HEDIS Guidelines

Adult Screening/Preventative

Breast Cancer Screening annually, or at a minimum, once every 2 calendar years (50-74 years of age)

• Document mastectomy history, if applicable

Cervical Cancer Screening every 3 years (21-64 years of age)

- Automatic HPV testing with pap, NOT just reflex
- If no cervix document history of hysterectomy (e.g. total abdominal hysterectomy). Using *total* or *no pap* needed due to absence of cervix or hysterectomy helps support an exclusion to this measure
- Women 30-64 years of age meet criteria if HPV testing is performed every 5 years (NOT reflex)

Chlamydia Screening annually (sexually active women 16-24 years of age)

PSA Screening (50-69 years of age)

• Do not test on 70 years and older who do not have any previous history of PSA elevation or cancer.

Colorectal Cancer Screening (45-75 years of age)

- Colonoscopy minimum every 10 years
- FIT-DNA (Cologuard) every 3 years
- Fecal Occult Blood (iFOB) annually
- Flexible sigmoidoscopy every 5 years
- CT colonography every 5 years
- Documentation of Total Colectomy

Fall Risk Screening (\geq 65 years of age on Health Outcomes Survey - HOS)

• Discuss risk and management (if fall or problems with balance or walking) with practitioner

Urinary Incontinence (> 65 years of age on HOS)

• Discuss treatment and impact on ADL with health care provider

Physical Activity (\geq 65 years of age on HOS)

- Discuss level of exercise or physical activity
- Advise on starting, increasing, or maintaining level of exercise or physical activity

Osteoporosis (women 65-75 years of age)

• Screening bone density test on or after patient's 65th birthday

Adult Vaccinations

- Flu vaccine annually
- Pneumo vaccine minimum of $1 (\geq 65 \text{ years of age})$

Pediatric Screening/Preventative

Well Child Visits (2-17 years of age)

- BMI percentile annually
- Counseling on nutrition annually
- Counseling on physical activity annually

Childhood Immunizations (2 years of age) – have the following vaccines by their 2nd birthday

- four diphtheria, tetanus and acellular pertussis (DTaP)
- three polio (IPV)
- one measles, mumps and rubella (MMR)
- three haemophilus influenza type B (HiB)
- three hepatitis B (HepB)
- one chicken pox (VZV)
- four pneumococcal conjugate (PCV)
- one hepatitis A (HepA)
- two or three rotavirus (RV)
- two influenza (flu)

Adolescent Immunizations (13 years of age) – have the following vaccines by their 13th birthday

- one dose of meningococcal vaccine
- one tetanus, diphtheria toxoids and acellular pertussis (Tdap) vaccine
- completed the human papillomavirus (HPV) vaccine series

Disease Management

Hypertension (17-85 years of age)

• < 140/90

Diabetes (17-75 years of age, type 1 or 2)

- A1C annually (goal < 8.0%)
- Micro-albumin annually (or on ACE Inhibitor/ARB medication or documentation of renal transplant, ESRD, etc.)
- Examples of ACE Inhibitor and ARB Medications:

Description			Prescription		
Angiotensin converting enzyme inhibitors	BenazeprilCaptopril	EnalaprilFosinopril	LisinoprilMoexipril	PerindoprilQuinapril	RamiprilTrandolapril
Angiotensin II inhibitors	AzilsartanCandesartan	EprosartanIrbesartan	LosartanOlmesartan	TelmisartanValsartan	
Antihypertensive combinations	 Amlodipine-bena Amlodipine- hydrochlorothiazi valsartan Amlodipine- hydrochlorothiazi olmesartan Amlodipine-olme Amlodipine-perin Amlodipine-telmi Amlodipine-valsa 	ide- ide- sartan dopril sartan	Azilsartan-chlorthalidone Benazepril-hydrochloroth Candesartan- Iydrochlorothiazide Captopril-hydrochlorothia Enalapril-hydrochlorothia Tosinopril-hydrochlorothia Iydrochlorothiazide-irbes Iydrochlorothiazide-lising	iazide Hydrochl olmesarta Hydrochl zide Hydrochl telmisarta azide Hydrochl sartan Nebivolol sartan Sacubitri	orothiazide-quinapril orothiazide- an orothiazide-valsartan I-valsartan

