sum of the three denominators).

Members with more than one disease or condition may appear in the measure multiple times (i.e., in each indicator for which they qualify). A lower rate represents better performance for all rates.

(HEDIS 2018, Volume 2: Technical Specification, Pg. 247)

 REPORTING LEVEL - Contract

EOC090-0010	Rate - DDI Falls + Anticonvulsants, Nonbenzodiazepine hypnotics, SSRIs, Antiemetics, Antipsychotics, Benzodiazepines or Tricyclic Antidepressants
EOC090-0020	Lower Confidence Interval - DDI Falls + Anticonvulsants, Nonbenzodiazepine hypnotics, SSRIs, Antiemetics, Antipsychotics, Benzodiazepines or Tricyclic Antidepressants
EOC090-0030	Upper Confidence Interval - DDI Falls + Anticonvulsants, Nonbenzodiazepine hypnotics, SSRIs, Antiemetics, Antipsychotics, Benzodiazepines or Tricyclic Antidepressants
EOC090-0040	Rate - DDI Dementia + Antiemetics, Antipsychotics, Benzodiazepines, Tricyclic Antidepressants, H2 Receptor Antagonists, Nonbenzodiazepine hypnotics or Anticholinergic Agents
EOC090-0050	Lower Confidence Interval - DDI Dementia + Antiemetics, Antipsychotics, Benzodiazepines, Tricyclic Antidepressants, H2 Receptor Antagonists, Nonbenzodiazepine hypnotics or Anticholinergic Agents
EOC090-0060	Upper Confidence Interval - DDI Dementia + Antiemetics, Antipsychotics, Benzodiazepines, Tricyclic Antidepressants, H2 Receptor Antagonists, Nonbenzodiazepine hypnotics or Anticholinergic Agents
EOC090-0070	Rate - DDI Chronic Kidney disease + Cox-2 Selective NSAIDs or Nonaspirin NSAIDs
EOC090-0080	Lower Confidence Interval - DDI Chronic Kidney disease + Cox-2 Selective NSAIDs or Nonaspirin NSAIDs
EOC090-0090	Upper Confidence Interval - DDI Chronic Kidney disease + Cox-2 Selective NSAIDs or Nonaspirin NSAIDs
EOC090-0100	Rate - Total
EOC090-0110	Lower Confidence Interval - Total
EOC090-0120	Upper Confidence Interval - Total

EOC095 - Fall Risk Management (FRM) HOS

DESCRIPTION - The two components of this measure assess different facets of fall risk management.

• Discussing Fall Risk. The percentage of Medicare members 75 years of age and older or 65–74 years of age with balance or walking problems or a fall in the past 12 months, who were seen by a practitioner in the past 12 months and who discussed falls or problems with balance or walking with their current practitioner.

• Managing Fall Risk. The percentage of Medicare members 65 years of age and older who had a fall or had problems with balance or walking in the past 12 months, who were seen by a practitioner in the past 12 months and who received fall risk intervention from their current practitioner.

(HEDIS 2018, Volume 2: Technical Specification, Pg. 269)

 REPORTING LEVEL - Contract

EOC095-0010	Discussing Fall Risk Rate
EOC095-0020	Managing Fall Risk Rate

EOC100 - Osteoporosis Testing in Older Women (OTO) HOS

DESCRIPTION - The percentage of Medicare women 65–85 years of age who report ever having received a bone density test to check for osteoporosis. (HEDIS 2018, Volume 2: Technical Specification, Pg. 271)

 REPORTING LEVEL - Contract

EOC100-0010	Osteoporosis Testing Rate

EOC105 - Pharmacotherapy Management of COPD Exacerbation (PCE)

DESCRIPTION - The percentage of COPD exacerbations for members 40 years of age and older who had an acute inpatient discharge or ED visit on or between January 1–November 30 of the measurement year and who were dispensed appropriate medications. Two rates are reported:

• 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.

Note: The eligible population for this measure is based on acute inpatient discharges and ED visits, not on members. It is possible for the denominator to include multiple events for the same individual.

(HEDIS 2018, Volume 2: Technical Specification, Pg. 107)

REPORTING LEVEL - Contract

EOC105-0010	Reported rate - Systemic corticosteroid
EOC105-0020	Lower 95% confidence interval - Systemic corticosteroid
EOC105-0030	Upper 95% confidence interval - Systemic corticosteroid
EOC105-0040	Reported rate - Bronchodilator
EOC105-0050	Lower 95% confidence interval - Bronchodilator
EOC105-0060	Upper 95% confidence interval - Bronchodilator

EOC110 - Adult BMI Assessment (ABA)

DESCRIPTION - The percentage of members 18–74 years of age who had an outpatient visit and whose body mass index (BMI) was documented during the measurement year or the year prior to the measurement year.

(HEDIS 2018, Volume 2: Technical Specification, Pg. 58)

REPORTING LEVEL - Contract

EOC110-0010	Reported Rate
EOC110-0020	Lower Confidence Interval
EOC110-0030	Upper Confidence Interval

EOC120 - Medication Reconciliation Post-Discharge (MRP)

The percentage of discharges from January 1–December 1 of the measurement year for members 18 years of age and older for whom medications were reconciled the date of discharge through 30 days after discharge (31 total days).

(HEDIS 2018, Volume 2: Technical Specification, Pg. 212)

REPORTING LEVEL - Contract

EOC120-0010	Reported Rate
EOC120-0020	Lower Confidence Interval
EOC120-0030	Upper Confidence Interval

EOC125 - Non-Recommended PSA-Based Screening in Older Men (PSA)

DESCRIPTION - The percentage of men 70 years and older who were screened unnecessarily for prostate cancer using prostate-specific antigen (PSA)-based screening.

Note: A lower rate indicates better performance.

(HEDIS 2018, Volume 2: Technical Specification, Pg. 228)

REPORTING LEVEL - Contract

EOC125-0100	Reported rate
EOC125-0110	Lower 95% confidence interval
EOC125-0120	Upper 95% confidence interval

EOC130 - Statin Therapy for Patients With Cardiovascular Disease (SPC)

DESCRIPTION - The percentage of males 21–75 years of age and females 40–75 years of age during the measurement year, who were identified as having clinical atherosclerotic cardiovascular disease (ASCVD) and met the following criteria. The following rates are reported:

• Received Statin Therapy. Members who were dispensed at least one high or moderate-intensity statin medication during the measurement year.

• Statin Adherence 80%. Members who remained on a high or moderate-intensity statin medication for at least 80% of the treatment period.

(HEDIS 2018, Volume 2: Technical Specification, Pg. 133)

REPORTING LEVEL - Contract

EOC130-0010	Reported rate - Received Statin Therapy - 21-75 years (Male)
EOC130-0020	Lower 95% confidence interval - Received Statin Therapy - 21-75 years (Male)
EOC130-0030	Upper 95% confidence interval - Received Statin Therapy - 21-75 years (Male)
EOC130-0040	Reported rate - Statin Adherence 80% - 21-75 years (Male)
EOC130-0050	Lower 95% confidence interval - Statin Adherence 80% - 21-75 years (Male)
EOC130-0060	Upper 95% confidence interval - Statin Adherence 80% - 21-75 years (Male)
EOC130-0070	Reported rate - Received Statin Therapy - 40-75 years (Female)
EOC130-0080	Lower 95% confidence interval - Received Statin Therapy - 40-75 years (Female)
EOC130-0090	Upper 95% confidence interval - Received Statin Therapy - 40-75 years (Female)
EOC130-0100	Reported rate - Statin Adherence 80% - 40-75 years (Female)
EOC130-0110	Lower 95% confidence interval - Statin Adherence 80% - 40-75 years (Female)
EOC130-0120	Upper 95% confidence interval - Statin Adherence 80% - 40-75 years (Female)
EOC130-0130	Reported rate - Received Statin Therapy - Total
EOC130-0140	Lower 95% confidence interval - Received Statin Therapy - Total
EOC130-0150	Upper 95% confidence interval - Received Statin Therapy - Total
EOC130-0160	Reported rate - Statin Adherence 80% - Total
EOC130-0170	Lower 95% confidence interval - Statin Adherence 80% - Total
EOC130-0180	Upper 95% confidence interval - Statin Adherence 80% - Total

EOC135 - Statin Therapy for Patients With Diabetes (SPD)

DESCRIPTION - The percentage of members 40–75 years of age during the measurement year with diabetes who do not have clinical atherosclerotic cardiovascular disease (ASCVD) who met the following criteria. Two rates are reported:

• Received Statin Therapy. Members who were dispensed at least one statin medication of any intensity during the measurement year.

• Statin Adherence 80%. Members who remained on a statin medication of any intensity for at least 80% of the treatment period.

(HEDIS 2018, Volume 2: Technical Specification, Pg. 155)

REPORTING LEVEL - Contract

EOC135-0010	Reported rate - Received Statin Therapy
EOC135-0020	Lower 95% confidence interval - Received Statin Therapy
EOC135-0030	Upper 95% confidence interval - Received Statin Therapy
EOC135-0040	Reported rate - Statin Adherence 80%
EOC135-0050	Lower 95% confidence interval - Statin Adherence 80%
EOC135-0060	Upper 95% confidence interval - Statin Adherence 80%

EOC150 - Follow-Up After Emergency Department Visit for Mental Illness (FUM)

The percentage of emergency department (ED) visits for members 6 years of age and older with a principal diagnosis of mental illness, who had a follow-up visit for mental illness. Two rates are reported:

1.   The percentage of ED visits for which the member received follow-up within 30 days of the ED visit (31 total days).

2.   The percentage of ED visits for which the member received follow-up within 7 days of the ED visit (8 total days).

(HEDIS 2018, Volume 2: Technical Specification, Pg. 182)

REPORTING LEVEL - Contract

EOC150-0010	Rate - 7 Days
EOC150-0020	Lower Confidence Interval - 7 Days
EOC150-0030	Upper Confidence Interval - 7 Days
EOC150-0040	Rate - 30 Days
EOC150-0050	Lower Confidence Interval - 30 Days
EOC150-0060	Upper Confidence Interval - 30 Days

EOC155 - Follow-Up After Emergency Department Visit for Alcohol and Other Drug Dependence (FUA)

The percentage of emergency department (ED) visits for members 13 years of age and older with a principal diagnosis of alcohol or other drug (AOD) abuse or dependence, who had a follow up visit for AOD. Two rates are reported:

1.   The percentage of ED visits for which the member received follow-up within 30 days of the ED visit (31 total days).

2.   The percentage of ED visits for which the member received follow-up within 7 days of the ED visit (8 total days).

(HEDIS 2018, Volume 2: Technical Specification, Pg. 185)

REPORTING LEVEL - Contract

EOC155-0010	Rate - 7 Days 13-17 Years

EOC155-0020	Lower Confidence Interval - 7 Days 13-17 Years
EOC155-0030	Upper Confidence Interval - 7 Days 13-17 Years
EOC155-0040	Rate - 7 Days 18+ Years
EOC155-0050	Lower Confidence Interval - 7 Days 18+ Years
EOC155-0060	Upper Confidence Interval - 7 Days 18+ Years
EOC155-0070	Rate - 7 Days Total
EOC155-0080	Lower Confidence Interval - 7 Days Total
EOC155-0090	Upper Confidence Interval - 7 Days Total
EOC155-0100	Rate - 30 Days 13-17 Years
EOC155-0110	Lower Confidence Interval - 30 Days 13-17 Years
EOC155-0120	Upper Confidence Interval - 30 Days 13-17 Years
EOC155-0130	Rate - 30 Days 18+ Years
EOC155-0140	Lower Confidence Interval - 30 Days 18+ Years
EOC155-0150	Upper Confidence Interval - 30 Days 18+ Years
EOC155-0160	Rate - 30 Days Total
EOC155-0170	Lower Confidence Interval - 30 Days Total
EOC155-0180	Upper Confidence Interval - 30 Days Total

EOC160 - Transitions of Care (TRC)

The percentage of discharges for members 18 years of age and older who had each of the following during the measurement year. Four rates are reported:

• Notification of Inpatient Admission. Documentation of receipt of notification of inpatient admission on the day of admission or the following day.

• Receipt of Discharge Information. Documentation of receipt of discharge information on the day of discharge or the following day.

• Patient Engagement After Inpatient Discharge. Documentation of patient engagement (e.g., office visits, visits to the home, telehealth) provided within 30 days after discharge.

• Medication Reconciliation Post-Discharge. Documentation of medication reconciliation on the date of discharge through 30 days after discharge (31 total days).

(HEDIS 2018, Volume 2: Technical Specification, Pg. 216)

REPORTING LEVEL - Contract

EOC160-0010	Reported rate - Notification of Inpatient Admission - 18-64 Years
EOC160-0020	Lower 95% confidence interval - Notification of Inpatient Admission - 18-64 Years
EOC160-0030	Upper 95% confidence interval - Notification of Inpatient Admission - 18-64 Years
EOC160-0040	Reported rate - Notification of Inpatient Admission - 65+ Years
EOC160-0050	Lower 95% confidence interval - Notification of Inpatient Admission - 65+ Years
EOC160-0060	Upper 95% confidence interval - Notification of Inpatient Admission - 65+ Years
EOC160-0070	Reported rate - Notification of Inpatient Admission - Total
EOC160-0080	Lower 95% confidence interval - Notification of Inpatient Admission - Total
EOC160-0090	Upper 95% confidence interval - Notification of Inpatient Admission - Total
EOC160-0100	Reported rate - Medication Reconciliation Post-Discharge - 18-64 Years
EOC160-0110	Lower 95% confidence interval - Medication Reconciliation Post-Discharge - 18-64 Years
EOC160-0120	Upper 95% confidence interval - Medication Reconciliation Post-Discharge - 18-64 Years
EOC160-0130	Reported rate - Medication Reconciliation Post-Discharge - 65+ Years
EOC160-0140	Lower 95% confidence interval - Medication Reconciliation Post-Discharge - 65+ Years
EOC160-0150	Upper 95% confidence interval - Medication Reconciliation Post-Discharge - 65+ Years
EOC160-0160	Reported rate - Medication Reconciliation Post-Discharge - Total
EOC160-0170	Lower 95% confidence interval - Medication Reconciliation Post-Discharge - Total
EOC160-0180	Upper 95% confidence interval - Medication Reconciliation Post-Discharge - Total
EOC160-0190	Reported rate - Patient Engagement After Inpatient Discharge - 18-64 Years
EOC160-0200	Lower 95% confidence interval - Patient Engagement After Inpatient Discharge - 18-64 Years
EOC160-0210	Upper 95% confidence interval - Patient Engagement After Inpatient Discharge - 18-64 Years
EOC160-0220	Reported rate - Patient Engagement After Inpatient Discharge - 65+ Years
EOC160-0230	Lower 95% confidence interval - Patient Engagement After Inpatient Discharge - 65+ Years
EOC160-0240	Upper 95% confidence interval - Patient Engagement After Inpatient Discharge - 65+ Years
EOC160-0250	Reported rate - Patient Engagement After Inpatient Discharge - Total
EOC160-0260	Lower 95% confidence interval - Patient Engagement After Inpatient Discharge - Total
EOC160-0270	Upper 95% confidence interval - Patient Engagement After Inpatient Discharge - Total

EOC160-0280	Reported rate - Receipt of Discharge Information - 18-64 Years
EOC160-0290	Lower 95% confidence interval - Receipt of Discharge Information - 18-64 Years
EOC160-0300	Upper 95% confidence interval - Receipt of Discharge Information - 18-64 Years
EOC160-0310	Reported rate - Receipt of Discharge Information - 65+ Years
EOC160-0320	Lower 95% confidence interval - Receipt of Discharge Information - 65+ Years
EOC160-0330	Upper 95% confidence interval - Receipt of Discharge Information - 65+ Years
EOC160-0340	Reported rate - Receipt of Discharge Information - Total
EOC160-0350	Lower 95% confidence interval - Receipt of Discharge Information - Total
EOC160-0360	Upper 95% confidence interval - Receipt of Discharge Information - Total

EOC165 - Follow-Up After Emergency Department Visit for People With High-Risk Multiple Chronic Conditions (FMC)

The percentage of emergency department (ED) visits for members 18 years and older who have high-risk multiple chronic conditions who had a follow-up service within 7 days of the ED visit.

(HEDIS 2018, Volume 2: Technical Specification, Pg. 222)

REPORTING LEVEL - Contract

EOC165-0010	Reported rate - 18-64 Years
EOC165-0020	Lower 95% confidence interval - 18-64 Years
EOC165-0030	Upper 95% confidence interval - 18-64 Years
EOC165-0040	Reported rate - 65+ Years
EOC165-0050	Lower 95% confidence interval - 65+ Years
EOC165-0060	Upper 95% confidence interval - 65+ Years
EOC165-0070	Reported rate - Total
EOC165-0080	Lower 95% confidence interval - Total
EOC165-0090	Upper 95% confidence interval - Total

EOC170 - Use of Opioids at High Dosage (UOD)

For members 18 years and older, the rate per 1,000 receiving prescription opioids for ≥15 days during the measurement year at a high dosage (average morphine equivalent dose [MED] >120 mg).

Note: A lower rate indicates better performance.

(HEDIS 2018, Volume 2: Technical Specification, Pg. 258)

REPORTING LEVEL - Contract

EOC170-0010	Reported rate
EOC170-0020	Lower 95% confidence interval
EOC170-0030	Upper 95% confidence interval

EOC175 - Use of Opioids From Multiple Providers (UOP)

For members 18 years and older, the rate per 1,000 receiving prescription opioids for ≥15 days during the measurement year who received opioids from multiple providers. Three rates are reported.

1. Multiple Prescribers: The rate per 1,000 of members receiving prescriptions for opioids from four or more different prescribers during the measurement year.

2. Multiple Pharmacies: The rate per 1,000 of members receiving prescriptions for opioids from four or more different pharmacies during the measurement year.

3. Multiple Prescribers and Multiple Pharmacies: The rate per 1,000 of members receiving prescriptions for opioids from four or more different prescribers and four or more different pharmacies during the measurement year (i.e., the rate per 1,000 of members who are numerator compliant for both the Multiple Prescribers and Multiple Pharmacies rates).

