



Comprehensive Diabetes Care: HbA1c Testing and LDL-Screening (two measures)

Measure Basic Information

Name and date of specifications used: HEDIS® 2015 Technical Specifications for Health Plans (Volume 2)

URL of Specifications:

n/a

Measure Type:

HEDIS PQI Survey Other Specify:

Measure Utility:

CCO Incentive Core Performance CMS Adult Set CHIPRA Set State Performance
Other Specify:

Data Source: MMIS/DSSURS:

Measurement Period: January 1 – December 31, 2015

HbA1c Testing:

2013 Benchmark: 86%, 2012 National Medicaid 75th percentile

2014 Benchmark: 87%, 2013 National Medicaid 75th percentile

2015 Benchmark: 87%, 2014 National Medicaid 75th percentile

LDL-Screening:

2013 Benchmark: 80%, 2012 National Medicaid 75th percentile

2014 Benchmark: 80%, 2013 National Medicaid 75th percentile

2015 Benchmark: 80%, 2013 National Medicaid 75th percentile¹

Measure changes in specifications from 2014 to 2015:

OHA is using HEDIS 2015 specifications for all 2015 measurements.

Changes from HEDIS 2013 to HEDIS 2015 include:

- The Comprehensive Diabetes Care: LDL-C screening measure is retired in HEDIS® 2015. OHA continues to measure LDL-C screenings based on HEDIS 2014, but in order to keep the screening codes up to date, the ‘LDL-C Tests Value Set’ available for other measures in HEDIS® 2015 is used.
- Revised the ED visit requirement in identifying the denominator: Changed from one ED visit with the diabetes diagnosis to at least two visits. (Minimum impact on the measures).

¹ HEDIS has retired the LDL-C Screening measure; 2014 benchmarks are not available. OHA will continue to use the HEDIS 2013 benchmark for this measure.



- Update new and obsolete outpatient and acute inpatient visit codes to identify diabetic members. (No major impact on the measures).
- HEDIS® 2015 updates to the LOINC codes for HbA1c tests (No impact on the measures; LOINC not used in OHA's calculation).

For measurements involving NDC lists published by NCQA (<http://www.ncqa.org>), OHA will use the latest available version for the measures; 2016 NDC lists will be used for the final calculations of 2015 measurement year. Before the 2016 NDC lists are available, OHA will use the 2015 lists for any progress reports.

For 2015 measurement, OHA is only including CCO A and CCO B members. For dental related measures (e.g., dental sealants, DHS custody) OHA is only including CCO A members.

HEDIS specifications are written for multiple lines of business and include a broad set of codes that could be used for measurement. OHA is not using all codes listed in the HEDIS specifications. Codes OHA is not using include, but are not limited to, LOINC, CPT, and HCPCS codes that are not open to Medicaid in Oregon. A general rule of thumb is that only CPT/HCPCS codes associated with the prioritized list will be used to calculate the measures; however as some measure specifications include denied claims, a claim that was denied because it included codes not on the prioritized list might still be counted toward the measure.

Denied claims: Included Not included

Measure Details

Data elements required denominator:

Member age 18-75 as of December 31 of the measurement year with diabetes identified from claim/encounter data or pharmacy data, during the measurement year or the year prior to the measurement year: (qualify for any one of the following criteria occurred over both years)

- At least two outpatient visits (Outpatient Value Set), observation visits (Observation Value Set), ED visits (ED Value Set) on different dates of service, with a diagnosis of diabetes (Diabetes Value Set). Visit type need not be the same for the two visits.
- At least one acute inpatient encounter (Acute Inpatient Value Set) with a diagnosis of diabetes (Diabetes Value Set).
- Dispensed insulin or hypoglycemics/antihyperglycemics on an ambulatory basis (Table CDC-A)².

Required exclusions for denominator:

See continuous enrollment criteria.

Deviations from cited specifications for denominator:

None.

²The CDC-A NDC list is available on the NCQA website (<http://www.ncqa.org>).



Data elements required numerator:

- HbA1c Testing: An HbA1c test (HbA1c Tests Value Set) performed during the measurement year.
- LDL-C Testing: A LDL-C test (LDL-C Tests Value Set) performed during the measurement year.

Value Set Name	CPT	LOINC (<i>for reference only – LOINC not used in OHA measure calculations</i>)
HbA1c Tests	83036, 83037, 3044F, 3045F, 3046F	17856-6, 4548-4, 4549-2
LDL-C Tests ³	3048F, 3049F, 3050F, 80061, 83700, 83701, 83704, 83721	12773-8, 13457-7, 18261-8, 18262-6, 2089-1, 49132-4, 55440-2

Required exclusions for numerator: None.

Deviations from cited specifications for numerator: None.

What are the continuous enrollment criteria:

The measurement year.

What are allowable gaps in enrollment:

No more than one gap in enrollment of up to 45 days during the measurement year.

Define Anchor Date (if applicable):

December 31 of the measurement year.

For More Information: n/a

List other required exclusions and or deviations from cited specifications not already indicated:

None.

³ Although HEDIS® 2015 has retired LDL-C screening from the diabetes care measure, the ‘LDL-C Tests Value Set’ is available through other measures, such as the ‘Cardiovascular Monitoring for People with Cardiovascular Disease and Schizophrenia (SMC)’ measure.