• Diabetic eye exam annually (report available in EMR)

• BP < 140/90

Statin therapy – provided and adhering to (39-75 years of age) – Examples include the following Low-intensity
statin therapy prescriptions as well as the High and Moderate-intensity statin therapy prescriptions found under

Description	Prescription		
Low-intensity statin therapy	 Simvastatin 5-10 mg Ezetimibe-simvastatin 10 mg Pravastatin 10–20 mg 	Lovastatin 20 mgFluvastatin 20–40 mg	

• Foot exam annually (not currently required)

Cardiovascular Disease

- Statin therapy provided and adhering to (males 20-75 years of age, females 39-75 years of age)
- Acute MI receive persistent beta-blocker treatment for 6 months after discharge (17 years of age and older)
- Examples of Moderate and High-intensity Statins:

Description		Prescription
High-intensity statin therapy	 Atorvastatin 40-80 mg Amlodipine-atorvastatin 40-80 mg Ezetimibe-atorvastatin 40-80 mg 	 Rosuvastatin 20-40 mg Simvastatin 80 mg Ezetimibe-simvastatin 80 mg
Moderate-intensity statin therapy	 Atorvastatin 10-20 mg Amlodipine-atorvastatin 10-20 mg Rosuvastatin 5-10 mg Simvastatin 20-40 mg Ezetimibe-simvastatin 20-40 mg 	 Pravastatin 40-80 mg Lovastatin 40 mg Fluvastatin 40-80 mg bid Pitavastatin 1–4 mg

• Examples of Beta Blocker Medications:

Description	Prescription			
Noncardioselective beta- blockers	CarvedilolLabetalolNadolol	PindololPropranolol	TimololSotalol	
Cardioselective beta-blockers	Acebutolol Atenolol	BetaxololBisoprolol	Metoprolol Nebivolol	
Antihypertensive combinations	 Atenolol-chlorthalidone Bendroflumethiazide-nadolol Bisoprolol-hydrochlorothiazide 		 Hydrochlorothiazide-metoprolol Hydrochlorothiazide-propranolol 	

Asthma (5-64 years of age with persistent asthma)

- Maintains a ratio of dispensed controller medications to total (reliever + controller) dispensed asthma medications of 0.50 or greater in a calendar year.
- Examples of Asthma Reliever Medication:

Description	Prescriptions		
Short-acting, inhaled beta-2 agonists	 Albuterol 	Levalbuterol	

• Examples of Asthma Controller Medication:

Examples of Astima controller Medication.				
Description		Prescriptions		
Antiasthmatic combinations	 Dyphylline-guaifenesin 			
Antibody inhibitors	Omalizumab			
Anti-interleukin-4	Dupilumab			
Anti-interleukin-5	Mepolizumab	Reslizumab	Benralizumab	
Inhaled steroid combinations	Budesonide-formoterolFluticasone-salmeterol	Fluticasone-vilanterolFormoterol-mometason	e	
Inhaled corticosteroids	BeclomethasoneBudesonideCiclesonide	FlunisolideFluticasoneMometasone		
Leukotriene modifiers	 Montelukast 	 Zafirlukast 	Zileuton	
Methylxanthines	Theophylline			

Major Depression Diagnosis (17 years of age and older)

• Treated with and remained on antidepressant

ADHD (6-12 years of age that are newly prescribed medication)

- Initial follow up with practitioner within 30 days of new medication
- At least 2 follow-up visits (in addition to initial follow-up) with practitioner within 270 days if remained on medication for at least 210 days

Pregnancy

- Prenatal care visit in first trimester or within 42 days of enrollment at MAHP
- Postpartum visit on or between 7 and 84 days after delivery

Follow-Up After Emergency Department Visit for Members with 2 or More High-Risk Chronic Conditions

- Follow-up visit on or within 7 days of ED visit
- High-risk chronic conditions include: COPD, Alzheimer's disease and related disorders, chronic kidney disease, depression, heart failure, acute MI, afib, stroke and TIA