Note: A lower rate indicates better performance for all three rates.

(HEDIS 2018, Volume 2: Technical Specification, Pg. 263)

REPORTING LEVEL - Contract

EOC175-0010	Reported rate - Multiple Pharmacies
EOC175-0020	Lower 95% confidence interval - Multiple Pharmacies
EOC175-0030	Upper 95% confidence interval - Multiple Pharmacies
EOC175-0040	Reported rate - Multiple Prescribers
EOC175-0050	Lower 95% confidence interval - Multiple Prescribers
EOC175-0060	Upper 95% confidence interval - Multiple Prescribers
EOC175-0070	Reported rate - Multiple Prescribers and Multiple Pharmacies

EOC175-0080	Lower 95% confidence interval - Multiple Prescribers and Multiple Pharmacies
EOC175-0090	Upper 95% confidence interval - Multiple Prescribers and Multiple Pharmacies

HPS403 - Total Membership (TLM)

DESCRIPTION - The number of members enrolled as of December 31 of the measurement year. (HEDIS 2018, Volume 2: Technical Specification, Pg. 439)

REPORTING LEVEL - Contract

HPS403-0210	Membership HMO-Tot
HPS403-0220	Membership HMO-Medicaid
HPS403-0230	Membership HMO-Commercial
HPS403-0240	Membership HMO-Medicare Risk/Cost
HPS403-0245	Membership HMO-Marketplace
HPS403-0270	Membership HMO-Oth
HPS403-0280	Membership PPO-Tot
HPS403-0290	Membership PPO-Commercial
HPS403-0300	Membership PPO-Medicare Risk/Cost
HPS403-0305	Membership PPO-Marketplace
HPS403-0330	Membership PPO-Oth
HPS403-0340	Membership POS-Tot
HPS403-0350	Membership POS-Commercial
HPS403-0360	Membership POS-Medicare Risk/Cost
HPS403-0365	Membership POS-Marketplace
HPS403-0390	Membership POS-Oth
HPS403-0400	Membership FFS-Tot
HPS403-0420	Membership PPO-Medicaid
HPS403-0440	Membership POS-Medicaid
HPS403-0450	Membership FFS-Commercial
HPS403-0460	Membership FFS-Medicare Risk/Cost
HPS403-0470	Membership FFS-Medicaid
HPS403-0480	Membership FFS-Oth
HPS403-0490	Tot Membership Tot
HPS403-0500	Membership EPO-Tot
HPS403-0510	Membership EPO-Oth
HPS403-0520	Membership EPO-Marketplace
HPS403-0530	Membership EPO-Commercial

PDI801 - Board Certification/Residency Completion (BCR)

DESCRIPTION - The percentage of the following physicians whose board certification is active as of December 31 of the measurement year:

• Family medicine physicians

• Internal medicine physicians

• Pediatricians

• OB/GYN physicians

• Geriatricians

• Other physician specialists

Board certification refers to the various specialty certification programs of the American Board of Medical Specialties and the American Osteopathic Association. Report each product separately as of December 31 of the measurement year.

(HEDIS 2018, Volume 2: Technical Specification, Pg. 422)

REPORTING LEVEL - Contract

PDI801-0010	Family Medicine Board Cert Pct
PDI801-0030	Oth Specialists Board Cert Pct
PDI801-0050	Geriatricians Board Cert Pct
PDI801-0060	Internal Medicine Board Cert Pct
PDI801-0070	OB/GYN Provs Board Cert Pct
PDI801-0080	Pediatrician Board Cert Pct

PDI806 - Enrollment by Product Line (ENP)

DESCRIPTION - The total number of members enrolled in the product line, stratified by age and gender.

(HEDIS 2018, Volume 2: Technical Specification, Pg. 426)

REPORTING LEVEL - Contract

PDI806-0010	Enr by Product Line Tot M
PDI806-0020	Enr by Product Line Tot F
PDI806-0030	Enr by Product Line Tot Tot

PDI807 - Language Diversity of Membership (LDM)

DESCRIPTION - An unduplicated count and percentage of members enrolled at any time during the measurement year by spoken language preferred for health care and preferred language for written materials. (HEDIS 2018, Volume 2: Technical Specification, Pg. 431)

REPORTING LEVEL - Contract

PDI807-0360	Spoken Language Preferred for Health Care - Health Plan Direct Num
PDI807-0370	Spoken Language Preferred for Health Care - CMS/State Databases Num
PDI807-0380	Spoken Language Preferred for Health Care - Other Third-Party Source Num
PDI807-0390	Preferred Language for Written Materials - Health Plan Direct Num
PDI807-0400	Preferred Language for Written Materials - CMS/State Databases Num
PDI807-0410	Preferred Language for Written Materials - Other Third-Party Source Num
PDI807-0420	Other Language Needs - Health Plan Direct Num
PDI807-0430	Other Language Needs - CMS/State Databases Num
PDI807-0440	Other Language Needs - Other Third-Party Source Num
PDI807-0450	Spoken Language Preferred for Health Care - English Pct
PDI807-0460	Spoken Language Preferred for Health Care - Non-English Pct
PDI807-0470	Spoken Language Preferred for Health Care - Unknown Pct
PDI807-0480	Spoken Language Preferred for Health Care - Declined Pct
PDI807-0490	Spoken Language Preferred for Health Care - Total Pct
PDI807-0500	Language Preferred for Written Materials - English Pct
PDI807-0510	Language Preferred for Written Materials - Non-English Pct
PDI807-0520	Language Preferred for Written Materials - Unknown Pct
PDI807-0530	Language Preferred for Written Materials - Declined Pct
PDI807-0540	Language Preferred for Written Materials - Total Pct
PDI807-0550	Other Language Needs - English Pct
PDI807-0560	Other Language Needs - Non-English Pct
PDI807-0570	Other Language Needs - Unknown Pct
PDI807-0580	Other Language Needs - Declined Pct
PDI807-0590	Other Language Needs - Total Pct

PDI808 - Race/Ethnicity Diversity of Membership (RDM)

DESCRIPTION - An unduplicated count and percentage of members enrolled any time during the measurement year, by race and ethnicity. (HEDIS 2018, Volume 2: Technical Specification, Pg. 434)

REPORTING LEVEL - Contract

PDI808-1120	White Hispanic or Latino Pct
PDI808-1130	White Not Hispanic or Latino Pct
PDI808-1140	White Unknown Ethnicity Pct
PDI808-1150	White Declined Ethnicity Pct
PDI808-1160	White Total Pct
PDI808-1170	Black or African American Hispanic or Latino Pct
PDI808-1180	Black or African American Not Hispanic or Latino Pct
PDI808-1190	Black or African American Unknown Ethnicity Pct
PDI808-1200	Black or African American Declined Ethnicity Pct
PDI808-1210	Black or African American Total Pct
PDI808-1220	American-Indian and Alaska Native Hispanic or Latino Pct
PDI808-1230	American-Indian and Alaska Native Not Hispanic or Latino Pct
PDI808-1240	American-Indian and Alaska Native Unknown Ethnicity Pct
PDI808-1250	American-Indian and Alaska Native Declined Ethnicity Pct

PDI808-1260	American-Indian and Alaska Native Total Pct
PDI808-1270	Asian Hispanic or Latino Pct
PDI808-1280	Asian Not Hispanic or Latino Pct
PDI808-1290	Asian Unknown Ethnicity Pct
PDI808-1300	Asian Declined Ethnicity Pct
PDI808-1310	Asian Total Pct
PDI808-1320	Native Hawaiian and Other Pacific Islanders Hispanic or Latino Pct
PDI808-1330	Native Hawaiian and Other Pacific Islanders Not Hispanic or Latino Pct
PDI808-1340	Native Hawaiian and Other Pacific Islanders Unknown Ethnicity Pct
PDI808-1350	Native Hawaiian and Other Pacific Islanders Declined Ethnicity Pct
PDI808-1360	Native Hawaiian and Other Pacific Islanders Total Pct
PDI808-1370	Some Other Race Hispanic or Latino Pct
PDI808-1380	Some Other Race Not Hispanic or Latino Pct
PDI808-1390	Some Other Race Unknown Ethnicity Pct
PDI808-1400	Some Other Race Declined Ethnicity Pct
PDI808-1410	Some Other Race Total Pct
PDI808-1420	Two or More Races Hispanic or Latino Pct
PDI808-1430	Two or More Races Not Hispanic or Latino Pct
PDI808-1440	Two or More Races Unknown Ethnicity Pct
PDI808-1450	Two or More Races Declined Ethnicity Pct
PDI808-1460	Two or More Races Total Pct
PDI808-1470	Unknown Hispanic or Latino Pct
PDI808-1480	Unknown Not Hispanic or Latino Pct
PDI808-1490	Unknown Unknown Ethnicity Pct
PDI808-1500	Unknown Declined Ethnicity Pct
PDI808-1510	Unknown Total Pct
PDI808-1520	Declined Hispanic or Latino Pct
PDI808-1530	Declined Not Hispanic or Latino Pct
PDI808-1540	Declined Unknown Ethnicity Pct
PDI808-1550	Declined Declined Ethnicity Pct
PDI808-1560	Declined Total Pct
PDI808-1570	Total Hispanic or Latino Pct
PDI808-1580	Total Not Hispanic or Latino Pct
PDI808-1590	Total Unknown Ethnicity Pct
PDI808-1600	Total Declined Ethnicity Pct
PDI808-1610	Total Total Pct

PDI809 - Enrollment by State (EBS)

DESCRIPTION - The number of members enrolled as of December 31 of the measurement year, by state. (HEDIS 2018, Volume 2: Technical Specification, Pg. 430)

REPORTING LEVEL - Contract

PDI809-0010	Alabama
PDI809-0020	Alaska
PDI809-0030	Arizona
PDI809-0040	Arkansas
PDI809-0050	California
PDI809-0060	Colorado
PDI809-0070	Connecticut
PDI809-0080	Delaware
PDI809-0090	District of Columbia
PDI809-0100	Florida
PDI809-0110	Georgia
PDI809-0120	Hawaii
PDI809-0130	Idaho
PDI809-0140	Illinois
PDI809-0150	Indiana
PDI809-0160	Iowa

PDI809-0170	Kansas
PDI809-0180	Kentucky
PDI809-0190	Louisiana
PDI809-0200	Maine
PDI809-0210	Maryland
PDI809-0220	Massachusetts
PDI809-0230	Michigan
PDI809-0240	Minnesota
PDI809-0250	Mississippi
PDI809-0260	Missouri
PDI809-0270	Montana
PDI809-0280	Nebraska
PDI809-0290	Nevada
PDI809-0300	New Hampshire
PDI809-0310	New Jersey
PDI809-0320	New Mexico
PDI809-0330	New York
PDI809-0340	North Carolina
PDI809-0350	North Dakota
PDI809-0360	Ohio
PDI809-0370	Oklahoma
PDI809-0380	Oregon
PDI809-0390	Pennsylvania
PDI809-0400	Rhode Island
PDI809-0410	South Carolina
PDI809-0420	South Dakota
PDI809-0430	Tennessee
PDI809-0440	Texas
PDI809-0450	Utah
PDI809-0460	Vermont
PDI809-0470	Virginia
PDI809-0480	Washington
PDI809-0490	West Virginia
PDI809-0500	Wisconsin
PDI809-0510	Wyoming
PDI809-0520	American Samoa
PDI809-0530	Federated States of Micronesia
PDI809-0540	Guam
PDI809-0550	Commonwealth of Northern Marianas
PDI809-0560	Puerto Rico
PDI809-0570	Virgin Islands
PDI809-0580	Other
PDI809-0590	Total

UOS505 - Frequency of Selected Procedures (FSP)

DESCRIPTION - This measure summarizes the utilization of frequently performed procedures that often show wide regional variation and have generated concern regarding potentially inappropriate utilization. (HEDIS 2018, Volume 2: Technical Specification, Pg. 330)

REPORTING LEVEL - Contract

UOS505-0010	CABG M <65 Procs/1000
UOS505-0020	CABG M 65-74 Procs/1000
UOS505-0030	CABG M 75-84 Procs/1000
UOS505-0040	CABG M 85+ Procs/1000
UOS505-0050	PCI M <65 Procs/1000
UOS505-0060	PCI M 65-74 Procs/1000
UOS505-0070	PCI M 75-84 Procs/1000
UOS505-0080	PCI M 85+ Procs/1000

UOS505-0090	Carotid Endarterectomy M <65 Procs/1000
UOS505-0100	Carotid Endarterectomy M 65-74 Procs/1000
UOS505-0110	Carotid Endarterectomy M 75-84 Procs/1000
UOS505-0120	Carotid Endarterectomy M 85+ Procs/1000
UOS505-0170	Total Hip Replacement M <65 Procs/1000
UOS505-0180	Total Hip Replacement M 65-74 Procs/1000
UOS505-0190	Total Hip Replacement M 75-84 Procs/1000
UOS505-0200	Total Hip Replacement M 85+ Procs/1000
UOS505-0210	Total Knee Replacement M <65 Procs/1000
UOS505-0220	Total Knee Replacement M 65-74 Procs/1000
UOS505-0230	Total Knee Replacement M 75-84 Procs/1000
UOS505-0240	Total Knee Replacement M 85+ Procs/1000
UOS505-0290	Cholecystectomy opn M <65 Procs/1000
UOS505-0300	Cholecystectomy opn M 65-74 Procs/1000
UOS505-0310	Cholecystectomy opn M 75-84 Procs/1000
UOS505-0320	Cholecystectomy opn M 85+ Procs/1000
UOS505-0330	Cholecystectomy, (laparoscopic) M <65 Procs/1000
UOS505-0340	Cholecystectomy, (laparoscopic) M 65-74 Procs/1000
UOS505-0350	Cholecystectomy, (laparoscopic) M 75-84 Procs/1000
UOS505-0360	Cholecystectomy, (laparoscopic) M 85+ Procs/1000
UOS505-0370	Prostatectomy <65 Procs/1000
UOS505-0380	Prostatectomy 65-74 Procs/1000
UOS505-0390	Prostatectomy 75-84 Procs/1000
UOS505-0400	Prostatectomy 85+ Procs/1000
UOS505-0410	CABG F <65 Procs/1000
UOS505-0420	CABG F 65-74 Procs/1000
UOS505-0430	CABG F 75-84 Procs/1000
UOS505-0440	CABG F 85+ Procs/1000
UOS505-0450	PCI F <65 Procs/1000
UOS505-0460	PCI F 65-74 Procs/1000
UOS505-0470	PCI F 75-84 Procs/1000
UOS505-0480	PCI F 85+ Procs/1000
UOS505-0490	Carotid Endarterectomy F <65 Procs/1000
UOS505-0500	Carotid Endarterectomy F 65-74 Procs/1000
UOS505-0510	Carotid Endarterectomy F 75-84 Procs/1000
UOS505-0520	Carotid Endarterectomy F 85+ Procs/1000
UOS505-0570	Total Hip Replacement F <65 Procs/1000
UOS505-0580	Total Hip Replacement F 65-74 Procs/1000
UOS505-0590	Total Hip Replacement F 75-84 Procs/1000
UOS505-0600	Total Hip Replacement F 85+ Procs/1000
UOS505-0610	Total Knee Replacement F <65 Procs/1000
UOS505-0620	Total Knee Replacement F 65-74 Procs/1000
UOS505-0630	Total Knee Replacement F 75-84 Procs/1000
UOS505-0640	Total Knee Replacement F 85+ Procs/1000
UOS505-0690	Cholecystectomy opn F <65 Procs/1000
UOS505-0700	Cholecystectomy opn F 65-74 Procs/1000
UOS505-0710	Cholecystectomy opn F 75-84 Procs/1000
UOS505-0720	Cholecystectomy opn F 85+ Procs/1000
UOS505-0730	Cholecystectomy, (laparoscopic) F <65 Procs/1000
UOS505-0740	Cholecystectomy, (laparoscopic) F 65-74 Procs/1000
UOS505-0750	Cholecystectomy, (laparoscopic) F 75-84 Procs/1000
UOS505-0760	Cholecystectomy, (laparoscopic) F 85+ Procs/1000
UOS505-0771	Hysterectomy - Abdominal <65 Procs/1000
UOS505-0772	Hysterectomy - Vaginal <65 Procs/1000
UOS505-0781	Hysterectomy - Abdominal 65-74 Procs/1000
UOS505-0782	Hysterectomy - Vaginal 65-74 Procs/1000
UOS505-0791	Hysterectomy - Abdominal 75-84 Procs/1000

UOS505-0792	Hysterectomy - Vaginal 75-84 Procs/1000
UOS505-0801	Hysterectomy - Abdominal 85+ Procs/1000
UOS505-0802	Hysterectomy - Vaginal 85+ Procs/1000
UOS505-0810	Cardiac Catheterization M <65 Procs/1000
UOS505-0820	Cardiac Catheterization F <65 Procs/1000
UOS505-0830	Cardiac Catheterization M 65-74 Procs/1000
UOS505-0840	Cardiac Catheterization F 65-74 Procs/1000
UOS505-0850	Cardiac Catheterization M 75-84 Procs/1000
UOS505-0860	Cardiac Catheterization F 75-84 Procs/1000
UOS505-0870	Cardiac Catheterization M 85+ Procs/1000
UOS505-0880	Cardiac Catheterization F 85+ Procs/1000
UOS505-0890	Mastectomy F <65 Procs/1000
UOS505-0900	Mastectomy F 65-74 Procs/1000
UOS505-0910	Mastectomy F 75-84 Procs/1000
UOS505-0920	Mastectomy F 85+ Procs/1000
UOS505-0930	Lumpectomy F <65 Procs/1000
UOS505-0940	Lumpectomy F 65-74 Procs/1000
UOS505-0950	Lumpectomy F 75-84 Procs/1000
UOS505-0960	Lumpectomy F 85+ Procs/1000
UOS505-0970	Back Surgery M <65 Procs/1000
UOS505-0980	Back Surgery F <65 Procs/1000
UOS505-0990	Back Surgery M 65-74 Procs/1000
UOS505-1000	Back Surgery F 65-74 Procs/1000
UOS505-1010	Back Surgery M 75-84 Procs/1000
UOS505-1020	Back Surgery F 75-84 Procs/1000
UOS505-1030	Back Surgery M 85+ Procs/1000
UOS505-1040	Back Surgery F 85+ Procs/1000
UOS505-1050	Bariatric weight loss surgery M <65 Procs/1000
UOS505-1060	Bariatric weight loss surgery F <65 Procs/1000
UOS505-1070	Bariatric weight loss surgery M 65-74 Procs/1000
UOS505-1080	Bariatric weight loss surgery F 65-74 Procs/1000
UOS505-1090	Bariatric weight loss surgery M 75-84 Procs/1000
UOS505-1100	Bariatric weight loss surgery F 75-84 Procs/1000
UOS505-1110	Bariatric weight loss surgery M 85+ Procs/1000
UOS505-1120	Bariatric weight loss surgery F 85+ Procs/1000

UOS506 - Inpatient Utilization-General Hospital/Acute Care (IPU)

DESCRIPTION - This measure summarizes utilization of acute inpatient care and services in the following categories:

• Total inpatient

• Maternity

• Surgery

• Medicine

(HEDIS 2018, Volume 2: Technical Specification, Pg. 343)

REPORTING LEVEL - Contract

UOS506-0010	Tot IP Ds/1000 <1
UOS506-0020	Tot IP Days/1000 <1
UOS506-0030	Tot IP ALOS <1
UOS506-0040	Tot IP Ds/1000 1-9
UOS506-0050	Tot IP Days/1000 MM 1-9
UOS506-0060	Tot IP ALOS 1-9
UOS506-0070	Tot IP Ds/1000 MM 10-19
UOS506-0080	Tot IP Days/1000 MM 10-19
UOS506-0090	Tot IP ALOS 10-19
UOS506-0100	Tot IP 20-44 Ds/1000
UOS506-0110	Tot IP Days/1000 MM 20-44
UOS506-0120	Tot IP ALOS 20-44

UOS506-0130	Tot IP Ds/1000 MM 45-64
UOS506-0140	Tot IP Days/1000 MM 45-64
UOS506-0150	Tot IP ALOS 45-64
UOS506-0160	Tot IP Ds/1000 MM 65-74
UOS506-0170	Tot IP Days/1000 MM 65-74
UOS506-0180	Tot IP ALOS 65-74
UOS506-0190	Tot IP Ds/1000 MM 75-84
UOS506-0200	Tot IP Days/1000 MM 75-84
UOS506-0210	Tot IP ALOS 75-84
UOS506-0220	Tot IP Ds/1000 MM 85+
UOS506-0230	Tot IP Days/1000 MM 85+
UOS506-0240	Tot IP ALOS 85+
UOS506-0270	Tot IP ALOS Unk
UOS506-0280	Tot IP Ds/1000 MM Tot
UOS506-0290	Tot IP Days/1000 MM Tot
UOS506-0300	Tot IP ALOS Tot
UOS506-0310	Medicine <1 Ds/1000
UOS506-0320	Medicine <1 Days/1000 MM
UOS506-0330	Medicine <1 ALOS
UOS506-0340	Medicine 1-9 Ds/1000 MM
UOS506-0350	Medicine 1-9 Days/1000 MM
UOS506-0360	Medicine 1-9 ALOS
UOS506-0370	Medicine 10-19 Ds/1000 MM
UOS506-0380	Medicine 10-19 Days/1000 MM
UOS506-0390	Medicine 10-19 ALOS
UOS506-0400	Medicine 20-44 Ds/1000
UOS506-0410	Medicine 20-44 Days/1000 MM
UOS506-0420	Medicine 20-44 ALOS
UOS506-0430	Medicine 45-64 Ds/1000
UOS506-0440	Medicine 45-64 Days/1000 MM
UOS506-0450	Medicine 45-64 ALOS
UOS506-0460	Medicine 65-74 Ds/1000
UOS506-0470	Medicine 65-74 Days/1000 MM
UOS506-0480	Medicine 65-74 ALOS
UOS506-0490	Medicine 75-84 Ds/1000
UOS506-0500	Medicine 75-84 Days/1000 MM
UOS506-0510	Medicine 75-84 ALOS
UOS506-0520	Medicine 85+ Ds/1000
UOS506-0530	Medicine 85+ Days/1000 MM
UOS506-0540	Medicine 85+ ALOS
UOS506-0570	Medicine Unk ALOS
UOS506-0580	Medicine Tot Ds/1000
UOS506-0590	Medicine Tot Days/1000 MM
UOS506-0600	Medicine Tot ALOS
UOS506-0610	Surgery <1 Ds/1000
UOS506-0620	Surgery <1 Days/1000 MM
UOS506-0630	Surgery <1 ALOS
UOS506-0640	Surgery 1-9 Ds/1000 MM
UOS506-0650	Surgery 1-9 Days/1000 MM
UOS506-0660	Surgery 1-9 ALOS
UOS506-0670	Surgery 10-19 Ds/1000 MM
UOS506-0680	Surgery 10-19 Days/1000 MM
UOS506-0690	Surgery 10-19 ALOS
UOS506-0700	Surgery 20-44 Ds/1000
UOS506-0710	Surgery 20-44 Days/1000 MM
UOS506-0720	Surgery 20-44 ALOS
UOS506-0730	Surgery 45-64 Ds/1000

UOS506-0740	Surgery 45-64 Days/1000 MM
UOS506-0750	Surgery 45-64 ALOS
UOS506-0760	Surgery 65-74 Ds/1000
UOS506-0770	Surgery 65-74 Days/1000 MM
UOS506-0780	Surgery 65-74 ALOS
UOS506-0790	Surgery 75-84 Ds/1000
UOS506-0800	Surgery 75-84 Days/1000 MM
UOS506-0810	Surgery 75-84 ALOS
UOS506-0820	Surgery 85+ Ds/1000
UOS506-0830	Surgery 85+ Days/1000 MM
UOS506-0840	Surgery 85+ ALOS
UOS506-0870	Surgery Unk ALOS
UOS506-0880	Surgery Tot Ds/1000
UOS506-0890	Surgery Tot Days/1000 MM
UOS506-0900	Surgery Tot ALOS
UOS506-0910	Maternity 10-19 Ds/1000 MM
UOS506-0920	Maternity 10-19 Days/1000 MM
UOS506-0930	Maternity 10-19 ALOS
UOS506-0940	Maternity 20-44 Ds/1000
UOS506-0950	Maternity 20-44 Days/1000 MM
UOS506-0960	Maternity 20-44 ALOS
UOS506-0970	Maternity 45-64 Ds/1000
UOS506-0980	Maternity 45-64 Days/1000 MM
UOS506-0990	Maternity 45-64 ALOS
UOS506-1020	Maternity Unk ALOS
UOS506-1030	Maternity Tot Ds/1000
UOS506-1040	Maternity Tot Days/1000 MM
UOS506-1050	Maternity Tot ALOS

UOS507 - Ambulatory Care (AMB)

DESCRIPTION - This measure summarizes utilization of ambulatory care in the following categories.

• Outpatient Visits

• ED Visits

(HEDIS 2018, Volume 2: Technical Specification, Pg. 339)

REPORTING LEVEL - Contract

UOS507-0010	AMB OP <1 Visit/1000
UOS507-0020	AMB ER <1 Visit/1000
UOS507-0050	AMB OP 1-9 Visit/1000
UOS507-0060	AMB ER 1-9 Visit/1000
UOS507-0090	AMB OP 10-19 Visit/1000
UOS507-0100	AMB ER 10-19 Visit/1000
UOS507-0130	AMB OP 20-44 Visit/1000
UOS507-0140	AMB ER 20-44 Visit/1000
UOS507-0170	AMB OP 45-64 Visit/1000
UOS507-0180	AMB ER 45-64 Visit/1000
UOS507-0210	AMB OP 65-74 Visit/1000
UOS507-0220	AMB ER 65-74 Visit/1000
UOS507-0250	AMB OP 75-84 Visit/1000
UOS507-0260	AMB ER 75-84 Visit/1000
UOS507-0290	AMB OP 85+ Visit/1000
UOS507-0300	AMB ER 85+ Visit/1000
UOS507-0370	AMB OP Visit/1000
UOS507-0380	AMB ER Visit/1000

UOS513 - Mental Health Utilization (MPT)

DESCRIPTION - This measure summarizes the number and percentage of members receiving the following mental health services during the measurement year:

• Inpatient

• Intensive outpatient or partial hospitalization

• Outpatient

• ED

• Telehealth

• Any service

(HEDIS 2018, Volume 2: Technical Specification, Pg. 356)

REPORTING LEVEL - Contract

UOS513-0010	Any 0-12 M Pct
UOS513-0020	Inpat 0-12 M Pct
UOS513-0030	Intensive 0-12 M Pct
UOS513-0040	Outpat 0-12 M Pct
UOS513-0050	Any 13-17 M Pct
UOS513-0060	Inpat 13-17 M Pct
UOS513-0070	Intensive 13-17 M Pct
UOS513-0080	Outpat 13-17 M Pct
UOS513-0090	Any 18-64 M Pct
UOS513-0100	Inpat 18-64 M Pct
UOS513-0110	Intensive 18-64 M Pct
UOS513-0120	Outpat 18-64 M Pct
UOS513-0130	Any 65+ M Pct
UOS513-0140	Inpat 65+ M Pct
UOS513-0150	Intensive 65+ M Pct
UOS513-0160	Outpat 65+ M Pct
UOS513-0170	Any Unk M Pct
UOS513-0180	Inpat Unk M Pct
UOS513-0190	Intensive Unk M Pct
UOS513-0200	Outpat Unk M Pct
UOS513-0210	Any Tot M Pct
UOS513-0220	Inpat Tot M Pct
UOS513-0230	Intensive Tot M Pct
UOS513-0240	Outpat Tot M Pct
UOS513-0250	Any 0-12 F Pct
UOS513-0260	Inpat 0-12 F Pct
UOS513-0270	Intensive 0-12 F Pct
UOS513-0280	Outpat 0-12 F Pct
UOS513-0290	Any 13-17 F Pct
UOS513-0300	Inpat 13-17 F Pct
UOS513-0310	Intensive 13-17 F Pct
UOS513-0320	Outpat 13-17 F Pct
UOS513-0330	Any 18-64 F Pct
UOS513-0340	Inpat 18-64 F Pct
UOS513-0350	Intensive 18-64 F Pct
UOS513-0360	Outpat 18-64 F Pct
UOS513-0370	Any 65+ F Pct
UOS513-0380	Inpat 65+ F Pct
UOS513-0390	Intensive 65+ F Pct
UOS513-0400	Outpat 65+ F Pct
UOS513-0410	Any Unk F Pct
UOS513-0420	Inpat Unk F Pct
UOS513-0430	Intensive Unk F Pct
UOS513-0440	Outpat Unk F Pct
UOS513-0450	Any Tot F Pct

UOS513-0460	Inpat Tot F Pct
UOS513-0470	Intensive Tot F Pct
UOS513-0480	Outpat Tot F Pct
UOS513-0490	Any 0-12 Tot Pct
UOS513-0500	Inpat 0-12 Tot Pct
UOS513-0510	Intensive 0-12 Tot Pct
UOS513-0520	Outpat 0-12 Tot Pct
UOS513-0530	Any 13-17 Tot Pct
UOS513-0540	Inpat 13-17 Tot Pct
UOS513-0550	Intensive 13-17 Tot Pct
UOS513-0560	Outpat 13-17 Tot Pct
UOS513-0570	Any 18-64 Tot Pct
UOS513-0580	Inpat 18-64 Tot Pct
UOS513-0590	Intensive 18-64 Tot Pct
UOS513-0600	Outpat 18-64 Tot Pct
UOS513-0610	Any 65+ Tot Pct
UOS513-0620	Inpat 65+ Tot Pct
UOS513-0630	Intensive 65+ Tot Pct
UOS513-0640	Outpat 65+ Tot Pct
UOS513-0650	Any Unk Tot Pct
UOS513-0660	Inpat Unk Tot Pct
UOS513-0670	Intensive Unk Tot Pct
UOS513-0680	Outpat Unk Tot Pct
UOS513-0690	Any Tot Tot Pct
UOS513-0700	Inpat Tot Tot Pct
UOS513-0710	Intensive Tot Tot Pct
UOS513-0720	Outpat Tot Tot Pct
UOS513-0730	ED 0-12 F Pct
UOS513-0740	ED 13-17 F Pct
UOS513-0750	ED 18-64 F Pct
UOS513-0760	ED 65+ F Pct
UOS513-0770	ED Tot F Pct
UOS513-0780	ED Unk F Pct
UOS513-0790	ED 0-12 M Pct
UOS513-0800	ED 13-17 M Pct
UOS513-0810	ED 18-64 M Pct
UOS513-0820	ED 65+ M Pct
UOS513-0830	ED Tot M Pct
UOS513-0840	ED Unk M Pct
UOS513-0850	ED 0-12 Tot Pct
UOS513-0860	ED 13-17 Tot Pct
UOS513-0870	ED 18-64 Tot Pct
UOS513-0880	ED 65+ Tot Pct
UOS513-0890	ED Tot Tot Pct
UOS513-0900	ED Unk Tot Pct
UOS513-0910	Telehealth 0-12 F Pct
UOS513-0920	Telehealth 13-17 F Pct
UOS513-0930	Telehealth 18-64 F Pct
UOS513-0940	Telehealth 65+ F Pct
UOS513-0950	Telehealth Tot F Pct
UOS513-0960	Telehealth Unk F Pct
UOS513-0970	Telehealth 0-12 M Pct
UOS513-0980	Telehealth 13-17 M Pct
UOS513-0990	Telehealth 18-64 M Pct
UOS513-1000	Telehealth 65+ M Pct
UOS513-1010	Telehealth Tot M Pct
UOS513-1020	Telehealth Unk M Pct

UOS513-1030	Telehealth 0-12 Tot Pct
UOS513-1040	Telehealth 13-17 Tot Pct
UOS513-1050	Telehealth 18-64 Tot Pct
UOS513-1060	Telehealth 65+ Tot Pct
UOS513-1070	Telehealth Tot Tot Pct
UOS513-1080	Telehealth Unk Tot Pct

UOS520a - Identification of Alcohol and Other Drug Services (IAD)

DESCRIPTION - This measure summarizes the number and percentage of members with an alcohol and other drug (AOD) claim who received the following chemical dependency services during the measurement year:

• Inpatient

• Intensive outpatient or partial hospitalization

• Outpatient or an ambulatory MAT dispensing event

• ED

• Telehealth

• Any service

Note: For the Public Use File this portion of UOS520 contains only the "Alcohol" fields

(HEDIS 2018, Volume 2: Technical Specification, Pg. 348)

REPORTING LEVEL - Contract

UOS520a-0010	Alcohol Outpat 0-12 F Pct
UOS520a-0020	Alcohol Outpat 13-17 F Pct
UOS520a-0030	Alcohol Outpat 18-24 F Pct
UOS520a-0040	Alcohol Outpat 25-34 F Pct
UOS520a-0050	Alcohol Outpat 35-64 F Pct
UOS520a-0060	Alcohol Outpat 65+ F Pct
UOS520a-0070	Alcohol Outpat Tot F Pct
UOS520a-0080	Alcohol Outpat Unk F Pct
UOS520a-0090	Alcohol Outpat 0-12 M Pct
UOS520a-0100	Alcohol Outpat 13-17 M Pct
UOS520a-0110	Alcohol Outpat 18-24 M Pct
UOS520a-0120	Alcohol Outpat 25-34 M Pct
UOS520a-0130	Alcohol Outpat 35-64 M Pct
UOS520a-0140	Alcohol Outpat 65+ M Pct
UOS520a-0150	Alcohol Outpat Tot M Pct
UOS520a-0160	Alcohol Outpat Unk M Pct
UOS520a-0170	Alcohol Outpat 0-12 Tot Pct
UOS520a-0180	Alcohol Outpat 13-17 Tot Pct
UOS520a-0190	Alcohol Outpat 18-24 Tot Pct
UOS520a-0200	Alcohol Outpat 25-34 Tot Pct
UOS520a-0210	Alcohol Outpat 35-64 Tot Pct
UOS520a-0220	Alcohol Outpat 65+ Tot Pct
UOS520a-0230	Alcohol Outpat Tot Tot Pct
UOS520a-0240	Alcohol Outpat Unk Tot Pct
UOS520a-0250	Alcohol Any 0-12 F Pct
UOS520a-0260	Alcohol Any 13-17 F Pct
UOS520a-0270	Alcohol Any 18-24 F Pct
UOS520a-0280	Alcohol Any 25-34 F Pct
UOS520a-0290	Alcohol Any 35-64 F Pct
UOS520a-0300	Alcohol Any 65+ F Pct
UOS520a-0310	Alcohol Any Tot F Pct
UOS520a-0320	Alcohol Any Unk F Pct
UOS520a-0330	Alcohol Any 0-12 M Pct
UOS520a-0340	Alcohol Any 13-17 M Pct
UOS520a-0350	Alcohol Any 18-24 M Pct
UOS520a-0360	Alcohol Any 25-34 M Pct
UOS520a-0370	Alcohol Any 35-64 M Pct

UOS520a-0380	Alcohol Any 65+ M Pct
UOS520a-0390	Alcohol Any Tot M Pct
UOS520a-0400	Alcohol Any Unk M Pct
UOS520a-0410	Alcohol Any 0-12 Tot Pct
UOS520a-0420	Alcohol Any 13-17 Tot Pct
UOS520a-0430	Alcohol Any 18-24 Tot Pct
UOS520a-0440	Alcohol Any 25-34 Tot Pct
UOS520a-0450	Alcohol Any 35-64 Tot Pct
UOS520a-0460	Alcohol Any 65+ Tot Pct
UOS520a-0470	Alcohol Any Tot Tot Pct
UOS520a-0480	Alcohol Any Unk Tot Pct
UOS520a-0490	Alcohol Intensive 0-12 F Pct
UOS520a-0500	Alcohol Intensive 13-17 F Pct
UOS520a-0510	Alcohol Intensive 18-24 F Pct
UOS520a-0520	Alcohol Intensive 25-34 F Pct
UOS520a-0530	Alcohol Intensive 35-64 F Pct
UOS520a-0540	Alcohol Intensive 65+ F Pct
UOS520a-0550	Alcohol Intensive Tot F Pct
UOS520a-0560	Alcohol Intensive Unk F Pct
UOS520a-0570	Alcohol Intensive 0-12 M Pct
UOS520a-0580	Alcohol Intensive 13-17 M Pct
UOS520a-0590	Alcohol Intensive 18-24 M Pct
UOS520a-0600	Alcohol Intensive 25-34 M Pct
UOS520a-0610	Alcohol Intensive 35-64 M Pct
UOS520a-0620	Alcohol Intensive 65+ M Pct
UOS520a-0630	Alcohol Intensive Tot M Pct
UOS520a-0640	Alcohol Intensive Unk M Pct
UOS520a-0650	Alcohol Intensive 0-12 Tot Pct
UOS520a-0660	Alcohol Intensive 13-17 Tot Pct
UOS520a-0670	Alcohol Intensive 18-24 Tot Pct
UOS520a-0680	Alcohol Intensive 25-34 Tot Pct
UOS520a-0690	Alcohol Intensive 35-64 Tot Pct
UOS520a-0700	Alcohol Intensive 65+ Tot Pct
UOS520a-0710	Alcohol Intensive Tot Tot Pct
UOS520a-0720	Alcohol Intensive Unk Tot Pct
UOS520a-0730	Alcohol ED 0-12 F Pct
UOS520a-0740	Alcohol ED 13-17 F Pct
UOS520a-0750	Alcohol ED 18-24 F Pct
UOS520a-0760	Alcohol ED 25-34 F Pct
UOS520a-0770	Alcohol ED 35-64 F Pct
UOS520a-0780	Alcohol ED 65+ F Pct
UOS520a-0790	Alcohol ED Tot F Pct
UOS520a-0800	Alcohol ED Unk F Pct
UOS520a-0810	Alcohol ED 0-12 M Pct
UOS520a-0820	Alcohol ED 13-17 M Pct
UOS520a-0830	Alcohol ED 18-24 M Pct
UOS520a-0840	Alcohol ED 25-34 M Pct
UOS520a-0850	Alcohol ED 35-64 M Pct
UOS520a-0860	Alcohol ED 65+ M Pct
UOS520a-0870	Alcohol ED Tot M Pct
UOS520a-0880	Alcohol ED Unk M Pct
UOS520a-0890	Alcohol ED 0-12 Tot Pct
UOS520a-0900	Alcohol ED 13-17 Tot Pct
UOS520a-0910	Alcohol ED 18-24 Tot Pct
UOS520a-0920	Alcohol ED 25-34 Tot Pct
UOS520a-0930	Alcohol ED 35-64 Tot Pct
UOS520a-0940	Alcohol ED 65+ Tot Pct

UOS520a-0950   Alcohol ED Tot Tot Pct
UOS520a-0960   Alcohol ED Unk Tot Pct
UOS520a-0970   Alcohol Inpat 0-12 F Pct
UOS520a-0980   Alcohol Inpat 13-17 F Pct
UOS520a-0990   Alcohol Inpat 18-24 F Pct
UOS520a-1000   Alcohol Inpat 25-34 F Pct
UOS520a-1010   Alcohol Inpat 35-64 F Pct
UOS520a-1020   Alcohol Inpat 65+ F Pct
UOS520a-1030   Alcohol Inpat Tot F Pct
UOS520a-1040   Alcohol Inpat Unk F Pct
UOS520a-1050   Alcohol Inpat 0-12 M Pct
UOS520a-1060   Alcohol Inpat 13-17 M Pct
UOS520a-1070   Alcohol Inpat 18-24 M Pct
UOS520a-1080   Alcohol Inpat 25-34 M Pct
UOS520a-1090   Alcohol Inpat 35-64 M Pct
UOS520a-1100   Alcohol Inpat 65+ M Pct
UOS520a-1110   Alcohol Inpat Tot M Pct
UOS520a-1120   Alcohol Inpat Unk M Pct
UOS520a-1130   Alcohol Inpat 0-12 Tot Pct
UOS520a-1140   Alcohol Inpat 13-17 Tot Pct
UOS520a-1150   Alcohol Inpat 18-24 Tot Pct
UOS520a-1160   Alcohol Inpat 25-34 Tot Pct
UOS520a-1170   Alcohol Inpat 35-64 Tot Pct
UOS520a-1180   Alcohol Inpat 65+ Tot Pct
UOS520a-1190   Alcohol Inpat Tot Tot Pct
UOS520a-1200   Alcohol Inpat Unk Tot Pct
UOS520a-1210   Alcohol Telehealth 0-12 F Pct
UOS520a-1220   Alcohol Telehealth 13-17 F Pct
UOS520a-1230   Alcohol Telehealth 18-24 F Pct
UOS520a-1240   Alcohol Telehealth 25-34 F Pct
UOS520a-1250   Alcohol Telehealth 35-64 F Pct
UOS520a-1260   Alcohol Telehealth 65+ F Pct
UOS520a-1270   Alcohol Telehealth Tot F Pct
UOS520a-1280   Alcohol Telehealth Unk F Pct
UOS520a-1290   Alcohol Telehealth 0-12 M Pct
UOS520a-1300   Alcohol Telehealth 13-17 M Pct
UOS520a-1310   Alcohol Telehealth 18-24 M Pct
UOS520a-1320   Alcohol Telehealth 25-34 M Pct
UOS520a-1330   Alcohol Telehealth 35-64 M Pct
UOS520a-1340   Alcohol Telehealth 65+ M Pct
UOS520a-1350   Alcohol Telehealth Tot M Pct
UOS520a-1360   Alcohol Telehealth Unk M Pct
UOS520a-1370   Alcohol Telehealth 0-12 Tot Pct
UOS520a-1380   Alcohol Telehealth 13-17 Tot Pct
UOS520a-1390   Alcohol Telehealth 18-24 Tot Pct
UOS520a-1400   Alcohol Telehealth 25-34 Tot Pct
UOS520a-1410   Alcohol Telehealth 35-64 Tot Pct
UOS520a-1420   Alcohol Telehealth 65+ Tot Pct
UOS520a-1430   Alcohol Telehealth Tot Tot Pct
UOS520a-1440   Alcohol Telehealth Unk Tot Pct

UOS520b - Identification of Alcohol and Other Drug Services (IAD)

DESCRIPTION - This measure summarizes the number and percentage of members with an alcohol and other drug (AOD) claim who received the following chemical dependency services during the measurement year:

• Inpatient

• Intensive outpatient or partial hospitalization

• Outpatient or an ambulatory MAT dispensing event

• ED

• Telehealth

• Any service

Note: For the Public Use File this portion of UOS520 contains only the "Opioid" fields

(HEDIS 2018, Volume 2: Technical Specification, Pg. 348)

 REPORTING LEVEL - Contract

UOS520b-0010	Opioid Outpat 0-12 F Pct
UOS520b-0020	Opioid Outpat 13-17 F Pct
UOS520b-0030	Opioid Outpat 18-24 F Pct
UOS520b-0040	Opioid Outpat 25-34 F Pct
UOS520b-0050	Opioid Outpat 35-64 F Pct
UOS520b-0060	Opioid Outpat 65+ F Pct
UOS520b-0070	Opioid Outpat Tot F Pct
UOS520b-0080	Opioid Outpat Unk F Pct
UOS520b-0090	Opioid Outpat 0-12 M Pct
UOS520b-0100	Opioid Outpat 13-17 M Pct
UOS520b-0110	Opioid Outpat 18-24 M Pct
UOS520b-0120	Opioid Outpat 25-34 M Pct
UOS520b-0130	Opioid Outpat 35-64 M Pct
UOS520b-0140	Opioid Outpat 65+ M Pct
UOS520b-0150	Opioid Outpat Tot M Pct
UOS520b-0160	Opioid Outpat Unk M Pct
UOS520b-0170	Opioid Outpat 0-12 Tot Pct
UOS520b-0180	Opioid Outpat 13-17 Tot Pct
UOS520b-0190	Opioid Outpat 18-24 Tot Pct
UOS520b-0200	Opioid Outpat 25-34 Tot Pct
UOS520b-0210	Opioid Outpat 35-64 Tot Pct
UOS520b-0220	Opioid Outpat 65+ Tot Pct
UOS520b-0230	Opioid Outpat Tot Tot Pct
UOS520b-0240	Opioid Outpat Unk Tot Pct
UOS520b-0250	Opioid Any 0-12 F Pct
UOS520b-0260	Opioid Any 13-17 F Pct
UOS520b-0270	Opioid Any 18-24 F Pct
UOS520b-0280	Opioid Any 25-34 F Pct
UOS520b-0290	Opioid Any 35-64 F Pct
UOS520b-0300	Opioid Any 65+ F Pct
UOS520b-0310	Opioid Any Tot F Pct
UOS520b-0320	Opioid Any Unk F Pct
UOS520b-0330	Opioid Any 0-12 M Pct
UOS520b-0340	Opioid Any 13-17 M Pct
UOS520b-0350	Opioid Any 18-24 M Pct
UOS520b-0360	Opioid Any 25-34 M Pct
UOS520b-0370	Opioid Any 35-64 M Pct
UOS520b-0380	Opioid Any 65+ M Pct
UOS520b-0390	Opioid Any Tot M Pct
UOS520b-0400	Opioid Any Unk M Pct
UOS520b-0410	Opioid Any 0-12 Tot Pct
UOS520b-0420	Opioid Any 13-17 Tot Pct
UOS520b-0430	Opioid Any 18-24 Tot Pct
UOS520b-0440	Opioid Any 25-34 Tot Pct

UOS520b-0450	Opioid Any 35-64 Tot Pct
UOS520b-0460	Opioid Any 65+ Tot Pct
UOS520b-0470	Opioid Any Tot Tot Pct
UOS520b-0480	Opioid Any Unk Tot Pct
UOS520b-0490	Opioid Intensive 0-12 F Pct
UOS520b-0500	Opioid Intensive 13-17 F Pct
UOS520b-0510	Opioid Intensive 18-24 F Pct
UOS520b-0520	Opioid Intensive 25-34 F Pct
UOS520b-0530	Opioid Intensive 35-64 F Pct
UOS520b-0540	Opioid Intensive 65+ F Pct
UOS520b-0550	Opioid Intensive Tot F Pct
UOS520b-0560	Opioid Intensive Unk F Pct
UOS520b-0570	Opioid Intensive 0-12 M Pct
UOS520b-0580	Opioid Intensive 13-17 M Pct
UOS520b-0590	Opioid Intensive 18-24 M Pct
UOS520b-0600	Opioid Intensive 25-34 M Pct
UOS520b-0610	Opioid Intensive 35-64 M Pct
UOS520b-0620	Opioid Intensive 65+ M Pct
UOS520b-0630	Opioid Intensive Tot M Pct
UOS520b-0640	Opioid Intensive Unk M Pct
UOS520b-0650	Opioid Intensive 0-12 Tot Pct
UOS520b-0660	Opioid Intensive 13-17 Tot Pct
UOS520b-0670	Opioid Intensive 18-24 Tot Pct
UOS520b-0680	Opioid Intensive 25-34 Tot Pct
UOS520b-0690	Opioid Intensive 35-64 Tot Pct
UOS520b-0700	Opioid Intensive 65+ Tot Pct
UOS520b-0710	Opioid Intensive Tot Tot Pct
UOS520b-0720	Opioid Intensive Unk Tot Pct
UOS520b-0730	Opioid ED 0-12 F Pct
UOS520b-0740	Opioid ED 13-17 F Pct
UOS520b-0750	Opioid ED 18-24 F Pct
UOS520b-0760	Opioid ED 25-34 F Pct
UOS520b-0770	Opioid ED 35-64 F Pct
UOS520b-0780	Opioid ED 65+ F Pct
UOS520b-0790	Opioid ED Tot F Pct
UOS520b-0800	Opioid ED Unk F Pct
UOS520b-0810	Opioid ED 0-12 M Pct
UOS520b-0820	Opioid ED 13-17 M Pct
UOS520b-0830	Opioid ED 18-24 M Pct
UOS520b-0840	Opioid ED 25-34 M Pct
UOS520b-0850	Opioid ED 35-64 M Pct
UOS520b-0860	Opioid ED 65+ M Pct
UOS520b-0870	Opioid ED Tot M Pct
UOS520b-0880	Opioid ED Unk M Pct
UOS520b-0890	Opioid ED 0-12 Tot Pct
UOS520b-0900	Opioid ED 13-17 Tot Pct
UOS520b-0910	Opioid ED 18-24 Tot Pct
UOS520b-0920	Opioid ED 25-34 Tot Pct
UOS520b-0930	Opioid ED 35-64 Tot Pct
UOS520b-0940	Opioid ED 65+ Tot Pct
UOS520b-0950	Opioid ED Tot Tot Pct
UOS520b-0960	Opioid ED Unk Tot Pct
UOS520b-0970	Opioid Inpat 0-12 F Pct
UOS520b-0980	Opioid Inpat 13-17 F Pct
UOS520b-0990	Opioid Inpat 18-24 F Pct
UOS520b-1000	Opioid Inpat 25-34 F Pct
UOS520b-1010	Opioid Inpat 35-64 F Pct

UOS520b-1020	Opioid Inpat 65+ F Pct
UOS520b-1030	Opioid Inpat Tot F Pct
UOS520b-1040	Opioid Inpat Unk F Pct
UOS520b-1050	Opioid Inpat 0-12 M Pct
UOS520b-1060	Opioid Inpat 13-17 M Pct
UOS520b-1070	Opioid Inpat 18-24 M Pct
UOS520b-1080	Opioid Inpat 25-34 M Pct
UOS520b-1090	Opioid Inpat 35-64 M Pct
UOS520b-1100	Opioid Inpat 65+ M Pct
UOS520b-1110	Opioid Inpat Tot M Pct
UOS520b-1120	Opioid Inpat Unk M Pct
UOS520b-1130	Opioid Inpat 0-12 Tot Pct
UOS520b-1140	Opioid Inpat 13-17 Tot Pct
UOS520b-1150	Opioid Inpat 18-24 Tot Pct
UOS520b-1160	Opioid Inpat 25-34 Tot Pct
UOS520b-1170	Opioid Inpat 35-64 Tot Pct
UOS520b-1180	Opioid Inpat 65+ Tot Pct
UOS520b-1190	Opioid Inpat Tot Tot Pct
UOS520b-1200	Opioid Inpat Unk Tot Pct
UOS520b-1210	Opioid Telehealth 0-12 F Pct
UOS520b-1220	Opioid Telehealth 13-17 F Pct
UOS520b-1230	Opioid Telehealth 18-24 F Pct
UOS520b-1240	Opioid Telehealth 25-34 F Pct
UOS520b-1250	Opioid Telehealth 35-64 F Pct
UOS520b-1260	Opioid Telehealth 65+ F Pct
UOS520b-1270	Opioid Telehealth Tot F Pct
UOS520b-1280	Opioid Telehealth Unk F Pct
UOS520b-1290	Opioid Telehealth 0-12 M Pct
UOS520b-1300	Opioid Telehealth 13-17 M Pct
UOS520b-1310	Opioid Telehealth 18-24 M Pct
UOS520b-1320	Opioid Telehealth 25-34 M Pct
UOS520b-1330	Opioid Telehealth 35-64 M Pct
UOS520b-1340	Opioid Telehealth 65+ M Pct
UOS520b-1350	Opioid Telehealth Tot M Pct
UOS520b-1360	Opioid Telehealth Unk M Pct
UOS520b-1370	Opioid Telehealth 0-12 Tot Pct
UOS520b-1380	Opioid Telehealth 13-17 Tot Pct
UOS520b-1390	Opioid Telehealth 18-24 Tot Pct
UOS520b-1400	Opioid Telehealth 25-34 Tot Pct
UOS520b-1410	Opioid Telehealth 35-64 Tot Pct
UOS520b-1420	Opioid Telehealth 65+ Tot Pct
UOS520b-1430	Opioid Telehealth Tot Tot Pct
UOS520b-1440	Opioid Telehealth Unk Tot Pct

UOS520c - Identification of Alcohol and Other Drug Services (IAD)

DESCRIPTION - This measure summarizes the number and percentage of members with an alcohol and other drug (AOD) claim who received the following chemical dependency services during the measurement year:

• Inpatient

• Intensive outpatient or partial hospitalization

• Outpatient or an ambulatory MAT dispensing event

• ED

• Telehealth

• Any service

Note: For the Public Use File this portion of UOS520 contains only the "Other" fields

(HEDIS 2018, Volume 2: Technical Specification, Pg. 348)

 REPORTING LEVEL - Contract

UOS520c-0010   Other Outpat 0-12 F Pct
UOS520c-0020   Other Outpat 13-17 F Pct
UOS520c-0030   Other Outpat 18-24 F Pct
UOS520c-0040   Other Outpat 25-34 F Pct
UOS520c-0050   Other Outpat 35-64 F Pct
UOS520c-0060   Other Outpat 65+ F Pct
UOS520c-0070   Other Outpat Tot F Pct
UOS520c-0080   Other Outpat Unk F Pct
UOS520c-0090   Other Outpat 0-12 M Pct
UOS520c-0100   Other Outpat 13-17 M Pct
UOS520c-0110   Other Outpat 18-24 M Pct
UOS520c-0120   Other Outpat 25-34 M Pct
UOS520c-0130   Other Outpat 35-64 M Pct
UOS520c-0140   Other Outpat 65+ M Pct
UOS520c-0150   Other Outpat Tot M Pct
UOS520c-0160   Other Outpat Unk M Pct
UOS520c-0170   Other Outpat 0-12 Tot Pct
UOS520c-0180   Other Outpat 13-17 Tot Pct
UOS520c-0190   Other Outpat 18-24 Tot Pct
UOS520c-0200   Other Outpat 25-34 Tot Pct
UOS520c-0210   Other Outpat 35-64 Tot Pct
UOS520c-0220   Other Outpat 65+ Tot Pct
UOS520c-0230   Other Outpat Tot Tot Pct
UOS520c-0240   Other Outpat Unk Tot Pct
UOS520c-0250   Other Any 0-12 F Pct
UOS520c-0260   Other Any 13-17 F Pct
UOS520c-0270   Other Any 18-24 F Pct
UOS520c-0280   Other Any 25-34 F Pct
UOS520c-0290   Other Any 35-64 F Pct
UOS520c-0300   Other Any 65+ F Pct
UOS520c-0310   Other Any Tot F Pct
UOS520c-0320   Other Any Unk F Pct
UOS520c-0330   Other Any 0-12 M Pct
UOS520c-0340   Other Any 13-17 M Pct
UOS520c-0350   Other Any 18-24 M Pct
UOS520c-0360   Other Any 25-34 M Pct
UOS520c-0370   Other Any 35-64 M Pct
UOS520c-0380   Other Any 65+ M Pct
UOS520c-0390   Other Any Tot M Pct
UOS520c-0400   Other Any Unk M Pct
UOS520c-0410   Other Any 0-12 Tot Pct
UOS520c-0420   Other Any 13-17 Tot Pct
UOS520c-0430   Other Any 18-24 Tot Pct
UOS520c-0440   Other Any 25-34 Tot Pct
UOS520c-0450   Other Any 35-64 Tot Pct
UOS520c-0460   Other Any 65+ Tot Pct
UOS520c-0470   Other Any Tot Tot Pct
UOS520c-0480   Other Any Unk Tot Pct
UOS520c-0490   Other Intensive 0-12 F Pct
UOS520c-0500   Other Intensive 13-17 F Pct
UOS520c-0510   Other Intensive 18-24 F Pct
UOS520c-0520   Other Intensive 25-34 F Pct
UOS520c-0530   Other Intensive 35-64 F Pct
UOS520c-0540   Other Intensive 65+ F Pct
UOS520c-0550   Other Intensive Tot F Pct
UOS520c-0560   Other Intensive Unk F Pct
UOS520c-0570   Other Intensive 0-12 M Pct

UOS520c-0580	Other Intensive 13-17 M Pct
UOS520c-0590	Other Intensive 18-24 M Pct
UOS520c-0600	Other Intensive 25-34 M Pct
UOS520c-0610	Other Intensive 35-64 M Pct
UOS520c-0620	Other Intensive 65+ M Pct
UOS520c-0630	Other Intensive Tot M Pct
UOS520c-0640	Other Intensive Unk M Pct
UOS520c-0650	Other Intensive 0-12 Tot Pct
UOS520c-0660	Other Intensive 13-17 Tot Pct
UOS520c-0670	Other Intensive 18-24 Tot Pct
UOS520c-0680	Other Intensive 25-34 Tot Pct
UOS520c-0690	Other Intensive 35-64 Tot Pct
UOS520c-0700	Other Intensive 65+ Tot Pct
UOS520c-0710	Other Intensive Tot Tot Pct
UOS520c-0720	Other Intensive Unk Tot Pct
UOS520c-0730	Other ED 0-12 F Pct
UOS520c-0740	Other ED 13-17 F Pct
UOS520c-0750	Other ED 18-24 F Pct
UOS520c-0760	Other ED 25-34 F Pct
UOS520c-0770	Other ED 35-64 F Pct
UOS520c-0780	Other ED 65+ F Pct
UOS520c-0790	Other ED Tot F Pct
UOS520c-0800	Other ED Unk F Pct
UOS520c-0810	Other ED 0-12 M Pct
UOS520c-0820	Other ED 13-17 M Pct
UOS520c-0830	Other ED 18-24 M Pct
UOS520c-0840	Other ED 25-34 M Pct
UOS520c-0850	Other ED 35-64 M Pct
UOS520c-0860	Other ED 65+ M Pct
UOS520c-0870	Other ED Tot M Pct
UOS520c-0880	Other ED Unk M Pct
UOS520c-0890	Other ED 0-12 Tot Pct
UOS520c-0900	Other ED 13-17 Tot Pct
UOS520c-0910	Other ED 18-24 Tot Pct
UOS520c-0920	Other ED 25-34 Tot Pct
UOS520c-0930	Other ED 35-64 Tot Pct
UOS520c-0940	Other ED 65+ Tot Pct
UOS520c-0950	Other ED Tot Tot Pct
UOS520c-0960	Other ED Unk Tot Pct
UOS520c-0970	Other Inpat 0-12 F Pct
UOS520c-0980	Other Inpat 13-17 F Pct
UOS520c-0990	Other Inpat 18-24 F Pct
UOS520c-1000	Other Inpat 25-34 F Pct
UOS520c-1010	Other Inpat 35-64 F Pct
UOS520c-1020	Other Inpat 65+ F Pct
UOS520c-1030	Other Inpat Tot F Pct
UOS520c-1040	Other Inpat Unk F Pct
UOS520c-1050	Other Inpat 0-12 M Pct
UOS520c-1060	Other Inpat 13-17 M Pct
UOS520c-1070	Other Inpat 18-24 M Pct
UOS520c-1080	Other Inpat 25-34 M Pct
UOS520c-1090	Other Inpat 35-64 M Pct
UOS520c-1100	Other Inpat 65+ M Pct
UOS520c-1110	Other Inpat Tot M Pct
UOS520c-1120	Other Inpat Unk M Pct
UOS520c-1130	Other Inpat 0-12 Tot Pct
UOS520c-1140	Other Inpat 13-17 Tot Pct

UOS520c-1150   Other Inpat 18-24 Tot Pct
UOS520c-1160   Other Inpat 25-34 Tot Pct
UOS520c-1170   Other Inpat 35-64 Tot Pct
UOS520c-1180   Other Inpat 65+ Tot Pct
UOS520c-1190   Other Inpat Tot Tot Pct
UOS520c-1200   Other Inpat Unk Tot Pct
UOS520c-1210   Other Telehealth 0-12 F Pct
UOS520c-1220   Other Telehealth 13-17 F Pct
UOS520c-1230   Other Telehealth 18-24 F Pct
UOS520c-1240   Other Telehealth 25-34 F Pct
UOS520c-1250   Other Telehealth 35-64 F Pct
UOS520c-1260   Other Telehealth 65+ F Pct
UOS520c-1270   Other Telehealth Tot F Pct
UOS520c-1280   Other Telehealth Unk F Pct
UOS520c-1290   Other Telehealth 0-12 M Pct
UOS520c-1300   Other Telehealth 13-17 M Pct
UOS520c-1310   Other Telehealth 18-24 M Pct
UOS520c-1320   Other Telehealth 25-34 M Pct
UOS520c-1330   Other Telehealth 35-64 M Pct
UOS520c-1340   Other Telehealth 65+ M Pct
UOS520c-1350   Other Telehealth Tot M Pct
UOS520c-1360   Other Telehealth Unk M Pct
UOS520c-1370   Other Telehealth 0-12 Tot Pct
UOS520c-1380   Other Telehealth 13-17 Tot Pct
UOS520c-1390   Other Telehealth 18-24 Tot Pct
UOS520c-1400   Other Telehealth 25-34 Tot Pct
UOS520c-1410   Other Telehealth 35-64 Tot Pct
UOS520c-1420   Other Telehealth 65+ Tot Pct
UOS520c-1430   Other Telehealth Tot Tot Pct
UOS520c-1440   Other Telehealth Unk Tot Pct

UOS520d - Identification of Alcohol and Other Drug Services (IAD)

DESCRIPTION - This measure summarizes the number and percentage of members with an alcohol and other drug (AOD) claim who received the following chemical dependency services during the measurement year:

• Inpatient

• Intensive outpatient or partial hospitalization

• Outpatient or an ambulatory MAT dispensing event

• ED

• Telehealth

• Any service

Note: For the Public Use File this portion of UOS520 contains only the "Total" fields

(HEDIS 2018, Volume 2: Technical Specification, Pg. 348)

REPORTING LEVEL - Contract

UOS520d-0010   Total Outpat 0-12 F Pct
UOS520d-0020   Total Outpat 13-17 F Pct
UOS520d-0030   Total Outpat 18-24 F Pct
UOS520d-0040   Total Outpat 25-34 F Pct
UOS520d-0050   Total Outpat 35-64 F Pct
UOS520d-0060   Total Outpat 65+ F Pct
UOS520d-0070   Total Outpat Tot F Pct
UOS520d-0080   Total Outpat Unk F Pct
UOS520d-0090   Total Outpat 0-12 M Pct
UOS520d-0100   Total Outpat 13-17 M Pct
UOS520d-0110   Total Outpat 18-24 M Pct
UOS520d-0120   Total Outpat 25-34 M Pct
UOS520d-0130   Total Outpat 35-64 M Pct

UOS520d-0140	Total Outpat 65+ M Pct
UOS520d-0150	Total Outpat Tot M Pct
UOS520d-0160	Total Outpat Unk M Pct
UOS520d-0170	Total Outpat 0-12 Tot Pct
UOS520d-0180	Total Outpat 13-17 Tot Pct
UOS520d-0190	Total Outpat 18-24 Tot Pct
UOS520d-0200	Total Outpat 25-34 Tot Pct
UOS520d-0210	Total Outpat 35-64 Tot Pct
UOS520d-0220	Total Outpat 65+ Tot Pct
UOS520d-0230	Total Outpat Tot Tot Pct
UOS520d-0240	Total Outpat Unk Tot Pct
UOS520d-0250	Total Any 0-12 F Pct
UOS520d-0260	Total Any 13-17 F Pct
UOS520d-0270	Total Any 18-24 F Pct
UOS520d-0280	Total Any 25-34 F Pct
UOS520d-0290	Total Any 35-64 F Pct
UOS520d-0300	Total Any 65+ F Pct
UOS520d-0310	Total Any Tot F Pct
UOS520d-0320	Total Any Unk F Pct
UOS520d-0330	Total Any 0-12 M Pct
UOS520d-0340	Total Any 13-17 M Pct
UOS520d-0350	Total Any 18-24 M Pct
UOS520d-0360	Total Any 25-34 M Pct
UOS520d-0370	Total Any 35-64 M Pct
UOS520d-0380	Total Any 65+ M Pct
UOS520d-0390	Total Any Tot M Pct
UOS520d-0400	Total Any Unk M Pct
UOS520d-0410	Total Any 0-12 Tot Pct
UOS520d-0420	Total Any 13-17 Tot Pct
UOS520d-0430	Total Any 18-24 Tot Pct
UOS520d-0440	Total Any 25-34 Tot Pct
UOS520d-0450	Total Any 35-64 Tot Pct
UOS520d-0460	Total Any 65+ Tot Pct
UOS520d-0470	Total Any Tot Tot Pct
UOS520d-0480	Total Any Unk Tot Pct
UOS520d-0490	Total Intensive 0-12 F Pct
UOS520d-0500	Total Intensive 13-17 F Pct
UOS520d-0510	Total Intensive 18-24 F Pct
UOS520d-0520	Total Intensive 25-34 F Pct
UOS520d-0530	Total Intensive 35-64 F Pct
UOS520d-0540	Total Intensive 65+ F Pct
UOS520d-0550	Total Intensive Tot F Pct
UOS520d-0560	Total Intensive Unk F Pct
UOS520d-0570	Total Intensive 0-12 M Pct
UOS520d-0580	Total Intensive 13-17 M Pct
UOS520d-0590	Total Intensive 18-24 M Pct
UOS520d-0600	Total Intensive 25-34 M Pct
UOS520d-0610	Total Intensive 35-64 M Pct
UOS520d-0620	Total Intensive 65+ M Pct
UOS520d-0630	Total Intensive Tot M Pct
UOS520d-0640	Total Intensive Unk M Pct
UOS520d-0650	Total Intensive 0-12 Tot Pct
UOS520d-0660	Total Intensive 13-17 Tot Pct
UOS520d-0670	Total Intensive 18-24 Tot Pct
UOS520d-0680	Total Natensive 25-34 Tot Pct
UOS520d-0690	Total Intensive 35-64 Tot Pct
UOS520d-0700	Total Intensive 65+ Tot Pct

UOS520d-0710	Total Intensive Tot Tot Pct
UOS520d-0720	Total Intensive Unk Tot Pct
UOS520d-0730	Total ED 0-12 F Pct
UOS520d-0740	Total ED 13-17 F Pct
UOS520d-0750	Total ED 18-24 F Pct
UOS520d-0760	Total ED 25-34 F Pct
UOS520d-0770	Total ED 35-64 F Pct
UOS520d-0780	Total ED 65+ F Pct
UOS520d-0790	Total ED Tot F Pct
UOS520d-0800	Total ED Unk F Pct
UOS520d-0810	Total ED 0-12 M Pct
UOS520d-0820	Total ED 13-17 M Pct
UOS520d-0830	Total ED 18-24 M Pct
UOS520d-0840	Total ED 25-34 M Pct
UOS520d-0850	Total ED 35-64 M Pct
UOS520d-0860	Total ED 65+ M Pct
UOS520d-0870	Total ED Tot M Pct
UOS520d-0880	Total ED Unk M Pct
UOS520d-0890	Total ED 0-12 Tot Pct
UOS520d-0900	Total ED 13-17 Tot Pct
UOS520d-0910	Total ED 18-24 Tot Pct
UOS520d-0920	Total ED 25-34 Tot Pct
UOS520d-0930	Total ED 35-64 Tot Pct
UOS520d-0940	Total ED 65+ Tot Pct
UOS520d-0950	Total ED Tot Tot Pct
UOS520d-0960	Total ED Unk Tot Pct
UOS520d-0970	Total Inpat 0-12 F Pct
UOS520d-0980	Total Inpat 13-17 F Pct
UOS520d-0990	Total Inpat 18-24 F Pct
UOS520d-1000	Total Inpat 25-34 F Pct
UOS520d-1010	Total Inpat 35-64 F Pct
UOS520d-1020	Total Inpat 65+ F Pct
UOS520d-1030	Total Inpat Tot F Pct
UOS520d-1040	Total Inpat Unk F Pct
UOS520d-1050	Total Inpat 0-12 M Pct
UOS520d-1060	Total Inpat 13-17 M Pct
UOS520d-1070	Total Inpat 18-24 M Pct
UOS520d-1080	Total Inpat 25-34 M Pct
UOS520d-1090	Total Inpat 35-64 M Pct
UOS520d-1100	Total Inpat 65+ M Pct
UOS520d-1110	Total Inpat Tot M Pct
UOS520d-1120	Total Inpat Unk M Pct
UOS520d-1130	Total Inpat 0-12 Tot Pct
UOS520d-1140	Total Inpat 13-17 Tot Pct
UOS520d-1150	Total Inpat 18-24 Tot Pct
UOS520d-1160	Total Inpat 25-34 Tot Pct
UOS520d-1170	Total Inpat 35-64 Tot Pct
UOS520d-1180	Total Inpat 65+ Tot Pct
UOS520d-1190	Total Inpat Tot Tot Pct
UOS520d-1200	Total Inpat Unk Tot Pct
UOS520d-1210	Total Telehealth 0-12 F Pct
UOS520d-1220	Total Telehealth 13-17 F Pct
UOS520d-1230	Total Telehealth 18-24 F Pct
UOS520d-1240	Total Telehealth 25-34 F Pct
UOS520d-1250	Total Telehealth 35-64 F Pct
UOS520d-1260	Total Telehealth 65+ F Pct
UOS520d-1270	Total Telehealth Tot F Pct

UOS520d-1280	Total Telehealth Unk F Pct
UOS520d-1290	Total Telehealth 0-12 M Pct
UOS520d-1300	Total Telehealth 13-17 M Pct
UOS520d-1310	Total Telehealth 18-24 M Pct
UOS520d-1320	Total Telehealth 25-34 M Pct
UOS520d-1330	Total Telehealth 35-64 M Pct
UOS520d-1340	Total Telehealth 65+ M Pct
UOS520d-1350	Total Telehealth Tot M Pct
UOS520d-1360	Total Telehealth Unk M Pct
UOS520d-1370	Total Telehealth 0-12 Tot Pct
UOS520d-1380	Total Telehealth 13-17 Tot Pct
UOS520d-1390	Total Telehealth 18-24 Tot Pct
UOS520d-1400	Total Telehealth 25-34 Tot Pct
UOS520d-1410	Total Telehealth 35-64 Tot Pct
UOS520d-1420	Total Telehealth 65+ Tot Pct
UOS520d-1430	Total Telehealth Tot Tot Pct
UOS520d-1440	Total Telehealth Unk Tot Pct

UOS522 - Antibiotic Utilization (ABX)

DESCRIPTION - This measure summarizes the following data on outpatient utilization of antibiotic prescriptions during the measurement year, stratified by age and gender:

• Total number of antibiotic prescriptions.

• Average number of antibiotic prescriptions per member per year (PMPY).

• Total days supplied for all antibiotic prescriptions.

• Average days supplied per antibiotic prescription.

• Total number of prescriptions for antibiotics of concern.

• Average number of prescriptions PMPY for antibiotics of concern.

• Percentage of antibiotics of concern for all antibiotic prescriptions.

• Average number of antibiotics PMPY reported by drug class:

  – For selected "antibiotics of concern."

  – For all other antibiotics.

(HEDIS 2018, Volume 2: Technical Specification, Pg. 360)

REPORTING LEVEL - Contract

UOS522-0010	AU Antibiotic Scrips PMPY M Tot Avg
UOS522-0015	AU Antibiotic Scrips M Tot Num
UOS522-0020	AU Antibiotic Scrips PMPY F Tot Avg
UOS522-0025	AU Antibiotic Scrips F Tot Num
UOS522-0030	AU Antibiotic Scrips PMPY MF Tot Avg
UOS522-0035	AU Antibiotic Scrips MF Tot Num
UOS522-0040	AU Days Supplied per Antibiotic Scrip M Tot Avg
UOS522-0045	AU Days Supplied for Antibiotic Scrips M Tot Num
UOS522-0050	AU Days Supplied per Antibiotic Scrip F Tot Avg
UOS522-0055	AU Days Supplied for Antibiotic Scrips F Tot Num
UOS522-0060	AU Days Supplied per Antibiotic Scrip MF Tot Avg
UOS522-0065	AU Days Supplied for Antibiotic Scrips MF Tot Num
UOS522-0070	AU Scrips PMPY for Antibiotics of Concern M Tot Avg
UOS522-0075	AU Scrips for Antibiotics of Concern M Tot Num
UOS522-0080	AU Scrips PMPY for Antibiotics of Concern F Tot Avg
UOS522-0085	AU Scrips for Antibiotics of Concern F Tot Num
UOS522-0090	AU Scrips PMPY for Antibiotics of Concern MF Tot Avg
UOS522-0095	AU Scrips for Antibiotics of Concern MF Tot Num
UOS522-0100	AU Pct Antibiotics of All Antibiotic Scrips M Tot
UOS522-0110	AU Pct Antibiotics of All Antibiotic Scrips F Tot
UOS522-0120	AU Pct Antibiotics of All Antibiotic Scrips MF Tot
UOS522-0130	AC Quinolone Scrips PMPY M Tot
UOS522-0140	AC Quinolone Scrips PMPY F Tot

UOS522-0150	AC Quinolone Scrips PMPY MF Tot
UOS522-0160	AC Cephalosporin Scrips 2nd-4th Generation PMPY M Tot
UOS522-0170	AC Cephalosporin Scrips 2nd-4th Generation PMPY F Tot
UOS522-0180	AC Cephalosporin Scrips 2nd-4th Generation PMPY MF Tot
UOS522-0190	AC Azithromycin and Clarithromycin Scrips PMPY M Tot
UOS522-0200	AC Azithromycin and Clarithromycin Scrips PMPY F Tot
UOS522-0210	AC Azithromycin and Clarithromycin Scrips PMPY MF Tot
UOS522-0220	AC Amoxicillin/Clavulanate Scrips PMPY M Tot
UOS522-0230	AC Amoxicillin/Clavulanate Scrips PMPY F Tot
UOS522-0240	AC Amoxicillin/Clavulanate Scrips PMPY MF Tot
UOS522-0250	AC Ketolide Scrips PMPY M Tot
UOS522-0260	AC Ketolide Scrips PMPY F Tot
UOS522-0270	AC Ketolide Scrips PMPY MF Tot
UOS522-0280	AC Clindamycin Scrips PMPY M Tot
UOS522-0290	AC Clindamycin Scrips PMPY F Tot
UOS522-0300	AC Clindamycin Scrips PMPY MF Tot
UOS522-0310	AC Misc Antibiotics of Concern Scrips PMPY M Tot
UOS522-0320	AC Misc Antibiotics of Concern Scrips PMPY F Tot
UOS522-0330	AC Misc Antibiotics of Concern Scrips PMPY MF Tot
UOS522-0340	AO Absorbable Sulfonamide Scrips PMPY M Tot
UOS522-0350	AO Absorbable Sulfonamide Scrips PMPY F Tot
UOS522-0360	AO Absorbable Sulfonamide Scrips PMPY MF Tot
UOS522-0370	AO Aminoglycoside Scrips PMPY M Tot
UOS522-0380	AO Aminoglycoside Scrips PMPY F Tot
UOS522-0390	AO Aminoglycoside Scrips PMPY MF Tot
UOS522-0400	AO 1st Generation Cephalosporin Scrips PMPY M Tot
UOS522-0410	AO 1st Generation Cephalosporin Scrips PMPY F Tot
UOS522-0420	AO 1st Generation Cephalosporin Scrips PMPY MF Tot
UOS522-0430	AO Lincosamide Scrips PMPY M Tot
UOS522-0440	AO Lincosamide Scrips PMPY F Tot
UOS522-0450	AO Lincosamide Scrips PMPY MF Tot
UOS522-0460	AO Macrolide (not azith or clarith) Scrips PMPY M Tot
UOS522-0470	AO Macrolide (not azith or clarith) Scrips PMPY F Tot
UOS522-0480	AO Macrolide (not azith or clarith) Scrips PMPY MF Tot
UOS522-0490	AO Penicillin Scrips PMPY M Tot
UOS522-0500	AO Penicillin Scrips PMPY F Tot
UOS522-0510	AO Penicillin Scrips PMPY MF Tot
UOS522-0520	AO Tetracycline Scrips PMPY M Tot
UOS522-0530	AO Tetracycline Scrips PMPY F Tot
UOS522-0540	AO Tetracycline Scrips PMPY MF Tot
UOS522-0550	AO Misc Antibiotic Scrips PMPY M Tot
UOS522-0560	AO Misc Antibiotic Scrips PMPY F Tot
UOS522-0570	AO Misc Antibiotic Scrips PMPY MF Tot
UOS522-0580	AC Quinolone Scrips M Tot Num
UOS522-0590	AC Quinolone Scrips F Tot Num
UOS522-0600	AC Quinolone Scrips MF Tot Num
UOS522-0610	AC Cephalosporin Scrips 2nd-4th Generation M Tot Num
UOS522-0620	AC Cephalosporin Scrips 2nd-4th Generation F Tot Num
UOS522-0630	AC Cephalosporin Scrips 2nd-4th Generation MF Tot Num
UOS522-0640	AC Azithromycin and Clarithromycin Scrips M Tot Num
UOS522-0645	AC Azithromycin and Clarithromycin Scrips F Tot Num
UOS522-0650	AC Azithromycin and Clarithromycin Scrips MF Tot Num
UOS522-0660	AC Amoxicillin/Clavulanate Scrips M Tot Num
UOS522-0670	AC Amoxicillin/Clavulanate Scrips F Tot Num
UOS522-0680	AC Amoxicillin/Clavulanate Scrips MF Tot Num
UOS522-0690	AC Ketolide Scrips M Tot Num
UOS522-0700	AC Ketolide Scrips F Tot Num

UOS522-0710	AC Ketolide Scrips MF Tot Num
UOS522-0720	AC Clindamycin Scrips M Tot Num
UOS522-0730	AC Clindamycin Scrips F Tot Num
UOS522-0740	AC Clindamycin Scrips MF Tot Num
UOS522-0750	AC Misc Antibiotics of Concern Scrips M Tot Num
UOS522-0760	AC Misc Antibiotics of Concern Scrips F Tot Num
UOS522-0770	AC Misc Antibiotics of Concern Scrips MF Tot Num
UOS522-0780	AO Absorbable Sulfonamide Scrips M Tot Num
UOS522-0790	AO Absorbable Sulfonamide Scrips F Tot Num
UOS522-0800	AO Absorbable Sulfonamide Scrips MF Tot Num
UOS522-0810	AO Aminoglycoside Scrips M Tot Num
UOS522-0820	AO Aminoglycoside Scrips F Tot Num
UOS522-0830	AO Aminoglycoside Scrips MF Tot Num
UOS522-0840	AO 1st Generation Cephalosporin Scrips M Tot Num
UOS522-0850	AO 1st Generation Cephalosporin Scrips F Tot Num
UOS522-0860	AO 1st Generation Cephalosporin Scrips MF Tot Num
UOS522-0870	AO Lincosamide Scrips M Tot Num
UOS522-0880	AO Lincosamide Scrips F Tot Num
UOS522-0890	AO Lincosamide Scrips MF Tot Num
UOS522-0900	AO Macrolide (not azith or clarith) Scrips M Tot Num
UOS522-0910	AO Macrolide (not azith or clarith) Scrips F Tot Num
UOS522-0920	AO Macrolide (not azith or clarith) Scrips MF Tot Num
UOS522-0930	AO Penicillin Scrips M Tot Num
UOS522-0940	AO Penicillin Scrips F Tot Num
UOS522-0950	AO Penicillin Scrips MF Tot Num
UOS522-0960	AO Tetracycline Scrips M Tot Num
UOS522-0970	AO Tetracycline Scrips F Tot Num
UOS522-0980	AO Tetracycline Scrips MF Tot Num
UOS522-0990	AO Misc Antibiotic Scrips M Tot Num
UOS522-1000	AO Misc Antibiotic Scrips F Tot Num
UOS522-1010	AO Misc Antibiotic Scrips MF Tot Num

UOS524 - Plan All-Cause Readmissions (PCR)

DESCRIPTION - For members 18 years of age and older, the number of acute inpatient 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. Data are reported in the following categories:

1. Count of Index Hospital Stays (IHS) (denominator)

2. Count of 30-Day Readmissions (numerator)

3.   Expected Readmissions Rate

(HEDIS 2018, Volume 2: Technical Specification, Pg. 379)

 REPORTING LEVEL - Contract

UOS524-0010	Count of Index Stays (Denominator) 65-74
UOS524-0020	Count of 30-Day readmissions (Numerator) 65-74
UOS524-0025	Observed Readmission 65-74
UOS524-0030	Expected Readmissions Rate (Expected Readmission/Den) 65-74
UOS524-0035	Total Variance 65-74
UOS524-0040	Count of Index Stays (Denominator) 75-84
UOS524-0050	Count of 30-Day readmissions (Numerator) 75-84
UOS524-0055	Observed Readmission 75-84
UOS524-0060	Expected Readmissions Rate (Expected Readmission/Den) 75-84
UOS524-0065	Total Variance 75-84
UOS524-0070	Count of Index Stays (Denominator) 85+
UOS524-0080	Count of 30-Day readmissions (Numerator) 85+
UOS524-0085	Observed Readmission 85+
UOS524-0090	Expected Readmissions Rate (Expected Readmission/Den) 85+
UOS524-0095	Total Variance 85+
UOS524-0100	Count of Index Stays (Denominator) Total

UOS524-0110	Count of 30-Day readmissions (Numerator) Total
UOS524-0120	Observed Readmission Total
UOS524-0130	Expected Readmissions Rate (Expected Readmission/Den) Total
UOS524-0140	Total Variance Total
UOS524-0150	Observed-to-Expected Ratio Total
UOS524-0160	Lower Confidence Interval Total
UOS524-0170	Upper Confidence Interval Total
UOS524-0510	Count of Index Stays (Denominator) 18-44
UOS524-0520	Count of 30-Day readmissions (Numerator) 18-44
UOS524-0525	Observed Readmission 18-44
UOS524-0530	Expected Readmissions Rate (Expected Readmission/Den) 18-44
UOS524-0535	Total Variance 18-44
UOS524-0540	Count of Index Stays (Denominator) 45-54
UOS524-0550	Count of 30-Day readmissions (Numerator) 45-54
UOS524-0555	Observed Readmission 45-54
UOS524-0560	Expected Readmissions Rate (Expected Readmission/Den) 45-54
UOS524-0565	Total Variance 45-54
UOS524-0570	Count of Index Stays (Denominator) 55-64
UOS524-0580	Count of 30-Day readmissions (Numerator) 55-64
UOS524-0585	Observed Readmission 55-64
UOS524-0590	Expected Readmissions Rate (Expected Readmission/Den) 55-64
UOS524-0595	Total Variance 55-64
UOS524-0600	Count of Index Stays (Denominator) Total
UOS524-0610	Count of 30-Day readmissions (Numerator) Total
UOS524-0620	Expected Readmissions Rate (Expected Readmission/Den) Total
UOS524-0630	Observed Readmission Total
UOS524-0640	Total Variance Total
UOS524-0650	Observed-to-Expected Ratio Total
UOS524-0660	Lower Confidence Interval Total
UOS524-0670	Upper Confidence Interval Total

UOS526 - Acute Hospital Utilization (AHU) {Note: NCQA renamed from Inpatient Hospital Utilization IHU)}

DESCRIPTION - For members 18 years of age and older, the risk-adjusted ratio of observed to expected acute inpatient discharges during the measurement year reported by Surgery, Medicine and Total.

(HEDIS 2018, Volume 2: Technical Specification, Pg. 354)

REPORTING LEVEL - Contract

UOS526-0070	Medicine 18-44 Total Observed Discharges
UOS526-0080	Medicine 45-54 Total Observed Discharges
UOS526-0090	Medicine 55-64 Total Observed Discharges
UOS526-0100	Medicine 65-74 Total Observed Discharges
UOS526-0110	Medicine 75-84 Total Observed Discharges
UOS526-0120	Medicine 85+ Total Observed Discharges
UOS526-0130	Medicine 18-44 Total Expected Discharges
UOS526-0140	Medicine 45-54 Total Expected Discharges
UOS526-0150	Medicine 55-64 Total Expected Discharges
UOS526-0160	Medicine 65-74 Total Expected Discharges
UOS526-0170	Medicine 75-84 Total Expected Discharges
UOS526-0180	Medicine 85+ Total Expected Discharges
UOS526-0190	Surgery 18-44 Total Observed Discharges
UOS526-0200	Surgery 45-54 Total Observed Discharges
UOS526-0210	Surgery 55-64 Total Observed Discharges
UOS526-0220	Surgery 65-74 Total Observed Discharges
UOS526-0230	Surgery 75-84 Total Observed Discharges
UOS526-0240	Surgery 85+ Total Observed Discharges
UOS526-0250	Surgery 18-44 Total Expected Discharges
UOS526-0260	Surgery 45-54 Total Expected Discharges

UOS526-0270	Surgery 55-64 Total Expected Discharges
UOS526-0280	Surgery 65-74 Total Expected Discharges
UOS526-0290	Surgery 75-84 Total Expected Discharges
UOS526-0300	Surgery 85+ Total Expected Discharges
UOS526-0310	Total 18-44 Total Observed Discharges
UOS526-0320	Total 45-54 Total Observed Discharges
UOS526-0330	Total 55-64 Total Observed Discharges
UOS526-0340	Total 65-74 Total Observed Discharges
UOS526-0350	Total 75-84 Total Observed Discharges
UOS526-0360	Total 85+ Total Observed Discharges
UOS526-0370	Total 18-44 Total Expected Discharges
UOS526-0380	Total 45-54 Total Expected Discharges
UOS526-0390	Total 55-64 Total Expected Discharges
UOS526-0400	Total 65-74 Total Expected Discharges
UOS526-0410	Total 75-84 Total Expected Discharges
UOS526-0420	Total 85+ Total Expected Discharges
UOS526-0430	Non-Outliers Members - Total 18-44
UOS526-0440	Non-Outliers Members - Total 45-54
UOS526-0450	Non-Outliers Members - Total 55-64
UOS526-0460	Non-Outliers Members - Total 65-74
UOS526-0470	Non-Outliers Members - Total 75-84
UOS526-0480	Non-Outliers Members - Total 85+

UOS528 - Emergency Department Utilization (EDU)

DESCRIPTION - For members 18 years of age and older, the risk-adjusted ratio of observed to expected emergency department (ED) visits during the measurement year.

(HEDIS 2018, Volume 2: Technical Specification, Pg. 399)

REPORTING LEVEL - Contract

UOS528-0010	Number of Members in the Eligible Population - Total 18-44
UOS528-0020	Number of Members in the Eligible Population - Total 45-54
UOS528-0030	Number of Members in the Eligible Population - Total 55-64
UOS528-0040	Number of Members in the Eligible Population - Total 65-74
UOS528-0050	Number of Members in the Eligible Population - Total 75-84
UOS528-0060	Number of Members in the Eligible Population - Total 85+
UOS528-0070	ED visits by Age and Risk Adjustment 18-44 Total Observed ED Visits
UOS528-0080	ED visits by Age and Risk Adjustment 45-54 Total Observed ED Visits
UOS528-0090	ED visits by Age and Risk Adjustment 55-64 Total Observed ED Visits
UOS528-0100	ED visits by Age and Risk Adjustment 65-74 Total Observed ED Visits
UOS528-0110	ED visits by Age and Risk Adjustment 75-84 Total Observed ED Visits
UOS528-0120	ED visits by Age and Risk Adjustment 85+ Total Observed ED Visits
UOS528-0130	ED visits by Age and Risk Adjustment 18-44 Total Expected ED Visits
UOS528-0140	ED visits by Age and Risk Adjustment 45-54 Total Expected ED Visits
UOS528-0150	ED visits by Age and Risk Adjustment 55-64 Total Expected ED Visits
UOS528-0160	ED visits by Age and Risk Adjustment 65-74 Total Expected ED Visits
UOS528-0170	ED visits by Age and Risk Adjustment 75-84 Total Expected ED Visits
UOS528-0180	ED visits by Age and Risk Adjustment 85+ Total Expected ED Visits
UOS528-0190	ED visits by Age and Risk Adjustment 18-44 M Total Variance (O/E)
UOS528-0200	ED visits by Age and Risk Adjustment 18-44 F Total Variance (O/E)
UOS528-0210	ED visits by Age and Risk Adjustment 18-44 Total Total Variance (O/E)
UOS528-0220	ED visits by Age and Risk Adjustment 45-54 M Total Variance (O/E)
UOS528-0230	ED visits by Age and Risk Adjustment 45-54 F Total Variance (O/E)
UOS528-0240	ED visits by Age and Risk Adjustment 45-54 Total Total Variance (O/E)
UOS528-0250	ED visits by Age and Risk Adjustment 55-64 M Total Variance (O/E)
UOS528-0260	ED visits by Age and Risk Adjustment 55-64 F Total Variance (O/E)
UOS528-0270	ED visits by Age and Risk Adjustment 55-64 Total Total Variance (O/E)
UOS528-0280	ED visits by Age and Risk Adjustment 65-74 M Total Variance (O/E)
UOS528-0290	ED visits by Age and Risk Adjustment 65-74 F Total Variance (O/E)

UOS528-0300	ED visits by Age and Risk Adjustment 65-74 Total Total Variance (O/E)
UOS528-0310	ED visits by Age and Risk Adjustment 75-84 M Total Variance (O/E)
UOS528-0320	ED visits by Age and Risk Adjustment 75-84 F Total Variance (O/E)
UOS528-0330	ED visits by Age and Risk Adjustment 75-84 Total Total Variance (O/E)
UOS528-0340	ED visits by Age and Risk Adjustment 85+ M Total Variance (O/E)
UOS528-0350	ED visits by Age and Risk Adjustment 85+ F Total Variance (O/E)
UOS528-0360	ED visits by Age and Risk Adjustment 85+ Total Total Variance (O/E)
UOS528-0370	ED visits by Age and Risk Adjustment Total M Total Variance (O/E)
UOS528-0380	ED visits by Age and Risk Adjustment Total F Total Variance (O/E)
UOS528-0390	ED visits by Age and Risk Adjustment Total Total Total Variance (O/E)

UOS530 - Hospitalization for Potentially Preventable Complications (HPC)

DESCRIPTION - For members 67 years of age and older, the rate of discharges for ambulatory care sensitive conditions (ACSC) per 1,000 members and the risk-adjusted ratio of observed to expected discharges for ACSC by chronic and acute conditions.

(HEDIS 2018, Volume 2: Technical Specification, Pg. 404)

REPORTING LEVEL - Contract

UOS530-0010	Number of Members in the Eligible Population - Total 67-74
UOS530-0020	Number of Members in the Eligible Population - Total 75-84
UOS530-0030	Number of Members in the Eligible Population - Total 85+
UOS530-0040	Acute ACSC 67-74 Total Observed Acute ACSC Discharges
UOS530-0050	Acute ACSC 75-84 Total Observed Acute ACSC Discharges
UOS530-0060	Acute ACSC 85+ Total Observed Acute ACSC Discharges
UOS530-0070	Acute ACSC 67-74 Total Expected Acute ACSC Discharges
UOS530-0080	Acute ACSC 75-84 Total Expected Acute ACSC Discharges
UOS530-0090	Acute ACSC 85+ Total Expected Acute ACSC Discharges
UOS530-0100	Chronic ACSC 67-74 Total Observed Chronic ACSC Discharges
UOS530-0110	Chronic ACSC 75-84 Total Observed Chronic ACSC Discharges
UOS530-0120	Chronic ACSC 85+ Total Observed Chronic ACSC Discharges
UOS530-0130	Chronic ACSC 67-74 Total Expected Chronic ACSC Discharges
UOS530-0140	Chronic ACSC 75-84 Total Expected Chronic ACSC Discharges
UOS530-0150	Chronic ACSC 85+ Total Expected Chronic ACSC Discharges
UOS530-0160	Total ACSC 67-74 Total Observed Total ACSC Discharges
UOS530-0170	Total ACSC 75-84 Total Observed Total ACSC Discharges
UOS530-0180	Total ACSC 85+ Total Observed Total ACSC Discharges
UOS530-0190	Total ACSC 67-74 Total Expected Total ACSC Discharges
UOS530-0200	Total ACSC 75-84 Total Expected Total ACSC Discharges
UOS530-0210	Total ACSC 85+ Total Expected Total ACSC Discharges
UOS530-0220	Chronic ACSC Non-Outlier Members - Total 67-74
UOS530-0230	Chronic ACSC Outlier Members - Total 67-74
UOS530-0240	Chronic ACSC Non-Outlier Members - Total 75-84
UOS530-0250	Chronic ACSC Outlier Members - Total 75-84
UOS530-0260	Chronic ACSC Non-Outlier Members - Total 85+
UOS530-0270	Chronic ACSC Outlier Members - Total 85+
UOS530-0280	Acute ACSC Non-Outlier Members - Total 67-74
UOS530-0290	Acute ACSC Outlier Members - Total 67-74
UOS530-0300	Acute ACSC Non-Outlier Members - Total 75-84
UOS530-0310	Acute ACSC Outlier Members - Total 75-84
UOS530-0320	Acute ACSC Non-Outlier Members - Total 85+
UOS530-0330	Acute ACSC Outlier Members - Total 85+

UOS532 - Standardized Healthcare-Associated Infection Ratio (HAI)

Hospital-reported standard infection ratios (SIR) for four different healthcare-associated infections (HAI), adjusted for the proportion of members discharged from each health plan's contracted acute care hospital. The measure reports the percentage of total discharges from hospitals with a high, moderate, low or unavailable SIR, next to a total plan-weighted SIR for each of the following infections:

- HAI-1: Central line-associated blood stream infections (CLABSI).
- HAI-2: Catheter-associated urinary tract infections (CAUTI).
- HAI-5: Methicillin-resistant Staphylococcus aureus blood laboratory-identified events (bloodstream infections) (MRSA).
- HAI-6: Clostridium difficile laboratory-identified events (intestinal infections) (CDIFF).

Note: A lower SIR indicates better performance. SIRs >1.0 indicate that more infections occurred than expected; SIRs <1.0 indicate fewer infections occurred than expected.

(HEDIS 2018, Volume 2: Technical Specification, Pg. 370)

REPORTING LEVEL - Contract

UOS532-0010	Proportion of Total Discharges From High SIR Hospitals (CAUTI)
UOS532-0020	Proportion of Total Discharges From High SIR Hospitals (CDIFF)
UOS532-0030	Proportion of Total Discharges From High SIR Hospitals (CLABSI)
UOS532-0040	Proportion of Total Discharges From High SIR Hospitals (MRSA)
UOS532-0050	Proportion of Total Discharges From Low SIR Hospitals (CAUTI)
UOS532-0060	Proportion of Total Discharges From Low SIR Hospitals (CDIFF)
UOS532-0070	Proportion of Total Discharges From Low SIR Hospitals (CLABSI)
UOS532-0080	Proportion of Total Discharges From Low SIR Hospitals (MRSA)
UOS532-0090	Proportion of Total Discharges From Moderate SIR Hospitals (CAUTI)
UOS532-0100	Proportion of Total Discharges From Moderate SIR Hospitals (CDIFF)
UOS532-0110	Proportion of Total Discharges From Moderate SIR Hospitals (CLABSI)
UOS532-0120	Proportion of Total Discharges From Moderate SIR Hospitals (MRSA)
UOS532-0130	Plan-Weighted SIR (CAUTI)
UOS532-0140	Plan-Weighted SIR (CDIFF)
UOS532-0150	Plan-Weighted SIR (CLABSI)
UOS532-0160	Plan-Weighted SIR (MRSA)
UOS532-0170	Number of Hospitals with Reportable SIR (CAUTI)
UOS532-0180	Number of Hospitals with Reportable SIR (CDIFF)
UOS532-0190	Number of Hospitals with Reportable SIR (CLABSI)
UOS532-0200	Number of Hospitals with Reportable SIR (MRSA)
UOS532-0210	Proportion of Total Discharges From Hospitals With Unavailable SIR (CAUTI)
UOS532-0220	Proportion of Total Discharges From Hospitals With Unavailable SIR (CDIFF)
UOS532-0230	Proportion of Total Discharges From Hospitals With Unavailable SIR (CLABSI)
UOS532-0240	Proportion of Total Discharges From Hospitals With Unavailable SIR (MRSA)

Appendix A: Formulas for calculating results for specific HEDIS Measures

The pages that follow contain formulas necessary for calculating the final rate for individual contracts in these HEDIS measures:

- M18_AHU: Inpatient Hospital Utilization (UOS526), there are separate formulas for:
  - Medicine
  - Surgery
  - Total
- M18_EDU: Emergency Department Utilization (UOS528)
- M18_HPC: Hospitalization for Potentially Preventable Complications (UOS530), there as separate formulas for:
  - Acute
  - Chronic
  - Total
- M18_PCR: Plan All-Cause Readmissions (UOS524), there are separate formulas for:
  - All Ages
  - Non-Seniors
  - Seniors

Calculating Measure M18_AHU: Inpatient Hospital Utilization, Medicine

All data come from the HEDIS 2016 M18_AHU data file, PUF Measure UOS526

Formula Value	AHU Field	IndicatorKey	Variable	Field Description	PUF Field
A	nomt1844	201463_20	Denominator	Non-Outliers Members - Total 18-44	UOS526-0430
G	moidt1844	201463_20	Numerator	Medicine 18-44 Total Observed Discharges	UOS526-0070
M	mexdt1844	201461_20	Numerator	Medicine 18-44 Total Expected Discharges	UOS526-0130
B	nomt4554	201472_20	Denominator	Non-Outliers Members - Total 45-54	UOS526-0440
H	moidt4554	201472_20	Numerator	Medicine 45-54 Total Observed Discharges	UOS526-0080
N	mexdt4554	201470_20	Numerator	Medicine 45-54 Total Expected Discharges	UOS526-0140
C	nomt5564	201481_20	Denominator	Non-Outliers Members - Total 55-64	UOS526-0450
I	moidt5564	201481_20	Numerator	Medicine 55-64 Total Observed Discharges	UOS526-0090
O	mexdt5564	201479_20	Numerator	Medicine 55-64 Total Expected Discharges	UOS526-0150
D	nomt6574	201490_20	Denominator	Non-Outliers Members - Total 65-74	UOS526-0460
J	moidt6574	201490_20	Numerator	Medicine 65-74 Total Observed Discharges	UOS526-0100
P	mexdt6574	201488_20	Numerator	Medicine 65-74 Total Expected Discharges	UOS526-0160
E	nomt7584	201499_20	Denominator	Non-Outliers Members - Total 75-84	UOS526-0470
K	moidt7584	201499_20	Numerator	Medicine 75-84 Total Observed Discharges	UOS526-0110
Q	mexdt7584	201497_20	Numerator	Medicine 75-84 Total Expected Discharges	UOS526-0170
F	nomt85	201508_20	Denominator	Non-Outliers Members - Total 85+	UOS526-0480
L	moidt85	201508_20	Numerator	Medicine 85+ Total Observed Discharges	UOS526-0120
R	mexdt85	201506_20	Numerator	Medicine 85+ Total Expected Discharges	UOS526-0180

$$\text{National Observed Rate} = \text{Average}\left(\left(\frac{G_1 + H_1 + I_1 + J_1 + K_1 + L_1}{A_1 + B_1 + C_1 + D_1 + E_1 + F_1}\right) + \ldots + \left(\frac{G_n + H_n + I_n + J_n + K_n + L_n}{A_n + B_n + C_n + D_n + E_n + F_n}\right)\right)$$

where 1 through n are all contracts with numeric data.

Observed Count = G + H + I + J + K + L

Expected Count = M + N + O + P + Q + R

Denominator = A + B + C + D + E + F

$$\text{Final Rate} = \left(\left(\frac{\text{Observed Count}}{\text{Expected Count}}\right) \times \text{National Observed Rate}\right) \times 1000$$

Data Exclusion Rules:

1) Observed / Expected: contracts with values < 0.2 or > 5.0 are dropped from further calculations.

Denominator: contracts with values < 150 are dropped from further calculations.

Calculating Measure M18_AHU: Inpatient Hospital Utilization, Surgery

All data come from the HEDIS 2016 M18_AHU data file, PUF Measure UOS526

Formula Value	AHU Field	IndicatorKey	Variable	Field Description	PUF Field
A	nomt1844	201526_20	Denominator	Non-Outliers Members - Total 18-44	UOS526-0430
G	soidt1844	201526_20	Numerator	Surgery 18-44 Total Observed Discharges	UOS526-0190
M	sexdt1844	201524_20	Numerator	Surgery 18-44 Total Expected Discharges	UOS526-0250
B	nomt4554	201535_20	Denominator	Non-Outliers Members - Total 45-54	UOS526-0440
H	soidt4554	201535_20	Numerator	Surgery 45-54 Total Observed Discharges	UOS526-0200
N	sexdt4554	201533_20	Numerator	Surgery 45-54 Total Expected Discharges	UOS526-0260
C	nomt5564	201544_20	Denominator	Non-Outliers Members - Total 55-64	UOS526-0450
I	soidt5564	201544_20	Numerator	Surgery 55-64 Total Observed Discharges	UOS526-0210
O	sexdt5564	201542_20	Numerator	Surgery 55-64 Total Expected Discharges	UOS526-0270
D	nomt6574	201553_20	Denominator	Non-Outliers Members - Total 65-74	UOS526-0460
J	soidt6574	201553_20	Numerator	Surgery 65-74 Total Observed Discharges	UOS526-0220
P	sexdt6574	201551_20	Numerator	Surgery 65-74 Total Expected Discharges	UOS526-0280
E	nomt7584	201562_20	Denominator	Non-Outliers Members - Total 75-84	UOS526-0470
K	soidt7584	201562_20	Numerator	Surgery 75-84 Total Observed Discharges	UOS526-0230
Q	sexdt7584	201560_20	Numerator	Surgery 75-84 Total Expected Discharges	UOS526-0290
F	nomt85	201571_20	Denominator	Non-Outliers Members - Total 85+	UOS526-0480
L	soidt85	201571_20	Numerator	Surgery 85+ Total Observed Discharges	UOS526-0240
R	sexdt85	201569_20	Numerator	Surgery 85+ Total Expected Discharges	UOS526-0300

$$\text{National Observed Rate} = \text{Average} \left(\left(\frac{G_1 + H_1 + I_1 + J_1 + K_1 + L_1}{A_1 + B_1 + C_1 + D_1 + E_1 + F_1} \right) + \ldots + \left(\frac{G_n + H_n + I_n + J_n + K_n + L_n}{A_n + B_n + C_n + D_n + E_n + F_n} \right) \right)$$

where 1 through n are all contracts with numeric data.

Observed Count = G + H + I + J + K + L

Expected Count = M + N + O + P + Q + R

Denominator = A + B + C + D +E + F

$$\text{Final Rate} = \left(\left(\frac{\text{Observed Count}}{\text{Expected Count}} \right) \times \text{National Observed Rate} \right) \times 1000$$

Data Exclusion Rules:

1) Observed / Expected: contracts with values < 0.2 or > 5.0 are dropped from further calculations.

Denominator: contracts with values < 150 are dropped from further calculations

Calculating Measure M18_AHU: Inpatient Hospital Utilization, Total

All data come from the HEDIS 2016 M18_AHU data file, PUF Measure UOS526

Formula Value	AHU Field	IndicatorKey	Variable	Field Description	PUF Field
A	nomt1844	201589_20	Denominator	Non-Outliers Members - Total 18-44	UOS526-0430
G	toidt1844	201589_20	Numerator	Total 18-44 Total Observed Discharges	UOS526-0310
M	texdt1844	201587_20	Numerator	Total 18-44 Total Expected Discharges	UOS526-0370
B	nomt4554	201598_20	Denominator	Non-Outliers Members - Total 45-54	UOS526-0440
H	toidt4554	201598_20	Numerator	Total 45-54 Total Observed Discharges	UOS526-0320
N	texdt4554	201596_20	Numerator	Total 45-54 Total Expected Discharges	UOS526-0380
C	nomt5564	201607_20	Denominator	Non-Outliers Members - Total 55-64	UOS526-0450
I	toidt5564	201607_20	Numerator	Total 55-64 Total Observed Discharges	UOS526-0330
O	texdt5564	201605_20	Numerator	Total 55-64 Total Expected Discharges	UOS526-0390
D	nomt6574	201616_20	Denominator	Non-Outliers Members - Total 65-74	UOS526-0460
J	toidt6574	201616_20	Numerator	Total 65-74 Total Observed Discharges	UOS526-0340
P	texdt6574	201614_20	Numerator	Total 65-74 Total Expected Discharges	UOS526-0400
E	nomt7584	201625_20	Denominator	Non-Outliers Members - Total 75-84	UOS526-0470
K	toidt7584	201625_20	Numerator	Total 75-84 Total Observed Discharges	UOS526-0350
Q	texdt7584	201623_20	Numerator	Total 75-84 Total Expected Discharges	UOS526-0410
F	nomt85	201634_20	Denominator	Non-Outliers Members - Total 85+	UOS526-0480
L	toidt85	201634_20	Numerator	Total 85+ Total Observed Discharges	UOS526-0360
R	texdt85	201632_20	Numerator	Total 85+ Total Expected Discharges	UOS526-0420

$$\text{National Observed Rate} = \text{Average}\left(\left(\frac{G_1 + H_1 + I_1 + J_1 + K_1 + L_1}{A_1 + B_1 + C_1 + D_1 + E_1 + F_1}\right) + \ldots + \left(\frac{G_n + H_n + I_n + J_n + K_n + L_n}{A_n + B_n + C_n + D_n + E_n + F_n}\right)\right)$$

where 1 through n are all contracts with numeric data.

Observed Count = G + H + I + J + K + L

Expected Count = M + N + O + P + Q + R

Denominator = A + B + C + D + E + F

$$\text{Final Rate} = \left(\left(\frac{\text{Observed Count}}{\text{Expected Count}}\right) \times \text{National Observed Rate}\right) \times 1000$$

Data Exclusion Rules:

1) Observed / Expected: contracts with values < 0.2 or > 5.0 are dropped from further calculations.

Denominator: contracts with values < 150 are dropped from further calculations.

Calculating Measure M18_EDU: Emergency Department Utilization

All data come from the HEDIS 2016 M18_EDU data file, PUF Measure UOS528.

Formula Value	EDU Field	IndicatorKey	Variable	Field Description	PUF Field
A	mct1844	200839_20	Denominator	Number of Members in the Eligible Population: Total 18-44	UOS528-0010
G	eoedt1844	200860_20	Numerator	ED visits by Age and Risk Adjustment 18-44 Total Observed ED Visits	UOS528-0070
M	eexdt1844	200839_20	Numerator	ED visits by Age and Risk Adjustment 18-44 Total Expected ED Visits	UOS528-0130
B	mct4554	200842_20	Denominator	Number of Members in the Eligible Population: Total 45-54	UOS528-0020
H	eoedt4554	200863_20	Numerator	ED visits by Age and Risk Adjustment 45-54 Total Observed ED Visits	UOS528-0080
N	eexdt4554	200842_20	Numerator	ED visits by Age and Risk Adjustment 45-54 Total Expected ED Visits	UOS528-0140
C	mct5564	200845_20	Denominator	Number of Members in the Eligible Population: Total 55-64	UOS528-0030
I	eoedt5564	200866_20	Numerator	ED visits by Age and Risk Adjustment 55-64 Total Observed ED Visits	UOS528-0090
O	eexdt5564	200845_20	Numerator	ED visits by Age and Risk Adjustment 55-64 Total Expected ED Visits	UOS528-0150
D	mct6574	200848_20	Denominator	Number of Members in the Eligible Population: Total 65-74	UOS528-0040
J	eoedt6574	200869_20	Numerator	ED visits by Age and Risk Adjustment 65-74 Total Observed ED Visits	UOS528-0100
P	eexdt6574	200848_20	Numerator	ED visits by Age and Risk Adjustment 65-74 Total Expected ED Visits	UOS528-0160
E	mct7584	200851_20	Denominator	Number of Members in the Eligible Population: Total 75-84	UOS528-0050
K	eoedt7584	200872_20	Numerator	ED visits by Age and Risk Adjustment 75-84 Total Observed ED Visits	UOS528-0110
Q	eexdt7584	200851_20	Numerator	ED visits by Age and Risk Adjustment 75-84 Total Expected ED Visits	UOS528-0170
F	mct85	200854_20	Denominator	Number of Members in the Eligible Population: Total 85+	UOS528-0060
L	eoedt85	200875_20	Numerator	ED visits by Age and Risk Adjustment 85+ Total Observed ED Visits	UOS528-0120
R	eexdt85	200854_20	Numerator	ED visits by Age and Risk Adjustment 85+ Total Expected ED Visits	UOS528-0180

$$\text{National Observed Rate} = \text{Average}\left(\left(\frac{G_1 + H_1 + I_1 + J_1 + K_1 + L_1}{A_1 + B_1 + C_1 + D_1 + E_1 + F_1}\right) + \dots + \left(\frac{G_n + H_n + I_n + J_n + K_n + L_n}{A_n + B_n + C_n + D_n + E_n + F_n}\right)\right)$$

where 1 through n are all contracts with numeric data.

Observed Count = G + H + I + J + K + L

Expected Count = M + N + O + P + Q + R

Denominator = A + B + C + D + E + F

$$\text{Final Rate} = \left(\left(\frac{\text{Observed Count}}{\text{Expected Count}}\right) \times \text{National Observed Rate}\right) \times 1{,}000$$

Data Exclusion Rules:

1) Observed / Expected: contracts with values < 0.2 or > 5.0 are dropped from further calculations.

2) Denominator: contracts with values < 150 are dropped from further calculations.

Calculating Measure M18_HPC: Hospitalization for Potentially Preventable Complications, Acute

All data come from the HEDIS 2016 M18_HPC data file, PUF Measure UOS530

Formula Value	HPC Field	IndicatorKey	Variable	Field Description	PUF Field
A	anomt6774	201216_20	Denominator	Acute ACSC Non-Outlier Members - Total 67-74	UOS530-0280
D	aodt6774	201216_20	Numerator	Acute ACSC 67-74 Total Observed Acute ACSC Discharges	UOS530-0040
H	aedt6774	201214_20	Numerator	Acute ACSC 67-74 Total Expected Acute ACSC Discharges	UOS530-0070
B	anomt7584	201225_20	Denominator	Acute ACSC Non-Outlier Members - Total 75-84	UOS530-0300
E	aodt7584	201225_20	Numerator	Acute ACSC 75-84 Total Observed Acute ACSC Discharges	UOS530-0050
I	aedt7584	201223_20	Numerator	Acute ACSC 75-84 Total Expected Acute ACSC Discharges	UOS530-0080
C	anomt85	201234_20	Denominator	Acute ACSC Non-Outlier Members - Total 85+	UOS530-0320
F	aodt85	201234_20	Numerator	Acute ACSC 85+ Total Observed Acute ACSC Discharges	UOS530-0060
J	aedt85	201232_20	Numerator	Acute ACSC 85+ Total Expected Acute ACSC Discharges	UOS530-0090

$$\text{National Observed Rate} = \text{Average}\left(\left(\frac{D_1 + E_1 + F_1}{A_1 + B_1 + C_1}\right) + \ldots + \left(\frac{D_n + E_n + F_n}{A_n + B_n + C_n}\right)\right)$$

where 1 through n are all contracts with numeric data.

Observed Count = D + E + F

Expected Count = H + I + J

Denominator = A + B + C

$$\text{Final Rate} = \left(\left(\frac{\text{Observed Count}}{\text{Expected Count}}\right) \times \text{National Observed Rate}\right) \times 1000$$

Data Exclusion Rules:

1) Observed / Expected: contracts with values < 0.2 or > 5.0 are dropped from further calculations.

2) Denominator: contracts with values < 200 are dropped from further calculations.

Calculating Measure M18_HPC: Hospitalization for Potentially Preventable Complications, Chronic

All data come from the HEDIS 2016 M18_HPC data file, PUF Measure UOS530

Formula Value	HPC Field	IndicatorKey	Variable	Field Description	PUF Field
A	cnomt6774	201252_20	Denominator	Chronic ACSC Non-Outlier Members - Total 67-74	UOS530-0220
D	codt6774	201252_20	Numerator	Chronic ACSC 67-74 Total Observed Chronic ACSC Discharges	UOS530-0100
H	cedt6774	201250_20	Numerator	Chronic ACSC 67-74 Total Expected Chronic ACSC Discharges	UOS530-0130
B	cnomt7584	201261_20	Denominator	Chronic ACSC Non-Outlier Members - Total 75-84	UOS530-0240
E	codt7584	201261_20	Numerator	Chronic ACSC 75-84 Total Observed Chronic ACSC Discharges	UOS530-0110
I	cedt7584	201259_20	Numerator	Chronic ACSC 75-84 Total Expected Chronic ACSC Discharges	UOS530-0140
C	cnomt85	201270_20	Denominator	Chronic ACSC Non-Outlier Members - Total 85+	UOS530-0260
F	codt85	201270_20	Numerator	Chronic ACSC 85+ Total Observed Chronic ACSC Discharges	UOS530-0120
J	cedt85	201268_20	Numerator	Chronic ACSC 85+ Total Expected Chronic ACSC Discharges	UOS530-0150

$$\text{National Observed Rate} = \text{Average}\left(\left(\frac{D_1 + E_1 + F_1}{A_1 + B_1 + C_1}\right) + \ldots + \left(\frac{D_n + E_n + F_n}{A_n + B_n + C_n}\right)\right)$$

where 1 through n are all contracts with numeric data.

Observed Count = D + E + F

Expected Count = H + I + J

Denominator = A + B + C

$$\text{Final Rate} = \left(\left(\frac{\text{Observed Count}}{\text{Expected Count}}\right) \times \text{National Observed Rate}\right) \times 1000$$

Data Exclusion Rules:

1) Observed / Expected: contracts with values < 0.2 or > 5.0 are dropped from further calculations.

Denominator: contracts with values < 200 are dropped from further calculations.

Calculating Measure M18_HPC: Hospitalization for Potentially Preventable Complications, Total

All data come from the HEDIS 2016 M18_HPC data file, PUF Measure UOS530

Formula Value	HPC Field	IndicatorKey	Variable	Field Description	PUF Field
A	mct6774	201288_20	Denominator	Number of Members in the Eligible Population - Total 67-74	UOS530-0010
K	aomt6774	201288_20	OutlierAcute	Acute ACSC Outlier Members - Total 67-74	UOS530-0290
L	comt6774	201288_20	OutlierChronic	Chronic ACSC Outlier Members - Total 67-74	UOS530-0230
D	todt6774	201288_20	Numerator	Total ACSC 67-74 Total Observed Total ACSC Discharges	UOS530-0160
H	tedt6774	201286_20	Numerator	Total ACSC 67-74 Total Expected Total ACSC Discharges	UOS530-0190
B	mct7584	201297_20	Denominator	Number of Members in the Eligible Population - Total 75-84	UOS530-0020
M	aomt7584	201297_20	OutlierAcute	Acute ACSC Outlier Members - Total 75-84	UOS530-0310
N	comt7584	201297_20	OutlierChronic	Chronic ACSC Outlier Members - Total 75-84	UOS530-0250
E	todt7584	201297_20	Numerator	Total ACSC 75-84 Total Observed Total ACSC Discharges	UOS530-0170
I	tedt7584	201295_20	Numerator	Total ACSC 75-84 Total Expected Total ACSC Discharges	UOS530-0200
C	mct85	201306_20	Denominator	Number of Members in the Eligible Population - Total 85+	UOS530-0030
O	aomt85	201306_20	OutlierAcute	Acute ACSC Outlier Members - Total 85+	UOS530-0330
P	comt85	201306_20	OutlierChronic	Chronic ACSC Outlier Members - Total 85+	UOS530-0270
F	todt85	201306_20	Numerator	Total ACSC 85+ Total Observed Total ACSC Discharges	UOS530-0180
J	tedt85	201304_20	Numerator	Total ACSC 85+ Total Expected Total ACSC Discharges	UOS530-0210

Observed Count = D + E + F

Expected Count = H + I + J

Denominator = A + B + C – (K + L + M + N + O + P)

National Observed Rate = $\text{Average}\left(\left(\frac{\text{Observed Count}_1}{\text{Denominator}_1}\right) + \ldots + \left(\frac{\text{Observed Count}_n}{\text{Denominator}_n}\right)\right)$

where 1 through n are all contracts with numeric data.

Final Rate = $\left(\left(\frac{\text{Observed Count}}{\text{Expected Count}}\right) \times \text{National Observed Rate}\right) \times 1000$

Data Exclusion Rules:

1) Observed / Expected: contracts with values < 0.2 or > 5.0 are dropped from further calculations.

2) Denominator: contracts with values < 200 are dropped from further calculations.

Calculating Measure M18_PCR: Plan All-Cause Readmissions, All Ages

All data come from the HEDIS 2016 M18_PCR & M18_PCRb data files, PUF Measure UOS524

Formula Value	PCR Field	IndicatorKey	Variable	Field Description	PUF Field
A	is1844	202014_20	Denominator	Count of Index Stays (Denominator) 18-44	UOS524-0510
G	r1844	202014_20	Numerator	Count of 30-Day readmissions (numerator) 18-44	UOS524-0520
M	err1844*	201977_20	Rate	Expected Readmissions Rate 18-44	UOS524-0530
B	is4554	202015_20	Denominator	Count of Index Stays (Denominator) 45-54	UOS524-0540
H	r4554	202015_20	Numerator	Count of 30-Day readmissions (numerator) 45-54	UOS524-0550
N	err4554*	201978_20	Rate	Expected Readmissions Rate 45-54	UOS524-0560
C	is5564	202016_20	Denominator	Count of Index Stays (Denominator) 55-64	UOS524-0570
I	r5564	202016_20	Numerator	Count of 30-Day readmissions (numerator) 55-64	UOS524-0580
O	err5564*	201979_20	Rate	Expected Readmissions Rate 55-64	UOS524-0590

Formula Value	PCRb Field			Field Description	PUF Field
D	is6574	202100_20	Denominator	Count of Index Stays (Denominator) 65-74	UOS524-0010
J	r6574	202100_20	Numerator	Count of 30-Day readmissions (numerator) 65-74	UOS524-0020
P	err6574*	202063_20	Rate	Expected Readmissions Rate 65-74	UOS524-0030
E	is7584	202101_20	Denominator	Count of Index Stays (Denominator) 75-84	UOS524-0040
K	r7584	202101_20	Numerator	Count of 30-Day readmissions (numerator) 75-84	UOS524-0050
Q	err7584*	202064_20	Rate	Expected Readmissions Rate 75-84	UOS524-0060
F	is85	202102_20	Denominator	Count of Index Stays (Denominator) 85+	UOS524-0070
L	r85	202102_20	Numerator	Count of 30-Day readmissions (numerator) 85+	UOS524-0080
R	err85*	202065_20	Rate	Expected Readmissions Rate 85+	UOS524-0090

$$\text{NatAvgObs} = \text{Average}\left(\left(\frac{G_1 + H_1 + I_1 + J_1 + K_1 + L_1}{A_1 + B_1 + C_1 + D_1 + E_1 + F_1}\right) + \dots + \left(\frac{G_n + H_n + I_n + J_n + K_n + L_n}{A_n + B_n + C_n + D_n + E_n + F_n}\right)\right)$$

Where 1 through n are all contracts with numeric data.

Denominator = A + B + C + D + E + F

$$\text{Observed} = \frac{G + H + I + J + K + L}{A + B + C + D + E + F}$$

$$\text{Expected} = \left(\left(\frac{A}{A + B + C + D + E + F}\right) \times M\right) + \left(\left(\frac{B}{A + B + C + D + E + F}\right) \times N\right) + \left(\left(\frac{C}{A + B + C + D + E + F}\right) \times O\right) +$$
$$\left(\left(\frac{D}{A + B + C + D + E + F}\right) \times P\right) + \left(\left(\frac{E}{A + B + C + D + E + F}\right) \times Q\right) + \left(\left(\frac{F}{A + B + C + D + E + F}\right) \times R\right)$$

$$\text{Final Rate} = \left(\left(\frac{\text{Observed}}{\text{Expected}}\right) \times \text{NatAvgObs}\right) \times 100$$

Data Exclusion Rules:

1) Denominator: contracts with values <10 are dropped from further calculations.

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* Note: the description of these fields has been changed from "Average Adjusted Probability" to "Expected Readmission Rate" to better reflect their meaning, and the Fields have been renamed accordingly from e.g. "ap1844" to "err1844". This has no impact on the calculated rates or scores.

Calculating Measure M18_PCR: Plan All-Cause Readmissions, Non-Senior

All data come from the HEDIS 2016 M18_PCR data file, PUF Measure UOS524

Formula Value	PCR Field	IndicatorKey	Variable	Field Description	PUF Field
A	is1844	202014_20	Denominator	Count of Index Stays (Denominator) 18-44	UOS524-0510
D	r1844	202014_20	Numerator	Count of 30-Day readmissions (numerator) 18-44	UOS524-0520
G	err1844*	201977_20	Rate	Expected Readmissions Rate 18-44	UOS524-0530
B	is4554	202015_20	Denominator	Count of Index Stays (Denominator) 45-54	UOS524-0540
E	r4554	202015_20	Numerator	Count of 30-Day readmissions (numerator) 45-54	UOS524-0550
H	err4554*	201978_20	Rate	Expected Readmissions Rate 45-54	UOS524-0560
C	is5564	202016_20	Denominator	Count of Index Stays (Denominator) 55-64	UOS524-0570
F	r5564	202016_20	Numerator	Count of 30-Day readmissions (numerator) 55-64	UOS524-0580
I	err5564*	201979_20	Rate	Expected Readmissions Rate 55-64	UOS524-0590

$$\text{NatAvgObs} = \text{Average}\left(\left(\frac{D_1 + E_1 + F_1}{A_1 + B_1 + C_1} \right) + \ldots + \left(\frac{D_n + E_n + F_n}{A_n + B_n + C_n} \right) \right)$$

Where 1 through n are all contracts with numeric data.

Denominator = A + B + C

$$\text{Observed} = \frac{D + E + F}{A + B + C}$$

$$\text{Expected} = \left(\left(\frac{A}{A + B + C} \right) \times G \right) + \left(\left(\frac{B}{A + B + C} \right) \times H \right) + \left(\left(\frac{C}{A + B + C} \right) \times I \right)$$

$$\text{Final Rate} = \left(\left(\frac{\text{Observed}}{\text{Expected}} \right) \times \text{NatAvgObs} \right) \times 100$$

Data Exclusion Rules:

1) Denominator: contracts with values <10 are dropped from further calculations.

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* Note: the description of these fields has been changed from "Average Adjusted Probability" to "Expected Readmission Rate" to better reflect their meaning, and the Fields have been renamed accordingly from e.g. "ap1844" to "err1844". This has no impact on the calculated rates or scores.

Calculating Measure M18_PCRb: Plan All-Cause Readmissions, Seniors

All data come from the HEDIS 2016 M18_PCRb data file, PUF Measure UOS524

Formula Value	PCRb Field	IndicatorKey	Variable	Field Description	PUF Field
A	is6574	202100_20	Denominator	Count of Index Stays (Denominator) 65-74	UOS524-0010
D	r6574	202100_20	Numerator	Count of 30-Day readmissions (numerator) 65-74	UOS524-0020
G	err6574*	202063_20	Rate	Expected Readmissions Rate 65-74	UOS524-0030
B	is7584	202101_20	Denominator	Count of Index Stays (Denominator) 75-84	UOS524-0040
E	r7584	202101_20	Numerator	Count of 30-Day readmissions (numerator) 75-84	UOS524-0050
H	err7584*	202064_20	Rate	Expected Readmissions Rate 75-84	UOS524-0060
C	is85	202102_20	Denominator	Count of Index Stays (Denominator) 85+	UOS524-0070
F	r85	202102_20	Numerator	Count of 30-Day readmissions (numerator) 85+	UOS524-0080
I	err85*	202065_20	Rate	Expected Readmissions Rate 85+	UOS524-0090

$$\text{NatAvgObs} = \text{Average}\left(\left(\frac{D_1 + E_1 + F_1}{A_1 + B_1 + C_1}\right) + \ldots + \left(\frac{D_n + E_n + F_n}{A_n + B_n + C_n}\right)\right)$$

Where 1 through n are all contracts with numeric data.

Denominator = A + B + C

$$\text{Observed} = \frac{D + E + F}{A + B + C}$$

$$\text{Expected} = \left(\left(\frac{A}{A + B + C}\right) \times G\right) + \left(\left(\frac{B}{A + B + C}\right) \times H\right) + \left(\left(\frac{C}{A + B + C}\right) \times I\right)$$

$$\text{Final Rate} = \left(\left(\frac{\text{Observed}}{\text{Expected}}\right) \times \text{NatAvgObs}\right) \times 100$$

Data Exclusion Rules:

1) Denominator: contracts with values <10 are dropped from further calculations.

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* Note: the description of these fields has been changed from "Average Adjusted Probability" to "Expected Readmission Rate" to better reflect their meaning, and the Fields have been renamed accordingly from e.g. "ap1844" to "err1844". This has no impact on the calculated rates or scores.